Suvorexant: An option for preventing delirium?

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Delirium is characterized by a disturbance of consciousness or cognition that typically has a rapid onset and fluctuating course.[1] Up to 42% of hospitalized geriatric patients experience delirium.[1] Approximately 10% to 31% of these patients have the condition upon admission, and the remainder develop it during their hospitalization.[1] Unfortunately, options for preventing or treating delirium are limited. Benzodiazepines and antipsychotic medications have been used to treat problematic behaviors associated with delirium, but they do not effectively reduce the occurrence, duration, or severity of this condition.[2,3]

Recent evidence suggests that suvorexant, which is FDA-approved for insomnia, may be useful for preventing delirium. Suvorexant—a dual orexin receptor (OX1R, OX2R) antagonist—promotes sleep onset and maintenance, and is associated with normal measures of sleep activity such as rapid eye movement (REM) sleep, non-REM sleep, and sleep stage–specific electroencephalographic profiles.[4] Here we review 3 studies that evaluated suvorexant for preventing delirium.

Hatta et al.[5] In this randomized, placebo-controlled, blinded, multicenter study, 72 patients (age 65 to 89) newly admitted to an ICU were randomized to suvorexant, 15 mg/d, (n = 36) or placebo (n = 36) for 3 days.[5] None of the patients taking suvorexant developed delirium, whereas 17% (6 patients) in the placebo group did (P = .025).[5]

Azuma et al.[6] In this 7-day, blinded, randomized study of 70 adult patients (age ≥20) admitted to an ICU, 34 participants received suvorexant (15 mg nightly for age <65, 20 mg nightly for age ≥65) and the rest received treatment as usual (TAU). Suvorexant was associated with a lower incidence of delirium symptoms (n = 6, 17.6%) compared with TAU (n = 17, 47.2%) (P = .011).[6] The onset of delirium was earlier in the TAU group (P < .05).[6]

Hatta et al.[7] In this large prospective, observational study of adults (age >65), 526 patients with significant risk factors for delirium were prescribed suvorexant and/or ramelteon. Approximately 16% of the patients who received either or both of these medications met DSM-5 criteria for delirium, compared with 24% who did not receive these medications (P = .005).[7]

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Disclosures

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