

## Modified Anticholinergic Risk Scale (mARS)

Rudolph JL, Salow MJ, Angelini MC, McGlinchey RE. The anticholinergic risk scale and anticholinergic adverse effects in older persons. Arch Intern Med 2008; 168: 508-13.

	mARS category 3	mARS category 2	mARS category 1	Guidance
Antidepressants	Amitriptyline Imipramine	Desipramine Trimipramine Nortriptyline Clomipramine Sertraline	Trazodone Mirtazapine Paroxetine Lofepamine	Venlafaxine, duloxetine, bupropion and trazadone have low-to-nil systemic anticholinergic activity.
Antipsychotics	Thioridazine Fluphenazine Perphenazine Chlorphenamine Chlorpromazine Promethazine Trifluorperazine	Clozapine Doxepin Olanzapine Levomepromazine Pericyazine	Quetiapine Risperidone Haloperidol	Avoid phenothiazines. Among atypical antipsychotics, aripiprazole and ziprasidone are the least anticholinergic.
Nausea and vertigo		Prochlorperazine	Metoclopramide	Domperidone.
Urinary antispasmodics	Oxybutynin	Fesoterodine Flavoxate Darifenacin Trospium Dosulepin Solifenacin Tolterodine		Review effectiveness and reassess continued need. Non anticholinergic drugs from a different class, e.g. mirabegron may be considered as an alternative in patients with high ACB in line with NICE TA 290.
Sedatives	Clemastine Hydroxyzine Cyproheptadine			Avoid antihistamine sedatives.
Antiallergics		Cetirizine Loratidine		Desloratadine may be an alternative.
H2 Blockers		Cimetidine	Rantitidine	PPIs may be an alternative.

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Antiparkinson	Procyclidine Benztropine	Amantadine	Levodopa Carbidopa Selegiline Entacapone Pramipexole	
Others	Atropine Dicyclomine Orphenadrine Tizanidine	Loperamide Tiotropium Pseudoephedrine Baclofen Propiverine	Methocarbamol Reboxetine	