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IDENTIFYING PREDICTORS OF SUCCESS FOR
PATIENTS SWITCHING FROM DONEPEZIL TO
GALANTAMINE: A VETERANS AFFAIRS

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Acetylcholinesterase inhibitors (AChEIs) have shown superior efficacy vs. placebo for symptomatic treatment of mild-to-moderate Alzheimer's disease (AD). AChEIs have been shown to delay the progression of AD for at least 6 months. VA San Diego Healthcare System (VASDHS) has an established process to autoconvert large numbers of patients upon refill. However, a Pharmacy and Therapeutics Committee-approved autoconversion (AC) from donepezil to galantamine was halted in July 2008 due to poor tolerability and efficacy. The purpose of this study is to identify predictive factors for successful AC from donepezil to galantamine at our facility. This study is a retrospective cohort chart analysis of all patients with mild-to-moderate AD at VASDHS who were clinically stable on donepezil (defined as having an active donepezil prescription for at least 3 months) who underwent AC. Patients were excluded if they had advanced AD, were on multiple medications for AD, or had prescriptions for AD that were expired or discontinued prior to their first day of AC. Data collected includes baseline characteristics (age, gender, service connection status, ethnicity, social history, co-morbid conditions, other medications, length of AD), galantamine dose at initiation and discontinuation, time on

galantamine before discontinuation, reason for discontinuation, MMSE and Zarit scores (when available), and caregiver characteristics (availability, type, location). Results and conclusions will be presented.