



Soothing agitation gives new hope to Alzheimer patients

One in five people with Alzheimer's disease experience severe agitation. While extreme restlessness is hard for anyone to bear, in those with dementia it may also speed the progression of the disease.

Doctors don't understand why, but they know that controlling agitation is important.

"It's a quality of life issue," says Dr. Krista Lanctôt, a senior researcher at Toronto's Sunnybrook Research Institute and an expert in neuropsychiatric problems. "When people are agitated and have an inner turmoil, their obvious discomfort is hard to watch."

Because the number of Canadians with Alzheimer's disease and other dementias will increase from 747,000 to 1.4 million by 2031, researchers are looking for ways to make the disease easier to live with.

That includes controlling agitation. But anti-psychotic drugs currently used to treat it work only with some people. These drugs can contribute to cognitive decline in their own right, while also increasing risk of stroke.

That's why Dr. Lanctôt, with the help of Sunnybrook's Dr. Nathan Herrmann, is poised to launch a small clinical trial of a drug called nabilone that shows promise for treating agitation, without the side effects of anti-psychotic drugs. It could also control pain and the weight loss common in those with Alzheimer's disease.

Nabilone is a synthetic version of tetrahydrocannabinol, the active ingredient in marijuana plants. Cancer patients use it to treat chemotherapy-induced nausea, and those with anorexia use it to help stimulate appetite and regain weight. But it has never been properly tested in people with Alzheimer's.

Launching this fall, Dr. Lanctôt's study is co-funded by the Alzheimer Society Research Program and the Discovery Foundation of Canada.

It involves 40 participants with Alzheimer's disease. Half will be randomly-assigned to take nabilone for six weeks and then a placebo for six weeks, with a week in between when they take neither. The other half will begin with six weeks of placebo, followed by a week off, and then six weeks of nabilone.

Dr. Lanctôt will measure changes in agitation, reported pain and weight gain. If all goes well, she hopes to progress to a larger clinical trial.

No Canadian with dementia should have to suffer severe agitation. Help the Alzheimer Society of Canada continue to fund this kind of research by giving to the Alzheimer Society Research Program. More information is available at www.alzheimer.ca.