

Too many pills? How to talk to your doctor about reviewing what's needed

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Prescription drugs are seen in a glass flask at a state laboratory in Taylorsville, Utah, on July 6, 2017. Credit: AP Photo/Rick Bowmer, File

Swallowing a handful of pills is a daily ritual for many people, from young adults coping with anxiety to older adults managing <u>chronic</u> <u>conditions</u>. Overall, 13% of people in the U.S. take five or more prescription drugs. For those 65 and older, that number is 42%.



If you're taking multiple meds, it's smart to be aware of potential problems. One <u>pill</u> can lead to a side effect, leading to another pill and another <u>side effect</u> in what experts call a "prescribing cascade."

Some drugs can cause harm if taken for years. Others stop working or interact badly with a new drug. A drug tolerated well at first can cause side effects later, leading to cognitive decline and injuries from falls.

"Our metabolism changes as we get older," said Dr. Elizabeth Bayliss, who studies deprescribing at Kaiser Permanente's Institute for Health Research in Aurora, Colorado. "Everyone's ability to metabolize the medications they've been taking for a long time may change."

The nonprofit Lown Institute calls the whole situation a <u>medication</u> overload that will cause 4.6 million hospital visits this decade.

If your daily pill routine is getting out of hand, ask for a <u>medication</u> review. Here's how to get started with a process called "deprescribing."

Ask for a prescription checkup

Start with a professional you trust, like a doctor or pharmacist, said Lisa McCarthy, a pharmacist and deprescribing expert at the University of Toronto.

If you're asking your doctor, don't wait until the end of a 15-minute visit. Instead, make a dedicated appointment and tell them when booking you want to talk about your medicines, McCarthy said.

Your doctor may not have the full picture of what you're taking if other prescribers are involved, and some doctors hesitate to manage drugs prescribed by others. That's when a pharmacist can help by reviewing everything and writing up suggestions you can share with your doctors,



said pharmacist Bradley Phillips of the University of Florida College of Pharmacy.

"We're considered the medication experts," Phillips said.

Could my medicine be causing a problem?

Swelling, incontinence, restlessness, insomnia—all are side effects caused by common medications that sometimes get treated with new drugs. McCarthy wants people to ask their doctors a simple question: Could this symptom be related to one of my medications?

"If we could teach the public to ask that question it would be very powerful," McCarthy said. And for a follow-up question, she suggested: Do I still need this medicine?

Pharmacist Barbara Farrell sees dramatic changes in many people she helps at an outpatient geriatric center in Ottawa, Ontario. Some have emerged from a drug-induced dementia after their meds are reduced. A 77-year-old woman was able to leave her wheelchair and walk with a cane after cutting her daily pills from 32 to 17. She had arrived sedated and unable to communicate, and a few months later, she was back to her hobby of knitting.

Weaning off medication takes time

Some meds can be stopped abruptly but others require a slow taper to prevent uncomfortable withdrawal symptoms—or even life-threatening seizures. Tapering to progressively lower doses is particularly important with drugs for depression, insomnia and anxiety.

After two decades on various pills for these conditions, therapist Molly



Bernardi of Spokane, Washington, began tapering down her doses.

The 45-year-old suspected the pills were the cause of her worsening problems with digestion, balance, memory, stiff muscles and flickering dots across her field of vision. When scans ruled out other illnesses, she gradually stopped each of four medications.

"It's been by far the hardest thing I've ever done," Bernardi said.

One of the final drugs she stopped was the toughest: a benzodiazepine, a class of sedatives that can be harmful if taken long term. Over the course of three months, she used a kitchen knife and a nail file to cut her 1 milligram daily pill into ever-smaller pieces.

She listened to her body, found <u>support groups</u> on Facebook and used breathwork and prayer to get through withdrawal symptoms.

"Now when I have a good day, a good hour, a good moment, it's peace and presence like I've never known since before I was medicated," Bernardi said. "I'm just experiencing a little bit of great. And a little bit of great is so great that it keeps me going."

Be in charge of your medication list

Even in the best-connected health care systems, McCarthy said, information about prescriptions isn't always shared among doctors. And they won't know about your over-the-counter drugs, vitamins or nightly CBD gummy.

The only person who knows everything you take is you, McCarthy said. So keep a current list of what you take, why it was prescribed and when you started taking it.



For an example of a medication list, which McCarthy called a "tremendously powerful" tool, look at the <u>workshop materials</u> she and her colleagues designed.

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