GOVERNMENT RESPONSE TO PROFESSOR SUBE BANERJEE’S REPORT ON THE PRESCRIBING OF ANTI-PsYCHOTIC DRUGS TO PEOPLE WITH DEMENTIA: 12 NOVEMBER 2009

1. The Government welcomes the independent clinical report prepared by Professor Sube Banerjee on the prescribing of anti-psychotic drugs to people with dementia, and accepts the conclusions and recommendations he has reached. The report was commissioned by the Government in recognition of widespread concern about the over-prescription of these drugs, and as part of the priority being given to improving care for people with dementia.

2. There have been a number of previous reports addressing this difficult issue. However, Professor Banerjee’s report brings together for the first time all the clinical evidence available in a comprehensive way, with clear recommendations on how to take matters forward. We need to ensure that anti-psychotic drugs are only prescribed to people with dementia when necessary, and are not used when non-pharmacological approaches can be equally effective.

3. The figures contained in the report on people with dementia dying as a result of being prescribed anti-psychotic drugs are totally unacceptable. There is inevitably an element of risk with the prescribing of any medication. However, there is clear evidence that anti-psychotic drugs are currently being over-prescribed, when alternative non-pharmacological approaches to dealing with anxiety and behavioural problems are available and should be used.

4. A number of the report’s recommendations are addressed to bodies outside the Department of Health. The report will therefore be widely disseminated by the Department to those with an interest, and we expect the findings and recommendations to be taken into account by all relevant organisations. The Government supports the best practice guidance identified in the report, with quality and safety being the overriding principles. There will be a need for PCTs, local authorities and other bodies to work together to take forward the report’s recommendations, particularly taking into account the interface between health and social care services.

5. All clinical decisions to prescribe anti-psychotic drugs to people with dementia should be taken on the best evidence available, with proper regard to the existing NICE guidance. This guidance makes clear that people with dementia should only be offered anti-psychotics if they are severely distressed or there is an immediate risk of harm to the person or others. The NHS locally should be following NICE guidance and PCTs have a responsibility to ensure that this happens.

6. The Government accepts the conclusion reached by Professor Banerjee that there should not be a ban on the prescribing of anti-psychotic medication to people with dementia, as there will
undoubtedly be occasions when the use of drugs will be necessary and in the best interests of the person involved. As the report points out, behavioural problems in people with dementia can be distressing and dangerous, so in some cases antipsychotic medication may be the best option.

7. The position of a new National Clinical Director for Dementia was advertised yesterday on 11 November, with an expectation that the position will be filled in January 2010. One of the most important tasks of the new Director will be to provide leadership in taking forward the recommendations contained in Professor Banerjee’s report. Notably he or she will be charged with:

- reporting on a six monthly basis to the Minister for Care Services on progress against the recommendations of the report; and
- leading a national audit to generate data on the prescribing of anti-psychotic drugs to people with dementia in each PCT in England. The first audit should be completed within six months of the National Clinical Director coming into post, and repeated on an annual basis for at least the next three years to measure progress.

8. National and local progress on addressing the conclusions of the report will also be monitored by the National Dementia Strategy Implementation Board responsible for delivery and implementation of the National Dementia Strategy. Progress on auditing the prescription of anti-psychotic drugs to people with dementia, and reducing current levels of prescription, will from now on form part of the programme for implementing the Strategy. Progress on further research on the clinical and cost effectiveness of non-pharmacological methods of treating behavioural problems in dementia will also assessed by the Ministerial Group on Dementia Research. The establishment of the Ministerial Group was announced on 5 November, to take forward the conclusions of the Dementia Research Summit held in July 2009. The membership and terms of reference for the Group will be announced in the near future.

9. The Government welcomes the fact that the Alzheimer’s Society has given its support to the contents of the report, and that they are represented at the launch by the Society’s Chief Executive, Neil Hunt. The Department of Health will be working closely with the Society to produce advice for people whose family members with dementia are currently being prescribed anti-psychotic drugs and who may have concerns at their possible effects.