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Treatment of tardive dyskinesia with donepezil: a pilot study.

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Abstract

BACKGROUND: **Tardive dyskinesia** (TD) remains a significant clinical problem for which there is no uniformly effective **treatment**. Earlier trials with acetylcholine precursors may have been disappointing because of underlying damage to striatal cholinergic neurons in patients with TD. In contrast, new cholinesterase inhibitors, developed for the **treatment** of dementia, may improve TD by directly increasing cholinergic synaptic transmission.

METHOD: We conducted an 8-week open-label trial of **donepezil** in the **treatment** of TD. Ten patients with schizophrenia or schizoaffective disorder who received stable doses of antipsychotics and met DSM-IV criteria for TD were treated with **donepezil**, 5 to 10 mg/day, for 6 weeks after a 2-week baseline period. Changes in total Abnormal Involuntary **Movement** Scale (AIMS) scores measured every 2 weeks were assessed for significance. Patients were also assessed using the Brief Psychiatric Rating Scale, the Mini-Mental State Examination, the Barnes Akathisia Scale, and the Simpson-Angus Scale.

RESULTS: Total AIMS scores decreased significantly ($p = .0009$), with no changes in other measures. Nine patients showed a positive response. Improvement was greatest in orofacial and upper extremity movements. No significant interactions were noted between the total AIMS scores and age ($p > .29$), duration of TD ($p > .38$), or duration of antipsychotic **treatment** ($p > .14$).

CONCLUSION: **Donepezil** appeared to be effective in suppressing TD in this **pilot study**. However, placebo-controlled, double-blind studies are necessary before **donepezil** can be recommended as a **treatment** for TD.

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