



Quetiapine for

Behavioural and Psychological Symptoms of Dementia (BPSD)

(Pronounced kwet-eye-a-peen)

Why has quetiapine been prescribed?

Quetiapine is most commonly used to treat conditions such as schizophrenia and other similar conditions. However, it is sometimes used in people with dementia experiencing behavioural or psychological symptoms where other measures have not worked.

What are the benefits of taking quetiapine?

Quetiapine can be effective in reducing distress and can help you to feel more calm.

Are there any precautions with quetiapine?

Quetiapine is suitable for most people. As with all medicines, however, there are precautions. Your prescriber will usually check that it is safe to prescribe quetiapine, but let your prescriber know if any of the following apply to you, as extra care may be needed:

- a) If you suffer from liver or kidney trouble.
- b) If you have cerebrovascular risk factors such as hypertension, diabetes, smoking, atrial fibrillation and previous stroke
- c) If you are taking any other medication, especially anticonvulsants, antibiotics, HIV medications or antifungal medicines. Also, tell your prescriber if you buy any medicine 'over the counter' from a pharmacy or supermarket. Please also tell your prescriber if you take any alternative or complementary medicine such as Chinese herbal medicines.
- d) If you have an intolerance to lactose as this is an ingredient of quetiapine tablets.
- e) It is recommended that grapefruit juice is not taken while taking quetiapine because grapefruit can cause increased levels of the quetiapine in the system.

What is the usual dose of quetiapine?

The starting dose is usually 12.5-25mg a day. This is slowly increased over a few days or weeks. The usual dose of quetiapine is between 50-100mg daily. Some people may receive higher doses up to a maximum of 300mg daily in older people and individuals with Parkinson's disease or dementia. It may take a few weeks to get to the dose that is most suitable.

How should quetiapine be taken?

Quetiapine is usually taken once or twice a day.

What form does quetiapine come in?

Quetiapine is available in tablet, as film coated tablets and slow release tablets, and liquid forms. The film coated tablets are available as 25mg, 100mg, 150mg, 200mg and 300mg and extended release tablets as 50mg, 150mg, 200mg, and 300mg. The liquid solution comes as 20mg per 1ml.

What should be done if a dose is missed?

If you forget a dose, take it as soon as you remember, as long as it is within a few hours of the usual time. If you miss a whole day's dose – just carry on as normal with the usual dose the following day. If you miss more than a day's dose, speak to your prescriber.

What will happen when quetiapine is first taken?

Quetiapine, may produce some noticeable effects within a few hours. To begin with it can help some people to feel more calm and relaxed. However, like many medicines, it may take several days or weeks for the full effects and for some symptoms to improve. Many people do not experience any side effects. However, some people may experience some side effects. We have listed potential side effects in the table below, whether or not they are likely to be short or long-term and what measures can be taken is also described. There are other possible side effects – we have listed only the most important ones. Ask your doctor, pharmacist or nurse if you are worried about anything else that you think might be a side effect. Further information on side effects is available in the official manufacturer's leaflet.

Reporting side effects

The 'Yellow Card' scheme encourages patients to report any side effects that they feel may be caused by their medication. Ask your doctor, pharmacist, or nurse for the forms if you wish to report any side effects. Alternatively, telephone 0800 100 3352 or go to www.mhra.gov.uk.

Is quetiapine addictive?

No, quetiapine is not addictive. However, if you stop taking the medicine suddenly, you may experience unpleasant physical feelings.

What about alcohol?

It is recommended that people taking quetiapine should not drink alcohol. This is because both antipsychotics and alcohol can cause drowsiness. If the two are taken together, severe drowsiness can result. This can lead to falls and accidents. As well as this, drinking alcohol may make symptoms such as psychosis worse. However, once people are used to taking medication, then *very small amounts* of alcohol may not be harmful. It pays to be very careful, because alcohol affects people in different ways, especially when they are taking medication. Never drink alcohol and drive. Discuss any concerns you may have with your doctor, pharmacist or nurse.

Is it OK to stop taking quetiapine when symptoms go away?

Quetiapine is usually only used for short periods in dementia and should be reviewed regularly. You should always discuss any plans you have to reduce or stop any of your prescribed medicines with your prescriber.

Are there any alternatives to quetiapine?

Yes, there are alternatives available. Overall, antipsychotics have broadly similar therapeutic effects but differ in their side effects. Other antipsychotics, except Clozapine, are more likely to cause movement disorders, particularly in people with Parkinson's disease or Lewy Body Dementia.

Other non-drug treatments that are person-centred can help. Paracetamol for pain can be very beneficial for some people. Reminiscence, music and dance therapy can be effective.

Summary of side effects



Low blood pressure - Common

What can be done about it?

This can be troublesome when standing up. You may feel dizzy or faint. This tends to wear off in time.



Dizziness - Common

What can be done about it?

This may wear off within a few days. Discuss with your prescriber if this persists



Drowsiness - Common

What can be done about it?

Drowsiness tends to wear off over time. Speak to your prescriber about changing the dose or dose timings.



Tachycardia – Common (palpitations)

What can be done about it?

Some people have a fast heartbeat. This is most common in the first few weeks of treatment. If you experience a fast heart beat contact your prescriber.



Dry mouth - Common

What can be done about it?

This tends to wear off. Sugar-free boiled sweets, chewing gum or eating citrus fruits may help. If this persists, report it to your prescriber.



Weight gain – Common

What can be done about it?

This is usually limited to a few pounds. Try to eat healthily and take plenty of exercise.



Constipation - Common

What can be done about it?

Eat lots of fibre - fruit and vegetables are good sources. Drink plenty of fluids. If necessary, your prescriber may prescribe a laxative.

Other (less common) side effects	How common is it and what can be done about it?
Abnormal movements (also known as tardive dyskinesia)	Very rare This occurs only after long term treatment. It usually begins with unusual movements of the mouth and tongue. Symptoms may go away when switched to another medicine.
Diabetes	Very rare It may be necessary to switch to another medicine. Symptoms may go away when switched to another medicine.

Very common = almost everyone affected
Common = many people affected
Uncommon = some people affected

Rare = few people affected
Very rare = very few or no one affected

In older people with dementia, there is an increased risk of stroke with antipsychotic drugs. Stroke is a medical emergency. The FAST test can help you recognise the signs.

Facial weakness: Can the person smile? Has their mouth or eye drooped?

Arm weakness: Can the person raise both arms?

Speech problems: Can the person speak clearly and understand what you say?

Time to call 999: if you see any of these signs.

Disclaimer

This leaflet does not replace the official manufacturer's Patient Information Leaflet.

For more information, visit www.slam.nhs.uk/meds or speak to a health care professional.

Leaflet supplied by: Medicines Information, Pharmacy Department, Maudsley Hospital, London SE5 8AZ | Telephone: 020 3228 2317

Artwork by: Oscar Millar (www.millarstratton.co.uk)