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EFFECT OF TREATMENT GAPS IN ELDERLY PATIENTS WITH DEMENTIA TREATED WITH CHOLINESTERASE INHIBITORS

Erika Droogsmma, Leeuwarden; N.J.G.M. Veeger, Groningen; P.E. van Walderveen, S.M. Niemarkt, D.Z.B. van Asselt, Leeuwarden, the Netherlands:

Pariente et al.¹ concluded that “Treatment gaps do not compromise the outcome of patients treated with cholinesterase inhibitors in a real-life setting.” However, their conclusion is based on the effect of treatment gaps on risk of institutionalization and death, rather than on disease-specific endpoints. It has been shown that the beneficial effect of cholinesterase inhibitors on cognition, an important disease-specific endpoint, disappears within 3 weeks of discontinuation.^{2,3} In addition, as mentioned by Pariente et al., treatment gaps are likely to occur in patients in whom reinitiation of treatment is

worthwhile. From this, we infer that selection may have played a role, consequently limiting the generalizability of the study to a real-life setting.⁴ This study is welcome because the authors address an important issue. However, because of these caveats, clinicians should not discontinue treatment too readily, as discontinuation of treatment does affect cognition, thereby compromising the outcome of patients.

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Erika Droogsma, N.J.G.M. Veeger, P.E. van Walderveen, et al.

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