



Dementia Care: Anticonvulsants Increase Stroke Risk

Tuesday, June 4 2024

In light of the CMS initiative to begin collecting data on usage of anticonvulsant medications on the MDS form, there has been increasing discussion of the use of anticonvulsant (antiepileptic) medications for nursing home residents living with dementia. One of the dangers of the rising use of anticonvulsant prescriptions for treatment of BPSD is the risk of stroke.

Sarycheva et al., publishing in [Journal of the American Heart Association](#), found that use of antiepileptic drugs in the presence of Alzheimer's disease increased the risk of stroke by 37% during the first 180 days of use. The risk was highest during the first six months of use, with double the incidence of stroke in months 1-3.

Alzheimer's patients

Their rigorously constructed study drew from the Medication Use and Alzheimer's Disease (MEDALZ) database in Finland and retrospectively examined data from 5,617 matched pairs of individuals with a diagnosis of Alzheimer's [or mixed dementia](#) including Alzheimer's. One member of each pair had initiated treatment with antiepileptic drugs during the study period; the other had not. Researchers also analyzed stroke risk in connection with individual anticonvulsant drugs to determine whether risks varied by choice of medication. Their statistical model accounted for numerous confounding variables.

Stroke risk regardless of drug choice

Comparing stroke risk by choice of drug, i.e., old or new classes of antiepileptic drugs, the researchers concluded that drug choice did not make a significant impact on the stroke outcome. Old antiepileptics included valproic acid, carbamazepine, clonazepam, and phenytoin. In the "new" category were pregabalin, gabapentin, lamotrigine, oxcarbazepine, topiramate, and levetiracetam. With only minor variations, all of these anticonvulsant drugs were associated with stroke risk.

The researchers comment that they elected to study stroke as an outcome because antiepileptic drugs act on the central nervous system—and because "strokes can further accelerate cognitive decline in this group".

Clinical cautions - antiepileptic drugs

There has been an [upward trend in use of anticonvulsant drugs for nursing home residents](#) who have dementia and exhibit BPSD. Yet experts have cited a lack of evidence to support effectiveness.

continued 



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In addition, the drug treatment could lead to a variety of adverse affects, as noted in the blog, [Are Anticonvulsants an Evidence-Based Answer for BPSD?](#)

For individuals who have Alzheimer's disease, the risk of stroke with antiepileptic drugs is significant, conclude Sarycheva et al. The study authors called for caution in using these drugs with the vulnerable Alzheimer's population.

Neuropsychiatric examination and reduction of polypharmacy can have a significant impact on BPSD. So can non-drug strategies, such as providing comfort, opening communications, and training caregivers. [Learn more about approaches to managing BPSD.](#)

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