**Quetiapine for the treatment of agitation in patients with dementia**

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**Objective:** To evaluate the efficacy, tolerability, and safety of quetiapine compared to placebo in treating patients with agitation associated with dementia.

**Method:** In this multicenter, double-blind, placebo-controlled, fixed-dose, 10-week study, eligible patients were randomized (3:3:2) to quetiapine 100 mg/day; 200 mg/day; or placebo. Quetiapine was initiated at 25 mg/day and titrated in 25 mg/day increments, reaching target doses of 100 mg/day by Day 4 or 200 mg/day by Day 8. Key efficacy measures were PANSS-Excitement Component (EC), CGI-C score and response rate (percentage of patients with =30% reduction in PANSS-EC or 'much' or 'very much improved' on CGI-C). Key safety and tolerability measures were the incidence of treatment-emergent adverse events including cerebrovascular (CVAEs), postural hypotension, and falls.

**Results:** The baseline characteristics of patients (n=333) were comparable among treatment groups and 63-65% completed the entire study. Compared to placebo, quetiapine 200 mg/day was associated with statistically significant improvements in PANSS-EC and CGI-C scores, and significantly higher response rates ($p<0.05$ for all measures). No CVAEs were reported in either quetiapine group. The incidences of postural hypotension and falls were similar among all treatment groups.

**Conclusions:** Quetiapine 200 mg/day is effective and well tolerated in treating patients with agitation associated with dementia.

Word count (maximum of 200) = 199

**References**


1. Tariot PN et al. Long-term use of quetiapine in elderly patients with psychotic disorders. Clin Ther 2000; 22: 1068-1084.

2. Tariot PN et al. Quetiapine in nursing home residents with Alzheimer's dementia and psychosis. Poster presented at the 15th Annual Meeting of the American Association for Geriatric Psychiatry, February 24-27, 2002, Orlando, FL, USA.


**Topic:** 28. Geriatric psychiatry

**Target audience**: Psychiatrists, geriatric psychiatrists


**Funding source**: AstraZeneca, Wilmington, Delaware, USA


**Educational objectives**

At the conclusion of the presentation, participants should recognize that quetiapine 200 mg/day is more effective than placebo in treating patients with agitation associated with dementia, and that quetiapine can be safely titrated to 200 mg/day by Day 8 and has a favorable tolerability profile in this patient population.

**Elderly patients with dementia-related psychosis treated with atypical antipsychotic drugs are at an increased risk of death compared to placebo.**