



## 12.10. Prescription of antipsychotics in elderly in (ELD-11) versus outside residential/nursing facility (ELD-12)

### 12.10.1. Documentation sheet

<b>Description</b>	Percentage of elderly with antipsychotics prescribed
<b>Calculation</b>	Percentage of elderly with antipsychotics prescribed Numerator: Number of elderly with antipsychotics; Denominator: Number of elderly.
<b>Rationale</b>	Elder people with dementia may present behavioral and psychological symptoms which make it difficult to care for them. Antipsychotics are often prescribed in this population to reduce the symptoms. However, given the associated risks, antipsychotics should be avoided as much as possible in this population. In patients with dementia, a higher risk of CVA and sudden death has been documented in the use of different classes of antipsychotics. Non-pharmacologic interventions are the recommended first step for problem behaviour in dementia. Antipsychotic drugs should only be used if the behavior of the patient poses a danger to him/herself or to persons in the environment. If the drugs are used, the duration of treatment should be as short as possible and the dosis as low as possible and the continuation of the treatment should be regularly reviewed. <sup>1</sup>
<b>Data source</b>	EPS
<b>Technical definitions</b>	Antipsychotics = ATC-code N05A Criteria > 0 DDD
<b>International comparability</b>	OECD Health Statistics 2017
<b>Dimension</b>	(Long-term) Care for the elderly; Appropriateness of Care; Safety of Care
<b>Keywords</b>	

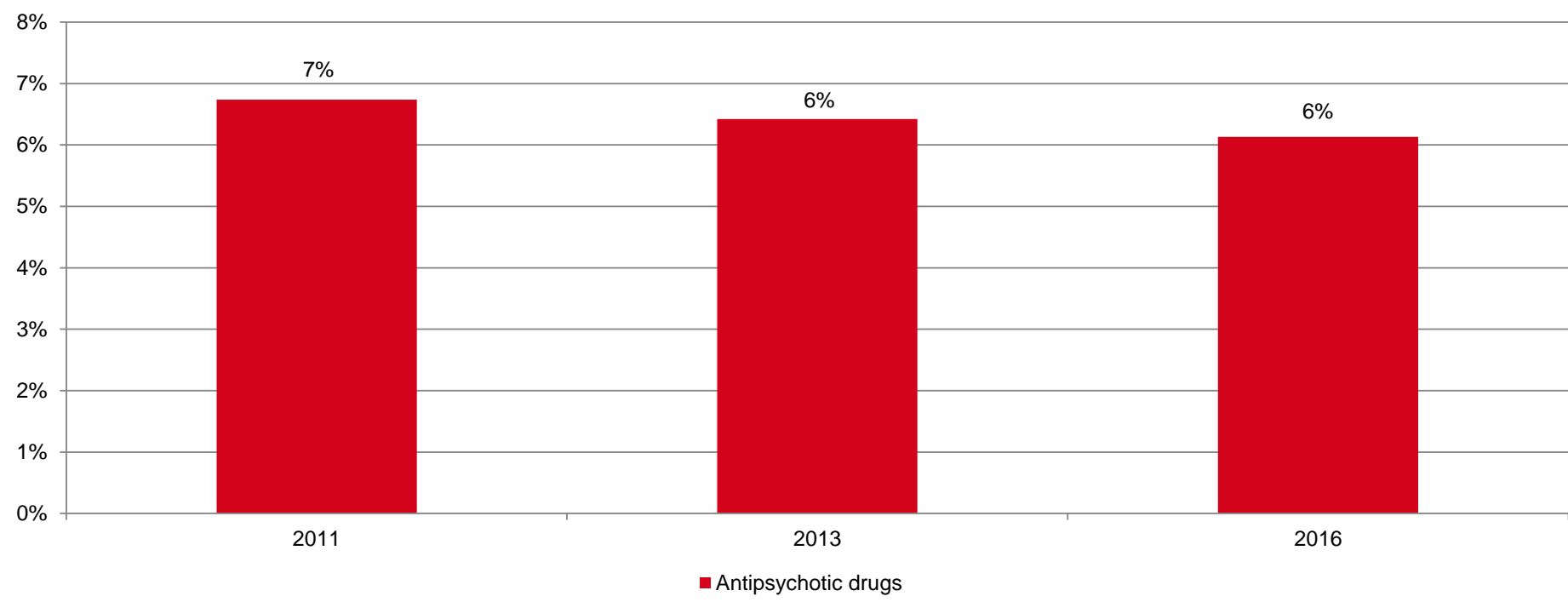
### 12.10.2. Results

In 2016, 6% of the population over 65 years was prescribed antipsychotic drugs (>0 DDD). Figure 187 illustrates that there has been a modest decrease since 2011. Woman are more likely to be prescribed antipsychotics than men: 7% of woman over 65 years versus 5% of men (see Figure 188). Prescriptions increase with age, 11% of the population

over 85 years was prescribed antipsychotics, compared to 4% of the population aged 65-74 years (see Figure 189). There is also some regional variation: prescriptions are lowest in the province of Antwerp (4% of population over 65 years) and highest in the province of Limburg (8%) (see Figure 190). Finally, the problem appears most acute in institutions, where 32% of residents over 75+ are prescribed antipsychotics, compared to 5% in persons 75+ living at home (Figure 191).



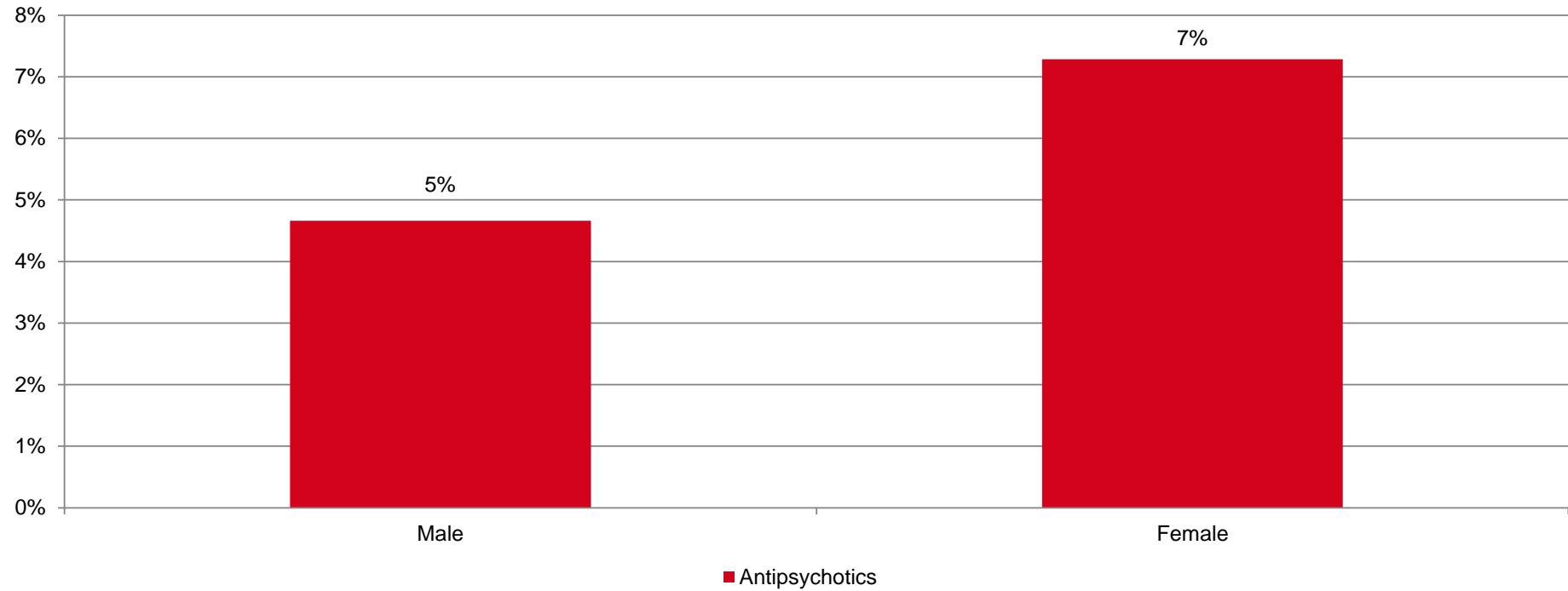
Figure 187 – Percentage of the Belgian population aged  $\geq 65$  years prescribed antipsychotics ( $>0$  DDD): evolution 2011-2013-2016



Source: RIZIV – INAMI (data EPS)



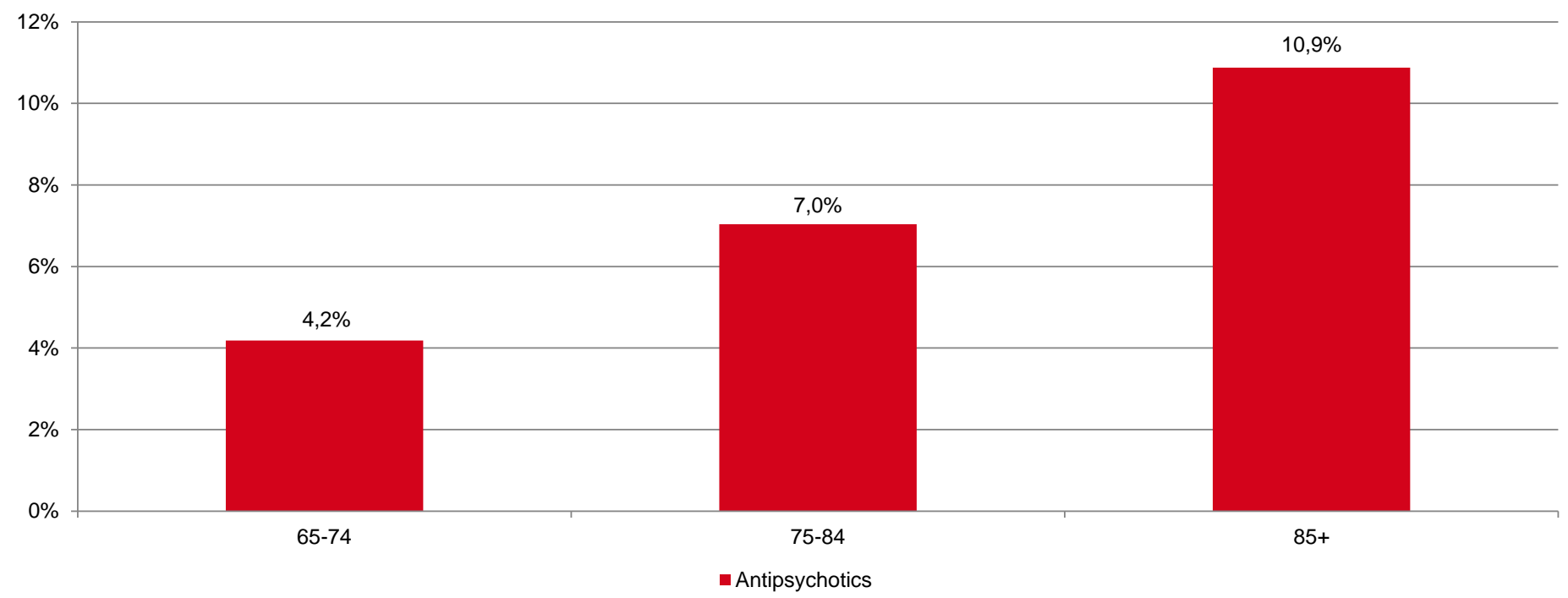
Figure 188 – Percentage of the Belgian population aged  $\geq 65$  years prescribed antipsychotics ( $>0$  DDD), by gender (2016)



Source: RIZIV – INAMI (data EPS)



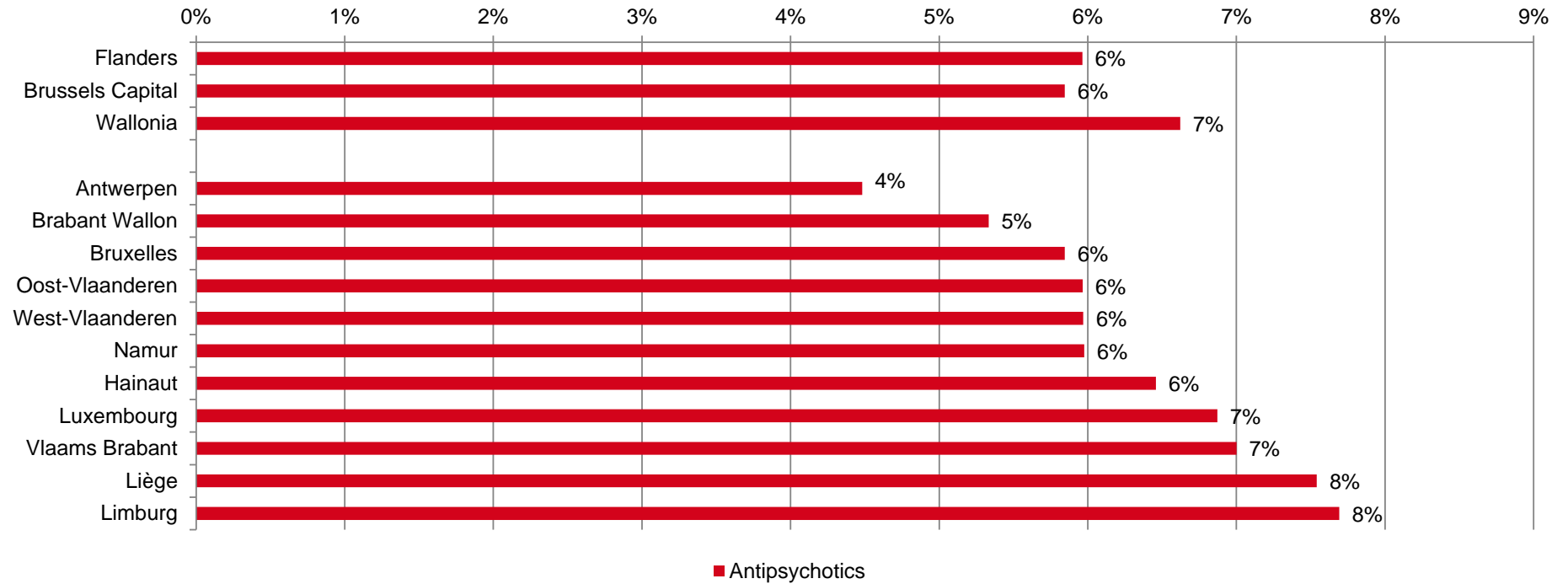
Figure 189 – Percentage of the Belgian population aged ≥65 years prescribed antipsychotics (>0 DDD), by age group (2016)



Source: RIZIV – INAMI (data EPS)



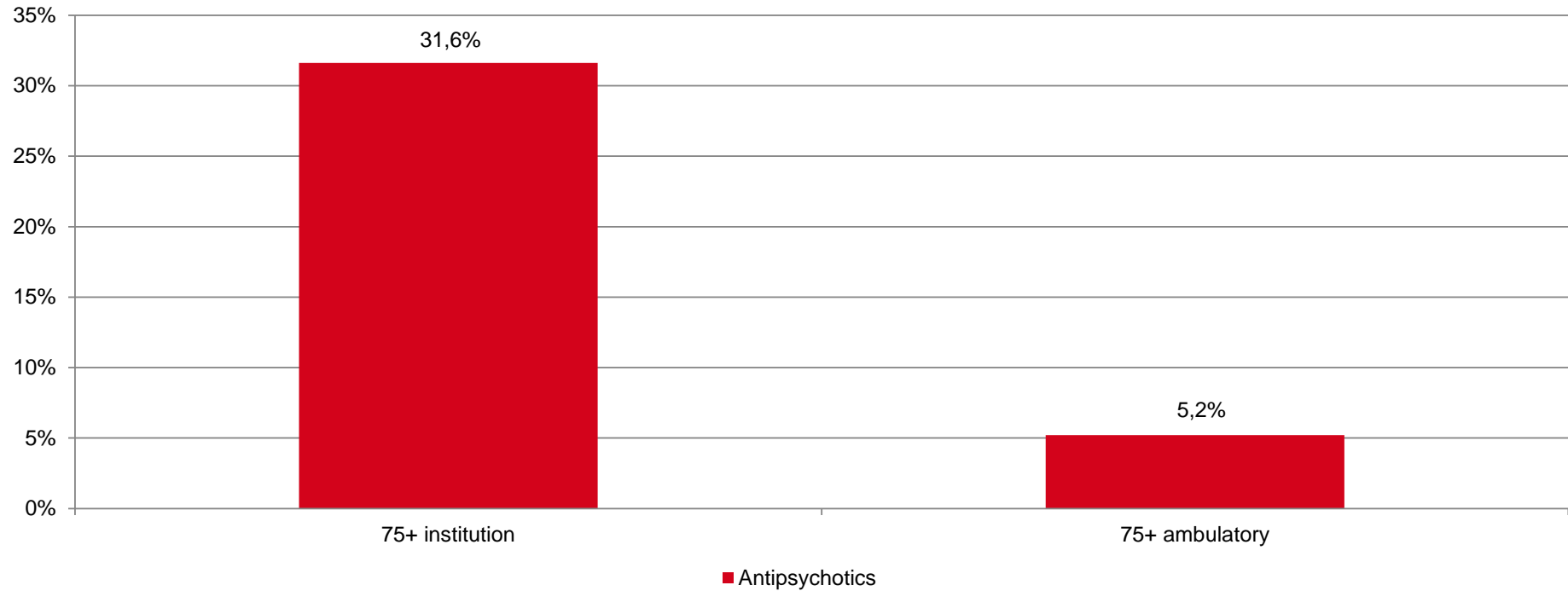
Figure 190 – Percentage of the Belgian population aged  $\geq 65$  years prescribed antipsychotics ( $>0$  DDD), by region and province (2016)



Source: RIZIV – INAMI (data EPS)



Figure 191 – Percentage of the Belgian population aged ≥75 years prescribed antipsychotics (>0 DDD), institution versus ambulatory (2016)



Source: RIZIV – INAMI (data EPS)

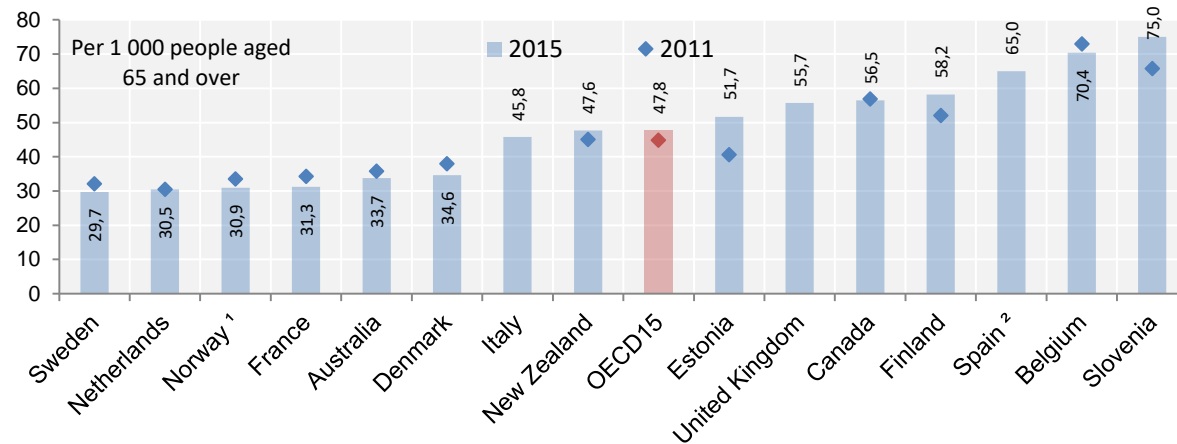
**International comparison**

Data collected by the OECD show that the prescription of antipsychotics to older people varies by more than a factor of two across OECD countries (Figure 192). In 2015, Sweden and the Netherlands prescribed

antipsychotics to fewer than 31 in every thousand people aged over 65, with rates either falling or constant. At the other extreme are Belgium and Slovenia with more than 70 in every thousand people aged over 65 being prescribed antipsychotics.



Figure 192 – People with a prescription of antipsychotics per 1 000 people aged  $\geq 65$  years, 2015 (or nearest year) ( $>0$  DDD): OECD data



1. Data for Norway do not include people in institutional care, so underestimate the use of antipsychotics. 2. Data for Spain refer to 2014  
Source: OECD Health Statistics 2017. DOI: [https://dx.doi.org/10.1787/health\\_glance-2017-graph198-en](https://dx.doi.org/10.1787/health_glance-2017-graph198-en)

### Key points

- Antipsychotics are often prescribed in people with dementia presenting behavioral and psychological symptoms in order to reduce these symptoms. However, given the associated risks, antipsychotics should be avoided as much as possible in this population. Non-pharmacologic interventions are the recommended first step for problem behaviour in dementia.
- In 2016, 6% of the population over 65 years was prescribed antipsychotic drugs ( $>0$  DDD). Women are more likely to be prescribed antipsychotics than men. There is also some regional variation: prescriptions are lowest in the province of Antwerp (4% of population over 65 years) and highest in the province of Limburg (8%). The problem is particularly severe in institutions, where 32% of residents over 75+ are prescribed antipsychotics.

- OECD data show that Belgium is a high-prescriber of antipsychotics in elderly. Prescriptions in Sweden and Netherlands are less than half as frequent compared to Belgium. There has been a modest decrease in Belgium since 2011.

### References

1. BCFI-CBIP. Formulierium Ouderenzorg, Dementie [Web page].2017. Available from: <https://bcfi.farmaka.be/nl/formulierium/392#main>