#### **Expert Survey Results and Guideline References**

**1 Indications for antipsychotics.** Please rate the appropriateness of using an antipsychotic to treat each of the following conditions in an older patient (assuming you have confirmed the diagnosis with an adequate workup, see Questions 2–9). Use a rating of 7–9 if you would usually prescribe an antipsychotic for an older patient with this condition, a 4–6 if you would sometimes do so, and a 1–3 if you would rarely or never do so.

	95% COM Third Line	NFIDENC Second I		ERVALS First Line	Avg(SD)		1st Line		3rd Line
Schizophrenia				*	8.7(0.6)	77	98	2	0
Mania with psychosis					8.2(1.0)	46	94	6	0
Dementia with agitation with delusions					7.9(1.5)	48	90	6	4
Psychotic major depression					7.8(1.3)	27	92	6	2
Delusional disorder					7.1(1.7)	21	73	25	2
Mania without psychosis					6.1(1.6)	2	52	40	8
Delirium					6.1(2.0)	9	51	38	11
Dementia with agitation without delusions					5.9(1.6)	0	42	52	6
Agitated nonpsychotic major depression					5.0(1.7)	0	19	65	17
Nonpsychotic major depression with severe anxiety					4.4(1.5)	0	6	67	27
Severe nausea and vomiting (e.g., due to chemotherapy)					3.4(1.7)	0	5	36	59
Irritability and hostility in the absence of a major psychiatric syndrome					2.7(1.4)	0	0	29	71
Nonpsychotic major depression without severe anxiety					2.7(1.3)	0	0	19	81
Neuropathic pain					2.3(1.4)	0	2	13	85
Panic disorder					2.1(1.1)	0	0	10	90
Generalized anxiety disorder					2.0(1.1)	0	0	13	88
Hypochondriasis					2.0(1.2)	0	0	15	85
Motion sickness					1.9(1.2)	0	0	11	89
Insomnia/sleep disturbance in the absence of a major psychiatric syndrome or a discrete medical cause					1.7(0.8)	0	0	4	96
]	2 3	4 5	6	7 8	9	%	%	%	%

**2** Diagnosis of delirium. Please rate the importance\* of the following features in making a diagnosis of delirium in an older patient (i.e., in distinguishing delirium from dementia; in identifying delirium superimposed on dementia).

	95% C	C O N	FIDEN	NCE 1	NTE	RVA	LS		Tr of	1st	2nd	3rd
	Third Li	ne	Secor	nd Line	I	First L	Line	Avg(SD)	Chc	Line	Line	Line
Disturbance of consciousness (i.e., reduced clarity of awareness of environment) with reduced ability to focus, sustain, or shift attention							*	8.5(0.8)	69	98	2	0
The disturbance has a fluctuating course (waxes and wanes) during the course of the day								8.0(1.3)	46	90	10	0
The disturbance develops over a short period of time								7.9(1.3)	42	92	6	2
Evidence that the patient has recently used drugs that can cause intoxication or withdrawal delirium								7.3(1.5)	23	79	19	2
Workup identifies a medical illness (e.g., dehydration, urinary tract infection) that could be causing the delirium								7.1(1.5)	13	77	21	2
Change in cognitive function (e.g., disorientation, language disturbance, perceptual disturbance)								7.0(1.9)	26	72	19	9
The patient has recently been exposed to an environmental toxin that can cause delirium								6.7(2.0)	15	66	26	9
If hallucinations or delusions are present, these symptoms fluctuate and are fragmented and unsystematized								6.4(1.8)	10	60	33	6
History of a dementing disorder								5.6(1.6)	6	27	63	10
EEG abnormalities								4.8(2.2)	4	29	38	33
The patient has recently been exposed to psychosocial stressors or been relocated to a different setting								4.7(1.9)	0	21	46	33
]	2	3	4	5 6	5 7	7 3	3	9	%	%	%	%

\*Note that the experts were supplied with the following rating scale for this and subsequent questions for which they were asked to rate importance.

- 9 extremely important discriminating feature
- 7–8 important discriminating feature
- 4-6 somewhat important discriminating feature
- 2–3 not very important discriminating feature
  - 1 not at all important as a discriminating feature

**3** Diagnosis of schizophrenia. Please rate the importance of the following features in making a diagnosis of schizophrenia in an older patient.

	95% C c Third Line		ENCE I cond Line	N T E R V A First I		Avg(SD)	Tr of Chc			
Delusions						7.9(1.1)	40	94	6	0
Hallucinations						7.5(1.6)	33	83	15	2
Long-term history of psychotic symptoms						7.3(1.5)	17	78	17	4
Grossly disorganized behavior						6.3(1.6)	13	50	46	4
Disorganized speech						6.3(1.8)	13	52	41	7
Absence of alterations in consciousness or impaired attention						6.2(2.2)	15	55	32	13
Workup rules out a medical illness (e.g., lupus erythematosus) that could be causing the psychotic symptoms						6.1(1.9)	9	47	43	11
No evidence that the patient has recently used drugs (e.g., psychostimulants) that can cause psychotic symptoms						6.0(2.0)	6	51	36	13
Affective flattening (diminished range of emotional expressiveness)						5.8(1.7)	6	34	57	9
The duration of mood symptoms is brief in relation to the total duration of the disturbance						5.8(1.6)	0	38	51	11
Avolition (inability to initiate and persist in goal-directed activities)						5.6(1.9)	9	34	49	17
The patient has frequently been treated with antipsychotic medications in the past						5.3(2.0)	4	33	48	20
Alogia (poverty of speech, decreased fluency and productivity of speech)						5.2(1.6)	2	19	62	19
A recent severe psychosocial stressor						4.2(1.9)	2	11	51	38
1	2 3	4	5 6	7	8 9	)	%	%	%	%

**4 Diagnosis of delusional disorder.** Please rate the importance of the following features in making a diagnosis of delusional disorder in an older patient.

	9 5 % Third I			E N C E ond Li		текv First		A	vg(SD)	Tr of Chc		2nd Line	
Nonbizarre delusions that have lasted at least 1 month								7	.9(1.4)	48	91	7	2
The person does not display disorganized speech or disorganized or bizarre behavior								7	.5(1.1)	13	89	9	2
No prominent auditory or visual hallucinations	1							7	.3(1.3)	21	79	21	0
No evidence that the patient has recently used drugs (e.g., psychostimulants) that can cause delusions								7	.2(1.6)	15	78	17	4
Aside from the delusions, the person's functioning is not markedly impaired								7	.1(1.6)	20	72	24	4
Workup rules out a medical illness (e.g., dementia of the Alzheimer's type) that could be causing the delusions								7	.1(1.7)	17	70	26	4
Absence of alterations in consciousness or impaired attention								7	.0(1.7)	24	76	20	4
The person does not have negative symptoms (affective flattening, alogia, avolition)					[			6	.8(1.2)	9	60	40	0
Absence of cognitive impairment	l							6	.7(1.8)	15	65	28	7
Absence of mood symptoms, or mood symptoms of brief duration								6	.5(1.6)	11	57	39	4
Premorbid paranoid personality disorder	1		[					5	.0(1.9)	0	30	45	25
Severe stressor (e.g., relocation or bereavement)	I							4	.2(2.2)	2	16	40	44
Premorbid obsessive-compulsive personality disorder								3	.8(1.9)	0	9	42	49
1	2	3	4	5	6	7	8	9		%	%	%	%

**5** Diagnosis of major depression. Please rate the importance of the following features in making a diagnosis of 1) nonpsychotic major depression and 2) psychotic major depression in an older patient.

	95% CON Third Line	FIDENCE IN Second Line	TERVALS First Line	Avg(SD)		1st Line		
Nonpsychotic Major Depression				8()				
Depressed mood most of the day, every day			*	8.1(1.3)	50	94	4	2
Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day				7.8(1.3)	31	94	4	2
Recurrent thoughts of death, recurrent suicidal ideation, or a suicide attempt				7.8(1.2)	32	89	11	0
Feelings of worthlessness or excessive or inappropriate guilt nearly every day				7.2(1.0)	13	76	24	0
Change in sleep patterns (insomnia or hypersomnia)		[		6.8(1.5)	15	67	29	4
Fatigue or loss of energy nearly every day				6.7(1.5)	13	60	36	4
Psychomotor agitation or retardation nearly every day				6.6(1.4)	11	62	36	2
Significant weight loss (when not dieting) or weight gain or a decrease or increase in appetite nearly every day				6.6(1.7)	15	58	35	6
Diminished ability to think or concentrate or indecisiveness nearly every day				6.4(1.4)	11	47	51	2
Workup rules out a medical illness (e.g., Parkinson's disease) that could be causing the depression				6.3(1.9)	11	51	40	9
The symptoms are not better accounted for by schizoaffective disorder, schizophrenia, or delusional disorder				6.2(2.1)	13	62	26	13
The patient has never had a hypomanic, manic, or mixed episode				6.0(2.2)	15	46	38	17
No evidence that the patient has recently used a drug (e.g., interferon) that can cause depression				5.9(1.9)	8	48	44	8
A previous episode of psychotic depression				5.8(2.5)	17	45	31	24
Bereavement within the previous 2 months				5.0(2.1)	2	29	46	25
History of severe anxiety				4.2(1.9)	0	13	48	4(
History of panic attacks				4.0(1.8)	0	10	48	42
Delusions that occur only when the depressive symptoms are present				3.7(2.7)	2	20	32	48



_			NTERVALS			1st		
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Lin
Psychotic Major Depression								
Depressed mood most of the day, every day				8.0(1.3)	47	91	6	2
Delusions that occur only when the depressive symptoms are present				8.0(1.1)	46	94	6	0
Recurrent thoughts of death, recurrent suicidal ideation, or a suicide attempt				7.9(1.1)	37	87	13	0
Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day				7.9(1.3)	34	91	6	2
A previous episode of psychotic depression				7.8(1.7)	39	89	7	4
Feelings of worthlessness or excessive or inappropriate guilt nearly every day				7.4(1.3)	20	82	16	2
The symptoms are not better accounted for by schizoaffective disorder, schizophrenia, or delusional disorder				7.1(1.8)	29	75	19	6
Psychomotor agitation or retardation nearly every day				7.1(1.4)	17	74	24	2
Change in sleep patterns (insomnia or hypersomnia)				7.0(1.5)	17	70	28	2
Significant weight loss (when not dieting) or weight gain or a decrease or increase in appetite nearly every day				6.7(1.7)	15	64	30	6
Diminished ability to think or concentrate or indecisiveness nearly every day				6.7(1.5)	15	54	43	2
Fatigue or loss of energy nearly every day				6.6(1.6)	13	62	33	4
Workup rules out a medical illness (e.g., Parkinson's disease) that could be causing the depression				6.4(2.0)	11	60	31	9
The patient has never had a hypomanic, manic, or mixed episode				5.9(2.2)	13	41	41	17
No evidence that the patient has recently used a drug (e.g., interferon) that can cause depression				5.9(2.0)	9	52	39	9
Bereavement within the previous 2 months				4.7(2.1)	2	21	51	28
History of severe anxiety				4.1(1.8)	0	11	47	43
History of panic attacks				3.7(1.8)	0	6	47	47

**6** Diagnosis of mania (bipolar I disorder). Please rate the importance of the following features in making a diagnosis of 1) nonpsychotic mania and 2) psychotic mania in an older patient.

	95% CON Third Line	FIDENCE l Second Line	INTERVALS First Line	Avg(SD)			2nd Line	
Nonpsychotic Mania								
Elevated, expansive, or irritable mood that persists for at least 1 week			*	8.2(1.2)	53	96	2	2
Inflated self-esteem or gandiosity for at least 1 week				7.5(1.1)	19	87	13	0
Flight of ideas or subjective experience that thoughts are racing occurring frequently for at least 1 week				7.4(1.0)	17	85	15	0
Excessive involvement in pleasurable activities that have a high potential for negative consequences (e.g., buying sprees, foolish business investments)				7.2(1.3)	17	77	21	2
Decreased need for sleep for at least 1 week				7.1(1.1)	11	77	23	0
Workup rules out a medical illness (e.g., multiple sclerosis, stroke) that could be causing the manic symptoms				6.9(1.8)	24	63	35	2
No evidence that the patient has recently used a drug (e.g., cocaine, antidepressant medication) that can cause manic symptoms				6.8(1.8)	19	62	34	4
The symptoms are not better accounted for by schizoaffective disorder, schizophrenia, or delusional disorder				6.6(1.9)	17	59	35	7
Increase in goal-directed activity or psychomotor agitation for at least 1 week				6.5(1.4)	6	57	40	2
Distractibility for at least 1 week				6.2(1.4)	6	40	55	4
Family history of a psychiatric disorder				5.1(1.8)	0	23	60	17
Hallucinations or delusions that occur only when the manic symptoms are also present				4.4(2.6)	2	30	28	41
History of substance abuse in early life				3.5(1.7)	0	2	51	47
History of sociopathy				3.4(1.8)	0	2	44	53
Borderline personality disorder				3.4(1.7)	0	2	40	58

-	95% Con	FIDENCE I	NTERVALS		Tr of		2nd	
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Lin
Psychotic Mania								
Hallucinations or delusions that occur only when the manic symptoms are also present			*	8.4(1.1)	66	98	0	2
Elevated, expansive, or irritable mood that persists for at least 1 week			*	8.1(1.4)	55	93	5	2
Inflated self-esteem or gandiosity for at least 1 week				7.6(1.1)	24	87	13	0
Flight of ideas or subjective experience that thoughts are racing occurring frequently for at least 1 week				7.5(1.0)	22	89	11	0
Decreased need for sleep for at least 1 week				7.3(1.1)	17	80	20	0
The symptoms are not better accounted for by schizoaffective disorder, schizophrenia, or delusional disorder				7.3(1.5)	23	77	21	2
Excessive involvement in pleasurable activities that have a high potential for negative consequences (e.g., buying sprees, foolish business investments)			-	7.3(1.3)	22	71	29	0
No evidence that the patient has recently used a drug (e.g., cocaine, antidepressant medication) that can cause manic symptoms				7.1(1.7)	22	67	30	2
Workup rules out a medical illness (e.g., multiple sclerosis, stroke) that could be causing the manic symptoms				6.9(1.8)	24	64	33	2
Increase in goal-directed activity or psychomotor agitation for at least 1 week				6.7(1.5)	15	52	46	2
Distractibility for at least 1 week		[		6.5(1.5)	11	46	52	2
Family history of a psychiatric disorder				5.2(1.8)	0	26	57	17
History of substance abuse in early life				3.5(1.7)	0	2	52	4
History of sociopathy				3.5(1.9)	0	5	43	52
Borderline personality disorder		]		3.2(1.7)	0	2	34	64
	1 2 3	4 5 6	7 8	9	%	%	%	ć

### **6** Diagnosis of mania (bipolar I disorder), continued

	95% CON Third Line	NFIDENCE Second Li			Avg(SD)	Tr of Chc		2nd Line	
Recurrent unexpected panic attacks (attacks that occur spontaneously "out of the blue")				*	8.5(0.7)	64	100	0	0
Persistent concern about having another panic attack or about the implications of the attack					7.5(1.2)	23	79	21	0
Significant change in daily behavior as a result of the panic attack					7.5(0.8)	13	91	9	0
No evidence that the patient has recently used drugs (e.g., psychostimulants) that can cause panic attacks or autonomic arousal					7.1(1.7)	26	66	32	2
Workup rules out a medical illness (e.g., hyperthyroidism) that could be causing the panic attack symptoms					7.1(1.7)	23	72	23	4
History of phobias					5.0(1.7)	0	22	61	17
Absence of cardiac disease					4.1(1.8)	0	15	38	47
History or presence of mitral valve prolapse					4.1(1.7)	0	9	50	41
Multiple physical complaints					4.0(1.8)	2	7	54	39
Insomnia					3.8(1.7)	0	6	40	53
Hopelessness					3.6(2.0)	2	9	35	57
Obsessions					3.5(2.0)	0	11	30	60
Delusions					3.3(2.5)	6	13	26	62
Weight loss					3.2(1.5)	0	6	23	70
	2 3	4 5	6 7	8 9	)	%	%	%	%

**7 Diagnosis of panic disorder.** Please rate the importance of the following features in making a diagnosis of panic disorder in an older patient.

**8** Diagnosis of generalized anxiety disorder. Please rate the importance of the following features in making a diagnosis of generalized anxiety disorder in an older patient.

	95% CON Third Line	FIDENCE IN Second Line	T E R V A L S First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
Excessive anxiety and worry that occur more		Second Line	*	8.5(0.8)	66	98	2	0
days than not for at least 6 months								
The person finds it hard to control the anxiety and worry				8.1(0.8)	34	96	4	0
The worry is accompanied by a feeling of restlessness or being keyed up				7.4(1.2)	17	85	15	0
No evidence that the patient has recently used drugs (e.g., excessive caffeine intake) that can cause anxiety				6.5(1.9)	15	60	36	4
Workup rules out a medical illness (e.g., hyperthyroidism) that could be causing the anxiety				6.4(2.0)	15	57	35	9
The person has difficulty concentrating (mind going blank)				6.1(1.4)	4	39	57	4
Presence of muscle tension				6.0(1.7)	4	45	51	4
Sleep disturbance (difficulty falling or staying asleep, restless unsatisfying sleep)				5.8(1.5)	2	38	55	6
The person becomes easily fatigued				5.7(1.6)	2	34	55	11
The person is irritable				5.5(1.6)	2	28	57	15
The anxiety or worry has one specific focus (e.g., fear of having a panic attack, fear of being embarrassed in public, fear of contamination, fear of having a serious illness)				4.5(2.3)	6	17	45	38
Multiple physical complaints				4.2(1.9)	0	13	53	34
Obsessions				3.6(1.9)	0	11	36	53
Hopelessness				3.4(1.7)	0	4	33	63
Weight loss				3.1(1.4)	0	0	35	65
Delusions				2.8(2.4)	4	11	17	72
	1 2 3	4 5 6	7 8 9	)	%	%	%	%

**9 Diagnosis of hypochondriasis.** Please rate the importance of the following features in making a diagnosis of hypochondriasis in an older patient.

	9 5 % Third I			ENCI ond L			V A L S st Line	1	Avg(SD)	Tr of Chc	1st Line		3rd Line
Persistent fears of having a serious disease based on a misinterpretation of bodily symptoms							*		8.4(0.7)	57	98	2	0
The preoccupation persists despite appropriate medical evaluation and reassurance							*		8.4(0.7)	51	100	0	0
Although the person may not recognize that the concern is excessive, the belief is not of delusional intensity (as in delusional disorder)									7.5(1.7)	32	83	15	2
Presence of multiple medically confirmed physical problems		[		]					4.0(2.3)	4	19	38	43
History of major depression									4.0(2.0)	2	13	39	48
	2	3	4	5	6	7	8	9		%	%	%	%

**10** Identifying conditions contributing to dementia with agitation. Please rate the importance of identifying and addressing the following conditions before deciding to intervene with antipsychotic medication to treat agitation in an older patient with dementia.

			NFIDE						Tr of		2nd	3rd
	Third	Line	Seco	ond L	ine	First	Line	Avg(SD)	Chc	Line	Line	Line
Delirium							*	8.1(1.1)	54	94	6	0
Agitated depression								7.5(1.0)	21	88	13	0
Pain (e.g., from osteoarthritis)								7.0(2.1)	27	71	21	8
Dysuria (e.g., due to infection) or urinary urgency (e.g., due to uninhibited bladder contractions)								6.9(2.0)	29	60	35	4
Dyspnea (e.g., due to cardiac or lung disease)								6.8(2.0)	23	71	23	6
Abdominal discomfort (e.g., due to constipation)								6.7(1.8)	15	65	29	6
Pruritus (severe itching)						]		6.0(2.0)	8	50	38	13
Dizziness								5.2(2.1)	6	27	54	19
Fatigue								4.0(2.2)	4	10	48	42
1	2	3	4	5	6	7	8	9	%	%	%	%

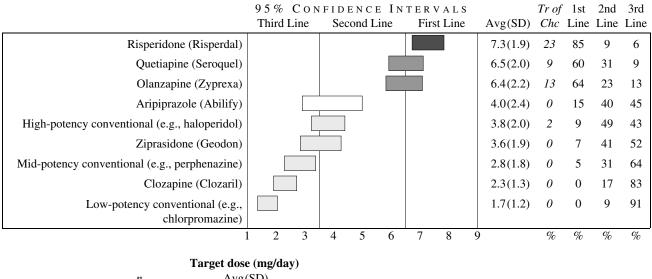
**11 Treatment of agitated dementia with delusions.** Assuming that other conditions have been ruled out or addressed, please rate the appropriateness of each of the following treatment regimens for an older patient with agitated dementia with delusions.

		CON Line		ENCE ond Li			V A L S t Line	Av	/g(SD)	Tr of Chc		2nd Line	3rd Line
An antipsychotic alone								7	.9(1.3)	38	94	4	2
A mood stabilizer plus an antipsychotic								5	.9(1.7)	0	46	46	8
An antidepressant plus an antipsychotic					]			5	.1(2.1)	2	29	48	23
A benzodiazepine plus an antipsychotic								4	.6(1.9)	0	17	58	25
A mood stabilizer alone								4	.2(1.7)	0	8	56	35
An antidepressant alone								3	.9(2.0)	2	10	42	48
Electroconvulsive therapy (ECT)								3	.2(2.0)	2	6	30	64
A benzodiazepine alone	[							2	.6(1.5)	0	0	21	79
1	2	3	4	5	6	7	8	9		%	%	%	%

**12** Treatment of agitated dementia without delusions. Assuming that other conditions have been ruled out or addressed, please rate the appropriateness of each of the following treatment regimens for an older patient with agitated dementia without delusions.

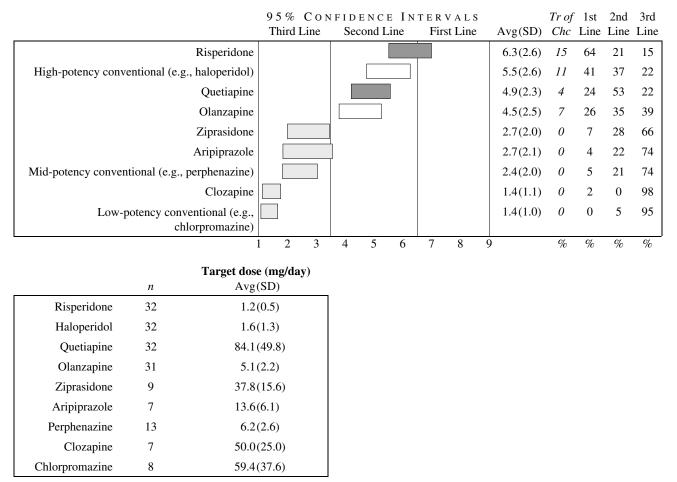
	95%	CON	NFIDI	ENCE	ΙN	TER	VALS		Tr of	1st	2nd	3rd
	Third	Line	Sec	ond Li	ne	Firs	t Line	Avg(SD)	Chc	Line	Line	Line
An antipsychotic alone								6.5(1.8)	10	60	31	8
A mood stabilizer alone								5.7(1.7)	4	35	56	8
An antidepressant alone								5.3(2.0)	2	31	46	23
A mood stabilizer plus an antipsychotic								5.2(1.8)	0	31	50	19
An antidepressant plus an antipsychotic								4.4(1.7)	0	10	60	29
A benzodiazepine plus an antipsychotic								3.8(2.0)	0	13	44	44
A benzodiazepine alone								3.6(1.7)	0	8	31	60
Electroconvulsive therapy (ECT)								2.2(1.4)	0	2	10	88
	1 2	3	4	5	6	7	8 9	)	%	%	%	%

**13** Selecting antipsychotics for treatment of dementia with agitation. Assume that other conditions have been ruled out or addressed and you have decided to treat an older patient with dementia with agitation with an antipsychotic. Please rate the appropriateness of using each of the following antipsychotics and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.



	n	Avg(SD)
Risperidone	39	1.2(0.7)
Quetiapine	36	104.2(54.9)
Olanzapine	38	6.2(2.3)
Aripiprazole	11	11.1(2.1)
Haloperidol	31	1.2(0.6)
Ziprasidone	15	49.3(33.7)
Perphenazine	21	5.8(2.8)
Clozapine	21	53.0(47.4)
Chlorpromazine	13	81.0(45.8)

**14** Selecting antipsychotics for treatment of delirium. Assume that you have taken steps to treat the etiological disturbance(s) contributing to the delirium. Please rate the appropriateness of using each of the following antipsychotics to treat an older patient with delirium and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.



**15** Treatment of nonpsychotic major depression. Please rate the appropriateness of each of the following treatment regimens for an older patient who has 1) agitated nonpsychotic depression and 2) nonpsychotic depression with severe anxiety.

	95% CON Third Line	FIDENCE IN Second Line	TERVALS First Line	Avg(SD)	Tr of Chc		2nd Line	
With Agitation								
An antidepressant alone				7.1(1.8)	23	77	19	4
An antipsychotic plus an antidepressant				5.8(2.2)	6	44	44	13
Electroconvulsive therapy (ECT)				5.5(2.0)	6	31	52	17
A benzodiazepine plus an antidepressant				5.2(2.1)	4	25	52	23
A mood stabilizer plus an antidepressant				5.0(2.0)	0	23	54	23
A mood stabilizer plus an antipsychotic				2.8(1.7)	0	0	33	67
A mood stabilizer alone				2.7(1.5)	0	0	26	74
An antipsychotic alone				2.4(1.4)	0	0	23	77
A benzodiazepine plus an antipsychotic				1.7(1.2)	0	0	10	90
A benzodiazepine alone				1.5(1.0)	0	0	6	94
With Severe Anxiety								
An antidepressant alone				7.1(1.6)	13	79	17	4
A benzodiazepine plus an antidepressant				6.1(2.1)	11	51	36	13
Electroconvulsive therapy (ECT)				5.2(1.7)	2	25	60	15
An antipsychotic plus an antidepressant				5.1(2.0)	2	29	48	23
A mood stabilizer plus an antidepressant				4.8(2.1)	0	26	49	26
A mood stabilizer alone				2.7(1.6)	0	0	28	72
A mood stabilizer plus an antipsychotic				2.6(1.5)	0	0	31	69
An antipsychotic alone				2.1(1.4)	0	0	20	80
A benzodiazepine plus an antipsychotic				1.8(1.3)	0	0	13	87
A benzodiazepine alone				1.7(1.1)	0	0	6	94
1	2 3	4 5 6	7 8	9	%	%	%	%

**16** Selecting antidepressants for treatment of nonpsychotic major depression. Assume you have decided to use an antidepressant to treat an older patient who has 1) agitated nonpsychotic depression and 2) nonpsychotic depression with severe anxiety. Rate the appropriateness of each of the following (used either alone or in combination with other medications). If you are not familiar with a medication, draw a line through that row.

	95% CON Third Line	FIDENCE I Second Line	N T E R V A L S First Line	Avg(SD)			2nd Line	
With Agitation								
A selective serotonin reuptake inhibitor (SSRI)				7.8(1.3)	34	87	11	2
Venlafaxine				6.7(1.7)	13	67	28	4
Mirtazapine				6.6(1.4)	11	57	41	2
Trazodone				4.8(2.1)	2	25	46	29
A tricyclic antidepressant (TCA)				4.6(1.8)	0	15	58	27
Bupropion	Ĺ			4.0(2.0)	0	13	40	47
A nonselective monoamine oxidase inhibitor (e.g., phenelzine)				3.2(1.5)	0	2	36	62
A selective monoamine oxidase inhibitor (e.g., selegiline)				2.7(1.5)	0	0	22	78
With Severe Anxiety								
A selective serotonin reuptake inhibitor (SSRI)				7.8(1.2)	38	88	13	0
Venlafaxine				6.8(1.7)	15	67	28	4
Mirtazapine				6.7(1.5)	14	64	34	2
A tricyclic antidepressant (TCA)				4.7(1.8)	0	13	63	25
Trazodone				4.5(2.0)	2	17	48	35
Bupropion				4.1(2.0)	0	15	36	49
A nonselective monoamine oxidase inhibitor (e.g., phenelzine)				3.4(1.6)	0	2	40	58
A selective monoamine oxidase inhibitor (e.g., selegiline)				2.7(1.5)	0	0	24	76
	2 3	4 5 6	7 8	)	%	%	%	%

**17** Use of atypical antipsychotics in treatment-resistant nonpsychotic major depression. Rate the appropriateness of adding an atypical antipsychotic to an antidepressant in an older patient with nonpsychotic major depression in the following clinical situations.

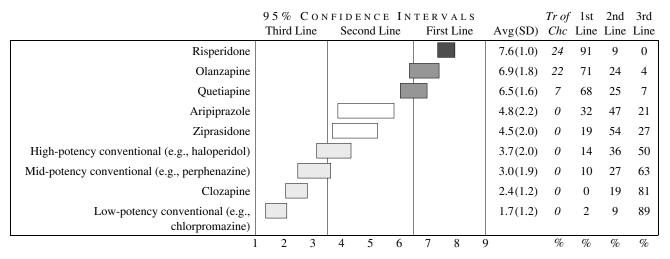
	95% Com	FIDENCE IN		Tr of	1st	2nd	3rd	
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Lack of response to adequate trials* of 2 antidepressants				5.6(2.4)	15	36	45	19
Partial response to adequate trials* of 2 antidepressants				4.8(2.2)	6	21	51	28
Lack of response to an adequate trial* of 1 antidepressant				3.8(2.1)	0	15	36	49
Partial response to an adequate trial* of 1 antidepressant				3.5(2.1)	0	11	32	57
*Assume that trials involved adequate theraneutic	1 2 3	4 5 6	, ,	9	%	%	%	%

\*Assume that trials involved adequate therapeutic doses and were of adequate duration.

**18** Treatment of psychotic major depression. Please rate the appropriateness of each of the following treatment regimens for an older patient with psychotic major depression.

	9 5 % Third L			N C E ond Li			7 A L S t Line	Avg(SD)	Tr of Chc	1st Line	2nd Line	3rd Line
An antipsychotic plus an antidepressant							*	8.4(0.8)	54	98	2	0
Electroconvulsive therapy (ECT)								7.3(1.6)	31	71	27	2
An antidepressant alone								4.5(1.9)	0	17	52	31
A mood stabilizer plus an antipsychotic								4.3(2.0)	0	19	48	33
A mood stabilizer plus an antidepressant		[						4.0(1.9)	0	11	49	40
An antipsychotic alone								3.7(1.9)	2	10	44	46
A benzodiazepine plus an antipsychotic								2.7(1.6)	0	2	29	69
A benzodiazepine plus an antidepressant								2.7(1.7)	0	0	35	65
A mood stabilizer alone								2.6(1.4)	0	0	23	77
A benzodiazepine alone								1.5(0.8)	0	0	2	98
	2	3	4	5	6	7	8	9	%	%	%	%

**19** Selecting antipsychotics to treat psychotic major depression. Please rate the appropriateness of using each of the following antipsychotics in combination with an antidepressant to treat an older patient with psychotic major depression and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.



	п	Target dose (mg/day) Avg(SD)
Risperidone	40	1.5(0.7)
Olanzapine	38	7.0(3.0)
Quetiapine	37	125.7(73.8)
Aripiprazole	13	14.2(4.4)
Ziprasidone	16	64.4(28.0)
Haloperidol	32	1.9(1.3)
Perphenazine	22	8.5(4.3)
Clozapine	20	64.7(58.5)
Chlorpromazine	12	110.8(74.5)

20 Selecting antipsychotics for treatment of schizophrenia. Please rate the appropriateness of using each of the following antipsychotics to treat an older patient with schizophrenia and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

			95% COM Third Line	FIDENCE IN Second Line	T E R V A L S First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
		Risperidone				7.8(1.0)	33	93	8	0
		Quetiapine				6.9(1.4)	10	67	33	0
		Olanzapine				6.8(1.7)	21	67	31	3
		Aripiprazole			<b>•</b>	5.7(2.2)	0	60	20	20
		Ziprasidone				5.1(1.9)	0	26	56	19
		Clozapine				4.3(2.0)	3	19	39	42
High-potency conve	ntional (	e.g., haloperidol)				4.3(2.2)	3	16	47	37
Mid-potency convent	ional (e.	g., perphenazine)				3.5(2.0)	0	8	41	51
Low-po	otency c	onventional (e.g., chlorpromazine)				2.1(1.4)	0	2	12	86
		1	2 3	4 5 6	7 8	9	%	%	%	%
		Target dose	e (mg/day)							
	п	Avg(	SD)							
Risperidone	39	2.4(	1.1)							
Quetiapine	36	204.2(	111.9)							
Olanzapine	38	10.6(	(3.5)							
Aripiprazole	15	20.3(	6.4)							
Ziprasidone	19	79.7(	(41.2)							
Clozapine	26	155.8(	111.6)							
Haloperidol	32	3.9(	2.6)							
Perphenazine	23	15.4(	(8.3)							
Chlorpromazine	15	206.7(	(122.6)							

**21** Treatment of panic disorder. Please rate the appropriateness of each of the following treatment regimens for an older patient with panic disorder.

	95% Co					Tr of					
	Third Line	Se	cond L	ine	First	t Line	Avg(SD)	Chc	Line	Line	Line
An antidepressant							7.6(1.6)	38	80	18	2
Cognitive-behavioral therapy (CBT)							6.4(1.7)	9	52	43	5
An antidepressant plus a benzodiazepine							6.3(1.5)	4	47	49	4
A benzodiazepine							5.3(1.7)	2	27	53	20
Other psychotherapy							4.3(1.9)	0	16	44	40
An antidepressant plus buspirone							4.3(2.0)	0	14	56	30
Buspirone							3.4(1.8)	0	7	39	55
An antipsychotic							2.8(1.5)	0	0	30	70
An antipsychotic plus a benzodiazepine							2.7(1.5)	0	2	23	75
1	2 3	4	5	6	7	8	9	%	%	%	%

**22** Treatment of generalized anxiety disorder. Please rate the appropriateness of each of the following treatment regimens for an older patient with generalized anxiety disorder.

		CON LLine		E N C E ond Li			V A L S st Line		Avg(SD)	Tr of Chc		2nd Line	3rd Line
An antidepressant									6.9(1.7)	21	67	31	2
A benzodiazepine									6.0(1.7)	2	44	46	10
Cognitive-behavioral therapy (CBT)									5.9(1.7)	4	42	52	6
An antidepressant plus a benzodiazepine									5.6(1.8)	0	42	46	13
An antidepressant plus buspirone									5.2(1.8)	0	30	55	15
Buspirone									5.0(1.8)	0	25	56	19
Other psychotherapy									5.0(2.2)	2	34	40	26
An antipsychotic									2.2(1.3)	0	0	15	85
An antipsychotic plus a benzodiazepine									2.1(1.2)	0	0	15	85
1	2	3	4	5	6	7	8	9		%	%	%	%

**23** Treatment of hypochondriasis. Please rate the appropriateness of each of the following treatment regimens for an older patient with hypochondriasis. Note that we are not referring to somatic concerns that reach delusional intensity here.

	95%	Сом	FIDE	ENCE	ΙN	TERV	ALS			Tr of	1st	2nd	3rd
	Third I	Line	Sec	ond Liı	ne	Firs	t Line	A	vg(SD)	Chc	Line	Line	Line
Supportive therapy								6	5.5(1.6)	11	61	34	5
Cognitive-behavioral therapy (CBT)								5	.7(1.6)	2	36	50	14
An antidepressant								5	.7(2.0)	5	41	43	16
An antidepressant plus a benzodiazepine								3	.8(2.0)	0	9	43	48
An antidepressant plus buspirone								3	.3(1.7)	0	5	43	52
A benzodiazepine								3	.3(1.6)	0	2	39	59
Buspirone								3	.2(1.6)	0	0	39	61
An antipsychotic								2	2.5(1.6)	0	2	25	73
An antipsychotic plus a benzodiazepine								1	.9(1.1)	0	0	9	91
1	2	3	4	5	6	7	8	9		%	%	%	%

**24** Treatment of delusional disorder. Please rate the appropriateness of each of the following treatment regimens for an older patient with delusional disorder.

	95% CONFIDENCE INTERVALS Third Line Second Line First Line									Tr of	1st	2nd	3rd
	Third L	line	Sec	ond L	ine	Firs	st Line		Avg(SD)	Chc	Line	Line	Line
An antipsychotic									8.0(1.2)	44	90	10	0
An antidepressant		[							4.0(1.8)	0	4	59	37
Electroconvulsive therapy (ECT)									3.3(2.3)	2	17	17	66
A mood stabilizer	[		]						3.0(1.7)	0	2	32	66
A benzodiazepine									2.4(1.4)	0	0	21	79
1	. 2	3	4	5	6	7	8	9		%	%	%	%

25 Selecting antipsychotics for treatment of delusional disorder. Assume that you have decided to use an antipsychotic to treat an older patient with delusional disorder, Please rate the appropriateness of using each of the following antipsychotics and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

			95% CON Third Line	NFIDENCE IN Second Line	NTERVALS First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
		Risperidone				7.3(1.5)	28	78	20	3
		Olanzapine				6.6(1.9)	18	55	38	8
		Quetiapine				6.4(1.7)	10	49	46	5
		Aripiprazole				5.1(2.5)	0	50	20	30
		Ziprasidone				4.5(2.2)	0	24	48	28
High-potency conve	entional (e	.g., haloperidol)				3.8(2.1)	0	12	38	50
Mid-potency conven	tional (e.g	, perphenazine)				3.1(2.0)	0	10	26	64
		Clozapine				2.5(1.7)	0	5	19	76
Low-p		nventional (e.g., chlorpromazine)				1.7(1.2)	0	2	5	93
		1	2 3	4 5 6	7 8	9	%	%	%	%
		Target dose	e (mg/day)							
	п	Avg(	SD)							
Risperidone	37	1.6(	0.9)							
Olanzapine	37	7.7(	3.1)							
Quetiapine	35	129.6(	76.7)							
Aripiprazole	13	17.9(	7.9)							
Ziprasidone	16	63.1(	35.0)							
Haloperidol	31	2.0(	1.2)							
Perphenazine	22	10.8(	6.3)							
Clozapine	14	96.9(	93.8)							
Chlorpromazine	12	100.8(	70.6)							

**26** Treatment of mania. Please rate the appropriateness of each of the following treatment regimens for an older patient with bipolar I disorder who is having a manic or mixed episode.

Mild ManiaA mood stabilizer aloneDiscontinue antidepressant if patient is currently receiving oneA mood stabilizer plus an antipsychotic A benzodiazepine plus an antipsychotic a mood stabilizer plus an antipsychotic A benzodiazepine alone Add an antidepressant if the patient is not already on oneElectroconvulsive therapy (ECT)Severe Nonpsychotic Annood stabilizer A benzodiazepine plus an antipsychotic a mood stabilizer plus an antipsychotic already on one Electroconvulsive therapy (ECT)A mood stabilizer plus an antipsychotic a mood stabilizer plus an antipsychotic already on one Electroconvulsive therapy (ECT)A mood stabilizer plus an antipsychotic a honod stabilizer plus an antipsychotic A benzodiazepine plus an antipsychotic A mood stabilizer plus an antipsychotic A benzodiazepine plus a mood stabilizer A benzodiazepine plus an antipsychotic A mood stabilizer plus an antipsychotic A da an antidepressant if the patient is not already on oneA benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on oneA benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on oneA benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on oneA benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on oneA benzodiazepine plus an antipsychotic Add		95% CON Third Line	FIDENCE IN Second Line	T E R V A L S First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
Discontinue antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic A benzodiazepine plus an antipsychotic alone A benzodiazepine plus an antipsychotic plus a benzodiazepine alone A dd an antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic A dd an antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic A mood stabilizer plus an antipsychotic A dd an antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic A mood stabilizer plus an antipsychotic plus a benzodiazepine plus an antipsychotic A mood stabilizer plus an antipsychotic A mood stabilizer plus an antipsychotic A dd an antidepressant if the patient is not already on one	Mild Mania								
A mood stabilizer plus an antipsychotic A benzodiazepine plus an antipsychotic alone A mood stabilizer plus an antipsychotic calone A benzodiazepine plus an antipsychotic plus a benzodiazepine alone A benzodiazepine alone A mood stabilizer plus an antipsychotic $A mood stabilizer plus an antipsychoticA mood$	A mood stabilizer alone				7.9(1.1)	40	91	9	0
A benzodiazepine plus a mood stabilizer An antipsychotic alone A benzodiazepine plus an antipsychotic benzodiazepine benzodiazepine already on one4.3(2.1)01647383.8(1.9)0748452.6(1.8)0720732.5(1.5)0020802.0(1.1)0012882.0(1.1)0012882.0(1.1)001090Severe Nonpsychotic Mania Discontinue antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic A mood stabilizer plus an antipsychotic plus a benzodiazepine Plus an antipsychotic plus a benzodiazepine7.1(2.1) $35$ 702194.8(2.0)21956264.7(2.0)02748254.6(2.2)02638364.5(2.0)2175231A benzodiazepine plus an antipsychotic A mood stabilizer plus an antipsychotic Add an antidepressant if the patient is not already on one3.5(1.9)0742511.8(1.1)00792313536364.5(2.0)2175231313536364.5(2.0)21752313536364.5(2.0)217					6.5(2.3)	21	62	24	14
An antipsychotic alone A benzodiazepine plus an antipsychotic A mood stabilizer plus an antipsychotic plus a benzodiazepine A benzodiazepine alone Add an antidepressant if the patient is not already on one $3.8(1.9)$ $0$ $7$ $48$ $45$ $2.6(1.8)$ $0$ $0$ $25$ $75$ $2.2(1.4)$ $0$ $0$ $20$ $80$ $2.0(1.1)$ $0$ $0$ $12$ $88$ $2.0(1.2)$ $0$ $0$ $10$ $90$ Severe Nonpsychotic Mania Discontinue antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic An antipsychotic alone Electroconvulsive therapy (ECT) $7$ $48$ $43$ A mood stabilizer plus an antipsychotic alone Electroconvulsive therapy (ECT) $6.6(2.4)$ $32$ $57$ $32$ $11$ $6.1(1.6)$ $5$ $48$ $43$ $9$ $4.8(2.0)$ $2$ $19$ $56$ $26$ $A$ mood stabilizer plus an antipsychotic plus a benzodiazepine A benzodiazepine plus an antipsychotic plus a benzodiazepine A dd an antidepressant if the patient is not already on one $3.5(1.9)$ $0$ $7$ $42$ $51$ Add an antidepressant if the patient is not already on one $3.5(1.9)$ $0$ $7$ $42$ $51$	A mood stabilizer plus an antipsychotic				4.4(2.1)	2	20	44	36
A benzodiazepine plus an antipsychotic A mood stabilizer plus an antipsychotic plus a benzodiazepine A dd an antidepressant if the patient is out already on one Electroconvulsive therapy (ECT) $2.6(1.8)$ $2.5(1.5)$ $0$ $0$ $25$ $75$ Severe Nonpsychotic Mania Discontinue antidepressant if patient is currently receiving one A mood stabilizer plus an antipsychotic An antipsychotic alone Electroconvulsive therapy (ECT) $7.1(2.1)$ $35$ $70$ $21$ $9$ Severe Nonpsychotic Mania Discontinue antidepressant if patient is currently receiving one A mood stabilizer alone A benzodiazepine plus an antipsychotic al nantipsychotic alone Electroconvulsive therapy (ECT) $7.1(2.1)$ $35$ $70$ $21$ $9$ A mood stabilizer plus an antipsychotic A mood stabilizer plus an antipsychotic plus a benzodiazepine A benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on one $7.1(2.1)$ $35$ $70$ $21$ $9$ $7.1(2.1)$ $35$ $70$ $21$ $9$ $6.6(2.4)$ $32$ $57$ $32$ $11$ $6.1(1.6)$ $5$ $48$ $43$ $9$ $4.8(2.0)$ $2$ $19$ $56$ $26$ $4.5(2.0)$ $2$ $17$ $52$ $31$ $3.5(1.9)$ $0$ $7$ $42$ $51$ $1.8(1.1)$ $0$ $0$ $7$ $93$ $3.5(1.9)$ $0$ $7$ $93$	A benzodiazepine plus a mood stabilizer				4.3(2.1)	0	16	47	38
A mood stabilizer plus an antipsychotic plus a benzodiazepine A benzodiazepine alone Add an antidepressant if the patient is not already on one Electroconvulsive therapy (ECT)2.5(1.5)0025752.2(1.4)0020802.0(1.1)0012882.0(1.2)001090Severe Nonpsychotic ManiaDiscontinue antidepressant if patient is currently receiving one7.1(2.1)3570219A mood stabilizer plus an antipsychotic A mood stabilizer alone Electroconvulsive therapy (ECT)6.6(2.4)325732116.1(1.6)5484394.8(2.0)21956264.7(2.0)02748254.6(2.2)02638364.5(2.0)2175231A mood stabilizer plus an antipsychotic A mood stabilizer plus an antipsychotic A du an antidepressant if the patient is not already on one3.5(1.9)0742511.8(1.1)00793	An antipsychotic alone				3.8(1.9)	0	7	48	45
A benzodiazepine A benzodiazepine alone Add an antidepressant if the patient is not already on one2.2(1.4)002.0802.0(1.1)0012882.0(1.2)001090Severe Nonpsychotic ManiaDiscontinue antidepressant if patient is currently receiving oneA mood stabilizer plus an antipsychotic A mood stabilizer alone Electroconvulsive therapy (ECT)7.1(2.1)3570219A mood stabilizer alone Electroconvulsive therapy (ECT)6.6(2.4)32573211A mood stabilizer A nantipsychotic alone Electroconvulsive therapy (ECT)4.8(2.0)2195626A mood stabilizer plus an antipsychotic plus a benzodiazepine A benzodiazepine plus an antipsychotic plus a benzodiazepine A dat an antidepressant if the patient is not already on one3.5(1.9)0742511.8(1.1)00793	A benzodiazepine plus an antipsychotic				2.6(1.8)	0	7	20	73
Add an antidepressant if the patient is not already on one2.0(1.1)001288Electroconvulsive therapy (ECT)2.0(1.2)001090Severe Nonpsychotic ManiaDiscontinue antidepressant if patient is currently receiving one7.1(2.1)3570219A mood stabilizer plus an antipsychotic A mood stabilizer alone6.6(2.4)32573211A benzodiazepine plus a mood stabilizer Electroconvulsive therapy (ECT)4.8(2.0)2195626A mood stabilizer plus an antipsychotic plus a benzodiazepine4.6(2.2)0263836A benzodiazepine plus an antipsychotic Lada an antidepressant if the patient is not already on one3.5(1.9)0742511.8(1.1)00793					2.5(1.5)	0	0	25	75
aiready on one2.0(1.2)001090Severe Nonpsychotic Mania2.0(1.2)001090Discontinue antidepressant if patient is currently receiving one7.1(2.1)3570219A mood stabilizer plus an antipsychotic A mood stabilizer alone6.6(2.4)32573211A benzodiazepine plus a mood stabilizer Electroconvulsive therapy (ECT)4.8(2.0)2195626A mood stabilizer plus an antipsychotic plus a benzodiazepine A benzodiazepine plus an antipsychotic plus a benzodiazepine3.5(1.9)074251A da an antidepressant if the patient is not already on one11.8(1.1)00793	A benzodiazepine alone				2.2(1.4)	0	0	20	80
Severe Nonpsychotic Mania7.1(2.1)3570219Discontinue antidepressant if patient is currently receiving one7.1(2.1)3570219A mood stabilizer plus an antipsychotic A mood stabilizer alone6.6(2.4)32573211A benzodiazepine plus a mood stabilizer An antipsychotic alone Electroconvulsive therapy (ECT)4.8(2.0)2195626A mood stabilizer plus an antipsychotic benzodiazepine4.5(2.0)0274825A benzodiazepine plus an antipsychotic already on one3.5(1.9)0742511.8(1.1)00793					2.0(1.1)	0	0	12	88
Discontinue antidepressant if patient is currently receiving one7.1(2.1)3570219A mood stabilizer plus an antipsychotic A mood stabilizer alone6.6(2.4)325732116.1(1.6)5484394.8(2.0)21956264.8(2.0)02748254.6(2.2)02638364.5(2.0)2175231A benzodiazepine plus an antipsychotic plus a benzodiazepine3.5(1.9)074251Add an antidepressant if the patient is not already on one11.8(1.1)00793	Electroconvulsive therapy (ECT)				2.0(1.2)	0	0	10	90
A mood stabilizer plus an antipsychotic A mood stabilizer alone6.6(2.4)32573211A mood stabilizer alone6.6(2.4)32573211A benzodiazepine plus a mood stabilizer An antipsychotic alone4.8(2.0)2195626Electroconvulsive therapy (ECT)4.6(2.2)0263836A mood stabilizer plus an antipsychotic plus a benzodiazepine51.5(1.9)074251A benzodiazepine plus an antipsychotic already on one3.5(1.9)074251	Severe Nonpsychotic Mania								
A mood stabilizer alone6.1(1.6)548439A benzodiazepine plus a mood stabilizer4.8(2.0)2195626An antipsychotic alone14.7(2.0)0274825Electroconvulsive therapy (ECT)114.6(2.2)0263836A mood stabilizer plus an antipsychotic plus a benzodiazepine115231A benzodiazepine plus an antipsychotic already on one3.5(1.9)0742511.8(1.1)00793					7.1(2.1)	35	70	21	9
A benzodiazepine plus a mood stabilizer An antipsychotic alone Electroconvulsive therapy (ECT)4.8(2.0)2195626A mood stabilizer plus an antipsychotic plus a benzodiazepine4.7(2.0)0274825A benzodiazepine A benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on one3.5(1.9)0742511.8(1.1)00793	A mood stabilizer plus an antipsychotic				6.6(2.4)	32	57	32	11
An antipsychotic alone4.7(2.0)0274825Electroconvulsive therapy (ECT)114.6(2.2)0263836A mood stabilizer plus an antipsychotic plus a benzodiazepine115231A benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on one3.5(1.9)0742511.8(1.1)00793	A mood stabilizer alone				6.1(1.6)	5	48	43	9
Electroconvulsive therapy (ECT)4.6(2.2)0263836A mood stabilizer plus an antipsychotic plus a benzodiazepinebenzodiazepine4.5(2.0)2175231A benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on one111.8(1.1)00793	A benzodiazepine plus a mood stabilizer				4.8(2.0)	2	19	56	26
A mood stabilizer plus an antipsychotic plus a benzodiazepine4.5(2.0)2175231A benzodiazepine plus an antipsychotic Add an antidepressant if the patient is not already on one3.5(1.9)074251	An antipsychotic alone				4.7(2.0)	0	27	48	25
benzodiazepineA benzodiazepine plus an antipsychoticAdd an antidepressant if the patient is not already on one	Electroconvulsive therapy (ECT)				4.6(2.2)	0	26	38	36
Add an antidepressant if the patient is not already on one 1.8(1.1) 0 0 7 93					4.5(2.0)	2	17	52	31
already on one	A benzodiazepine plus an antipsychotic				3.5(1.9)	0	7	42	51
A benzodiazepine alone 1.7(1.0) 0 0 7 93					1.8(1.1)	0	0	7	93
	A benzodiazepine alone				1.7(1.0)	0	0	7	93

## 26 Treatment of mania, continued

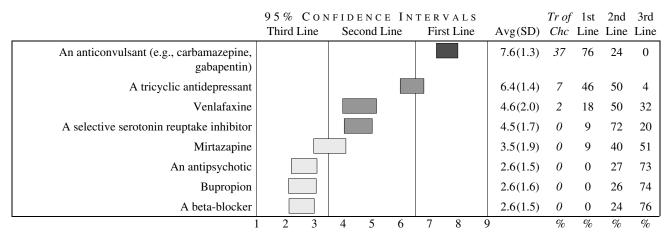
	95% CON	FIDENCE IN	TERVALS		Tr of	1st	2nd	3rd
	Third Line	Second Line	First Line	Avg(SD)				
Psychotic Mania								
A mood stabilizer plus an antipsychotic			*	8.4(1.1)	66	98	2	0
Discontinue antidepressant if patient is currently receiving one				7.0(2.4)	36	69	21	10
Electroconvulsive therapy (ECT)				6.1(2.1)	5	57	24	19
A mood stabilizer plus an antipsychotic plus a benzodiazepine				6.0(2.2)	12	50	36	14
An antipsychotic alone				5.9(1.9)	2	42	44	14
A mood stabilizer alone				4.3(1.8)	0	12	51	37
A benzodiazepine plus an antipsychotic				4.0(2.2)	0	14	38	48
A benzodiazepine plus a mood stabilizer				3.2(1.6)	0	0	39	61
Add an antidepressant if the patient is not already on one				1.8(1.3)	0	0	10	90
A benzodiazepine alone				1.3(0.7)	0	0	2	98
Mixed Episode								
A mood stabilizer plus an antipsychotic				6.3(1.8)	17	54	39	7
A mood stabilizer alone				5.7(2.0)	7	32	50	18
Electroconvulsive therapy (ECT)				5.5(2.0)	2	43	36	21
Add an antidepressant if the patient is not already on one				5.2(2.3)	9	30	45	25
A mood stabilizer plus an antipsychotic plus a benzodiazepine				4.6(2.1)	0	24	40	36
An antipsychotic alone				4.5(2.1)	0	21	44	35
Discontinue antidepressant if patient is currently receiving one				4.2(2.5)	7	21	33	45
A benzodiazepine plus a mood stabilizer				3.4(1.7)	0	0	42	58
A benzodiazepine plus an antipsychotic		]		3.1(1.8)	0	7	30	63
A benzodiazepine alone				1.6(0.9)	0	0	5	95

**27** Selecting antipsychotics for the treatment of mania. Assume you have decided to treat a patient with mania with a combination of a mood stabilizer and an antipsychotic. Please rate the appropriateness of using each of the following antipsychotics in combination with a mood stabilizer to treat an older patient with a manic episode with and without psychosis and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

	95% CON Third Line	FIDENCE IN Second Line	TERVAL First Lin		Tr of Chc		2nd Line			
Manic Episode With Psychosis		Second Line	I list Lill		ene	Line	Line	Line		
Risperidone				7.5(1.2)	31	83	17	0		
Olanzapine				7.1(1.8)	29	71	27	2		
Quetiapine				6.5(1.5)	29 10	52	43	5		
Aripiprazole				5.3(2.4)	10 0	38	38	25		
				· · · ·	4		58 52	23 32		
Ziprasidone				4.6(2.2)						
High-potency conventional (e.g., haloperidol)				4.5(2.3)	5	21	42	37		
Mid-potency conventional (e.g., perphenazine)				3.1(2.0)	0	8	31	62		
Clozapine				2.6(1.7)	0	3	18	79		
Low-potency conventional (e.g., chlorpromazine)				1.8(1.3)	0	3	5	93		
Manic Episode Without Psychosis										
Risperidone				5.1(2.3)	3	29	49	23		
Olanzapine				4.9(2.1)	0	26	47	26		
Quetiapine				4.3(2.0)	0	14	54	31		
Aripiprazole				3.4(2.0)	0	6	47	47		
Ziprasidone				3.1(1.9)	0	0	46	54		
High-potency conventional (e.g., haloperidol)				3.1(1.8)	0	6	31	63		
Mid-potency conventional (e.g., perphenazine)		_		2.6(1.8)	0	3	24	74		
Clozapine				1.7(1.0)	0	0	6	94		
Low-potency conventional (e.g., chlorpromazine)				1.4(0.8)	0	0	6	94		
	1 2 3	4 5 6	7 8	9	%	%	%	%		
	Manic episod	le with psychosis Target dose (mg		Manic episode						
	п	Avg (SD		п	<i>n</i> Target dose (mg/day) <i>n</i> Avg (SD					

	Manic epis	Target dos	iosis e (mg/day)	Manic episo	Target dos	•
	n	Avg	(SD)	n	Avg	(SD
Risperidone	41	2.1	(0.9)	31	1.9	(1.0)
Olanzapine	40	9.6	(3.4)	31	8.9	(3.4)
Quetiapine	37	164.4	(101.0)	29	147.6	(79.8)
Aripiprazole	9	19.4	(8.8)	7	17.9	(9.1)
Ziprasidone	18	67.2	(31.0)	14	57.5	(28.7)
High-potency conventional (e.g., haloperidol)	33	3.1	(1.9)	26	2.6	(1.5)
Mid-potency conventional (e.g., perphenazine)	18	14.1	(6.5)	17	10.9	(6.8)
Clozapine	15	93.3	(70.2)	12	100.0	(70.7)
Low-potency conventional (e.g., chlorpromazine)	13	142.3	(99.7)	12	125.0	(78.3)

**28** Treatment of neuropathic pain. Assume that a older patient with neuropathic pain has failed to respond to or been unable to tolerate treatment with a nonsteroidal anti-inflammatory drug (NSAID) (e.g., ibuprofen) and/or a cyclo-oxygenase-2 (COX-2) inhibitor (e.g., celecoxib [Celebrex]). Please rate the appropriateness of using each of the following as your next choice to treat an older patient with neuropathic pain.



29 Selection of antipsychotics for treatment of neuropathic pain. Assume that you have decided to treat an older patient with neuropathic pain with an antipsychotic. Please rate the appropriateness of using each of the following antipsychotics and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

	95%	Сом	FIDI	ENCE	IN	/ A L S		Tr of	1st	2nd	3rd	
	Third	Line	Sec	ond Li	ne	Firs	t Line	Avg(SD)	Chc	Line	Line	Line
Risperidone		]						1.8(1.8)	0	5	14	82
Olanzapine								1.7(1.6)	0	2	12	86
High-potency conventional (e.g., haloperidol)								1.5(1.5)	0	2	9	89
Quetiapine								1.5(1.4)	0	0	10	90
Mid-potency conventional (e.g., perphenazine)								1.5(1.5)	0	2	7	90
Ziprasidone								1.1(0.6)	0	0	3	97
Aripiprazole								1.1(0.5)	0	0	3	97
Low-potency conventional (e.g., chlorpromazine)								1.1(0.3)	0	0	0	100
Clozapine								1.1(0.5)	0	0	3	98
1	1 2	3	4	5	6	7	8	9	%	%	%	%

**30** Selection of initial treatment for severe nausea and vomiting due to chemotherapy. Please rate the appropriateness of using each of the following as the *initial* treatment regimen in an older patient with severe nausea and vomiting due to chemotherapy.

	95% Co Third Line			NCE nd Line			/ A L S t Line	Avg(SD	Tr of ) Chc	1st Line		3rd Line
A 5HT3 antagonist (e.g., odansetron [Zofran], granisetron [Kytril])								6.2(2.1	) 14	53	33	14
An antihistamine (e.g., promethazine [Phenergan])								5.5(2.5	) 5	50	25	25
Trimethobenzamide (Tigan)								5.1(2.3	) 0	41	32	27
An antipsychotic (e.g., prochlorperazine [Compazine], perphenazine [Trilafon], chlorpromazine [Thorazine])								4.6(2.5	) 2	29	29	41
Other dopamine antagonists (e.g., metaclopramide [Reglan])								4.5(1.8	) 0	15	55	30
Delta-9-tetrahydrocannabinol (THC) (e.g., dronabinol [Marinol])								4.4(2.0	) 3	16	43	41
Bismuth subsalicylate (PeptoBismol)			]					3.4(2.0	) 0	5	35	60
1	2 3	4	4	5 (	6	7	8	9	%	%	%	%

**31** Selection of next treatment for severe nausea and vomiting due to chemotherapy. Assuming that an older patient with severe nausea due to chemotherapy failed to respond to or tolerate treatment with a 5-HT<sub>3</sub> antagonist and either Phenergan or Tigan, and you have decided to use an antipsychotic. Please rate the appropriateness of each of the following as your next treatment choice and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

	9 5 % Third L			N C E ond Li			v A L S st Line	Avg	g(SD)	Tr of Chc		2nd Line	3rd Line
Prochlorperazine								3.6	5(3.1)	7	25	18	57
Perphenazine								2.0	)(2.0)	0	10	10	81
Chlorpromazine								1.9	9(1.9)	2	5	10	86
Haloperidol								1.7	7(1.6)	0	2	9	88
Risperidone								1.7	7(1.7)	2	2	7	90
Quetiapine								1.7	7(1.4)	0	2	7	91
Olanzapine								1.6	5(1.1)	0	0	7	93
Ziprasidone								1.1	(0.4)	0	0	0	100
Clozapine								1.1	(0.3)	0	0	0	100
Aripiprazole								1.0	)(0.2)	0	0	0	100
1	2	3	4	5	6	7	8	9		%	%	%	%

**32** Selection of initial treatment for motion sickness. Please rate the appropriateness of using each of the following as your *initial* treatment for an older patient with motion sickness.

	95% C								Tr of		2nd	3rd
	Third Li	ne	Sec	ond Li	ne	First	Line	Avg(SD)	Chc	Line	Line	Line
An antihistamine (e.g., Dramamine, meclizine [Antivert, Bonine])								6.9(1.8)	17	71	24	5
An anticholinergic agent (e.g., scopolamine, Transderm scopolamine patch)								6.1(2.2)	14	50	36	14
An antipsychotic (e.g., prochlorperazine [Compazine], perphenazine [Trilafon], chlorpromazine [Thorazine])								2.7(1.8)	0	2	24	73
Trimethobenzamide (Tigan)								2.7(1.7)	0	3	21	76
A 5HT3 antagonist (e.g., odansetron [Zofran], granisetron [Kytril])								2.5(1.7)	0	3	16	81
Delta-9-tetrahydrocannabinol (THC) (e.g., dronabinol [Marinol])								2.1(1.4)	0	0	11	89
1	2	3	4	5	6	7	8 9	)	%	%	%	%

**33** Selection of next treatment for motion sickness. Assume that an older patient with severe motion sickness has failed to respond to or tolerate treatment with an antihistamine (e.g., Dramamine) and with a scopolamine patch. Please rate the appropriateness of using each of the following as your next treatment choice and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

						TERVA			Tr of		2nd	3rd
	Third I	Line	Seco	ond Li	ne	First I	Line	Avg(SD)	Chc	Line	Line	Line
Prochlorperazine (Compazine)								3.8(2.4)	3	10	45	45
Trimethobenzamide (Tigan)								2.8(2.0)	0	7	21	71
A 5HT3 antagonist (e.g., odansetron [Zofran], granisetron [Kytril])								2.5(1.9)	0	8	15	77
Delta-9-tetrahydrocannabinol (THC) (e.g., dronabinol [Marinol])								2.3(1.9)	0	4	15	81
Risperidone								1.9(1.7)	0	3	15	82
Perphenazine								1.9(1.7)	0	3	13	84
Olanzapine								1.8(1.5)	0	3	15	82
Haloperidol								1.7(1.4)	0	3	9	88
Chlorpromazine								1.6(1.4)	0	3	6	91
Quetiapine								1.6(1.1)	0	0	9	91
Ziprasidone								1.2(0.7)	0	0	4	96
Aripiprazole								1.2(0.6)	0	0	0	100
Clozapine								1.1(0.6)	0	0	3	97
1	2	3	4	5	6	7	89		%	%	%	%

**34** Selection of initial treatment for irritability and hostility. Please rate the appropriateness of using each of the following as your *initial* treatment for an older patient who presents with irritability and hostility in the absence of a major psychiatric syndrome (dementia, depression, mania, schizophrenia).

		CON LLine		E N C E ond Li			v A L S st Line		Avg(SD)	Tr of Chc		2nd Line	3rd Line
Psychotherapy									6.1(1.9)	9	48	46	7
A selective serotonin reuptake inhibitor (SSRI)									5.6(1.9)	7	30	54	15
A mood stabilizer			[						5.1(2.2)	2	28	52	20
Venlafaxine									3.8(1.9)	0	9	48	43
Mirtazapine									3.5(1.8)	0	7	42	51
A benzodiazepine									3.3(1.6)	0	2	42	56
An antipsychotic									3.2(2.1)	2	9	26	65
A tricyclic antidepressant									3.1(1.9)	0	9	22	70
A monoamine oxidase inhibitor (MAOI)		]							1.9(1.2)	0	0	15	85
	1 2	3	4	5	6	7	8	9		%	%	%	%

**35** Selection of antipsychotics for treatment of irritability and hostility. An older patient presents with irritability and hostility in the absence of a major psychiatric syndrome (dementia, depression, mania, schizophrenia). Assuming you decide to use an antipsychotic to treat this patient, please rate the appropriateness of each of the following agents and indicate the dose level you would use. If you are not familiar with a medication, draw a line through that row.

	9 5 % Third I			ENCE ond Li			7 A L S t Line	Avg(SD)	Tr of Chc		2nd Line	
Risperidone								3.4(3.1)	10	24	14	62
Olanzapine	[							3.3(2.8)	5	23	14	64
Quetiapine	[							3.2(2.7)	0	19	23	58
Aripiprazole								2.0(1.9)	0	3	19	78
High-potency conventional (e.g., haloperidol)								1.9(1.4)	0	0	16	84
Ziprasidone								1.9(1.6)	0	3	16	82
Mid-potency conventional (e.g., perphenazine)								1.6(1.3)	0	0	12	88
Low-potency conventional (e.g., chlorpromazine)								1.3(0.8)	0	0	7	93
Clozapine								1.2(0.8)	0	0	2	98
1	2	3	4	5	6	7	8	9	%	%	%	%

**36** Selection of initial treatment for insomnia/sleep disturbance. Please rate the appropriateness of using each of the following as your *initial* treatment for an older patient who presents with insomnia/sleep disturbance in the absence of a major psychiatric syndrome (dementia, depression, mania, schizophrenia) or a discrete medical cause (e.g., sleep apnea, congestive heart failure with nocturnal dyspnea).

	95%	Сом	FID	ENCE	EIN	TER	VALS		Tr of	1st	2nd	3rd
	Third	Line	Sec	cond L	ine	Firs	st Line	Avg(SD)	Chc	Line	Line	Line
Other hypnotic agent (e.g., zolpidem, zaleplon, chloral hydrate)								6.7(1.7)	11	68	26	6
A sedating antidepressant (e.g., trazodone, mirtazapine)								6.3(1.8)	9	51	40	9
A benzodiazepine								5.2(1.9)	4	28	51	21
An antipsychotic								1.5(1.0)	0	0	4	96
	1 2	3	4	5	6	7	8	9	%	%	%	%

**37** Follow-up intervals for monitoring older patients on antipsychotics. For each of the following clinical situations, please write in 1) the follow-up interval you consider optimal and 2) the longest acceptable follow-up interval beyond which it would be considered inadequate care.

	Optima	al follow-u (days)	p interval	Longest acceptable follow-up inte (days)					
	Avg	(SD)	Median	Avg	(SD)	Median			
After starting an antipsychotic	7.6	(4.7)	7	25.6	(21.8)	14			
After a change in the dose of the antipsychotic	11.8	(8.3)	10	33.2	(24.3)	28			
Once a patient has been symptomatically stable on the same dose of antipsychotic for 1 month, to monitor for continued therapeutic benefit and tolerability	52.7	(25.9)	51	98.2	(47.7)	90			
Once a patient is in maintenance treatment (i.e., has been stable on the same antipsychotic medication for at least 6 months), to monitor for continued therapeutic benefit and tolerability	95.2	(45.6)	90	171.5	(84.0)	180			

**38** Duration of an adequate trial. Assume that you are treating an older patient with one of the conditions listed below with an antipsychotic at the target dose (expected therapeutic dose) you indicated you would use in earlier questions. Please indicate how long you would continue treatment before making a change in treatment regimen (i.e., increasing the dose still further, switching to a different medication) if the patient is having an inadequate response. If you would not use an antipsychotic to treat this condition in the first place, check the first box in the row and leave the item blank.

	Would	not use	Γ	Ouration (	days)
	n	%	Avg	(SD)	Median
Schizophrenia	0	0%	26.1	(57.9)	14
Psychotic major depression	0	0%	15.7	(29.7)	7
Mania with psychosis	0	0%	8.5	(14.5)	5
Dementia with agitation with delusions	1	3%	10.0	(15.5)	5
Delusional disorder	1	3%	26.4	(31.0)	14
Dementia with agitation without delusions	3	7%	8.0	(7.8)	7
Delirium	7	17%	1.4	(1.2)	1
Agitated nonpsychotic major depression	8	19%	11.2	(10.3)	7
Mania without psychosis	12	28%	10.0	(11.7)	7
Nonpsychotic major depression with severe anxiety	15	36%	13.9	(10.4)	14
Nonpsychotic major depression without severe anxiety	27	59%			
Severe nausea and vomiting (e.g., due to chemotherapy)	23	59%			
Irritability and hostility in the absence of a major psychiatric syndrome	28	65%			
Motion sickness	29	73%			
Hypochondriasis	33	77%			
Generalized anxiety disorder	36	80%			
Neuropathic pain	34	81%			
Panic disorder	35	81%			
Insomnia/sleep disturbance in the absence of a major psychiatric syndrome or a discrete medical cause	41	91%			

**39** Duration of treatment after response. Assume that an older patient has responded to treatment with an antipsychotic. How long would you continue treatment before trying to discontinue the antipsychotic? If you would not use an antipsychotic to treat this condition in the first place, check the first box in the row and leave the item blank. If you would continue treatment indefinitely, check the last box.

	Would	not use	D	uration (da	ys)	Indef	initely
	n	%	Avg	(SD)	Median	n	%
Schizophrenia	0	0%	528.5	(494.9)	365	26	63%
Psychotic major depression	0	0%	158.4	(106.0)	180	2	5%
Mania with psychosis	0	0%	124.8	(93.2)	90	2	5%
Dementia with agitation with delusions	1	2%	130.8	(86.9)	90	4	10%
Delusional disorder	1	2%	262.4	(227.9)	180	13	31%
Dementia with agitation without delusions	3	8%	104.3	(86.4)	90	0	0%
Delirium	6	14%	14.2	(29.2)	7	0	0%
Agitated nonpsychotic major depression	10	24%	76.3	(74.2)	60	1	2%
Mania without psychosis	14	33%	84.4	(77.0)	60	0	0%
Nonpsychotic major depression with severe anxiety	15	34%	68.3	(55.9)	56	0	0%
Irritability and hostility in the absence of a major psychiatric syndrome	26	60%					
Severe nausea and vomiting (e.g., due to chemotherapy)	24	67%					
Nonpsychotic major depression without severe anxiety	31	72%					
Motion sickness	31	76%					
Neuropathic pain	33	79%					
Hypochondriasis	36	82%					
Generalized anxiety disorder	39	87%					
Panic disorder	38	88%					
Insomnia/sleep disturbance in the absence of a major psychiatric syndrome or a discrete medical cause	43	93%					

**40** Maintenance dosing strategies for an older patient with schizophrenia or delusional disorder. Assume you are treating an older patient with schizophrenia or delusional disorder with an antipsychotic, and the patient *has* responded well to treatment. Please rate the appropriateness of the following dosing strategies.

	95%	CON	FID	ENCE	EIN	TER	VALS			Tr of	1st	2nd	3rd
	Thire	l Line	Se	cond L	ine	Fire	st Line		Avg(SD)	Chc	Line	Line	Line
Taper to the lowest effective dose and then continue treatment indefinitely									7.1(1.9)	26	74	17	9
Continue treatment indefinitely at the acute dose									4.9(2.0)	2	25	45	30
Attempt to discontinue the antipsychotic after 12 months									4.2(2.3)	2	24	28	48
Attempt to discontinue the antipsychotic after 6 months									3.2(2.0)	0	9	24	67
	1 2	3	4	5	6	7	8	9		%	%	%	%

**41 Dosing strategies for an older patient with dementia with agitation.** Assume you are treating an older patient with dementia with agitation with an antipsychotic and the patient has responded well to treatment. How long would you wait before trying to taper the dose to determine the lowest effective maintenance dose to prevent relapse? Please rate the appropriateness of the following intervals.

	95%	Со	NFID	ENC	EIN	ΓER	VALS	5		Tr of	1st	2nd	3rd
	Third	Line	Se	cond L	ine	Firs	st Line	;	Avg(SD)	Chc	Line	Line	Line
3 months									6.4(2.4)	17	62	23	15
6 months									6.3(1.6)	9	51	45	4
9 months									4.4(2.0)	0	19	47	34
12 months									3.6(2.2)	2	13	28	60
	1 2	3	4	5	6	7	8	9		%	%	%	%

**42** Complicating conditions. Assume that a patient has a condition for which *low-dose* (see p. 20 for definition) antipsychotic treatment is indicated and also has one of the complicating conditions listed below. Rate the appropriateness of using each of the following antipsychotics. We ask about medium- or high-dose treatment in Question 43.

		FIDENCE IN	TERVALS			1st		
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Cognitive impairment								
Risperidone				7.5(1.3)	28	85	15	0
Quetiapine				6.9(1.4)	11	64	33	2
Olanzapine				6.3(2.0)	13	48	41	11
Aripiprazole				5.6(2.5)	8	50	25	25
Ziprasidone				5.1(2.5)	3	39	32	29
High-potency conventional				4.7(2.3)	4	30	36	34
Mid-potency conventional				3.6(2.1)	2	11	33	56
Clozapine		]		3.1(1.9)	0	5	25	70
Low-potency conventional				2.1(1.4)	0	2	7	91
Prolonged QTc interval								
Risperidone				6.7(1.8)	15	66	28	6
Olanzapine				6.4(1.8)	11	57	37	7
Quetiapine				6.2(2.1)	11	52	34	14
Aripiprazole				5.6(2.6)	8	54	17	29
High-potency conventional				4.2(2.4)	2	24	30	46
Clozapine				3.5(2.4)	0	18	23	60
Mid-potency conventional				3.2(2.0)	2	7	34	59
Ziprasidone				2.3(1.8)	0	3	19	77
Low-potency conventional				1.7(1.0)	0	0	7	93
Congestive heart failure								
Risperidone		[		6.8(1.6)	13	67	28	4
Quetiapine				6.7(1.8)	14	63	33	5
Olanzapine				6.6(1.9)	11	67	24	9
Aripiprazole				6.0(2.5)	13	61	17	22
High-potency conventional				4.7(2.4)	4	30	37	33
Ziprasidone				4.0(2.9)	7	27	20	53
Mid-potency conventional				3.5(2.2)	2	9	43	48
Clozapine				3.2(2.3)	3	13	23	64
Low-potency conventional				2.2(1.6)	0	2	20	77
]	2 3	4 5 6	7 8	)	%	%	%	%

# **42** Complicating conditions, continued

	95% CON Third Line	FIDENCE IN Second Line	TERVALS First Line	Avg(SD)	Tr of Chc		2nd Line	
Constipation				8()				
Risperidone				7.1(1.6)	22	70	28	2
Quetiapine				6.6(1.5)	7	64	34	2
Aripiprazole				5.6(2.6)	13	46	33	21
Olanzapine			T	5.6(2.1)	7	43	39	17
Ziprasidone				5.3(2.6)	3	43	30	27
High-potency conventional				4.5(2.2)	2	23	45	32
Mid-potency conventional				3.1(1.6)	0	2	42	56
Clozapine		-		2.8(2.0)	0	8	28	65
Low-potency conventional				1.9(1.2)	0	0	18	82
Dysphagia								
Risperidone				6.6(1.6)	9	59	39	2
Quetiapine				6.3(1.7)	7	52	43	5
Olanzapine				6.1(1.9)	7	48	43	9
Aripiprazole				5.6(2.6)	14	50	23	27
Ziprasidone				4.9(2.7)	3	34	34	31
High-potency conventional				3.6(2.4)	2	11	39	50
Clozapine				3.3(2.1)	0	8	33	59
Mid-potency conventional				2.9(1.7)	0	2	34	64
Low-potency conventional				2.3(1.6)	0	2	20	77
Diabetes mellitus								
Risperidone				7.1(1.3)	15	76	24	0
Quetiapine				6.4(1.5)	7	55	43	2
Aripiprazole				5.7(2.6)	13	58	13	29
Ziprasidone				5.0(2.5)	3	34	34	31
High-potency conventional				4.6(2.3)	4	22	44	33
Mid-potency conventional				3.6(2.3)	2	11	43	45
Olanzapine				3.6(1.9)	0	4	54	41
Clozapine				2.8(2.0)	3	8	18	75
Low-potency conventional				2.4(1.8)	0	5	21	74

#### $42^{\text{Complicating conditions, continued}}$

42	05% Con	FIDENCE IN	TEDVALS		Tr of	1 of	and	2rd
	Third Line	Second Line	First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
Diabetic neuropathy								
Risperidone				7.0(1.6)	15	72	26	2
Quetiapine				6.2(1.7)	7	51	44	4
Aripiprazole				5.6(2.6)	8	50	25	25
Ziprasidone				5.0(2.5)	3	35	32	32
High-potency conventional				4.6(2.3)	2	22	46	33
Olanzapine				4.2(2.2)	4	13	51	36
Mid-potency conventional				3.6(2.2)	2	9	45	45
Clozapine				3.2(2.3)	3	15	20	65
Low-potency conventional				2.5(1.9)	0	5	21	74
Dyslipidemia								
Risperidone				7.1(1.6)	16	77	21	2
Quetiapine				6.2(1.7)	5	52	43	5
Aripiprazole				5.8(2.5)	13	54	25	21
Ziprasidone				5.0(2.6)	3	40	27	33
High-potency conventional				4.4(2.4)	2	23	41	36
Olanzapine				4.2(2.3)	2	19	44	37
Mid-potency conventional				3.6(2.2)	2	12	40	49
Clozapine				3.2(2.2)	3	13	26	62
Low-potency conventional				2.5(1.9)	0	5	19	76
Failure to thrive								
Olanzapine				6.2(2.2)	14	56	30	14
Quetiapine				6.2(1.8)	5	45	48	7
Risperidone				6.1(1.9)	5	45	45	9
Aripiprazole				5.4(2.7)	9	45	27	27
Ziprasidone				4.7(2.5)	3	24	41	34
High-potency conventional				3.8(2.3)	2	14	40	47
Clozapine				3.1(2.3)	0	16	16	68
Mid-potency conventional				3.1(2.1)	2	7	37	56
Low-potency conventional				2.2(1.6)	0	2	17	80
	1 2 3	4 5 6	7 8 9	9	%	%	%	%

# **42** Complicating conditions, continued

		FIDENCE IN			Tr of		2nd	3rd
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Gait disturbance/history of falls								
Quetiapine				6.2(1.8)	9	47	42	11
Risperidone				5.8(1.9)	0	47	40	13
Olanzapine				5.6(2.2)	2	44	33	22
Aripiprazole				5.4(2.4)	0	48	22	30
Ziprasidone				4.7(2.2)	0	27	40	33
High-potency conventional				3.5(2.3)	2	13	30	57
Clozapine				2.7(1.8)	0	7	20	73
Mid-potency conventional				2.6(1.5)	0	0	27	73
Low-potency conventional				1.6(0.9)	0	0	4	96
Galactorrhea								
Quetiapine				6.7(1.5)	10	67	29	5
Olanzapine			ļ	5.9(2.1)	7	45	40	14
Aripiprazole				5.9(2.5)	14	50	27	23
Risperidone				5.2(2.2)	5	36	36	27
Ziprasidone				4.7(2.6)	7	34	28	38
Clozapine				3.5(2.3)	0	16	22	62
High-potency conventional				2.6(1.9)	0	5	23	73
Mid-potency conventional				2.3(1.6)	0	0	31	69
Low-potency conventional				2.1(1.4)	0	0	24	76
Gynecomastia								
Quetiapine				6.7(1.6)	13	58	37	5
Olanzapine			<b>İ</b>	5.9(1.9)	5	42	47	11
Aripiprazole				5.8(2.5)	14	45	32	23
Risperidone				5.1(2.2)	3	30	40	30
Ziprasidone				4.7(2.7)	7	33	30	37
Clozapine				3.8(2.3)	0	21	24	56
High-potency conventional				2.8(2.0)	0	7	21	71
Mid-potency conventional				2.4(1.5)	0	0	33	68
Low-potency conventional				2.1(1.4)	0	0	23	78
	1 2 3	4 5 6	7 8	)	%	%	%	%

#### **42** Complicating conditions, continued

14	95% CON	FIDENCE IN	TERVALS		Tr of	1st	2nd	3rd
	Third Line	Second Line	First Line	Avg(SD)				
Disorders of excessive daytime somnolence								
(e.g., narcolepsy) Risperidone				6.4(1.9)	10	65	28	8
Aripiprazole				5.8(2.4)	5	53	26	21
Ziprasidone				4.9(2.5)	4	41	26 26	33
Quetiapine				4.9(2.0)	3	24	20 45	32
Olanzapine				4.8(2.1)	3	26	41	33
High-potency conventional				4.4(2.4)	2	20	39	39
Mid-potency conventional				3.2(2.1)	2	8	30	63
Clozapine		_		2.3(1.4)	0	3	14	83
Low-potency conventional				1.8(1.4)	0	3	5	92
Narrow angle glaucoma					-	-	-	
Risperidone				6.6(2.0)	14	66	25	9
Quetiapine				5.9(1.9)	7	50	38	12
Aripiprazole			1	5.7(2.4)	5	55	18	27
Ziprasidone				5.1(2.4)	3	38	31	31
Olanzapine				4.9(2.4)	5	30	40	30
High-potency conventional				4.0(2.4)	0	19	38	43
Clozapine				2.5(2.1)	0	11	8	81
Mid-potency conventional				2.3(1.5)	0	2	17	81
Low-potency conventional				1.5(1.0)	0	0	5	95
Obesity								
Risperidone				6.6(1.8)	13	69	27	4
Aripiprazole				5.6(2.4)	8	46	29	25
Quetiapine				5.5(1.8)	5	35	51	14
Ziprasidone				5.0(2.5)	3	43	23	33
High-potency conventional				4.5(2.4)	7	22	40	38
Olanzapine				3.3(2.0)	0	9	27	64
Mid-potency conventional				3.3(2.2)	2	9	30	60
Clozapine				2.8(2.1)	3	13	15	73
Low-potency conventional				2.1(1.5)	0	2	12	86
	1 2 3	4 5 6	7 8 9	)	%	%	%	%

	95% Con	FIDENCE IN	TERVALS		Tr of	1st	2nd	3rd
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Orthostatic hypotension								
Risperidone				6.1(2.0)	4	58	27	16
Aripiprazole				5.6(2.5)	8	50	25	25
Quetiapine				5.5(1.9)	2	33	53	14
Olanzapine				5.4(2.2)	5	41	39	20
Ziprasidone				4.8(2.6)	3	37	27	37
High-potency conventional				4.4(2.5)	4	27	31	42
Mid-potency conventional				2.8(1.8)	2	5	20	75
Clozapine				2.4(1.8)	0	8	5	87
Low-potency conventional				1.5(0.8)	0	0	2	98
Osteoporosis								
Quetiapine				6.6(1.4)	8	58	39	3
Risperidone				6.5(2.0)	10	68	20	13
Olanzapine				6.5(1.9)	8	66	24	11
Aripiprazole				5.6(2.4)	5	55	18	27
Ziprasidone				5.0(2.5)	4	37	33	30
High-potency conventional				4.4(2.5)	5	22	32	46
Clozapine				3.5(2.4)	3	18	18	65
Mid-potency conventional				3.4(2.2)	3	8	35	58
Low-potency conventional				2.4(1.9)	0	3	26	72
Parkinson's disease								
Quetiapine				7.1(1.5)	16	73	23	5
Olanzapine				5.7(1.9)	2	43	41	16
Clozapine				5.6(2.3)	3	40	43	18
Aripiprazole				5.1(2.4)	0	39	30	30
Ziprasidone				4.7(2.4)	0	29	35	35
Risperidone				4.6(2.2)	2	20	41	39
Mid-potency conventional				2.1(1.1)	0	0	11	89
Low-potency conventional				2.1(1.2)	0	0	14	86
High-potency conventional				2.0(1.3)	0	2	11	87

#### $42^{\text{Complicating conditions, continued}}$

14					<b>T</b> (	1.4	2 1	2 1
	Third Line	FIDENCE IN Second Line	First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
Urinary retention (prostatism)								
Risperidone				6.9(1.7)	16	68	27	5
Quetiapine				6.2(1.4)	5	45	52	2
Aripiprazole				5.8(2.3)	0	57	24	19
Ziprasidone				5.0(2.4)	0	36	36	29
Olanzapine				5.0(2.2)	2	31	45	24
High-potency conventional				4.0(2.3)	2	16	36	48
Clozapine				2.7(2.0)	0	8	16	76
Mid-potency conventional				2.3(1.4)	0	2	14	84
Low-potency conventional				1.5(0.9)	0	0	5	95
Retinopathy								
Risperidone		[		6.9(1.6)	15	71	24	5
Olanzapine				6.1(2.2)	10	49	38	13
Quetiapine				5.8(2.2)	8	49	36	15
Aripiprazole				5.4(2.4)	5	48	24	29
Ziprasidone				4.8(2.4)	4	29	36	36
High-potency conventional				4.1(2.4)	2	20	39	41
Clozapine				3.7(2.5)	3	19	22	58
Mid-potency conventional				2.7(1.8)	0	5	23	73
Low-potency conventional				1.8(1.3)	0	0	15	85
Sleep apnea								
Risperidone				6.6(2.2)	12	73	17	10
Quetiapine				5.7(1.8)	3	36	51	13
Olanzapine				5.6(2.1)	5	45	35	20
Aripiprazole				5.5(2.2)	0	48	29	24
Ziprasidone				5.0(2.6)	0	39	29	32
High-potency conventional				4.2(2.5)	2	22	34	44
Mid-potency conventional				3.0(1.8)	0	5	35	60
Clozapine		]		2.9(2.1)	0	8	17	75
Low-potency conventional				1.9(1.5)	0	3	8	90
	1 2 3	4 5 6	7 8	)	%	%	%	%

		95% CONFIDENCE INTERVALS				1st	2nd	3rd
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Lin
Xerophthalmia								
Risperidon	e			6.9(1.5)	10	72	26	3
Quetiapine	e			6.3(1.5)	8	49	51	0
Aripiprazole	e			5.8(2.1)	5	50	30	20
Olanzapin	e			5.7(2.0)	5	42	37	21
Ziprasidon	e			5.5(2.1)	0	37	44	19
High-potency conventiona	1			4.3(2.3)	3	13	47	39
Clozapin	e 🗌			2.8(2.0)	0	6	18	76
Mid-potency conventiona	1			2.6(1.5)	0	0	30	70
Low-potency conventiona	1			1.8(1.0)	0	0	3	97
Xerostomia								
Risperidon	e			7.0(1.4)	10	75	23	3
Quetiapin	e			6.4(1.4)	8	55	45	0
Aripiprazol	e			5.9(2.1)	0	55	25	20
Olanzapin	e			5.5(1.9)	3	41	38	21
Ziprasidon	e			5.4(2.1)	0	37	41	22
High-potency conventiona	1			4.3(2.3)	3	15	43	43
Clozapino	e			2.8(2.1)	0	6	21	74
Mid-potency conventiona	1			2.5(1.5)	0	0	29	71
Low-potency conventiona				1.7(1.0)	0	0	5	95
· ·	1 2 3	4 5 6	7 8	9	%	%	%	%

**43 Complicating conditions**. Assume that a patient has a condition for which *medium- to high-dose* (see p. 20 for definitions) antipsychotic treatment is indicated and also has one of the complicating conditions listed below. Rate the appropriateness of using each of the following antipsychotics.

	95% CON Third Line	FIDENCE IN Second Line	T E R V A L S First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
Cognitive impairment								
Risperidone				7.2(1.5)	22	78	17	4
Quetiapine				6.5(1.5)	12	56	40	5
Olanzapine				5.5(2.1)	5	41	39	20
Aripiprazole				5.5(2.4)	8	50	25	25
Ziprasidone				4.7(2.6)	3	35	29	35
High-potency conventional				4.4(2.4)	5	27	30	43
Mid-potency conventional		]		3.0(2.0)	2	5	30	65
Clozapine				2.6(1.9)	0	5	21	74
Low-potency conventional				1.7(1.2)	0	2	2	95
Prolonged QTc interval								
Risperidone				6.5(1.9)	13	62	27	11
Quetiapine				5.9(2.1)	12	43	43	14
Olanzapine				5.8(2.1)	5	47	40	14
Aripiprazole				5.6(2.6)	9	45	27	27
High-potency conventional				4.2(2.3)	2	22	31	47
Clozapine				3.1(2.3)	0	11	26	63
Mid-potency conventional				2.9(1.9)	0	7	23	70
Ziprasidone				2.2(1.6)	0	3	19	77
Low-potency conventional				1.8(1.4)	0	5	2	93
Congestive heart failure								
Quetiapine				6.3(1.9)	10	56	36	8
Risperidone				6.2(1.9)	7	60	31	10
Olanzapine				6.2(1.8)	5	52	40	7
Aripiprazole				5.2(2.3)	5	41	32	27
High-potency conventional				4.4(2.3)	2	21	38	40
Ziprasidone				3.3(2.3)	0	11	26	63
Mid-potency conventional				3.0(1.8)	0	2	39	59
Clozapine				2.8(2.0)	0	6	22	72
Low-potency conventional				1.9(1.4)	0	2	7	90
]	2 3	4 5 6	7 8	)	%	%	%	%

		95% CON	FIDENCE IN	TEDVALS		Tr of	s 1st	2nd	3rd
		Third Line	Second Line	First Line	Avg(SD)				
Constipation									
	Risperidone				6.8(2.1)	18	73	18	9
	Quetiapine				6.3(1.6)	7	53	42	5
	Aripiprazole				5.3(2.5)	4	46	29	25
	Ziprasidone				4.9(2.5)	0	40	23	37
	Olanzapine				4.9(2.2)	5	34	41	25
	High-potency conventional				4.3(2.1)	2	16	47	38
	Mid-potency conventional				2.5(1.5)	0	0	30	70
	Clozapine				2.5(1.8)	0	5	15	79
	Low-potency conventional				1.6(0.9)	0	0	5	95
Dysphagia				-					
	Quetiapine				6.4(1.7)	10	55	40	5
	Risperidone				6.0(1.8)	2	55	36	10
	Olanzapine				5.8(2.1)	5	51	32	17
	Aripiprazole				5.3(2.5)	5	45	27	27
	Ziprasidone				4.5(2.4)	0	26	37	37
	Clozapine				3.2(2.2)	0	14	24	62
	High-potency conventional				3.2(2.2)	2	7	33	60
	Mid-potency conventional				2.6(1.7)	0	2	29	68
	Low-potency conventional				2.2(1.6)	0	3	15	83
Diabetes mellitus									
	Risperidone				7.0(1.5)	20	70	26	4
	Quetiapine				6.1(1.8)	11	48	45	7
	Aripiprazole				5.9(2.5)	17	58	17	25
	Ziprasidone				5.1(2.5)	6	39	29	32
	High-potency conventional				4.8(2.3)	4	24	47	29
	Mid-potency conventional				3.5(2.2)	2	12	36	52
	Olanzapine				3.3(1.9)	0	4	44	51
	Clozapine				2.5(1.8)	0	5	15	79
	Low-potency conventional				2.4(1.8)	0	5	16	79

<b>TU</b>	95% CON	FIDENCE IN	TEDVAIS		Tr of	1 et	2nd	3rd
	Third Line	Second Line	Avg(SD)					
Diabetic neuropathy								
Risperidone				7.1(1.5)	18	73	22	4
Quetiapine				6.3(1.7)	9	51	42	7
Aripiprazole				5.6(2.5)	8	54	21	25
Ziprasidone				4.9(2.5)	3	35	29	35
High-potency conventional				4.8(2.3)	4	22	51	27
Olanzapine				3.9(2.2)	0	14	44	42
Mid-potency conventional				3.4(2.1)	2	9	35	56
Clozapine				2.9(2.1)	0	10	18	72
Low-potency conventional				2.4(1.8)	0	5	19	77
Dyslipidemia								
Risperidone				7.1(1.5)	19	79	17	5
Quetiapine				6.2(1.5)	5	54	41	5
Aripiprazole				5.8(2.5)	13	57	22	22
Ziprasidone				5.2(2.6)	3	45	21	34
High-potency conventional				4.6(2.4)	5	21	45	33
Olanzapine				3.9(2.4)	3	18	38	45
Mid-potency conventional				3.5(2.2)	2	12	37	51
Clozapine				2.8(2.2)	0	14	11	76
Low-potency conventional				2.3(1.9)	0	3	18	80
Failure to thrive								
Risperidone				6.4(1.9)	5	59	34	7
Quetiapine				6.2(1.9)	5	59	34	7
Olanzapine				6.1(2.3)	10	55	33	12
Aripiprazole				5.5(2.7)	9	50	23	27
Ziprasidone				4.8(2.4)	3	28	41	31
High-potency conventional				4.0(2.3)	2	14	43	43
Clozapine				3.2(2.4)	0	18	16	66
Mid-potency conventional				3.1(2.0)	0	7	39	54
Low-potency conventional				2.3(1.6)	0	2	20	78
	1 2 3	4 5 6	7 8	)	%	%	%	%

	95% CON	FIDENCE IN	TERVAIS		Tr of	1st	2nd	3rc
	Third Line	Second Line	First Line	Avg(SD)				
Gait disturbance/history of falls								
Quetiapine				6.1(1.8)	7	47	42	12
Risperidone				5.7(2.0)	2	36	51	13
Aripiprazole				5.6(2.5)	4	50	21	29
Olanzapine				5.5(2.2)	2	39	41	20
Ziprasidone				4.8(2.3)	0	29	35	3
High-potency conventional				3.2(2.1)	2	9	33	58
Clozapine				2.7(1.8)	0	8	13	80
Mid-potency conventional				2.3(1.5)	0	2	16	82
Low-potency conventional				1.4(0.7)	0	0	2	98
Galactorrhea								-
Quetiapine				6.4(1.8)	10	56	33	1(
Olanzapine				5.9(2.2)	8	46	38	1:
Aripiprazole				5.7(2.5)	14	45	32	23
Risperidone				5.0(2.3)	3	30	38	33
Ziprasidone				4.9(2.7)	7	41	26	33
Clozapine				3.4(2.4)	0	17	19	64
High-potency conventional				2.6(1.8)	0	2	29	68
Mid-potency conventional				2.2(1.5)	0	0	21	79
Low-potency conventional				1.8(1.2)	0	0	11	89
Gynecomastia								
Quetiapine				6.5(1.7)	11	57	35	8
Olanzapine				5.9(2.2)	5	47	37	10
Aripiprazole				5.7(2.5)	14	45	32	23
Risperidone				5.1(2.3)	0	37	32	32
Ziprasidone				4.9(2.7)	8	42	23	35
Clozapine				3.5(2.4)	0	17	20	6.
High-potency conventional				2.8(1.9)	0	3	31	6
Mid-potency conventional				2.2(1.5)	0	0	21	7
Low-potency conventional				1.8(1.3)	0	0	14	8

		FIDENCE IN			Tr of		2nd	
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Disorders of excessive daytime somnolence (e.g., narcolepsy)								
Risperidone				6.3(1.7)	5	68	27	5
Aripiprazole				5.4(2.6)	0	47	26	26
Ziprasidone				4.9(2.5)	0	37	33	30
Quetiapine				4.9(2.0)	3	21	51	28
Olanzapine				4.4(2.1)	2	17	51	32
High-potency conventional				4.3(2.5)	5	20	40	40
Mid-potency conventional				2.9(2.0)	3	5	26	69
Clozapine				2.1(1.4)	0	0	20	80
Low-potency conventional				1.7(1.3)	0	3	5	93
Narrow angle glaucoma								
Risperidone				6.5(1.9)	7	65	26	9
Quetiapine				5.8(1.9)	5	37	51	12
Aripiprazole				5.1(2.5)	0	43	24	33
Ziprasidone				4.7(2.4)	0	32	32	36
Olanzapine				4.6(2.4)	2	24	43	33
High-potency conventional				3.9(2.2)	2	12	43	45
Clozapine				2.6(2.2)	0	11	11	78
Mid-potency conventional				2.1(1.5)	0	2	7	90
Low-potency conventional				1.4(0.9)	0	0	5	95
Obesity								
Risperidone				6.6(1.9)	13	64	29	7
Quetiapine				5.7(1.8)	2	40	45	14
Aripiprazole				5.5(2.4)	8	42	33	25
Ziprasidone				4.9(2.3)	0	35	32	32
High-potency conventional				4.3(2.2)	2	18	44	38
Olanzapine				3.4(2.2)	0	11	33	56
Mid-potency conventional				2.9(1.9)	0	5	30	66
Clozapine				2.4(1.8)	0	5	13	82
Low-potency conventional				1.9(1.2)	0	0	12	88
1	2 3	4 5 6	7 8 9	)	%	%	%	%

		FIDENCE IN		A	Tr of		2nd	3rd
Orthostatic hypotension	Third Line	Second Line	First Line	Avg(SD)	Cnc	Line	Line	Line
				(0(20))	2	50	22	15
Risperidone				6.0(2.0)	2	52 20	33	15
Quetiapine				5.7(1.7)	2	30	58	12
Aripiprazole				5.5(2.4)	4	46	29	25
Olanzapine				5.4(2.2)	4	38	38	24
Ziprasidone	Г			4.8(2.5)	3	32	32	35
High-potency conventional				4.1(2.4)	2	16	40	44
Clozapine				2.5(2.0)	0	8	18	75
Mid-potency conventional				2.3(1.6)	0	5	12	83
Low-potency conventional				1.2(0.6)	0	0	0	100
Osteoporosis		_		6500	-		40	-
Quetiapine				6.5(1.6)	5	53	43	5
Olanzapine			T I I I I I I I I I I I I I I I I I I I	6.2(2.0)	7	61	27	12
Risperidone				6.0(2.1)	2	55	31	14
Aripiprazole				5.4(2.4)	0	50	21	29
Ziprasidone				4.8(2.4)	0	37	27	37
High-potency conventional				4.2(2.3)	2	12	43	45
Clozapine				3.1(2.2)	0	14	16	70
Mid-potency conventional				2.9(1.9)	0	5	24	71
Low-potency conventional				2.1(1.7)	0	3	18	80
Parkinson's disease								_
Quetiapine				7.1(1.6)	16	80	16	5
Olanzapine				5.5(2.0)	0	42	38	20
Clozapine				5.4(2.5)	8	38	38	23
Aripiprazole				5.1(2.3)	0	38	33	29
Ziprasidone	Г			4.5(2.3)	0	26	35	39
Risperidone				4.0(2.2)	0	13	41	46
Mid-potency conventional				2.0(1.2)	0	0	14	86
High-potency conventional				2.0(1.4)	0	2	7	91
Low-potency conventional		4 5 6	7 8	2.0(1.2)	0 // 100	0 %	12 %	88 %

ŦJ								
	95% CON Third Line	FIDENCE IN Second Line	T E R V A L S First Line	Avg(SD)	Tr of Chc		2nd Line	3rd Line
Urinary retention (prostatism)		Second Line	T list Line	Mig(SD)	Che	Line	Line	Lin
Risperidone				6.5(2.0)	9	63	26	11
Quetiapine				6.0(1.8)	7	41	52 20	7
Aripiprazole				5.5(2.4)	4	46	29 25	25
Ziprasidone				4.9(2.4)	3	32	35	32
Olanzapine				4.8(2.3)	4	29	42	29
High-potency conventional				3.7(2.2)	2	11	39	50
Clozapine				2.7(2.0)	0	8	18	75
Mid-potency conventional				2.1(1.4)	0	2	16	82
Low-potency conventional				1.3(0.6)	0	0	2	98
Retinopathy		_						
Risperidone				6.8(2.0)	14	74	17	10
Olanzapine				6.2(2.1)	12	51	39	10
Quetiapine				5.8(2.3)	10	45	35	20
Aripiprazole			T	5.5(2.6)	9	48	22	30
Ziprasidone				4.9(2.6)	7	33	30	37
High-potency conventional				4.4(2.5)	5	21	40	38
Clozapine				3.8(2.6)	3	19	27	54
Mid-potency conventional				3.1(2.2)	2	12	21	67
Low-potency conventional				1.7(1.5)	0	3	10	88
Sleep apnea								
Risperidone				6.8(2.1)	10	73	17	10
Quetiapine				5.6(1.8)	3	36	51	13
Aripiprazole				5.2(2.6)	0	52	14	33
Olanzapine				5.0(2.3)	3	33	40	28
Ziprasidone				4.9(2.6)	0	39	25	36
High-potency conventional	[			4.1(2.5)	2	20	34	46
Clozapine		]		2.8(2.3)	0	11	17	72
Mid-potency conventional				2.7(2.0)	0	10	13	78
Low-potency conventional				1.7(1.6)	0	5	0	95
	1 2 3	4 5 6	7 8	)	%	%	%	%

			FIDENCE IN		Tr of		2nd		
		Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Lin
Xerophthalmia									
	Risperidone				6.6(2.1)	12	68	22	10
	Quetiapine				6.1(1.7)	5	44	51	5
	Aripiprazole			]	5.6(2.3)	0	48	29	24
	Olanzapine				5.3(2.3)	5	35	43	23
	Ziprasidone				5.1(2.3)	0	36	36	29
	High-potency conventional	[			4.2(2.4)	2	17	41	41
	Clozapine				2.7(2.2)	0	9	17	74
	Mid-potency conventional				2.4(1.5)	0	3	18	79
	Low-potency conventional				1.6(1.3)	0	3	0	93
Xerostomia									
	Risperidone				6.6(2.1)	12	66	24	10
	Quetiapine				6.1(1.7)	5	49	46	5
	Aripiprazole				5.6(2.3)	0	48	29	24
	Ziprasidone			Ī	5.1(2.4)	0	36	36	29
	Olanzapine				5.1(2.3)	3	33	45	23
	High-potency conventional				4.2(2.4)	2	17	41	41
	Clozapine				2.7(2.2)	0	9	17	74
	Mid-potency conventional				2.4(1.5)	0	3	16	82
	Low-potency conventional				1.6(1.3)	0	3	0	97
		2 3	4 5 6	7 8 9	)	%	%	%	%

**44** Medication combinations. Please rate the appropriateness of combining each of the following types of antipsychotics with the following medications in an older patient. Please rate each combination using the following scale:

- 1 = no expected drug interaction
- 2 = need for extra monitoring for possible side effects
- 3 =combined use contraindicated

	C	Citalopram		Fluoxetine			Fluvoxamine			
	1	2	3	1	1 2 3		1	2	3	
	n (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	
Aripiprazole	14 (74%)	4 (21%)	1 (5%)	10 (53%)	9 (47%)	0 (0%)	9 (56%)	7 (44%)	0 (0%)	
Clozapine	22 (61%)	11 (31%)	3 (8%)	9 (25%)	25 (69%)	2 (6%)	5 (15%)	24 (73%)	4 (12%)	
Olanzapine	33 (79%)	7 (17%)	2 (5%)	20 (47%)	20 (47%)	3 (7%)	10 (29%)	24 (69%)	1 (3%)	
Quetiapine	32 (80%)	7 (18%)	1 (3%)	22 (56%)	17 (44%)	0 (0%)	17 (49%)	17 (49%)	1 (3%)	
Risperidone	29 (71%)	11 (27%)	1 (2%)	13 (33%)	25 (63%)	2 (5%)	18 (51%)	17 (49%)	0 (0%)	
Ziprasidone	18 (69%)	7 (27%)	1 (4%)	13 (50%)	13 (50%)	0 (0%)	12 (50%)	12 (50%)	0 (0%)	
High-potency conventional	29 (73%)	8 (20%)	3 (8%)	12 (31%)	23 (59%)	4 (10%)	16 (46%)	18 (51%)	1 (3%)	
Mid-potency conventional	24 (63%)	11 (29%)	3 (8%)	12 (32%)	20 (54%)	5 (14%)	16 (47%)	16 (47%)	2 (6%)	
Low-potency conventional	24 (65%)	9 (24%)	4 (11%)	10 (27%)	17 (46%)	10 (27%)	12 (36%)	17 (52%)	4 (12%)	

	I	Paroxetine		S	Sertraline		I	Bupropion	
	1	2	3	1	2	3	1	2	3
	<b>n</b> (%)								
Aripiprazole	8 (44%)	9 (50%)	1 (6%)	12 (67%)	6 (33%)	0 (0%)	14 (78%)	3 (17%)	1 (6%)
Clozapine	8 (22%)	25 (69%)	3 (8%)	17 (47%)	17 (47%)	2 (6%)	17 (49%)	15 (43%)	3 (9%)
Olanzapine	17 (41%)	23 (56%)	1 (2%)	28 (68%)	12 (29%)	1 (2%)	29 (71%)	11 (27%)	1 (2%)
Quetiapine	23 (58%)	16 (40%)	1 (3%)	29 (73%)	11 (28%)	0 (0%)	29 (74%)	9 (23%)	1 (3%)
Risperidone	12 (29%)	27 (66%)	2 (5%)	22 (54%)	19 (46%)	0 (0%)	23 (58%)	15 (38%)	2 (5%)
Ziprasidone	12 (44%)	14 (52%)	1 (4%)	18 (67%)	9 (33%)	0 (0%)	19 (70%)	7 (26%)	1 (4%)
High-potency conventional	10 (24%)	27 (64%)	5 (12%)	25 (60%)	15 (36%)	2 (5%)	21 (51%)	17 (41%)	3 (7%)
Mid-potency conventional	10 (26%)	24 (62%)	5 (13%)	22 (56%)	15 (38%)	2 (5%)	21 (54%)	15 (38%)	3 (8%)
Low-potency conventional	7 (19%)	23 (62%)	7 (19%)	20 (53%)	15 (39%)	3 (8%)	23 (61%)	12 (32%)	3 (8%)

	N	lirtazapine		Ν	efazodone		1	<b>Frazodone</b>	
	1	2	3	1	2	3	1	2	3
	<b>n</b> (%)	<b>n</b> (%)							
Aripiprazole	14 (78%)	3 (17%)	1 (6%)	8 (47%)	8 (47%)	1 (6%)	14 (70%)	5 (25%)	1 (5%)
Clozapine	15 (41%)	18 (49%)	4 (11%)	10 (30%)	21 (64%)	2 (6%)	16 (44%)	18 (50%)	2 (6%)
Olanzapine	21 (50%)	20 (48%)	1 (2%)	16 (43%)	20 (54%)	1 (3%)	22 (54%)	18 (44%)	1 (2%)
Quetiapine	22 (56%)	15 (38%)	2 (5%)	13 (36%)	20 (56%)	3 (8%)	22 (55%)	17 (43%)	1 (3%)
Risperidone	22 (51%)	18 (42%)	3 (7%)	4 (19%)	15 (71%)	2 (10%)	25 (60%)	16 (38%)	1 (2%)
Ziprasidone	17 (63%)	8 (30%)	2 (7%)	12 (46%)	13 (50%)	1 (4%)	16 (59%)	10 (37%)	1 (4%)
High-potency conventional	24 (57%)	15 (36%)	3 (7%)	20 (53%)	17 (45%)	1 (3%)	27 (66%)	13 (32%)	1 (2%)
Mid-potency conventional	21 (54%)	14 (36%)	4 (10%)	18 (50%)	15 (42%)	3 (8%)	22 (55%)	15 (38%)	3 (8%)
Low-potency conventional	17 (45%)	17 (45%)	4 (11%)	13 (37%)	19 (54%)	3 (9%)	15 (39%)	20 (53%)	3 (8%)

#### **44** Medication combinations, continued

- 1 = no expected drug interaction
- 2 = need for extra monitoring for possible side effects
- 3 = combined use contraindicated

	V	enlafaxine		Tricycli	ic antidepre	essant	Monoamine oxidase inhibitor			
	1	2	3	1	2	3	1	2	3	
	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	
Aripiprazole	14 (74%)	5 (26%)	0 (0%)	10 (50%)	8 (40%)	2 (10%)	7 (35%)	10 (50%)	3 (15%)	
Clozapine	20 (56%)	14 (39%)	2 (6%)	8 (23%)	22 (63%)	5 (14%)	7 (21%)	21 (64%)	5 (15%)	
Olanzapine	26 (63%)	14 (34%)	1 (2%)	11 (28%)	26 (65%)	3 (8%)	12 (33%)	21 (58%)	3 (8%)	
Quetiapine	28 (70%)	12 (30%)	0 (0%)	16 (41%)	20 (51%)	3 (8%)	11 (31%)	20 (57%)	4 (11%)	
Risperidone	26 (62%)	16 (38%)	0 (0%)	15 (37%)	24 (59%)	2 (5%)	14 (38%)	19 (51%)	4 (11%)	
Ziprasidone	18 (67%)	8 (30%)	1 (4%)	7 (26%)	13 (48%)	7 (26%)	10 (37%)	13 (48%)	4 (15%)	
High-potency conventional	24 (57%)	17 (40%)	1 (2%)	16 (40%)	22 (55%)	2 (5%)	13 (35%)	20 (54%)	4 (11%)	
Mid-potency conventional	25 (63%)	13 (33%)	2 (5%)	12 (31%)	23 (59%)	4 (10%)	10 (28%)	21 (58%)	5 (14%)	
Low-potency conventional	21 (55%)	14 (37%)	3 (8%)	11 (29%)	20 (53%)	7 (18%)	8 (22%)	22 (61%)	6 (17%)	

		Lithium		Ca	rbamazepii	ne	G	abapentin	
	1	2	3	1	2	3	1	2	3
	n (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)
Aripiprazole	9 (47%)	9 (47%)	1 (5%)	5 (25%)	12 (60%)	3 (15%)	13 (62%)	7 (33%)	1 (5%)
Clozapine	8 (22%)	25 (69%)	3 (8%)	5 (14%)	17 (47%)	14 (39%)	17 (47%)	17 (47%)	2 (6%)
Olanzapine	14 (35%)	24 (60%)	2 (5%)	14 (34%)	25 (61%)	2 (5%)	22 (54%)	18 (44%)	1 (2%)
Quetiapine	16 (42%)	21 (55%)	1 (3%)	12 (30%)	26 (65%)	2 (5%)	21 (62%)	12 (35%)	1 (3%)
Risperidone	15 (37%)	25 (61%)	1 (2%)	18 (43%)	22 (52%)	2 (5%)	26 (63%)	14 (34%)	1 (2%)
Ziprasidone	9 (33%)	17 (63%)	1 (4%)	8 (30%)	17 (63%)	2 (7%)	15 (56%)	10 (37%)	2 (7%)
High-potency conventional	7 (17%)	30 (73%)	4 (10%)	11 (26%)	27 (64%)	4 (10%)	26 (63%)	13 (32%)	2 (5%)
Mid-potency conventional	8 (21%)	27 (69%)	4 (10%)	12 (30%)	25 (63%)	3 (8%)	23 (59%)	14 (36%)	2 (5%)
Low-potency conventional	7 (22%)	22 (69%)	3 (9%)	12 (32%)	22 (58%)	4 (11%)	18 (49%)	17 (46%)	2 (5%)

	L	amotrigine		,	Valproate			Atenolol	
	1	2	3	1	2	3	1	2	3
	n (%)	<b>n</b> (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)
Aripiprazole	10 (50%)	9 (45%)	1 (5%)	12 (55%)	9 (41%)	1 (5%)	11 (52%)	10 (48%)	0 (0%)
Clozapine	12 (36%)	19 (58%)	2 (6%)	8 (24%)	23 (68%)	3 (9%)	12 (34%)	20 (57%)	3 (9%)
Olanzapine	14 (40%)	20 (57%)	1 (3%)	16 (41%)	22 (56%)	1 (3%)	21 (53%)	18 (45%)	1 (3%)
Quetiapine	13 (38%)	20 (59%)	1 (3%)	17 (44%)	22 (56%)	0 (0%)	21 (54%)	17 (44%)	1 (3%)
Risperidone	16 (44%)	19 (53%)	1 (3%)	21 (51%)	20 (49%)	0 (0%)	22 (52%)	19 (45%)	1 (2%)
Ziprasidone	11 (42%)	14 (54%)	1 (4%)	13 (50%)	13 (50%)	0 (0%)	14 (52%)	11 (41%)	2 (7%)
High-potency conventional	15 (42%)	19 (53%)	2 (6%)	21 (51%)	19 (46%)	1 (2%)	22 (55%)	14 (35%)	4 (10%)
Mid-potency conventional	13 (37%)	20 (57%)	2 (6%)	16 (40%)	22 (55%)	2 (5%)	15 (39%)	19 (50%)	4 (11%)
Low-potency conventional	11 (32%)	21 (62%)	2 (6%)	12 (32%)	23 (61%)	3 (8%)	11 (31%)	20 (56%)	5 (14%)

# **44** Medication combinations, continued

- 1 = no expected drug interaction
- 2 = need for extra monitoring for possible side effects
- 3 =combined use contraindicated

		Caffeine		(	Captopril			Codeine	
	1	2	3	1	2	3	1	2	3
	<b>n</b> (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)
Aripiprazole	14 (70%)	5 (25%)	1 (5%)	13 (68%)	6 (32%)	0 (0%)	10 (45%)	10 (45%)	2 (9%)
Clozapine	16 (47%)	17 (50%)	1 (3%)	10 (33%)	19 (63%)	1 (3%)	10 (30%)	22 (67%)	1 (3%)
Olanzapine	26 (67%)	12 (31%)	1 (3%)	19 (56%)	14 (41%)	1 (3%)	12 (31%)	25 (64%)	2 (5%)
Quetiapine	30 (77%)	8 (21%)	1 (3%)	19 (56%)	15 (44%)	0 (0%)	15 (38%)	22 (56%)	2 (5%)
Risperidone	30 (73%)	10 (24%)	1 (2%)	19 (53%)	17 (47%)	0 (0%)	17 (40%)	23 (55%)	2 (5%)
Ziprasidone	21 (78%)	5 (19%)	1 (4%)	14 (56%)	10 (40%)	1 (4%)	13 (48%)	13 (48%)	1 (4%)
High-potency conventional	26 (67%)	12 (31%)	1 (3%)	20 (56%)	15 (42%)	1 (3%)	16 (39%)	22 (54%)	3 (7%)
Mid-potency conventional	27 (71%)	10 (26%)	1 (3%)	15 (44%)	16 (47%)	3 (9%)	11 (28%)	25 (63%)	4 (10%)
Low-potency conventional	27 (75%)	8 (22%)	1 (3%)	11 (33%)	19 (58%)	3 (9%)	10 (27%)	23 (62%)	4 (11%)

	Co	rticosteroid	s		Digoxin		Ketoconazole			
	1	2	3	1	2	3	1	2	3	
	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	
Aripiprazole	13 (62%)	8 (38%)	0 (0%)	12 (60%)	8 (40%)	0 (0%)	10 (50%)	8 (40%)	2 (10%)	
Clozapine	16 (44%)	19 (53%)	1 (3%)	14 (40%)	19 (54%)	2 (6%)	16 (47%)	15 (44%)	3 (9%)	
Olanzapine	21 (51%)	18 (44%)	2 (5%)	24 (60%)	14 (35%)	2 (5%)	24 (65%)	11 (30%)	2 (5%)	
Quetiapine	25 (63%)	15 (38%)	0 (0%)	25 (68%)	12 (32%)	0 (0%)	16 (44%)	18 (50%)	2 (6%)	
Risperidone	27 (63%)	16 (37%)	0 (0%)	25 (61%)	16 (39%)	0 (0%)	23 (59%)	14 (36%)	2 (5%)	
Ziprasidone	16 (57%)	11 (39%)	1 (4%)	14 (50%)	11 (39%)	3 (11%)	13 (46%)	11 (39%)	4 (14%)	
High-potency conventional	29 (69%)	11 (26%)	2 (5%)	23 (55%)	18 (43%)	1 (2%)	24 (62%)	13 (33%)	2 (5%)	
Mid-potency conventional	24 (62%)	13 (33%)	2 (5%)	17 (44%)	20 (51%)	2 (5%)	22 (59%)	12 (32%)	3 (8%)	
Low-potency conventional	21 (57%)	14 (38%)	2 (5%)	13 (35%)	22 (59%)	2 (5%)	19 (53%)	13 (36%)	4 (11%)	

	I	oratadine		Macro	olide antibio	otics	I		
	1	2	3	1	2	3	1	2	3
	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)				
Aripiprazole	11 (69%)	5 (31%)	0 (0%)	13 (76%)	4 (24%)	0 (0%)	13 (72%)	5 (28%)	0 (0%)
Clozapine	12 (44%)	14 (52%)	1 (4%)	13 (46%)	12 (43%)	3 (11%)	15 (45%)	16 (48%)	2 (6%)
Olanzapine	17 (53%)	14 (44%)	1 (3%)	20 (57%)	12 (34%)	3 (9%)	23 (62%)	13 (35%)	1 (3%)
Quetiapine	15 (48%)	16 (52%)	0 (0%)	17 (55%)	14 (45%)	0 (0%)	23 (62%)	14 (38%)	0 (0%)
Risperidone	18 (55%)	15 (45%)	0 (0%)	21 (66%)	11 (34%)	0 (0%)	21 (54%)	17 (44%)	1 (3%)
Ziprasidone	13 (59%)	9 (41%)	0 (0%)	12 (55%)	9 (41%)	1 (5%)	18 (67%)	8 (30%)	1 (4%)
High-potency conventional	18 (53%)	15 (44%)	1 (3%)	22 (67%)	10 (30%)	1 (3%)	23 (59%)	15 (38%)	1 (3%)
Mid-potency conventional	15 (47%)	16 (50%)	1 (3%)	18 (58%)	11 (35%)	2 (6%)	17 (46%)	18 (49%)	2 (5%)
Low-potency conventional	14 (45%)	16 (52%)	1 (3%)	15 (50%)	13 (43%)	2 (7%)	15 (42%)	18 (50%)	3 (8%)

#### **44** Medication combinations, continued

- 1 = no expected drug interaction
- 2 = need for extra monitoring for possible side effects
- 3 =combined use contraindicated

	Omeprazole			J	Phenytoin		Theophylline			
	1	2	3	1	2	3	1	2	3	
	<b>n</b> (%)									
Aripiprazole	12 (86%)	2 (14%)	0 (0%)	9 (45%)	10 (50%)	1 (5%)	13 (65%)	7 (35%)	0 (0%)	
Clozapine	17 (61%)	9 (32%)	2 (7%)	10 (28%)	21 (58%)	5 (14%)	11 (31%)	21 (60%)	3 (9%)	
Olanzapine	21 (66%)	10 (31%)	1 (3%)	14 (37%)	21 (55%)	3 (8%)	18 (47%)	19 (50%)	1 (3%)	
Quetiapine	23 (74%)	8 (26%)	0 (0%)	7 (18%)	29 (76%)	2 (5%)	23 (61%)	15 (39%)	0 (0%)	
Risperidone	24 (73%)	8 (24%)	1 (3%)	18 (45%)	21 (53%)	1 (3%)	24 (62%)	15 (38%)	0 (0%)	
Ziprasidone	16 (73%)	6 (27%)	0 (0%)	12 (43%)	15 (54%)	1 (4%)	18 (64%)	9 (32%)	1 (4%)	
High-potency conventional	24 (71%)	9 (26%)	1 (3%)	16 (39%)	23 (56%)	2 (5%)	22 (56%)	16 (41%)	1 (3%)	
Mid-potency conventional	21 (66%)	9 (28%)	2 (6%)	15 (38%)	21 (54%)	3 (8%)	19 (53%)	15 (42%)	2 (6%)	
Low-potency conventional	20 (67%)	8 (27%)	2 (7%)	14 (38%)	20 (54%)	3 (8%)	18 (51%)	15 (43%)	2 (6%)	

	r	Framadol			Warfarin	
	1	2	3	1	2	3
	n (%)	<b>n</b> (%)	n (%)	<b>n</b> (%)	<b>n</b> (%)	<b>n</b> (%)
Aripiprazole	7 (54%)	5 (38%)	1 (8%)	13 (62%)	7 (33%)	1 (5%)
Clozapine	6 (24%)	17 (68%)	2 (8%)	16 (46%)	17 (49%)	2 (6%)
Olanzapine	11 (37%)	17 (57%)	2 (7%)	20 (53%)	16 (42%)	2 (5%)
Quetiapine	9 (31%)	19 (66%)	1 (3%)	19 (51%)	17 (46%)	1 (3%)
Risperidone	11 (35%)	19 (61%)	1 (3%)	22 (56%)	16 (41%)	1 (3%)
Ziprasidone	9 (43%)	11 (52%)	1 (5%)	15 (56%)	11 (41%)	1 (4%)
High-potency conventional	12 (39%)	16 (52%)	3 (10%)	22 (56%)	14 (36%)	3 (8%)
Mid-potency conventional	10 (34%)	15 (52%)	4 (14%)	20 (54%)	13 (35%)	4 (11%)
Low-potency conventional	10 (34%)	15 (52%)	4 (14%)	18 (51%)	13 (37%)	4 (11%)

**45** History of side effects. Assume you are treating an older patient for a condition for which *low-dose* antipsychotic treatment is indicated and that the patient also has a history of one of the side effects listed below. Rate the appropriateness of using each of the following antipsychotics. We ask about medium- or high-dose treatment in Question 46.

	95% CON Third Line	FIDENCE I Second Line	NTERVALS First Line	Avg(SD)		1st Line		
Excessive daytime sedation								
Risperidone				7.0(1.3)	7	73	27	0
Aripiprazole				6.1(2.0)	8	46	42	13
Ziprasidone				5.3(2.0)	3	31	48	21
Quetiapine				5.0(1.7)	2	21	60	19
Olanzapine				4.9(1.8)	0	21	58	21
High-potency conventional				4.7(2.2)	5	18	52	30
Mid-potency conventional		]		3.1(1.6)	0	0	44	56
Clozapine				2.8(1.5)	0	3	26	72
Low-potency conventional				2.0(1.1)	0	0	10	90
Drug-induced orthostatic hypotension								
Aripiprazole				6.0(2.1)	4	52	35	13
Risperidone				6.0(1.8)	5	45	45	9
Quetiapine				5.8(1.8)	5	38	50	12
Olanzapine				5.3(2.0)	0	33	47	21
Ziprasidone				5.1(2.2)	3	31	41	28
High-potency conventional				4.5(2.3)	5	18	48	34
Mid-potency conventional				2.8(1.8)	2	2	33	64
Clozapine				2.6(1.9)	0	5	23	72
Low-potency conventional				1.7(1.2)	0	0	7	93
Extrapyramidal side effects (drug-induced reversible motor side effects)								
Quetiapine				7.5(1.3)	26	83	17	0
Olanzapine				6.3(1.7)	9	51	44	5
Aripiprazole				6.3(1.9)	8	50	42	8
Ziprasidone				5.7(2.3)	7	43	39	18
Clozapine				5.3(2.5)	10	36	31	33
Risperidone				4.8(2.1)	5	23	53	23
Mid-potency conventional				2.8(1.4)	0	0	36	64
Low-potency conventional				2.8(1.7)	0	2	29	68
High-potency conventional				2.1(1.2)	0	0	14	86
1	2 3	4 5 6	7 8	9	%	%	%	%

## **45** History of side effects, continued

		FIDENCE IN		A		1st	2nd	
II-mi-	Third Line	Second Line	First Line	Avg(SD)	Cnc	Line	Line	Line
Hyperprolactinemia						60	20	
Quetiapine				6.9(1.5)	14	68	30	3
Aripiprazole				6.3(2.2)	14	59	27	14
Olanzapine				5.9(1.7)	8	47	50	3
Ziprasidone				5.3(2.2)	4	33	48	19
Clozapine				4.7(2.5)	6	31	29	40
Risperidone				4.5(2.0)	0	23	41	36
High-potency conventional				2.7(1.8)	0	8	18	75
Mid-potency conventional				2.5(1.4)	0	0	31	69
Low-potency conventional				2.3(1.6)	0	3	21	76
Central anticholinergic syndrome								
Risperidone				6.8(1.9)	17	71	19	10
Quetiapine		[		6.7(1.5)	8	68	30	3
Aripiprazole				6.3(2.0)	4	70	17	13
Ziprasidone				5.7(2.2)	7	39	43	18
Olanzapine				4.9(2.1)	0	27	51	22
High-potency conventional				4.0(2.5)	5	19	36	43
Clozapine				2.8(2.0)	0	8	24	68
Mid-potency conventional				2.4(1.7)	2	2	20	78
Low-potency conventional				1.5(0.8)	0	0	5	95
Significant peripheral anticholinergic side effects								
Risperidone				7.0(1.8)	16	74	16	9
Quetiapine				6.7(1.4)	10	71	29	0
Aripiprazole				6.1(2.1)	4	67	17	17
Ziprasidone				5.5(2.3)	7	38	38	24
Olanzapine				4.8(1.9)	0	24	55	21
High-potency conventional				4.0(2.5)	5	16	35	49
Clozapine				2.8(2.0)	0	11	16	74
Mid-potency conventional				2.5(1.8)	2	2	20	78
Low-potency conventional				1.6(0.9)	0	0	5	95
	1 2 3	4 5 6	7 8	9	%	%	%	%

# **45** History of side effects, continued

	95% Con		Tr of		2nd	3rd		
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Tachycardia								
Risperidone				6.7(1.8)	12	68	22	10
Quetiapine				6.2(1.5)	5	46	46	8
Aripiprazole			<u>_</u>	5.9(1.9)	0	50	33	17
Olanzapine				5.7(2.0)	3	45	40	15
Ziprasidone				4.8(2.0)	0	24	38	38
High-potency conventional				4.2(2.5)	5	17	40	43
Clozapine				3.2(1.9)	0	5	41	54
Mid-potency conventional				2.9(1.9)	3	3	33	65
Low-potency conventional				2.1(1.4)	0	0	20	80
Tardive dyskinesia								
Quetiapine				7.3(1.4)	17	79	19	2
Olanzapine				6.7(1.6)	7	65	30	5
Aripiprazole				6.3(2.2)	13	57	30	13
Clozapine				5.7(2.2)	13	38	44	18
Ziprasidone				5.5(2.3)	7	39	39	21
Risperidone				5.4(2.1)	5	34	43	23
Low-potency conventional				2.1(1.3)	0	0	17	83
Mid-potency conventional				2.0(1.3)	0	0	19	81
High-potency conventional				1.8(1.1)	0	0	9	91
	2 3	4 5 6	7 8	9	%	%	%	%

**46** History of side effects. Assume you are treating an older patient for a condition for which *medium-* or *high-dose* antipsychotic treatment is indicated and that the patient also has a history of one of the side effects listed below. Rate the appropriateness of using each of the following antipsychotics.

	95% CON Third Line	FIDENCE IN Second Line	TERVALS First Line	Avg(SD)		1st Line	2nd Line	
Excessive daytime sedation		Second Line			ene	Line	Line	21110
Risperidone				6.8(1.6)	7	72	23	5
Aripiprazole				5.8(2.4)	8	50	25	25
Ziprasidone				5.2(2.2)	3	31	45	24
Quetiapine				4.6(2.0)	2	15	49	37
Olanzapine				4.6(2.0)	0	19	48	33
High-potency conventional				4.4(2.2)	5	14	49	37
Mid-potency conventional				2.8(1.5)	0	2	27	71
Clozapine				2.6(1.5)	0	3	21	77
Low-potency conventional				1.7(1.2)	0	0	12	88
Drug-induced orthostatic hypotension								
Risperidone			ļ	5.9(2.0)	5	50	34	16
Quetiapine				5.7(1.9)	5	31	60	10
Aripiprazole			]	5.6(2.4)	8	42	38	21
Olanzapine				5.2(2.1)	2	30	49	21
Ziprasidone				4.9(2.3)	3	31	38	31
High-potency conventional				4.2(2.4)	5	14	41	45
Mid-potency conventional				2.5(1.5)	0	2	29	69
Clozapine				2.4(1.8)	0	5	15	79
Low-potency conventional				1.6(1.0)	0	0	5	95
Extrapyramidal side effects (drug-induced reversible motor side effects)								
Quetiapine				7.1(1.7)	18	75	23	3
Aripiprazole				6.2(2.3)	13	61	26	13
Olanzapine				6.0(1.9)	5	45	45	10
Ziprasidone				5.5(2.5)	4	44	37	19
Clozapine				5.0(2.7)	13	34	32	34
Risperidone				4.6(2.3)	2	24	41	34
Low-potency conventional				2.3(1.4)	0	0	22	78
Mid-potency conventional				2.3(1.4)	0	0	24	76
High-potency conventional				1.9(1.2)	0	0	16	84
	2 3	4 5 6	7 8	9	%	%	%	%

# **46** History of side effects, continued

		FIDENCE IN			Tr of		2nd	3rd
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Line
Hyperprolactinemia								
Quetiapine			L.	6.8(1.7)	13	69	26	5
Olanzapine			<b>_</b>	6.1(2.0)	8	51	41	8
Aripiprazole				6.0(2.3)	13	50	33	17
Ziprasidone				5.2(2.4)	4	36	43	21
Clozapine				4.7(2.5)	6	28	33	39
Risperidone				4.4(2.2)	0	24	39	37
High-potency conventional				2.4(1.4)	0	0	21	79
Mid-potency conventional				2.2(1.3)	0	0	20	80
Low-potency conventional				2.1(1.5)	0	0	18	82
Central anticholinergic syndrome								
Risperidone				6.7(2.0)	14	71	17	12
Quetiapine				6.3(1.8)	8	54	36	10
Aripiprazole				6.3(2.4)	13	65	13	22
Ziprasidone				5.3(2.4)	7	36	36	29
Olanzapine				4.5(2.2)	0	24	39	37
High-potency conventional				3.6(2.3)	5	12	37	51
Clozapine				2.5(2.0)	0	8	16	76
Mid-potency conventional				2.3(1.5)	0	3	13	85
Low-potency conventional				1.5(0.9)	0	0	5	95
Significant peripheral anticholinergic side effects								
Risperidone				6.8(2.0)	16	74	14	12
Quetiapine				6.5(1.7)	10	60	31	10
Aripiprazole				6.0(2.5)	13	63	17	21
Ziprasidone				5.4(2.4)	7	43	29	29
Olanzapine				4.7(2.1)	0	23	44	33
High-potency conventional				4.0(2.5)	5	16	35	49
Clozapine				2.6(1.9)	0	8	23	69
Mid-potency conventional				2.2(1.5)	0	2	15	83
Low-potency conventional				1.5(0.8)	0	0	5	95
1	2 3	4 5 6	7 8	)	%	%	%	%

## **46** History of side effects, continued

		FIDENCE IN		Tr of		2nd		
	Third Line	Second Line	First Line	Avg(SD)	Chc	Line	Line	Lın
Tachycardia								
Risperidone				6.6(2.1)	12	65	23	12
Quetiapine				6.3(1.8)	5	56	34	10
Aripiprazole				5.9(2.3)	4	58	21	2
Olanzapine				5.4(2.2)	2	44	37	20
Ziprasidone				4.7(2.1)	0	28	31	4
High-potency conventional				4.0(2.5)	5	19	38	4
Clozapine				2.8(1.9)	0	5	32	6
Mid-potency conventional				2.7(1.9)	3	3	30	6
Low-potency conventional				1.9(1.4)	0	0	22	7
Tardive dyskinesia								-
Quetiapine				7.0(1.7)	17	71	24	5
Olanzapine				6.3(1.9)	7	58	33	ç
Aripiprazole				6.0(2.4)	13	52	26	2
Clozapine				5.5(2.6)	15	41	33	2
Risperidone				5.3(2.3)	7	37	40	2
Ziprasidone				5.3(2.6)	10	41	31	2
Low-potency conventional				1.9(1.1)	0	0	12	8
Mid-potency conventional				1.8(1.1)	0	0	14	8
High-potency conventional				1.8(1.4)	2	2	5	9
	1 2 3	4 5 6	7 8 9	)	%	%	%	9

**47** Strategies for an older patient who develops tardive dyskinesia (TD). Assume that an older patient develops a dyskinesia while receiving an antipsychotic, but you believe the patient's condition requires continued treatment with a psychotropic medication. Please rate the appropriateness of each of the following strategies.

	95% CONFIDENCE INTERVALS							Tr of		2nd	3rd	
	Third	Line	Sec	cond Lin	e	First	t Line	Avg(SD)	Chc	Line	Line	Line
Continue treatment with an antipsychotic medication, but if there is an alternate agent that has a lower liability for causing TD, switch to that antipsychotic instead								7.3(1.7)	31	78	18	4
Taper the current antipsychotic to the lowest possible dose								6.2(2.1)	14	45	41	14
Discontinue the current antipsychotic and switch the patient to a psychotropic agent other than an antipsychotic (e.g., a mood stabilizer, a benzodiazepine)								5.3(2.3)	11	31	42	27
Continue the current antipsychotic at the same dose								3.0(1.7)	0	2	36	62
Increase the dose of the current antipsychotic								2.2(1.6)	0	4	13	82
1	. 2	3	4	5	6	7	8	9	%	%	%	%