# Can the behavioural symptoms of people severely affected by dementia be effectively and safely managed without use of regular psychotropic medication?

Submission date	<b>Recruitment status</b> No longer recruiting	[X] Prospectively registered		
02/08/2002		☐ Protocol		
Registration date 02/08/2002	Overall study status Completed Condition category	Statistical analysis plan		
		[X] Results		
Last Edited		Individual participant data		
08/08/2011	Mental and Behavioural Disorders			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Robert Howard

#### Contact details

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# Additional identifiers

Protocol serial number QRD/2002/01/01

# Study information

Scientific Title

#### Acronym

**FITS** 

#### Study objectives

Many people with dementia are prescribed antidepressants and minor or major tranquillizers. This may be appropriate treatment for psychiatric symptoms such as depression, hallucinations or delusions, but use of these drugs to control behavioural symptoms that may arise out of agitation for example is controversial. Major tranquillizers are highly effective in the treatment of hallucinations and delusions, but the little evidence that we have suggests that they have only modest efficacy in improving behavioural symptoms. In contrast to the lack of evidence that these drugs are helpful in the treatment of people with dementia, there are clear costs associated with their use. All of these drugs have side-effects to which people with dementia are particularly sensitive. Further, some researchers believe that use of these drugs may be associated with an accelerated decline in dementia.

The aim of this trial is to test the effectiveness and acceptability of alternatives to regular psychotropic prescription within those people with dementia who present the most serious behavioural problems and who would thus be most likely to receive drug treatment.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

No ethics information required at time of registration.

# Study design

Cluster randomised controlled trial

## Primary study design

Interventional

## Study type(s)

Treatment

#### Health condition(s) or problem(s) studied

Dementia

#### **Interventions**

Focused Intervention Training and Support (FITS) package delivered to Care staff within Continuing Care facilities versus a simple staff support group

#### Intervention Type

Other

#### **Phase**

Not Applicable

#### Primary outcome(s)

- 1. Determine whether this approach reduces the need for neuroleptics and other sedative medications
- 2. To measure the safety of this intervention
- 3. Determine whether this improves the quality of life of those people with dementia resident in such facilities
- 4. To examine whether a positive intervention on residents has a beneficial effect on staff

#### Key secondary outcome(s))

Not provided at time of registration

#### Completion date

01/02/2005

# **Eligibility**

#### Key inclusion criteria

Being a continuing care facility providing care for people with severe dementia

#### Participant type(s)

**Patient** 

#### Healthy volunteers allowed

No

## Age group

Senior

#### Sex

All

#### Key exclusion criteria

Not applicable

#### Date of first enrolment

01/06/2003

#### Date of final enrolment

01/02/2005

# Locations

#### Countries of recruitment

United Kingdom

England

# Study participating centre

# **Division of Psychological Medicine** London United Kingdom SE5 8AF

# Sponsor information

# Organisation

Alzheimer's Society (UK)

#### ROR

https://ror.org/0472gwq90

# Funder(s)

# Funder type

Charity

#### Funder Name

Alzheimer's Society, The Community Fund (RG 24052)

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/04/2006		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes