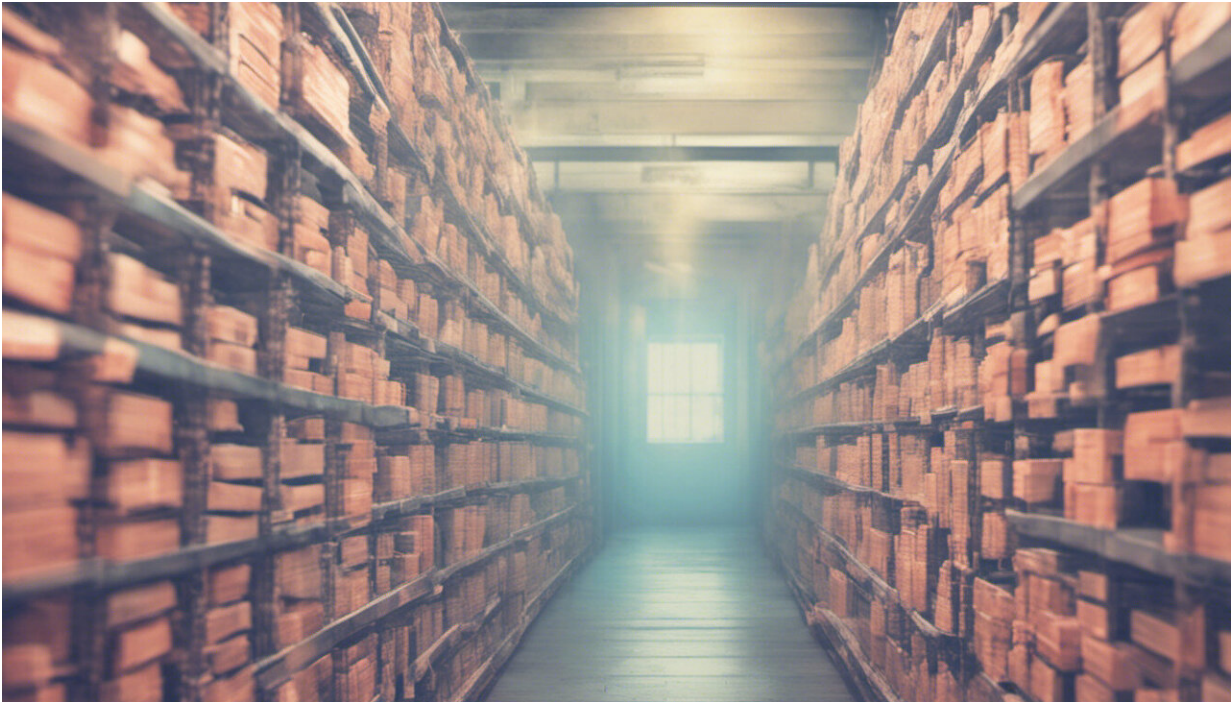


Potential pitfalls of high-risk prescribing practices in older adults

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Credit: AI-generated image ([disclaimer](#))

For many, good health and longevity is only achievable with the help of prescription drugs. However, researchers in Japan have recently identified that some "high-risk" prescribing practices may be a cause for concern among older adults.

In a new study published in *Geriatrics and Gerontology International*, a research team led by the University of Tsukuba evaluated the relationship between high-risk prescribing practices and the risk for disability in people aged 65 years and older. High-risk prescribing practices include polypharmacy (the use of five or more [prescription drugs](#)) and the use of drugs with sedative or anticholinergic properties, including antipsychotics, benzodiazepines, and antiparkinsonian drugs.

High-risk prescribing practices have been previously shown to be associated with physical frailty among older adults, and physical frailty corresponds with a risk for [physical disability](#). In Japan, people who are aged 65 years and older and have a functional disability are eligible to receive long-term care (LTC) services. To receive these services, a LTC needs certification is granted based on the assessment of an applicant's eligibility and care requirements. Using LTC needs certification as a proxy for disability among older adults in Japan, researchers led by the University of Tsukuba conducted a population-based nested case-control study to determine whether high-risk prescribing practices are associated with an increased risk of disability.

"To conduct our analysis, we used two health insurance datasets to form a comprehensive cohort that included 89% of Japanese adults aged 65 years and older as of October 2018," says lead author Dr. Naoaki Kuroda.

Among the cohort, the research team identified and control-matched over 2,100 cases who received their first [long-term care](#) needs certification within the observation period. The researchers then used conditional logistic regression analysis to estimate the risk of LTC certification associated with high-risk prescribing practices.

"We found that both polypharmacy and the use of drugs with sedative or anticholinergic properties exhibit dose-response relationships with the

risk for LTC needs certification," says senior author Professor Nanako Tamiya. "In other words, these high-risk prescribing practices are associated with an increased risk of disability among older adults."

The findings of this study may encourage the development of public health initiatives regarding high-risking prescribing practices among [older adults](#). Additional research is needed to determine whether a reduction in high-risk prescribing practices corresponds with a reduction in the risk of disability.

More information: Naoaki Kuroda et al, Associations of polypharmacy and drugs with sedative or anticholinergic properties with the risk of long-term care needs certification among older adults in Japan: A population-based, nested case-control study, *Geriatrics and Gerontology International* (2022). [DOI: 10.1111/ggi.14393](https://doi.org/10.1111/ggi.14393)

Provided by University of Tsukuba

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