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An interventional study to promote appropriate use of psychotropic drugs in care homes in people with dementia

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An estimated 90,000 people have dementia in Scotland in 2016 (Alzheimer Scotland, 2016). Two thirds of people with dementia live in the community while one third live in a care homes in UK (Alzheimer Society, 2014). The term stress and distress in dementia refer to the behavioural and psychological symptoms found to be present in people with dementia (Lee et al, 2004). 90% of people with dementia will experience these symptoms at some point (Robert et al, 2005).Psychotropic drugs are often inappropriately used to control these symptoms in spite of documented side effects of these drugs (Banerjee, 2009).The aim of this study is to explore the prescribing dynamics in care homes and assess the reason for prescribing psychotropic drugs in stress and distress; followed by development of an intervention to reduce the use of these drugs. The primary objectives are to explore staff awareness of stress and distress in dementia, their knowledge about the indications and side effects of psychotropic drugs. Secondary objective is to develop a staff training/education package.

The research will be mixed methods pre- and post-test study method. Quantitative data will be looking at the prescription rates of psychotropic drugs in care homes and measuring the knowledge and attitude of care staff towards stress and distress. Qualitative data will be collected by semi structured interviews to explore the objectives. An educational intervention to promote the use of alternative non-pharmacological interventions will be developed and tested. The outcome of the intervention will be evaluated by monitoring prescriptions trends.

Further, this is a unique study as nurse's attitude towards psychotropic drugs will be deeply explored. The Theory of planned behavior is followed as the theoretical framework and will be used to change attitude and behavior of care staff to use of psychotropic drugs. Following the themes identified, targeted intervention will be developed to act on the barriers of use of non-pharmacological management of stress and distress.

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