Evaluation of Anxiolytic and Antipsychotic Use at Inpatient Rehabilitation Hospital During the COVID-19 Pandemic





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Objective: To evaluate the administration of anxiolytic and antipsychotic medications to patients in an inpatient rehabilitation facility (IRF) during coronavirus disease-19 (COVID-19) pandemic.

Setting: Free standing 58-bed IRF affiliated with academic institution.

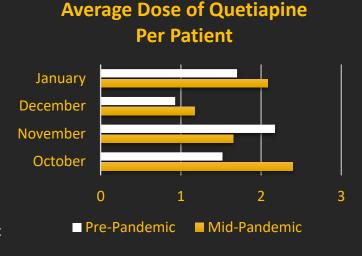
Timing: Data were collected from October 2019 to January 2020 (pre-pandemic) and October 2020 to January 2021 (mid-pandemic).

Participants: All patients admitted to IRF during period studied.

Medications reviewed: Benzodiazepines, hydroxyzine, propranolol, quetiapine.

Methods: Independent samples t-test was conducted to compare total administrations of each medication pre-pandemic and midpandemic, as well as average dose of each medication per patient per month pre-pandemic and mid-pandemic.

Total Administrations Pre-Pandemic Mid-Pandemic Benzodiazepines Hydroxyzine Propranolol Quetiapine



Results:

- There was a nonsignificant reduction in total administrations of propranolol, benzodiazepines, and hydroxyzine (39%, 38%, 25% reduction, respectively) after the declaration of the pandemic.
- Total administrations of quetiapine slightly increased midpandemic, although this was statistically insignificant.
- The average dose of quetiapine per patient increased during the pandemic, although not to a significant degree.
- The average dose of propranolol per patient decreased or remained stable mid-pandemic.
- The average doses of hydroxyzine and benzodiazepines per patient did not demonstrate a consistent change relative to the pandemic.

Conclusions:

800 1000

600

- The reduction in total administrations of anxiolytic medications, although not significant in this study, may be due to improved nonpharmacologic means of managing anxiety, use of maintenance medications for anxiety, or differences in patient population relative to the pandemic.
- The slight increase in average dose of quetiapine per patient may be due to increased agitation because of the pandemic itself or related to possible delirium in the rehabilitation setting due to visitor policy restrictions and masking policy during the COVID-19 pandemic.