TITLE: Monoamine oxidase inhibitors in Elderly Patients: Clinical Effectiveness and Guidelines

DATE: 14 August 2015

RESEARCH QUESTIONS

1. What is the clinical effectiveness and safety of antidepressants in elderly patients with depression, dementia and depression, or behavioural and psychological symptoms of dementia in any setting?

2. What are the evidence-based guidelines associated with the use of antidepressants in elderly patients with depression, dementia and depression, or behavioural and psychological symptoms of dementia in any setting?

KEY FINDINGS

Four systematic reviews, one randomized controlled trial, three non-randomized studies, and four evidence-based guidelines were identified regarding the use of antidepressants in elderly patients with depression, dementia and depression, or behavioural and psychological symptoms of dementia (BPSD) in any setting.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were added to limit by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2000 and July 30, 2015. Internet links were provided, where available.

SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.
Table 1: Selection Criteria

<table>
<thead>
<tr>
<th>Population</th>
<th>Elderly patients ≥65 years of age (subpopulation: the frail elderly) in any setting (home, long-term care, hospital) with depression, dementia and depression, or behavioural and psychological symptoms of dementia (BPSD)</th>
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<tbody>
<tr>
<td>Intervention</td>
<td>Monoamine oxidase inhibitors (MAOIs)</td>
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| Comparator  | • All antidepressant classes  
  o Selective serotonin reuptake inhibitors (SSRIs)  
  o Serotonin and norepinephrine reuptake inhibitors (SNRIs)  
  o Tricyclic antidepressants  
  o Norepinephrine-dopamine reuptake inhibitors (NDRIs)  
  o Serotonin 2 antagonists /serotonin reuptake inhibitors (SARIs)  
  o Noradrenergic and specific serotonergic antidepressants (NaSSAs), particularly mirtazapine  
• Placebo;  
• Non-pharmacologic interventions (e.g., environmental);  
• St. John’s Wort |
| Outcomes    | Q1: Clinical effectiveness (includes clinical benefit [e.g., minimal clinically important differences with different tools] and harms, safety); Q2: Guidelines |
| Study Designs | Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies (safety), evidence-based guidelines |

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

Four systematic reviews, one randomized controlled trial, three non-randomized studies, and four evidence-based guidelines were identified regarding the use of antidepressants in elderly patients with depression, dementia and depression, or behavioural and psychological symptoms of dementia (BPSD) in any setting. No relevant health technology assessments were identified.

Additional references of potential interest are provided in the appendix.

Health Technology Assessments
No literature identified.

Systematic Reviews and Meta-analyses


2. Tedeschini E, Levkovitz Y, Iovieno N, Ameral VE, Nelson JC, Papakostas GI. Efficacy of antidepressants for late-life depression: a meta-analysis and meta-regression of placebo-


Randomized Controlled Trials


Non-Randomized Studies


Guidelines and Recommendations


10. National guidelines for seniors’ mental health: the assessment and treatment of mental health issues in long term care homes (focus on mood and behaviour symptoms) [Internet]. Toronto: Canadian Coalition for Seniors’ Mental Health; 2006 May [cited 2015...
See: Appropriate first line antidepressants…, pages 30-31


See: 3.5.2 Pharmacological caregiving strategies, page 73

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APPENDIX – FURTHER INFORMATION:

Clinical Practice Guidelines – Methodology Not Specified

See: Other pharmacological treatment options, page 21

Review Articles


Additional References – Expert Opinion
