

# For Family Doctors: Tips on talking with patients with dementia and their caregivers about medications for Alzheimer's disease and other dementias

## Here are seven key points to discuss:

1. The medications approved for treating Alzheimer's disease are not a cure. There are two classes of medications, cholinesterase inhibitors (commonly known as cognitive enhancers) and NMDA receptor antagonists (memantine). These medications may improve the symptoms for a while, or slow the decline for some patients.
2. The benefits are modest, and can be subtle and difficult to detect. These could include being more engaged, motivated and communicative, or subtle improvements in concentration and memory.
3. I intend to rely on you to tell me, in follow-up appointments, if you are noticing these kinds of improvements and if this makes any noticeable difference in your quality of life.

4. We need to keep an eye on possible side effects. Watch for loss of appetite, nausea, vomiting and diarrhea. Look for unintended weight loss, dizziness, slowing of the heart rate, falls or headaches or unusual dreams or nightmares. Call me if you start to notice any of these side effects.
5. We'll make a decision on the first medication to try based on my experience with other patients, how easy it is to take, interactions with other drugs, and your own health conditions, such as kidney or heart problems, that may pose greater risks with one medication than another.
6. If one medication isn't helping or is causing troublesome side effects, it may be worth trying another medication. We may take you off the first medication and then start treatment at a dose that will minimize side effects and make the treatment as effective as possible.
7. Once you are on the optimum dose, we will discuss when you need to see me for a check-up to assess how you're doing and to check if the treatment is having a worthwhile effect.