

Seniors successfully withdraw from meds

September 19 2014, by Anke Van Eekelen



Prof Beer says the idea of de-prescribing appears acceptable to GPs and specialist physicians, who learn how to commence medication without a focus on when and how to potentially stop the treatment. Image: Baudouin

Elderly people have proved receptive to being de-prescribed medications, as part of a trial aimed at assessing the feasibility of withdrawal of medications among older people.

All 15 participants who started withdrawal of one selected drug over a two-month period understood the concept of de-prescribing and managed to stop or reduce the intake of the selected drug without complications.

The target drug was either anti-hypertension, anti-angina, diuretic or pain relief medication; on average one of nine taken daily by each participant.

The pilot randomised controlled trial (RCT) is a precursor for larger trials in order to better understand the effect of gradual drug intake reduction on overall well-being, physical and mental health.

Geriatrician and WA Centre for Health and Ageing clinical pharmacologist Professor Christopher Beer and colleagues recruited volunteers from residential aged-care facilities, where patients could be carefully monitored.

"Frailer people are the ones with the highest absolute risk of reoccurring events," Prof Beer says.

"The last thing you want to do is withdraw someone's medication and then precipitate a return of symptoms."

He says there is a genuine uncertainty about whether medicine prescriptions continue to be appropriate and safe when taken in combination with other prescribed and over-the-counter drugs over longer periods of time.

Prof Beer says the idea of de-prescribing appears acceptable to GPs and specialist physicians, who learn how to commence medication without a focus on when and how to potentially stop the treatment.

"We think a [follow-up] blinded RCT is essential because of the potential bias around open medication use," he says.

"It controls for people's attitudes and beliefs towards medication and prevents the tendency of the control group to start their medication

again."

Since the pilot trial, Prof Beer has received National Health and Medical Research Council funding to start the blinded RCT called Opti-Med, which is now underway.

The research aims to provide the evidence on which de-prescribing as an acceptable [medical](#) intervention can be based.

Prof Beer says that unlike the pilot study, the current blinded RCT will have the power to investigate the effect of de-prescribing on clinical outcomes and quality of life.

Its analysis in the next few years will present a rare opportunity to systematically evaluate the risk versus benefit of reducing medication in an increasingly expanding ageing population.

Provided by Science Network WA

Citation: Seniors successfully withdraw from meds (2014, September 19) retrieved 16 May 2024 from <https://medicalxpress.com/news/2014-09-seniors-successfully-meds.html>

| |
|--|
| <p>This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.</p> |
|--|