

Understanding NICE guidance

Information for people who use NHS services

Donepezil, galantamine, rivastigmine and memantine for Alzheimer's disease

NICE 'technology appraisal guidance' advises on when and how drugs and other treatments should be used in the NHS.

This leaflet is about when **donepezil, galantamine, rivastigmine** and **memantine** should be used to treat people with Alzheimer's disease in the NHS in England and Wales. It does not cover the use of these drugs for patients with other forms of dementia (for example, vascular dementia or dementia with Lewy bodies). It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people with Alzheimer's disease but it may also be useful for their families, carers or anyone with an interest in the condition.

It does not describe Alzheimer's disease or the treatments in detail – your specialist should discuss these with you. Some sources of further information and support are on page 5.

Following the outcome of a judicial review in August 2007, NICE amended and reissued the guidance. The new information is given in the box on page 3.

These may not be the only possible treatments for Alzheimer's disease. Your healthcare team should talk to you about whether they are suitable for you and about other treatment options available.

What has NICE said?

Donepezil, galantamine and rivastigmine are recommended as options for moderate Alzheimer's disease only, and if:

- treatment is started by a doctor who specialises in the care of people with dementia
- patients who are started on the drug are checked every 6 months, usually by a specialist team
- the check-up includes a test called the Mini Mental State Examination (MMSE) and assessment of the patient's behaviour and ability to cope with daily life
- the views of carers on the patient's condition are discussed at the start of drug treatment and at check-ups
- the drug is stopped if the patient's MMSE score falls below 10 points, or if the drug isn't working
- the least expensive of these three drugs is prescribed first. However, if this is not suitable for the patient another drug could be chosen.

Usually, healthcare professionals should use the MMSE test to assess whether a person has moderate Alzheimer's disease. However, the test is not suitable for some people. See the box on page 3 for details about this.

Memantine is not recommended as an option for people with moderately severe to severe Alzheimer's disease unless it is being used as part of a clinical trial (research).

Patients already taking donepezil, galantamine or rivastigmine for mild Alzheimer's disease or memantine for moderately severe to severe Alzheimer's disease should be able to carry on having treatment. Treatment should continue until the patient, carers and/or specialist decide it is the right time to stop.

Assessing the severity of Alzheimer's disease

Usually, healthcare professionals should use the MMSE test to assess whether a person has moderate Alzheimer's disease. However, the test is not suitable for some people.

When using the MMSE test, healthcare professionals should make sure that people from different ethnic or cultural backgrounds and people with disabilities have equal access to treatment.

In some cases, healthcare professionals should not rely on the MMSE test – or not rely on it alone – to assess whether someone has moderate Alzheimer's disease. This may be the case when assessing people who:

- have learning disabilities or other disabilities such as deafness or blindness, or
- have difficulty speaking (for example, after a stroke) or other difficulties with communicating, or
- are not fluent enough in a language in which the MMSE test can be given

if this means that the MMSE test will not fairly reflect the severity of the disease.

For these people, healthcare professionals should use a different method to judge whether the person has moderate Alzheimer's disease when deciding about starting or stopping treatment.

This leaflet contains a summary in plain English of the guidance NICE has issued to the NHS. The detailed guidance is available from www.nice.org.uk/TA111/guidance

Alzheimer's disease

Alzheimer's disease is a type of dementia. It affects the brain and causes problems with memory, thinking and behaviour. It is a progressive disease, which means it gets worse over time as more parts of the brain are affected.

The Mini Mental State Examination (MMSE) is a test that is used to measure how severe a person's Alzheimer's disease is. The lower the MMSE score, the more severe is the disease. An MMSE score of between 10 and 20 is classified as moderate Alzheimer's disease. An MMSE score of between 10 and 14 is classified as moderately severe Alzheimer's disease. The MMSE test is not suitable for some people. For these people, healthcare professionals should assess the severity of Alzheimer's disease using another method suitable for the person's circumstances.

Donepezil, galantamine, rivastigmine and memantine

Donepezil, galantamine and rivastigmine are a type of medicine called acetylcholinesterase inhibitors. They work to increase the amount of a chemical called acetylcholine in the brain.

Memantine works to stop the effects of a chemical called glutamate found in the brain.

What does this mean for me?

When NICE recommends a treatment, the NHS must ensure it is available to those people it could help, normally within 3 months of the guidance being issued. So, if you have moderate Alzheimer's disease, and your doctor thinks that treatment with donepezil, galantamine or rivastigmine is right for you, you should be able to have the treatment on the NHS. Please see www.nice.org.uk/aboutguidance if you appear to be eligible for the treatment but it is not available.

You should not be offered memantine on the NHS unless you have been asked to take part in a clinical trial.

If you are already taking donepezil, galantamine or rivastigmine for mild Alzheimer's disease or memantine for Alzheimer's disease, you should be able to continue taking it until you, your carers and your specialist decide it is the right time to stop.

More information about Alzheimer's disease

The organisation below can provide more information and support for people with Alzheimer's disease. Please note that NICE is not responsible for the quality or accuracy of any information or advice provided by this organisation.

- The Alzheimer's Society, 0845 300 0336, www.alzheimers.org.uk
NHS Direct online (www.nhsdirect.nhs.uk) may be a good starting point for finding out more. Your local Patient Advice and Liaison Service (PALS) may also be able to give you further advice and support.

About NICE

NICE produces advice (guidance) for the NHS about preventing, diagnosing and treating different medical conditions. The guidance is written by independent experts including healthcare professionals and people representing patients and carers. They consider all the research on the disease or treatment, talk to people affected by it, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This leaflet and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/TA111

You can order printed copies of this leaflet from the NHS Response Line (phone 0870 1555 455 and quote reference N1329).

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