

Why This Is Unnecessary and Potentially Harmful

- Positive published studies actually have mixed results
 - Haloperidol PPX did not actually decrease incidence of delirium on post-op day 1.1
 - RCT of quetiapine not actually powered for the primary outcome of lower DRS-R-98 scores and there was no significant difference in severity of delirium on days 1, 3, or 10.2
- 2016 systematic review concluded that antipsychotics did not change length of delirium or hospitalization⁶
- RCT comparing haloperidol, risperidone, and placebo for delirium treatment in palliative care and hospice patients found more severe delirium in patients receiving antipsychotics vs placebo⁷
- - Increased risk of extrapyramidal symptoms⁶⁻⁸
 - Increased risk of aspiration pneumonia9
- Use of atypical antipsychotics in elderly patients with dementia is associated with increased mortality $^{\rm 10}$

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