



The Misuse of Antipsychotics amongst Nursing Home Residents: A Status Update

Background:

- According to a report from the Department of Health and Human Services (HHS) Office of the Inspector General, twenty-six percent of all nursing home residents receive antipsychotic medications.
- The HHS Office of Inspector General found that 88 percent of these residents are elderly people with dementia. According to the Food and Drug Administration (FDA), elderly patients with dementia-related psychosis treated with antipsychotic drugs are at an increased risk of death. Furthermore, antipsychotic drugs are not approved for the treatment of dementia-related psychosis.
- Medicare and Medicaid prohibit physically or chemically restraining residents for staff convenience, but the government alleged that major pharmaceutical companies and the largest long-term care pharmacy illegally marketed antipsychotics to treat symptoms of dementia. HHS Inspector General Daniel Levinson said —government, taxpayers, nursing home residents, as well as their families and caregivers should be outraged—and should seek solutions to the misuse of antipsychotic drugs as restraints.

Federal Action:

- The FDA has required the manufacturers of conventional antipsychotic drugs to add a *Boxed Warning* and *Warning* to the drugs' prescribing information about the risk of mortality in elderly patients treated for dementia-related psychosis.
- October 2011, the Centers for Medicare and Medicaid Services (CMS) announced that it was considering regulations that would require nursing homes to hire independent pharmacists to assess residents' prescriptions. The regulations would have required pharmacist consultants in nursing homes to be free of conflicts of interest so they could make drug recommendations based on what is best for the resident – not what's best for the pharmacy companies or drug companies.
 - In April 2012, CMS decided NOT to publish these rules. Among the reasons given are that addressing this issue would not solve the entire problem (others such as facility staff

and doctors, are also part of the problem), and it would disrupt the long-term care industry.

- In May 2012, CMS launched the “Partnership to Improve Dementia Care Initiative,” which will seek to reduce the misuse of atypical antipsychotics among nursing home residents by 15% by the end of 2012. As part of this initiative, data on each nursing home's antipsychotic use has been made available on Nursing Home Compare. The initiative also emphasizes nonpharmacological alternatives to antipsychotics for nursing home residents. These include consistent staff assignments, increased exercise or time outdoors, monitoring and managing acute and chronic pain, and planning individualized activities.
- In May 2012, Senators Kohl, Grassley and Blumenthal introduced an amendment to S. 3187, the Food and Drug Administration Safety and Innovation Act, which would have required informed consent to administer antipsychotic drugs to elderly patients with dementia. Despite the tremendous outreach efforts of advocates across the country and the commendable leadership of Senators Grassley (R-Iowa), Blumenthal (D- Conn.) and Kohl (D-Wis.), the amendment was unable to achieve the unanimous consent required for consideration, failing by merely one vote.

National Consumer Voice for Quality Long-Term Care Action:

- Consumer Voice has remained vocal on the issue of the misuse of antipsychotics in long-term care facilities. The organization has issued a statement to the Senate Aging Committee in November of 2011, orchestrated a sign-on letter to CMS on the issue in December of 2011 and has met with CMS both in 2011 and 2012 where the antipsychotic issue has been discussed.
- In recommendations to CMS on how to improve the requirements of participation for long-term care facilities in Medicare and Medicaid, Consumer Voice recommended adopting more stringent regulations concerning the use of antipsychotics amongst nursing home residents. Consumer Voice will continue to be a leader in advocating for ending the misuse of atypical antipsychotics in long-term care facilities.