

Long-Term Care Survey Alert

News Briefs: Survey & Clinical News To Use

Long-term care providers will soon have a new option to battle functional losses in the later stages of Alzheimer's disease. The U.S. Food & Drug Administration has approved a new medication called memantine (Namenda) for people with moderate to severe Alzheimer's. The drug should be on pharmaceutical shelves by January. Unlike existing Alzheimer's drugs that boost brain levels of acetylcholine (such as Aricept and Cognex), memantine blocks glutamate, a neurotoxic brain chemical.

"...[M]emantine is the first drug shown to have an effect on the symptoms of moderate to severe Alzheimer's Disease, and shows a low incidence of minor side effects," said FDA Commissioner **Mark McClellan**. The most frequently reported adverse events caused by the drug are dizziness (seven percent), headache (six percent), and constipation (six percent). **Tip:** Since memantine may interact with other medications, including antidepressants such as Prozac or MAO inhibitors, it's a good idea to get the consulting pharmacist involved in the care of residents receiving the new medication.

Does your facility administer enteral feedings tinted with blue dye? The FDA recently warned of deaths associated with enteral feedings containing FD&C Blue No. 1. As of September 2003, the FDA reports it is aware of 20 cases where the feedings led to blue discoloration of body fluids and skin, as well as more serious complications, including 12 reported deaths. In more than 75 percent of cases, patients had a reported history of sepsis (and therefore likely altered gut permeability), which may have made it easier for them to absorb the blue dye. In addition to the reported systemic toxicity, Blue 1-tinted enteral feedings may also interfere with the hemoccult test, according to the FDA. **Tip:** Don't substitute feedings containing other blue dyes, such as methylene blue and FD&C Blue No. 2, which the FDA believes may have similar if not greater toxicity potential than Blue 1.

Here's a study that confirms that the government has a central role to play in nursing home quality care. A study by MyZiva, a nursing home resource for consumers and health care professionals, found that government fiscal and regulatory policies have become a significant contributing factor to deficient nursing home care. The study suggests the government take a number of corrective steps, including establishing a set minimum standard for state Medicaid reimbursement; discarding wasteful regs and paper mandates; and supporting nursing homes committed to quality while actively prosecuting the chronic poor performers. **Tip:** The report includes some helpful tables comparing facilities' staffing levels and deficiencies, as well as state Medicaid rates. (To download the report, go to www.myziva.net/press/pressrel/myzivanetreport.pdf.)