ALZHEIMER AGENTS

A. FDA approved indications (see Table 1)

1. Alzheimer's dementia, mild to moderate type (Donepezil, Galantamine, Rivastigmine, **Tacrine**)
2. Alzheimer's dementia, moderate to severe type (Donepezil, **Memantine, Memantine/donepezil**)

Documentation Required

B. Non-FDA approved, commonly used indications

1. Dementia (**Memantine)**
2. Dementia NOS
3. Prophylaxis-impaired cognition (Donepezil)
4. Dementia secondary to other medical conditions i.e., Huntington, HIV, Infection, TBI, Hypothyroidism, Vitamin B12 Deficiency
5. Vascular dementia (Formerly Multi-Infarct Dementia)
6. Substance-Induced Persisting Dementia

Documentation Required

C. Minimal documentation

1. Mini-Mental Status Examination (Folstein) at baseline if < 24, repeat each visit (no less than q6months).
2. R/O other etiologies such as MDD (pseudodemetia)

Documentation Required

D. Maximum Dosage - see Medication Summary for MDD

Documentation Required

E. Duration

1. For Outpatient: Document rationale when making any medication change.
2. For Inpatient: Document rationale when making more than 3 changes in any 7-day period.

F. Drug-Drug Interactions – Refer to www.epocrates.com

G. Warnings & Precautions

- Caution if cardiac conduction defects
- Caution if seizer hx or risk
- Caution if hepatic or renal impairment
- Caution if asthma or COPD
- Caution if GI bleeding or ulcer hx or risk
- Caution if urinary obstruction

Documentation Required

G. Standard laboratory and examination requirements

1. For inpatient: Basic laboratory studies on admission
2. For outpatient:
   Tacrine (Cognex): **LFTs at baseline, 4 weeks after initiation, then q3months thereafter.**
3. Additional laboratory work up should include metabolic profile, baseline TSH, B12, Folate, and RPR to r/o other possibilities interfering with cognitive status.
4. More frequent and/or additional monitoring should be considered depending on the clinical situation and whenever there is a change in the patient's status.

Attachment: Table 1 FDA-Approved Indications and Maximum Dose
References: Epocrates, Micromedex

ALZHEIMER'S DISEASE AGENTS

Table 1: FDA-Approved Indications and Maximum Daily Dose

Agent	Brand	Max Daily Dose	Mild-Moderate Dementia	Moderate-Severe Dementia
Donepezil	Aricept	**23mg**	X	X
Galantamine	Razadyne, **Razadyne ER**	24mg	X	
Memantine	**Namenda** **Namenda XR**	20mg **28mg**		X
Rivastigmine	Exelon	12mg	X	
	Exelon Patch	**13.3mg**		
Tacrine	**Cognex**	160mg	X	
Memantine/ Donepezil	**Namzaric**	**28ER/10**		**X**