Title **Novel Antipsychotics for Agitation in Dementia: A Systematic Review**

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Aim

To assess the efficacy and safety of the eight novel antipsychotic drugs (amisulpride, clozapine, olanzapine, quetiapine, risperidone, sertindole, ziprasidone, and zotepine) used to manage dementia-associated agitation (DAA)

Conclusions and results

Seven randomized controlled trials (RCTs) met the criteria for inclusion: two of low quality and five of moderate to high quality. No trials comparing different novel antipsychotics to each other were found. Of the eight novel antipsychotics developed, only RCTs involving olanzapine and risperidone were identified. For institutionalized elderly patients, the efficacy of intramuscular olanzapine was comparable to that of lorazepam (a benzodiazepine) and better than that of placebo. Adverse events at 24 hours were the same for all three patient groups studied. Of the longer-term trials (6 to 12 weeks) identified, the results of the newer trials supported the efficacy (measured using behavioral scales in elderly patients) of olanzapine and risperidone compared to placebo, whereas the results of the older trials did not. Both drugs increased some types of side effects. When risperidone was compared to the conventional antipsychotic agent haloperidol, efficacy was the same for both drugs. However, haloperidol significantly increased the incidence of extrapyramidal symptoms.

Recommendations

Not applicable.

Methods

Databases were searched for studies published from 1985 onwards that compared a novel antipsychotic prospectively with placebo, with a traditional antipsychotic, or with another novel antipsychotic. Results were augmented by searching relevant websites, hand searching bibliographies and abstracts, and contacting appropriate experts and agencies. Information regarding unpublished studies was requested from the drug manufacturers. Two reviewers independently reviewed the citations and abstracts.

Further research/reviews required

As DAA is a long-term condition, trials longer than the currently identified 6- to 12-week studies are needed. Also, cost-effectiveness analyses are needed to help clarify relative costs and benefits of these expensive drugs.

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