

A systematic review of the clinical effectiveness and cost-effectiveness of sensory, psychological and behavioural interventions for managing agitation in older adults with dementia

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Plain English summary

Interventions for managing agitation in older adults with dementia

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Background

Agitation is common in dementia, and is usually understood as purposeless behaviour such as shouting, moving about or even violence without an obvious cause. It is distressing, can cause care to break down and can increase costs. Drug treatments can have serious side effects and are often ineffective, but the evidence regarding non-pharmacological interventions is unclear.

Aims

This study aimed to discover which non-drug approaches to agitation in dementia worked, for whom and in what setting, whether or not they work immediately and in the longer term, and whether or not they represent good value for money.

Methods

We searched electronic databases and consulted the references and the authors of existing papers to find quantitative studies of non-drug treatments of agitation. We scored each study, giving more importance to those which were more rigorous, such as randomised controlled trials. Our results were organised according to the approach used. Owing to the differences between studies and lack of rigour, we could not meta-analyse (combine) results other than light therapy, and so we present a qualitative synthesis of the evidence, calculating the scale of the changes in different studies so that they could be compared. We evaluated the relationship between agitation and health and social care costs, and health-related quality of life, and developed an economic model to calculate whether or not interventions are good value for money.

Results

One hundred and sixty out of 1916 papers identified were included. Agitation was reduced, both in the short and in the long term, by training care staff and giving them supervision to assist implementation in either person-centred care, communication skills or dementia care mapping. Agitation decreased when care home residents carried out pleasant activities, or sensory intervention or structured music therapy. Neither aromatherapy nor light therapy decreased agitation, and training family carers to use psychological techniques did not decrease severe agitation either. There was little evidence about intervention costs and whether or not interventions are good value for money. We calculated that health and social care costs increase considerably in people who are severely agitated.

Conclusions

There is consistent evidence that teaching staff in care homes to communicate and consider the person with dementia's needs rather than focus on completing tasks with them was helpful for severe agitation, as were touch therapies. Activities and structured music therapy helped to decrease the level of agitation in care homes but was not specifically tested in severe agitation. We suggest using a manual with managers and staff of care homes to ensure the permanent and consistent implementation of effective interventions. Future studies should consider cost-effectiveness, and treatments for people in their own homes.

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