

Name of Journal: *World Journal of Psychiatry*

Manuscript NO: 54504

Manuscript Type: EDITORIAL

Evidence for using dextromethorphan-quinidine for the treatment of agitation in dementia

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Abstract

Behavioral and psychological symptoms including agitation are common in dementia, and are associated with decreased quality of life, increased risk of institutionalization, and greater patient and caregiver distress. Pharmacological agents used for management of behavioral and psychological symptoms of dementia are limited by their tolerability, prompting a need for identifying efficacious and safe pharmacological treatments for managing agitation in dementia. The combination of dextromethorphan and quinidine sulfate is approved for pseudobulbar affect, and may be effective in managing agitation in dementia. A review of literature found only one randomized controlled trial that evaluated the use of dextromethorphan-quinidine for the management of agitation in dementia when compared to placebo. Data from this trial demonstrated that dextromethorphan-quinidine decreased agitation in dementia, and was well tolerated. Although promising, further research is needed before dextromethorphan-quinidine combination can be accepted as a standard treatment for agitation in dementia.

Key words: Dextromethorphan; Quinidine; Agitation; Dementia; Behavioral and psychological symptoms of dementia

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Abstract Importance **Agitation** is common among **patients with Alzheimer disease**; safe, **effective treatments** are lacking.

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Many clinicians have been **using** this product off-label for **dementia-related agitation**, although coverage can be a challenge and it is priced very high (over \$700 a month) for those paying cash for it. It will be a welcome addition to the armamentarium if and when it is FDA approved for this indication, and certainly appears to be much safer ...

Author: Mitchel L. Zoler

Publish Year: 2015



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