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## TRAZODONE IN ELDERLY PATIENTS WITH DEMENTIA: IMPACT ON CAREGIVER BURDEN

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**Introduction:** Trazodone is a Serotonin-2A Antagonist/Reuptake Inhibitor (SARI) that combines its ability as a 5/HT<sub>2A</sub> receptor antagonist with some serotonin reuptake blockade actions. Studies support its use in the treatment of behavioral disturbances in patients with Alzheimer's disease and frontotemporal dementia.

**Objective:** To evaluate the effectiveness of trazodone in behavioral symptoms and caregiver burden in elderly patients with dementia.

**Methods:** In 49 patients (males and females) older than 65 years with dementia (DSM-IV), trazodone was associated to the standard treatment in a single night variable dose (50-200 mg). On days 0, 14 and 42 neuropsychiatric disorders and caregiver burden (Neuropsychiatric Inventory-Nursing Home Version, NPI-NH) were assessed. On days 0 and 42 cognitive impairment was measured by the test Mini-Mental State Examination (MMSE). The Clinical Global Impression (CGI) was administered on the last visit. Statistical evaluation was done by SPSS 17<sup>®</sup>.

**Results:** 38 patients completed the study. Global score NPI-NH was significantly reduced ( $p < 0.001$ ). Sleep quality subscale improved significantly ( $p < 0.001$ ). The MMSE was not modified. The caregiver burden showed a significant decrease ( $p < 0.001$ ) on each visit. Trazodone was well tolerated (main adverse effects were: hypotension (4.1%) and somnolence (2%). Patients evolution was positive (CGI).

**Conclusion:** Results of this study suggest that trazodone is an effective treatment for behavioral symptoms of dementia. Trazodone reduces caregiver burden without modifying the patient's cognitive function.