Treating Behavioral and Psychiatric Symptoms of Dementia with gabapentin is a promising alternative to psychotropics but an RCT is needed to evaluate for efficacy, indications, and dosing recommendations.

Gabapentin Relevant Facts:
- Molecule is a cyclohexyl group added to the backbone of GABA
- Uptake at small intestine, relies on “diffusion and facilitated transport.”
- Neuropathic pain dosing:
  - Immediate Release: 300mg qd -> 300mg TID
  - Needs renal dosing
  - Common side effects: Lightheaded, sleepy, peripheral edema, tired
  - Half Life: 4.8-8.7 hours
- Serious withdraw symptoms include seizures

Source:
2. Parke-Davis. Pfizer Gabapentin packaging insert. 2017