Preventing Dangerous Effects of POLYPHARMACY in Elderly Patients

**POLYPHARMACY**

Polypharmacy, or taking multiple prescription medications to manage just one health issue, is becoming an epidemic in elderly patients. Polypharmacy, and the risks associated with taking multiple medications, can seriously affect elderly patients’ health. By knowing the risks and staying alert, nurses can ensure their elderly patients aren’t being overly medicated.

**A COMMON PROBLEM:**

Polypharmacy can be hard to spot, as it typically happens when elderly patients are prescribed medications by different, independent healthcare providers.

**ADVERSE DRUG REACTIONS (ADR):**

Polypharmacy can seriously impact elderly patients’ health, often leading to ADRs.

- 44% of men and 57% of women 65+ take 5+ medications weekly
- 12% take 10+ medications weekly
- 6% of ADRs have fatal or serious consequences
- Approximately 140,000 fatalities are caused by ADRs annually

When paired with other drugs, seemingly harmless medications like Pepto-Bismol and aspirin can contribute significantly to ADRs.

**SHIFT IN HEALTH SPENDING:**

Polypharmacy doesn’t just affect elderly patients’ health—it also impacts their finances.

**DRUG-DRUG INTERACTIONS:**

Elderly patients are predisposed to the risks associated with polypharmacy.

- 15%–40% of elderly patients experience drug-drug interactions
- Elderly patients taking 5+ daily medications have 80% chance of drug-drug interaction
- Elderly patients taking 20+ medications have 100% probability of drug-drug interaction

**WHAT CAUSES POLYPHARMACY?**

- Clinicians and patients have different opinions on treatment
- Elderly patients may be dealing with memory loss or diseases like Alzheimer’s
- Patients use OTC drugs to treat side effects of prescription medications
- Patients visit multiple doctors and clinicians and receive many prescriptions

**TIPS FOR REDUCING HARMFUL EFFECTS:**

- Instruct patients to bring all OTC, herbal, and supplemental medications to appointments
- Screen for unnecessary drugs at each medical visit
- Immediately discontinue any drugs without a clear purpose
- Encourage other drugs with better or fewer side effects
- Update drug regimens and avoid frequent changes in drug schedules
- Thoroughly explain prescribed regimens to ensure patients understand
- Provide clear written instructions to accompany medications

Taking multiple medications leads to greater health care costs, increased risk of ADRs, and medication non-adherence in elderly patients. However, nurses can serve as extremely important checkpoints. By taking the proper steps and precautions, nurses can catch early signs to prevent elderly patients from becoming dependent on multiple medications.

To learn more about CEUFast Nursing’s (FC) polypharmacy course, visit ceufast.com/course/polypharmacy-the-new-normal-for-the-elderly-patient

Note: Figures are based on U.S. statistics and averages from multiple sources. Complete references are listed on ceufast.com/course/polypharmacy-the-new-normal-for-the-elderly-patient