R029: Assessing the rate of anticholinergic drug prescriptions for persons with dementia in Northern Ireland – QUB

Dementia is a term used to describe a broad group of conditions that affect the brain and causes a progressive cognitive decline in the ability to think, learn and remember. At present there is no cure for dementia, nor a way to slow down its progress. The occurrence of dementia, together with the major health and social care burden associated with it, is predicted to increase considerably with our ageing population.

Patients with dementia are often taking numerous medications at any given time (Lau et al., 2010), including anticholinergic drugs (anticholinergic drugs block the neurotransmitter acetylcholine, which helps control muscle movements). Many drugs which are routinely prescribed in clinical practice have anticholinergic properties: antipsychotics, antidepressants and first generation antihistamines are all classed as anticholinergic drugs (Harrison et al., 2007).

Individuals who are routinely prescribed anticholinergic drugs over a period of time are significantly more likely to have acute impairment in cognition and a higher risk of dementia (Gray et al., 2015; Gray & Hanlon, 2016). Researchers and regulatory bodies have now warned against prescribing anticholinergic medications to dementia patients and have urged clinicians to offer alternative treatments (Harrison et al., 2007).

Our aim is to assess the number of patients taking anticholinergic drugs and whether or not there is a difference in mortality rates between patients who take anticholinergic drugs and those who do not.