



ORIGINAL RESEARCH PAPER

Medicine

THE STUDY ON EFFECTIVENESS OF INTERVENTIONS ON CONTROLLING THE CONTINUED USAGE OF POTENTIALLY INAPPROPRIATE PSYCHOTROPIC MEDICATIONS IN ELDERLY PATIENTS PRESENTING TO THE GERIATRICS OPD IN A TERTIARY CARE HOSPITAL IN SOUTH INDIA

KEY WORDS: Psychotropics, Geriatric

Dr Aswin Rajeev

Assistant Professor, Amrita Vishwa Vidyapeetham, Department of Geriatrics, Amrita Institute of Medical Sciences, Kochi, Kerala

Dr George Paul*

Professor, Amrita Vishwa Vidyapeetham, Department of Geriatrics, Amrita Institute of Medical Sciences, Kochi, Kerala *Corresponding Author

Dr Priya Vijayakumar

Professor, Amrita Vishwa Vidyapeetham, Department of Geriatrics, Amrita Institute of Medical Sciences, Kochi, Kerala

ABSTRACT

Background: Prolonged use of psychotropic medications have got lot of adverse effects on the normal functioning of an individual. The aim of this study is to assess the effectiveness of current psychotropic medication reconciliation practises existing in the geriatric medicine unit.
Methods: Psychotropic medication prescriptions of newly presenting patients taking were analyzed. Medications were grouped into 2 classes: appropriate, inappropriate. Appropriate medications were continued and inappropriate medications were either stopped or substituted. The interventions done by the geriatric physicians were assessed.
Results: Data was collected from 72 patients who used prescription psychotropic medications on regular basis. Out of 72 patients, 49 patients used appropriate medications and 23 patients used inappropriate medications.
Conclusion: This study shows the importance of following medication reconciliation practises on regular basis for detecting inappropriate medications and modifying them.

Introduction

The process of prescribing a medication is complex process. Psychotropic medication use is at a rise in elderly population due to various mental health problems commonly found in elderly patients. Prolonged use of these medications have got lot of adverse effects on the normal functioning of an individual. The adverse effects can range from excessive tiredness to life threatening conditions like neuroleptic malignant syndrome. Elderly patients due to their unique physiologic characteristic are hence more prone to develop medication related adverse effects.¹

Beer's criteria is a tool put forward by the American Geriatrics society in guiding primary care physicians for identifying inappropriate medications in elderly patients². Medication reconciliation practices has to be encouraged to identify and prevent the use of inappropriate medications in elderly patients.

Aim

The aim of study was to assess the effectiveness of current psychotropic medication reconciliation practises existing in the geriatric medicine unit.

Method of study

The study was done as a part of a clinical audit. The data of psychotropic prescription medications of patients presenting to Geriatric medicine OPD for first time during the period of January-February 2019 were retrieved from electronic medical records. The patients who were using potentially inappropriate psychotropic medications were identified. A psychotropic medication was labelled as potentially inappropriate based on the context at which that medication was used according to 2019 modified Beer's criteria². Medications were grouped into 2 classes: appropriate, inappropriate. Appropriate medications were continued and inappropriate medications were either stopped or substituted. The interventions done by the geriatric physicians were assessed.

Results

Data was collected from 72 patients who used prescription psychotropic medications on regular basis. Out of 72 patients, 49 patients used appropriate medications and 23 patients used inappropriate medications.

Out of 23 patients, 11 were taking drugs which were not indicated for their ailment and those were stopped. 12 patients were taking drugs which needed to be substituted with other agents of similar potency and lesser side effects. 5 patients belonged to the

category of those whose some medications were continued and others were substituted or stopped.

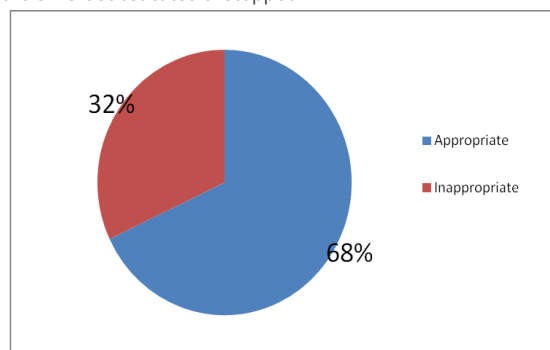


Fig 1: Appropriate and inappropriate medications

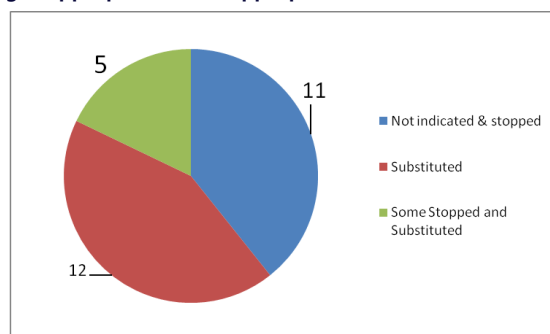


Fig 2: Inappropriate medications

Discussion

Potentially inappropriate psychotropic medication use results in various adverse events in elderly patients which are preventable by adequate medication reconciliation practises. Elderly patients tend to continue the usage of psychotropic medications started for a short period mainly due to dependency or lack of reconciliation of follow up visits.^{3,4} These drugs can result in lot of problems like falls, drowsiness and can increase the risk of delirium in elderly patients⁵. This study shows the importance of following medication reconciliation practises on regular basis for detecting inappropriate medications and modifying them.

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