

Best Evidence Summaries of Topics in Mental Healthcare

BEST *in* MH *clinical question-answering service*

Question

For adults with Alzheimer's Disease, how effective is Donezepil compared with other medications or no medication, in improving all patient outcomes?

Clarification of question using PICO structure

Patients:Adults with Alzheimer's DiseaseIntervention:DonezepilComparator:Other medications or no medicationOutcome:All patient outcomes



Clinical and research implications

Evidence from a systematic review, which included ten relevant randomised controlled trials, indicated that donezepil may have a small benefit for slowing decline in cognition, function, behaviour and clinical global change in patients with Alzheimer's disease. Both 5 mg/d and 10 mg/d doses appeared to be effective in patients with mild to moderate disease, however, evidence of effectiveness was restricted to the 10 mg/d dose in people with severe disease. The 10 mg/d dose, but not the 5 mg/d dose of donezepil, was associated with increased rates of adverse events and withdrawals.

All evidence was derived from placebo controlled trials; there were no studies providing direct comparisons of effectiveness between drugs. High quality studies comparing the effectiveness of different cholinesterase inhibitors and memantine are needed, as well as studies further investigating how effectiveness varies with disease severity.

What does the evidence say?

Number of included studies/reviews (number of participants)

We identified one systematic review which reported results relevant to this evidence summary. The review assessed the effectiveness of cholinesterase inhibitors and memantine for the management of people with Alzheimer's disease (AD) and included 23 studies, of which ten assessed the effectiveness of donezepil (5 mg/d or 10 mg/d). All studies included in the review were randomised, placebo-controlled trials; there were no direct comparisons of effectiveness between drugs. Three studies were conducted in people with severe AD, one in people with moderate to severe AD, four in people with mild to moderate/moderately severe AD, and one in people with mild AD; one study did not report details of disease severity. All studies lasted 24 weeks.

Main findings

Both doses of donezepil were associated with improvements in cognitive symptoms and clinical global impression, relative to placebo, in people with mild to moderate AD. Studies of behavioural symptoms and Activities of Daily Living (ADL) were conducted in people with severe or moderate-to-severe AD: 10 mg/d donezepil was associated with improvements in behavioural symptoms relative to placebo and 5 mg/d donezepil was not assessed by any study; 10 mg/d donezepil was associated with a small improvement in ADL relative to placebo, but 5 mg/d had no significant effect. Overall, the 10 mg/d dose of donezepil was generally associated with increased rates of adverse events and withdrawals relative to placebo, whereas the 5 mg/d dose was not.

Author's conclusions

Cholinesterase inhibitors, including Donezepil, were associated with modest overall benefits for slowing decline in cognition, function, behaviour and clinical global change of patients with Alzheimer's disease. Compared with placebo, more dropouts and adverse events occurred with the cholinesterase inhibitors.

Reliability of conclusions/Strength of evidence

The evidence included in this summary was derived from one systematic review, which included ten relevant randomised controlled trials. The review methods were poorly reported with respect to the

study selection, data extraction and quality assessment processes and it is therefore not possible to adequately assess the risk of bias in this review.

What do guidelines say?

The National Institute for Health and Care Excellence (NICE) guidelines, 'Donezepil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease' (2011), make the following comments on the effectiveness of donezepil compared with other medications or no medication, in improving all patient outcomes:

"4.1.5 For donepezil, the Assessment Group found no new studies reporting the Alzheimer's Disease Assessment Scale – cognitive subscale (ADAS-cog) at 12 or 24 weeks or MMSE at 12 weeks. The effectiveness estimates using these scales were therefore based on the studies included in NICE technology appraisal guidance 111. One new study was found that measured the effect of donepezil on cognition at 24 weeks follow-up. The overall pooled benefit using new and old data was significant on all scales (a mean change from baseline versus placebo of 1.165 [p < 0.001] and 1.206 [p < 0.001] at 12 and 24 weeks respectively using MMSE score, and -1.969 [p = 0.006] and -2.895 [p < 0.001] at 12 and 24 weeks respectively using ADAS-cog score) and the standardised mean difference of pooled outcomes increased with time for ADAS-cog. According to the manufacturer of donepezil, all 12 randomised controlled trials (from NICE technology appraisal guidance 111 and new submissions that reported on cognition using the ADAS-cog, MMSE or Severe Impairment Battery [SIB] scales) showed a statistically significant difference favouring donepezil versus placebo, with four of these reporting a statistically significant difference on two different cognitive scales. (p12)

4.1.8 ...A submitted meta-analysis of ten trials also showed significant improvement in global function compared with placebo using the [clinical dementia rating; (CDR)]" (p13)

4.1.30 The Assessment Group identified four head-to-head randomised controlled trials (two comparing all three AChE inhibitors, one comparing donepezil with rivastigmine and one comparing donepezil with galantamine) but considered only one of the studies to be of sufficiently high quality to inform this review. The included study (which compared donepezil with rivastigmine) noted that over 2 years there was no statistically significant difference between rivastigmine and donepezil for cognitive outcomes (MMSE and SIB). Patients taking rivastigmine had significantly improved outcomes than those taking donepezil in the primary analysis of functional outcomes (p = 0.007–0.047). No significant difference was seen between donepezil and rivastigmine for behavioural outcomes (NPI). The study showed that patients taking rivastigmine did significantly better than those taking donepezil in terms of global outcomes (GDS). only one of the studies to be of sufficiently high quality to inform this review.

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The evidence included in this summary is consistent with current guidance.

Date question received:	03/07/2015
Date searches conducted:	14/07/2015
Date answer completed:	27/07/2015

References

Systematic reviews

Tan, C. C., Yua, J. T., Wangb, H. F., Tanc, M. S., Menga, X. F., & Wanga, C. (2014). Efficacy and safety of donepezil, galantamine, rivastigmine, and memantine for the treatment of Alzheimer's disease: a systematic review and meta-analysis. *Journal of Alzheimer's Disease*, *14*, 15.

Guidelines

The National Institute for Health and Care Excellence (2011). *Donezepil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease*, NICE Technology Appraisal Guidance 217. Retrieved at: <u>http://www.nice.org.uk/guidance/ta217/resources/guidance-donepezil-galantamine-rivastigmine-and-memantine-for-the-treatment-of-alzheimers-disease-pdf</u>

Results

Systematic reviews

Author	Search	Inclusion criteria	Number of	Summary of results	Risk of bias
(year)	date		included		
			studies		
Tan et al.	11/2013	Participants:	23 (10	This systematic review aimed to assess the	The research
(2014)		Patients with probable or possible Alzheimer's	studies on	efficacy and safety of donepezil,	objective was
		Disease (AD) (according to the Diagnostic	Donepezil)	galantamine, rivastigmine, and memantine	clearly stated and
		and Statistical Manual of Mental Disorders—		for the treatment of Alzheimer's disease.	appropriate
		Fourth Edition (DSM-IV)) and the National			inclusion criteria
		Disorders and Stroke (Alabeimer's Disease and		All of the studies included in the review were	were defined.
		Pelated Disorders Association (NINCDS-ADRDA)		placebo controlled trials; there were no	
				direct comparisons between treatments. Ten	A range of
		Intervention:		of the 23 studies included in the review	bibliographic
		Cholinesterase inhibitor (donenezil		assessed the effectiveness of donezepil.	databases and
		galantamine rivastigmine) or memantine. Ten		Baseline participant caharcateristics (age,	conference
		studies investigated donezenil: 4 studies used a		gender and MMSE score) were similar in the	proceedings were
		fixed dose of 5mg (per day) 5 studies used a		treatment and placebo groups. Nine studies	searched and
		fixed dose of 10mg 3 adopted a flexible dose		assessed 10 mg/d donezepil and four studies	search terms were
		regimen ranging between 5 and 10mg. All		assessed 5 mg/d (three studies assessed	reported.
		studies lasted 24 weeks		both doses). Seven studies used fixed doses	
				of donezepil and three had flexible dosing	No details of the
		Comparator:		regimens. Three studies were conducted in	processes of study
		Placebo		people with severe AD, one in people with	selection and data
				moderate to severe AD, four in people with	extraction, or the
		Outcome:		mild to moderate/moderately severe AD,	numbers of
		(i) Cognitive function (in 4 studies), measured by		and one in people with mild AD; one study	reviewers involved

the Alzheimer's Disease Assessment Scale	did not report details of disease sev	verity. All were reported.
(ADAS-cog); (ii) Global assessment (in 5 studies),	studies had a duration of 24 weeks.	
Alzheimer's Disease Cooperative Study-Activities		A brief description
of Daily Living (ADCS/ADL); (iii) Behavioural	Cognitive function:	of randomisation
symptoms (in 3 studies), measured by the	Donezepil was associated with grea	ter and analysis
Neuropsychiatric Inventory (NPI); (IV) Functional	reductions in cognitive impairment	(ADAS- methods was
$\Delta DCS / \Delta DI \cdot (y)$ Safety and tolerability (in all 10	cog) than placebo, at both 5 mg/d a	and 10 provided (no
studies) including dropout rates	mg/d doses: weighted mean differe	ence details for
	(WMD) -1.95 (95% CI: -2.60 to -1.29), 3 individual studies),
Study design:	studies in people with mild to mode	erate AD; but no formal
Double-blind parallel-group randomised	WMD -2.48 (95% CI: -3.23 to -1.73),	4 studies methodological
controlled trials (RCTs), with at least 20 weeks	(3 in people with mild to moderate	AD and 1 quality assessment
treatment duration.	in people with mild AD).	was described. The
		methods used to
	Global assessment:	blind study
	Donezepil was associated with high	er participants
	numbers of participants with impro	vements (treatments
	on the Clinicians' Global Impression	of matched on
	Change scale (CIBIC+) than placebo	, at both appearance) were
	5 mg/d and 10 mg/d doses: Risk rat	io (RR) also described and
	1.55 (95% CI: 1.19 to 2.00), 3 studie	s in erroneously
	people with mild to moderate AD; F	R 1.66 reported as
	(95% CI: 1.38 to 2.00), 5 studies (4 i	n people allocation
	with mild to moderate AD and 1 in	people concealment. The
	with severe AD). No sensitivity anal	yses were review authors
	reported, however, the study cond	ucted in stated that "studies
	people with severe AD showed no	with fatal flaws in
	statistically significant treatment ef	fect, study design or
		data analysis were

		Behavioural symptoms:	excluded," but did
		Three studies assessed the effect of 10 mg/d	not provide any
		donezepil on behavioural symptoms	further details.
		measured by the Neuropsychiatric Inventory	
		(NPI) scale. One study was conducted in	Meta-analyses used
		people with severe AD, one in people with	a fixed effect
		moderate to severe AD and one did not	model. This was
		report disease severity. Results of meta-	broadly
		analysis indicated that donezepil was	appropriate as,
		associated with greater reductions in	although there
		behavioural symptoms than placebo: WMD -	were high levels of
		2.72 (95% CI: -4.92 to -0.52), however,	statistical
		statistical heterogeneity was high.	heterogeneity in
			some analyses the
		Functional outcome:	numbers of studies
		Three studies assessed the effects of	were frequently
		donezepil on Activities of Daily Living	too small to
		(ADCS/ADL); all were conducted in people	support a random
		with severe AD. One study assessed 5 mg/d	effects model.
		donezepil and found no significant	Analyses were
		treatment effect. Meta-analysis indicated	stratified by
		that 10 mg/d donezepil was associated with	treatment dose.
		a small improvement in ADL compared to	Sensitivity analyses
		placebo: WMD 1.03 (95% CI: 0.21 to 1.85), 3	were used to
		studies.	investigate the
			possible effects of
		Safety and tolerability:	disease severity,
		There was no significant difference in the	for galantamine
		number of all cause withdrawals between 5	and functional

		mg/d donezepil and placebo: RR 0.91 (95%	outcome.
		CI: 0.71 to 1.17), 3 studies. However, all	
		cause withdrawal rates were higher for 10	
		mg/d donezepil than for placebo: RR 1.31	
		(95% CI: 1.12 to 1.53), 8 studies. Results	
		were similar for withdrawals caused by	
		adverse events. For specific adverse events,	
		there were no significant differences	
		between 5 mg/d donazepil and placebo in	
		the rates of nausea, vomiting, anorexia,	
		dizziness, or headache; donezepil was	
		associated with increased risk of diarrhoea.	
		By contrast, 10 mg/d donezepil was	
		associated with an increased risk of all	
		specified adverse events except headache.	

Risk of bias

Systematic reviews

Author (year)	RISK OF BIAS					
	Inclusion criteria	Searches	Review process	Quality assessment	Synthesis	
Tan 2014		\odot	?	?		



😕 High risk ? Unclear risk

Search details

Source	Search Strategy	Number of hits	Relevant evidence identified
Guidelines			
NICE	donepezil alzheimer	9	1
Systematic Reviews	•	•	
MEDLINE	 Medline; (Donepezil OR Aricept).ti,ab; 2424 results. Medline; exp ALZHEIMER DISEASE/; 69431 results. Medline; Alzheimer*.ti,ab; 96660 results. Medline; 2 OR 3; 107121 results. Medline; 1 AND 4; 1636 results. Medline; (("systematic* review*") OR meta-analytic* OR metanalysis OR metaanalysis OR ("meta analysis") OR meta-synthesis OR metasynthesis OR ("meta synthesis") OR meta-regression OR ("meta regression OR ("meta regression") OR (synthes* adj3 literature) OR (synthes* adj3 evidence) OR ("integrative review") OR ("data synthesis") OR ("research synthesis") OR ("narrative synthesis") OR ("systematic study") OR ("systematic studies"))).ti,ab; 129153 results. Medline; meta-analysis.ti,ab,pt; 81638 results. Medline; (("systematic comparison*") OR ("systematic overview*") OR ("evidence based review") OR ("realist review") OR ("critical review") OR ("quantitative review") OR ("structured review") OR ("realist review") OR ("realist synthesis"))).ti,ab; 23752 results. Medline; ((medline OR pubmed OR cochrane OR embase OR cinahl OR psyclit OR psycinfo OR psychlit OR psychinfo OR (literature adj3 search*) OR ("included studies") OR (computerised adj3 search*) OR (computerised adj3 search*) OR (inclusion studies") OR ("inclusion studies")).ti,ab; 13.6425 results. 	81	1

	 psychinfo OR (literature adj3 search*) OR (database* adj3 search*) OR (bibliographic adj3 search*) OR (electronic adj3 database*) OR (computerized adj3 search*) OR (computerised adj3 search*) OR (internet adj3 search*) OR ("included studies") OR ("inclusion studies") OR ("inclusion criteria") OR ("selection criteria") OR ("predetermined criteria")).ab; 180865 results. 13. Medline; ((("predefined criteria") OR (assess* adj3 (quality OR validity)) OR (select* adj3 (study OR studies)) OR (data adj3 abtracted) OR (data adj3 abstraction) OR ("published intervention") OR ((study OR studies) adj2 evaluat*) OR (intervention* adj2 evaluat*) OR ("confidence interval") OR heterogeneity OR pooled OR pooling OR ("odds ratio*") OR Jadad OR coding)).ab; 921867 results. 14. Medline; 11 OR 12 OR 13; 1043858 results. 15. Medline; 10 AND 14; 91920 results. 18. Medline; ((review* adj4 (papers OR trials OR studies OR evidence OR intervention* OR evaluation*))).ti, ab; 134956 results. 19. Medline; 10 OR 15 OR 17 OR 18; 277206 results. 20. Medline; (etter OR editorial OR comment).pt; 1404081 results. 21. Medline; 21 NOT 22; 4020382 results. 23. Medline; 21 NOT 22; 4020382 results. 24. Medline; 20 OR 23; 5370109 results. 25. Medline; 19 NOT 24; 260123 results. 26. Medline; 19 NOT 24; 260123 results. 27. Medline; 25 [Limit to: Publication Year 2006-2015]; 181386 results. 27. Medline; 5 AND 26 [Limit to: Publication Year 2006-2015]; 81 results. 		
EMBASE	1. EMBASE; (Donepezil OR Aricept).ti,ab; 3673 results.	80	1
	3. EMBASE; Alzheimer*.ti,ab; 129801 results.		
	4. EMBASE; 2 OR 3; 159530 results.		
	5. EMBASE; 1 AND 4; 2518 results.		
	6. EMBASE; 5 [Limit to: (EBM-Evidence Based Medicine Meta Analysis or Systematic Review)]; 130 results.		

	7. EMBASE; 6 [Limit to: (EBM-Evidence Based Medicine Meta Analysis or Systematic Review) and Publication		
	Year 2006-2015]; 80 results.		
PsycINFO	1. PsycInfo; (Donepezil OR Aricept).ti,ab; 1227 results.	35	0
	2. PsycInfo; exp ALZHEIMER DISEASE/; 2318 results.		
	3. PsycInfo; Alzheimer*.ti,ab; 43687 results.		
	4. PsycInfo; 2 OR 3; 43766 results.		
	5. PsycInfo; 1 AND 4; 798 results.		
	6. PsycInfo; ((systematic* adj1 review*) OR meta-analytic* OR metanalysis OR metaanalysis OR (meta adj1		
	analysis) OR meta-synthesis OR metasynthesis OR (meta adj1 synthesis) OR meta-regression OR . AND		
	metaregression OR (meta adj1 regression) OR (synthes* adj3 literature) OR (synthes* adj3 evidence) OR		
	(integrative adj1 review) OR (data adj1 synthesis) OR (research adj1 synthesis) OR (narrative adj1 synthesis)		
	OR (systematic adj1 study) OR (systematic adj1 studies)).ti,ab; 37460 results.		
	7. PsycInfo; meta-analysis.ti,ab,pt; 16118 results.		
	8. PsycInfo; ((systematic adj1 comparison*) OR (systematic adj1 overview*) OR (evidence based review) OR		
	(comprehensive adj1 review) OR (critical adj1 review) OR (quantitative adj1 review) OR (structured adj1		
	review) OR (realist adj1 review) OR (realist adj1 synthesis)).ti,ab; 22471 results.		
	9. PsycInfo; 6 OR 2 OR 7 OR 8; 56286 results.		
	10. PsycInfo; review.pt; 115062 results.		
	11. PsycInfo; (medline OR pubmed OR cochrane OR embase OR cinahl OR psyclit OR psycinfo OR psychlit OR		
	psychinfo OR (literature adj3 search*) OR (database* adj3 search*) OR (bibliographic adj3 search*) OR		
	(electronic adj3 search*) OR (electronic adj3 database*) OR (computerized adj3 search*) OR (computerised		
	adj3 search*) OR (internet adj3 search*) OR (included adj1 studies) OR (inclusion adj3 studies) OR (inclusion		
	adj1 criteria) OR (selection adj1 criteria) OR (selection adj1 criteria) OR (predetermined criteria)).ab;		
	3653167 results.		
	12. PsycInfo; ((predefined adj1 criteria) OR (assess* adj3 (quality OR validity)) OR (select* adj3 (study OR		
	studies)) OR (data adj3 extract*) OR (extracted adj1 data) OR (data adj2 abstracted) OR (data adj3		
	abstraction) OR (published adj1 intervention) OR ((study OR studies) adj2 evaluat*) OR (intervention* adj2		
	evaluat*) OR (confidence adj1 interval) OR heterogeneity OR pooled OR pooling OR (odds adj1 ratio*) OR		
	Jadad OR coding).ab; 131412 results.		
	13. PsycInfo; 10 OR 11 OR 12; 3653167 results.		
	14. PsycInfo; 9 AND 13; 55958 results.		

	15. PsycInfo; review.ti; 122999 results.		
	16. PsycInfo; 13 AND 15; 122468 results.		
	17. PsycInfo; ((review* adj4 (papers OR trials OR studies OR evidence OR intervention* OR		
	evaluation*))).ti,ab; 52677 results.		
	18. PsycInfo; 9 OR 14 OR 16 OR 17; 192131 results.		
	19. PsycInfo; (letter OR editorial OR comment).pt; 156316 results.		
	20. PsycInfo; exp ANIMALS/; 6773 results.		
	21. PsycInfo; exp HUMANS/; 1795 results.		
	22. PsycInfo; 20 NOT 21; 6460 results.		
	23. PsycInfo; 19 OR 22; 162445 results.		
	24. PsycInfo; 18 NOT 23; 185104 results.		
	25. PsycInfo; META ANALYSIS/; 14573 results.		
	26. PsycInfo; 24 OR 25; 186607 results.		
	27. PsycInfo; 26 [Limit to: Publication Year 2006-2015]; 100970 results.		
	28. PsycInfo; 5 AND 27 [Limit to: Publication Year 2006-2015]; 35 results.		
Primary Studies			
MEDLINE	2. Medline; exp ALZHEIMER DISEASE/; 69431 results.	151	0
	3. Medline; Alzheimer*.ti,ab; 96660 results.		
	4. Medline; 2 OR 3; 107121 results.		
	5. Medline; (Donepezil OR Aricept).ti; 1218 results.		
	6. Medline; 4 AND 5; 797 results.		
	7. Medline; RANDOMIZED CONTROLLED TRIALS AS TOPIC/; 96724 results.		
	8. Medline; RANDOMIZED CONTROLLED TRIAL/; 0 results.		
	9. Medline; RANDOM ALLOCATION/; 83082 results.		
	10. Medline; DOUBLE-BLIND METHOD/; 128910 results.		
	11. Medline; SINGLE-BLIND METHOD/; 20353 results.		
	12. Medline; CLINICAL TRIAL/; 0 results.		
	13. Medline; CLINICAL TRIAL, PHASE I/ OR CLINICAL TRIAL, PHASE II/ OR CLINICAL TRIAL, PHASE III/ OR		
	CLINICAL TRIAL, PHASE IV/; 0 results.		
	14. Medline; CONTROLLED CLINICAL TRIAL/; 0 results.		
	15. Medline: MULTICENTER STUDY/: 0 results.		

	 Medline; CLINICAL TRIALS AS TOPIC/; 171918 results. Medline; 7 OR 8 OR 9 OR 10 OR 11 OR 12 OR 13 OR 14 OR 15 OR 16; 454855 results. Medline; ((clinical ADJ trial*) OR ((singl* OR doubl* OR treb* OR tripl*) adj3 (blind* OR mask*)) OR placebo* OR (randomly adj1 allocated) OR (allocated adj2 random*)).ti,ab; 434603 results. Medline; PLACEBOS/; 32647 results. Medline; 18 OR 19; 445592 results. Medline; 17 OR 20; 701837 results. Medline; 6 AND 21; 297 results. Medline; 22 [Limit to: Publication Year 2006-2015]; 151 results 		
EMBASE	 EMBASE; (Donepezil OR Aricept).ti,ab; 3673 results. EMBASE; exp ALZHEIMER DISEASE/; 135974 results. EMBASE; Alzheimer*.ti,ab; 129801 results. EMBASE; 2 OR 3; 159530 results. EMBASE; 1 AND 4; 2518 results. EMBASE; 5 [Limit to: (Clinical Trials Randomized Controlled Trial) and Publication Year 2006-2015]; 161 results. 		
CENTRAL	#1 (Donepezil or Aricept) 1013 #2MeSH descriptor: [Alzheimer Disease] 2261 #3 #1 and #2 269 Central only 180	180	0

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