

Aripiprazole

Delirium is reported in over 50% of critically ill ICU patients, and is associated with increased mortality and long-term cognitive consequences. Prevention and early management of delirium are essential components of ICU care. However, pharmacological interventions have not been effective in delirium prevention.

A study investigated the effect of aripiprazole on the prevention of **delirium** in a **neurosurgical intensive care unit**.

In this prospective, randomized placebo-controlled small clinical trial, 53 patients, 18 to 80 years old, were randomized to receive enteric aripiprazole (15 mg) or placebo for up to 7 days. Delirium, detected by the Confusion Assessment Method-ICU, ICU events, laboratory studies, aripiprazole safety, time to delirium onset, delirium-free days, delirium prevalence during follow-up and ICU length of stay were recorded.

Forty patients with similar baseline characteristics, including age, sex, neurosurgery types and APACHE II scores, completed the study. Delirium incidence and the mean days to its onset were 20% vs. 55% ($p = 0.022$) and 2.17 ± 0.41 vs. 2.09 ± 0.30 ($p = 0.076$) in the aripiprazole and placebo groups, respectively. The mean number of delirium-free days were: 5.6 (95%CI, 4.6-6.5) and 4.3 (95%CI, 3.2-5.4), in aripiprazole and placebo groups, respectively ($p = 0.111$). The prevalence of delirium during the follow-up was significantly lower in the aripiprazole group ($p = 0.018$). Serious aripiprazole adverse reactions were not observed.

Aripiprazole can reduce the incidence of delirium in the neurosurgical ICU. Studies with larger sample size in diverse ICU settings and longer follow-up are needed to confirm our findings ¹⁾.

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Mokhtari M, Farasatinasab M, Jafarpour Machian M, Yaseri M, Ghorbani M, Ramak Hashemi SM, Nikoobakht M, Golchin N, Mohammadi G, Sistanizad M. Aripiprazole for prevention of delirium in the neurosurgical intensive care unit: a double-blind, randomized, placebo-controlled study. Eur J Clin Pharmacol. 2020 Jan 3. doi: 10.1007/s00228-019-02802-1. [Epub ahead of print] PubMed PMID: 31900543.

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