



LIZA HORVATH
SENIOR ADVOCATE



Part 1: Seniors in Homes
The Misuse of Psychoactive Drugs in Nursing Homes

“..you have probably got 15,000 elderly people in nursing homes dying each year from the off-label use of antipsychotic medication..” – Dr. David Graham, FDA drug safety expert, 2007.

Sometimes a care facility is the best choice. A frail, elderly spouse or a child who works full time cannot always provide care for someone that may involve complex medical support or extensive supervision. Thoughtfully choosing a facility and monitoring the care given will afford the greatest chance of a comfortable and successful nursing home experience for an elderly loved one.

This week’s column covers the rampant use, albeit misuse, of psychoactive drugs in California nursing homes. Next week information on what to consider when selecting a care facility will be presented and a third column will outline the process of seeking help and filing a complaint, if warranted.

At some point many of us will need the services provided by a care facility and having as much information as possible will help us make informed decisions.

California Advocates for Nursing Home Reform (CANHR) is an organization that is actively attempting to eliminate the misuse of psychoactive drugs in nursing homes. CANHR states that “Tens of thousands of nursing home residents with dementia receive powerful antipsychotic drugs that are not intended or approved for their medical conditions. Rather, the drugs are often used to sedate and control them, a terrible substitute for the individualized care they need and deserve.”

When a patient with dementia is given an antipsychotic drug, the patient becomes submissive and “easy to manage.” It is estimated that drugs such as Risperdal, Seroquel,



Zyprexa and Haldol are given to one of every four California nursing home residents on a daily basis. Elderly patients can successfully take psychoactive drugs to treat conditions such as depression, schizophrenia and bipolar disorders but when nursing homes use these drugs as a substitute for needed care it is a form of chemical restraint – which is illegal. Further, according to the FDA, an antipsychotic drug given to elders with dementia can cause death.

Patients or their representatives must agree to health care before it is undertaken and, specifically, psychoactive drugs cannot be used without the patient's informed consent. When any medication is prescribed it is important to ask the following questions: Why is the medication being prescribed? How long will the drug be needed? Is this an "off-label" use? What are the degree and duration of side effects? Ask if there is an alternative to the medication and, if not, always confirm that the patient can revoke the consent, once given. The lowest possible dose should be given and, by law, must be reassessed at least every three months. If you have done your research, asked the questions and still feel unsure, seek a second opinion from a trusted physician.

Medical conditions that may lead to the prescription of an antipsychotic drug include agitation and confusion but these symptoms can also result from an untreated infection, dehydration, malnutrition, uncontrolled pain, or other undetected medical problems. Do the research, ask questions and, if you decide that a powerful drug may offer some relief, monitor the results. We want our elderly loved ones comfortable and happy, but most of all we want them safe.

Liza Horvath has over 25 years experience in the estate planning and trust fields and is a Trust Officer with a local bank. The above should not be considered legal or medical advice.

If you have a question please call (831) 915-0272 or email liza@montereytrust.com.