

Getting medication use right: What needs to be done?

Challenging Behaviour Foundation National Strategy Group Meeting
London, 16th June 2017


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Background

- Concerns about overuse of psychotropic medication
- Little good-quality nationally-representative data, until...

RESEARCH

 OPEN ACCESS



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Mental illness, challenging behaviour, and psychotropic drug prescribing in people with intellectual disability: UK population based cohort study

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Public Health
England



Prescribing of psychotropic drugs to people with learning disabilities and/or autism by general practitioners in England

Background cont.

- Disparity between psychotropic prescribing and rates of recorded mental illness
- Majority of people with intellectual disability who had been prescribed an antipsychotic medication did not have psychosis
- There are up to 35,000 people taking an anti-depressant or antipsychotic every day without clinical justification

CBF family carer survey

- Online survey conducted in 2016
- Approximately 100 responses
- People often dissatisfied with process of psychotropic medication prescribing and review

National response

Stopping over medication of people with learning disabilities (STOMPLD)

Over-medication, and then lack of review, is a historic problem, but one that nobody knew the true scale of until recently.

It is estimated that on an average day in England, between 30,000 and 35,000 people with a learning disability are being prescribed powerful drugs, with serious potential side effects, without clinical justification and for too long. This is often despite evidence-based alternative interventions being available.

This inequality in care is unacceptable, and it is incumbent on clinicians and every other professional involved in an individual's care to make sure they are acting in their patient's best interest at all times.

We, the undersigned, representing professionals from across the NHS, therefore pledge to work together, and with people with a learning disability and their loved ones, to take real and measurable steps to stop over-medication.

We will each set out the actions our individual organisations will take towards this shared aim, and report regularly on the progress we have made – ensuring that we can be held to account.

Hazel Jackson
Endorsed by

Sarah Kelly
Endorsed by

Anna
Endorsed by


Paul
Endorsed by


Michelle
Endorsed by


Julian
Endorsed by


Alita Patel
Endorsed by


The Rt Hon Alistair Burt MP
Minister of State for Community and Social Care



Supported by the Challenging Behaviour Foundation

STOPPING OVER-MEDICATION OF PEOPLE WITH LEARNING DISABILITIES

Moving forward

- Royal College of Psychiatrists Practice Guidance
- NICE Challenging Behaviour Guidelines



How have things changed?

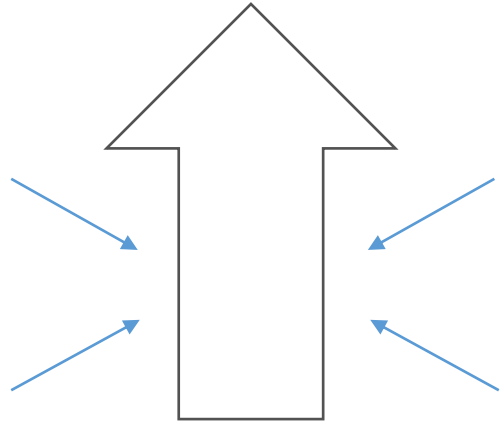
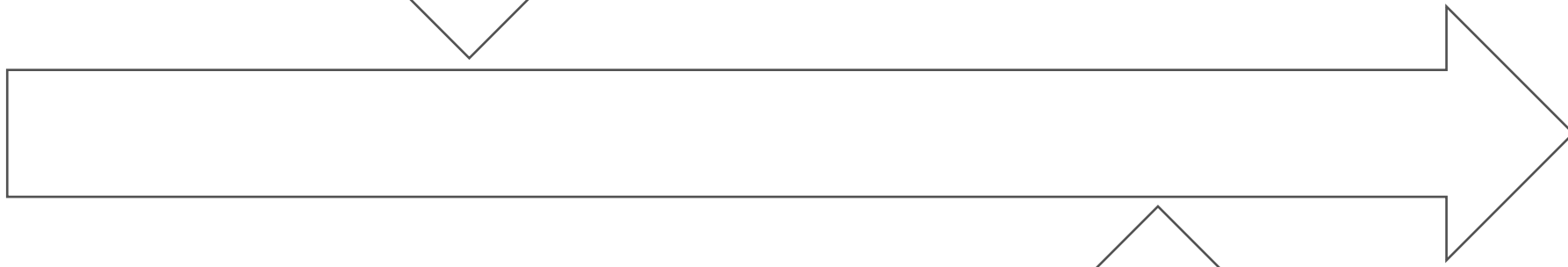
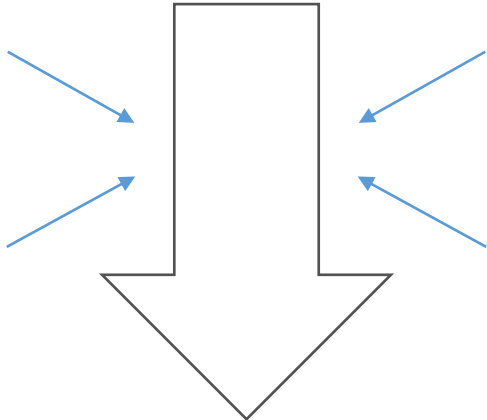
- Changes in prescribing (quantitative)...



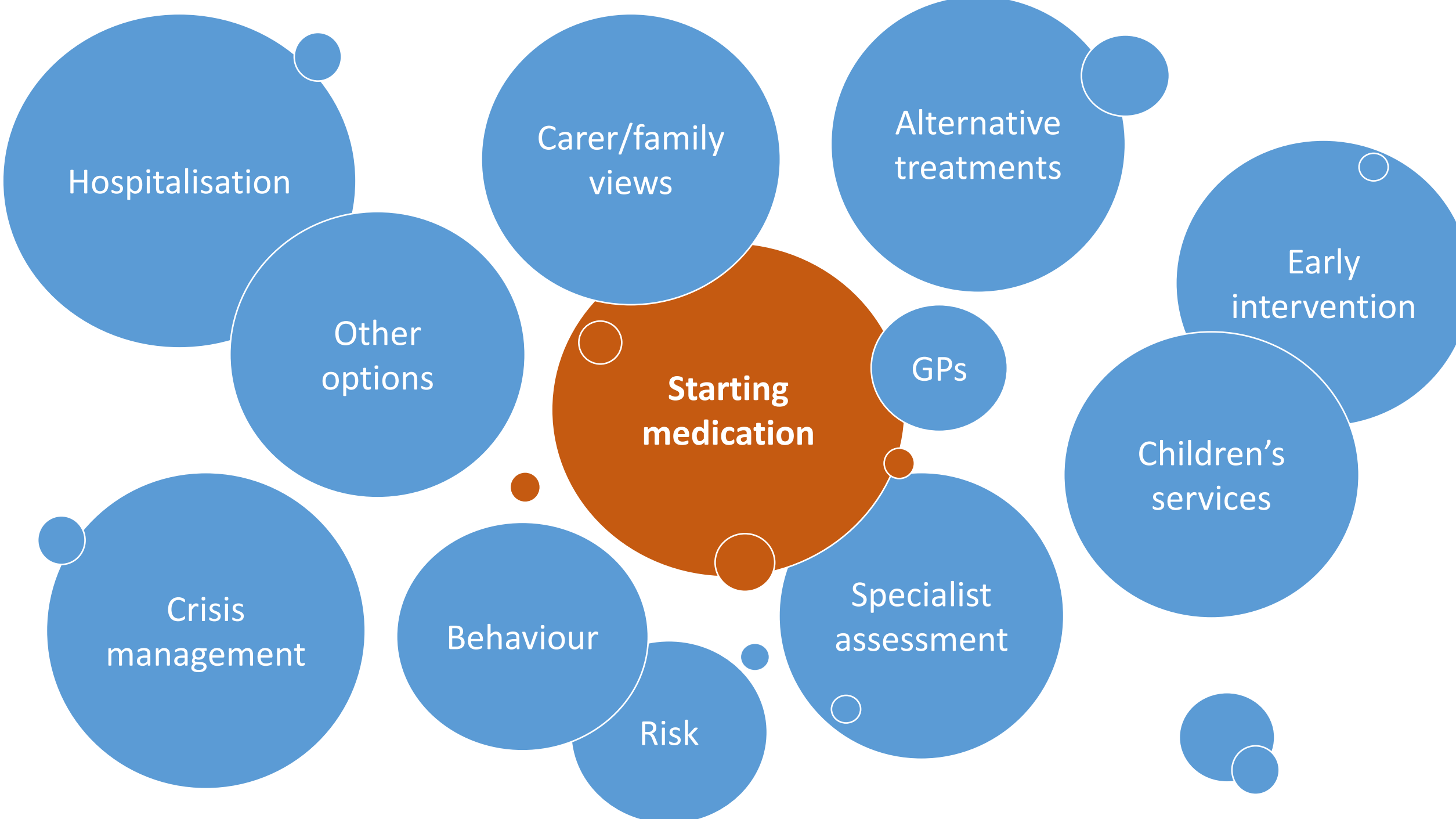
- Changes in experience (qualitative)...



Medication is started



Medication is reviewed



Hospitalisation

Carer/family views

Alternative treatments

Early intervention

Children's services

Starting medication

GPs

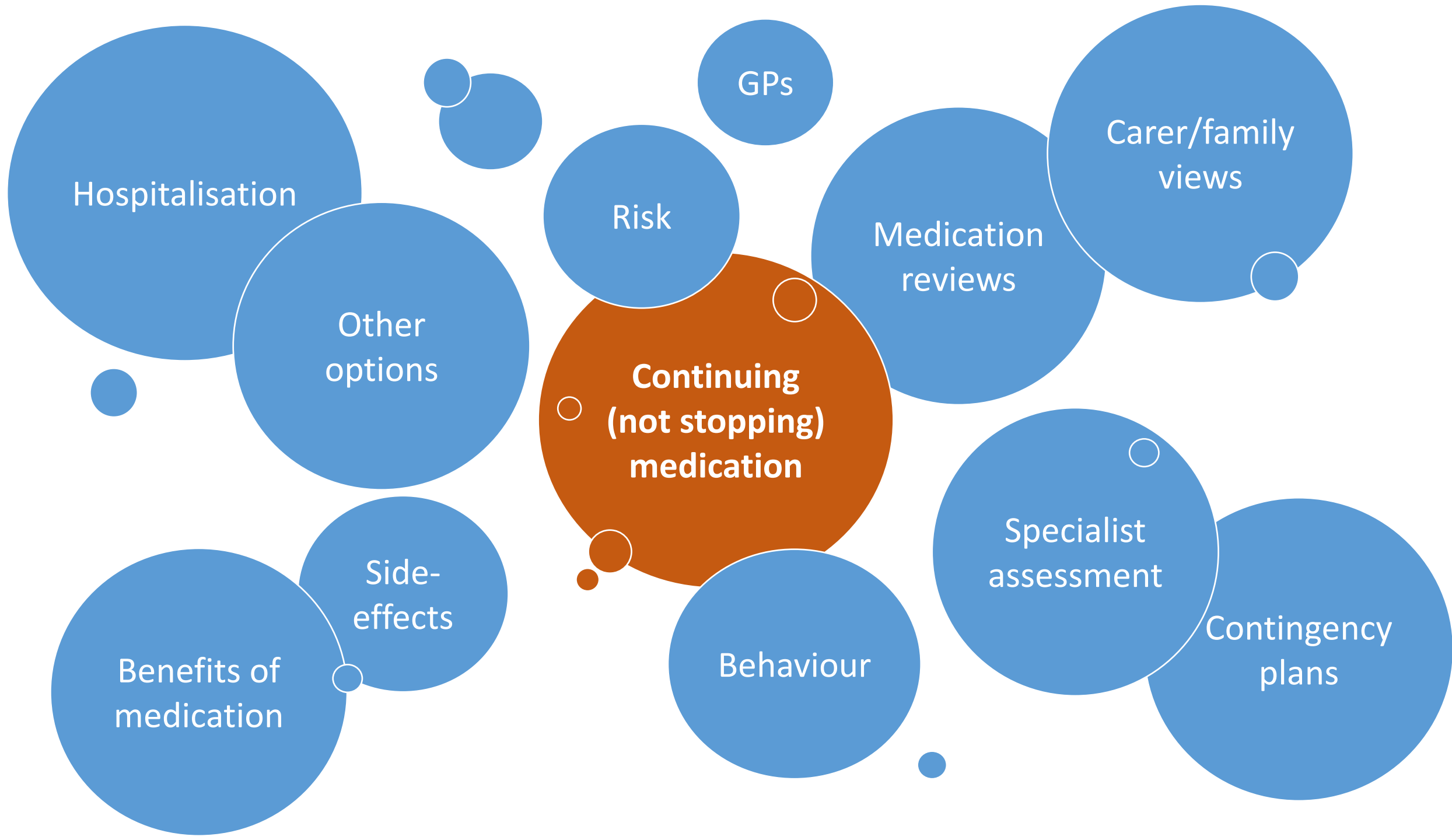
Specialist assessment

Risk

Behaviour

Crisis management

Other options



Discussion

- What are the major issues in starting medication?
- What are the main issues in medication review?
- How can people with intellectual disability and family carers be more involved in medication decisions and ensuring we make the best use of medication?