

Drug treatment for Alzheimer's disease: Ebixa or Memantine

Introduction

Ebixa is a brand name for the drug memantine. It is licensed for the treatment of moderately severe to severe Alzheimer's disease, and was launched in October 2002 by the drug company Lundbeck Ltd. It is different from the other drugs available in the UK??SA for Alzheimer's disease because they are all licensed for the mild to moderate stages.

Ebixa is not claimed to be a cure for Alzheimer's disease. It treats only the symptoms and there is no evidence to show that it could halve or reverse the process of cell damage that causes Alzheimer's disease.

This information sheet is for families and carers of people with Alzheimer's disease, and for anyone else interested in the treatment of Alzheimer's disease.

Who might benefit?

Ebixa is licensed only for people with Alzheimer's disease who are in the moderately severe to severe stages of the illness. It is not licensed for people with other kinds of dementia, although some research is being done into whether it is effective for people with other types such as vascular dementia.

There are also ongoing studies on whether it could help people in the earlier stages of dementia.

Effects

Ebixa has been used for treating people with dementia in Germany for over 10 ???years. Over the past few years, studies have been done which show that it can be effective in helping people in the later stages of the illness.

Unfortunately, Ebixa will not help everyone who tries it, but one study showed that about two thirds benefited, to a greater or lesser extent. However, in the same study, around 45% of patients on placebo (dummy pill) also benefited. The study showed improvement in practical matters such as getting up, washing, getting dressed and going to the toilet. People who were helped by the drug needed less help from carers. The drug also improved scores in tests of cognition (thinking and understanding).

Another study showed that both the group treated with Ebixa and those on the placebo got worse over six months, but those on Ebixa declined less². The result of the studies are

averages, so some people did better and some worse than the average. It is not possible to tell whether the drug will have an effect for any particular person.

How to get treatment

Treatment is normally started by a specialist. If you think the person you care for might benefit from Ebixa, the first step is to talk to the person's specialist (such as a psychiatrist, old age psychiatrist, neurologist or geriatrician), or to his or her GP who can refer him or her to a specialist.

It is important that the person has a proper diagnosis and assessment to make sure that it is in fact Alzheimer's disease, and that it is the moderately severe to severe stage of the illness. If the treatment is suitable, the specialist may prescribe it or refer the person back to the GP for a prescription.

Whether or not the person you care for is suitable for drug treatment, the doctor can give you information on local services which may help to cope with the illness. You can also contact Dementia SA on (021) 421 0077/78 for information or to talk things over.

How is it taken?

Ebixa usually comes in 10mg tablets. To start with, the person will probably be prescribed half a tablet every morning, building up to one tablet twice a day after four weeks. This is to reduce the risk of side effects. The tablets can be taken with or without food.

It also comes in drops for people who have difficulty with tablets. In this case, the person will usually start on 10 drops every morning, building up to 20 drops twice a day. The drops can be taken directly or put on food.

Side effects

A small number of people taking Ebixa have experienced side effects, usually not severe. These included hallucinations, confusion, dizziness, headache and tiredness.

Talk to the doctor if these, or any other new symptoms occur.

Other drugs

Ebixa may interact with some other drugs, so make sure the doctor knows what else the person is taking.

Other conditions

Check with the doctor if the person has kidney problems, as he or she may need a reduced dose or may be unsuitable for treatment. The drug should be used with care in people with epilepsy, heart problems or high blood pressure.

Don't make a drastic change in the person's diet (for example, putting him or her onto a vegetarian diet if he or she normally eats meat) without consulting the doctor first.

Overdose

If the person has taken too much Ebixa, contact a doctor or hospital straightaway. Keep any remaining tablets and the packaging so that you can tell them how much he or she has taken.

Stopping the drug

It is best to discuss with the doctor when to stop the drug. However, it is possible to stop immediately if you feel this is necessary. Talk to the doctor as soon as possible.

If it is not clear whether the drug is having an effect, the doctor may advise you to stop it for a few days to see if there is any change in the person's condition.

Cost

When the first drugs for Alzheimer's disease became available, some people were not at first able to get prescriptions on the UK National Health Service because health authorities did not make the drugs available.

However, some people have continued to have difficulties in obtaining them, depending on local funding levels and some people have had to pay for private prescriptions to obtain treatment. It is not yet clear whether people will experience any difficulty in obtain Ebixa on the NHS.

How it works

Alzheimer's disease and some other types of dementia damage brain cells. This causes some cells to release too much of a chemical called glutamate, which carries messages between brain cells.

Too much glutamate can damage cells further, because when it sticks to 'docking sites' on the surface of a cell, too much calcium can get in to the cell and damage it. Ebixa sticks to the same docking sites, blocking glutamate, so that it can't let too much calcium in. The docking sites are called 'N-methyl-D-aspartate (NMDA) receptors', and Ebixa is sometimes referred to as an 'NMDA receptor antagonist'.

The damage Alzheimer's disease causes to brain cells also reduces the supply of another brain chemical, which is needed to carry messages, called acetylcholine.

The other drugs currently licensed for treating Alzheimer's disease all increase the amount of acetylcholine. Because Ebixa works differently, it may be that the two types of drug could be taken together, and researchers are looking at whether this might be safe and effective.



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