

Want to cut down on your meds? Your pharmacist can help.

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Cara Tannenbaum. Credit: André Gamache

Pharmacists are pivotal in the process of deprescribing risky medications in seniors, leading many to stop taking unnecessary sleeping pills, anti-inflammatories and other drugs, a new Canadian study has found.

Published today in the *Journal of the American Medical Society (JAMA)*, the study by researchers at Université de Montréal (UdeM) took place in Quebec, Canada. The D-PRESCRIBE clinical trial followed 489 [patients](#) aged 65 year and older, involving 69 local pharmacists.

Half of the pharmacists distributed an educational brochure on deprescribing to their patients and also sent their family physician a pharmaceutical opinion to recommend deprescribing. The two-pronged approach sparked deprescribing conversations with eight out of every 10 patients.

More importantly, within six months, 43 per cent of users of sedative-hypnotics, 58 per cent of users of [non-steroidal anti-inflammatory drugs](#) (NSAIDs) and 31 per cent of users of glyburide (a.k.a. glibenclamide), an anti-diabetes drug, had safely stopped taking their medications.

No adverse events requiring hospitalization were reported, although 38 per cent of patients who attempted to gradually reduce their sedative-hypnotic [medication](#) reported transient withdrawal symptoms.

Education and outreach

"The D-PRESCRIBE study proves that community pharmacists can successfully lead the deprescribing of risky medication, by combining patient education with evidence-based outreach to physicians," said lead author Cara Tannenbaum, a medical professor and geriatrician who heads the Canadian Deprescribing Network.

"Seniors in Quebec have some of the highest rates of use of sedative-hypnotics in Canada," said Tannenbaum, who is also a researcher at UdeM's Institut universitaire de gériatrie de Montréal and the Michel-Saucier Endowed Chair in Geriatric Pharmacology, Health and Aging at UdeM's pharmacy faculty.

"These are powerful medications that are not meant for long-term use, and they have also been linked to accidental opioid overdose," she said. "Some patients in our study had been taking these pills for decades, yet were able to gradually taper their dose over several months and completely stop." She added: "Deprescribing is possible at any age, as long as you have a good plan in place with your pharmacist or physician. You simply have to ask: 'Do I really still need this medication?'"

Mr. Yvon Quenet did. The patient participated in the D-PRESCRIBE study and discovered that "Deprescribing is a great big word for a great cause," he says. "We must denounce the excessive consumption of medications among seniors."

An all-time high

Worldwide, experts say the number of pills being prescribed to older people is at an all-time high, as are drug-related hospitalizations and deaths due to drug interactions or side effects. Seniors are especially at risk due to age-related changes in the body. Sedative-hypnotic sleeping and anxiety pills can contribute to memory problems, falls, fractures and motor-vehicle accidents. NSAIDs increase the risk of bleeding and heart failure. Glyburide (or glibenclamide) is yet another medication listed on the American Geriatrics Society 'Beers' list of drugs for the elderly to avoid, as it has been associated with excessively low blood sugar, dizziness, falls and lack of concentration.

"There's no question that pharmacists can play an active role in deprescribing and collaborate efficiently with their patients' physicians to reduce their risk of medication harm," said Bertrand Bolduc, President of the Ordre des pharmaciens du Québec.

At the global level, the World Health Organization has also begun to address unsafe medication practices and medication errors – a leading

cause of injury in health-care systems in many countries – through a patient-safety program called Medication Without Harm. "A concerted response is now needed to answer the WHO's call to action," said Tannenbaum.

More information: Philippe Martin et al. Effect of a Pharmacist-Led Educational Intervention on Inappropriate Medication Prescriptions in Older Adults, *JAMA* (2018). [DOI: 10.1001/jama.2018.16131](https://doi.org/10.1001/jama.2018.16131)

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