

Introduction

HAVE YOU EVER WONDERED if you're taking too many medications and for too long? Do you ever stop to ask if they are all still necessary? Or to consider whether stopping a medication, even one you have taken for years, might make you feel better?

Medications help keep us healthy and strong and can prevent or reduce the progression of chronic conditions, but they need upkeep too. Medications that have protected us, supported us, and served us well over time may need to be replaced with safer products, removed from our regimen, or reduced to lesser doses.

Being the daughter of a carpenter, I learned firsthand about the importance of building structures to last and fixing things without compromising structural soundness. But even the best-built structures need upkeep—roofs replaced, plumbing repaired, electrical panels updated. Although these elements may have served the structure well for years, changes and updates eventually become necessary for structural integrity. As a pharmacist, I take the same approach to building and updating a medication regimen, especially as my patients age.

Think of an older adult whose health you care about—a parent, grandparent, friend, partner—or maybe yourself. Do they take medications? How many? Five or more? How long have they been taking these medications? When was the last time they took something that was not prescribed, an over-the-counter remedy or supplement? Possibly every day? I have heard some patients say they take so much medication every day that they “sound like a vial of pills!”

Now think about that person's overall health. Have they been hospitalized recently? Fallen? Do they have concerns of feeling old or express issues like forgetfulness, confusion, insomnia, or weakness?

Polypharmacy, the taking of five or more prescription or nonprescription medications on a regular basis,¹ can lead to many of these conditions. It's not just the number of medications that can be harmful, but the number of unnecessary medications. Our health system is very good at prescribing medications to treat health conditions, but it's not always good at deprescribing medications that may no longer be necessary.

What is deprescribing? Deprescribing is the thoughtful process of reducing, switching, or stopping a medication that may no longer be needed or may no longer be the best treatment option. The deprescribing process should be overseen by a health-care provider in communication with the patient or a caregiver.² Not all medications can or should be stopped, but you may be taking medications that are no longer necessary or pose more of a risk than a benefit as you age.

Aging Changes Everything

Why is deprescribing important? Throughout the aging process, your body changes. Think of how much your body changes in your first 20, 30, or 40 years of life. Now consider how many changes a 65-year-old will experience if they live to be 85, 95, even 105. That's why considering whether a medication is still appropriate, needed, or dosed properly is an important key to healthy aging. A medication you may have started taking at 40 may not serve you well by the time you reach 80.

Your body's ability to absorb, distribute, metabolize, and eliminate medications changes throughout your lifetime, and those changes are especially acute in your older years. Changes in gut motility and acid production can change how medications are absorbed. Increased body fat and decreased hydration in older adults changes the distribution or delivery of medications throughout the body. Liver size and function decrease with age, which can reduce how well the body metabolizes medications. Age-related reduction of kidney size and

function affects how well medications are eliminated from the body. Side effects may appear even after a person has taken a medication for years. Instead of taking another pill to combat the side effect, it may be possible to change, reduce, or eliminate the medication causing the ill effect.

Polypharmacy and certain medications can also lead to falls, which can be especially devastating to older adults. Though many factors contribute to falls, including health conditions, health status, sensory impairment, and environment, falls are not a “normal” part of the aging process. Deprescribing certain medications may help prevent a fall from occurring.

Do You Have Questions? You Should!

With so many factors to consider, where do you begin? How can you initiate productive conversations with health-care providers regarding the care for yourself or others? People frequently tell me, “At the pharmacy, I am asked, ‘Do you have any questions?’ Quite honestly, I don’t know what to ask.”

I understand! When my daughter was diagnosed with a brain tumor and we were waiting for more detailed tests, the medical team asked if we had any questions. My honest answer was, “Millions!” But, honestly, I could not formulate even one question at that time. Fortunately, we had the time to make a list of questions, which helped us and her medical team devise a patient-specific plan for a successful outcome.

As you read through this book, make time to develop your questions. Don’t wait for a problem such as a side effect or a fall to occur. Some medications are considered potentially inappropriate or risky for older adults, so you can always start a conversation by asking a provider if you or someone you care for is taking any potentially inappropriate medications. In chapter 5, I will list and explain other questions you can ask.

Deprescribing is a way to optimize your medications. Stopping, reducing, or changing a medication may not have immediate results. However, over time, deprescribing may help you feel better, be more active, and maintain a better quality of life. After following a deprescribing process, some people think more clearly, have better balance, and no longer suffer from dizziness. Others feel less fatigued, stronger, and able to accomplish more every day. Others just feel better in general.

Deprescribing is different for everyone, so it is difficult to generalize how it should be done or what effects it might have. The process needs to be individualized based on a person's needs, health status or function, and health conditions.³

Polypharmacy is a global problem. Researchers from all over the world examine polypharmacy issues and the need to reduce prescriptions. Globally, as the number of older adults increases, experts expect the number of medications, the number of chronic diseases per individual, and problems related to polypharmacy will also rise. Building awareness of polypharmacy and taking advantage of the benefits of deprescribing can potentially reduce frailty, falls, hospitalizations, and adverse drug events. Deprescribing is a medical solution to the “condition” of polypharmacy.

You may be asking why a pharmacist or associate professor of pharmacy would write a book about reducing medications. The answer is that I want to see older adults enjoying life instead of suffering needless side effects from their medications. As a certified geriatric pharmacist, I have seen brown bags and pill boxes filled to the brim with unnecessary medications and have counseled many individuals, groups, and caregivers about medicines that need to be used with caution and prescriptions that may be more appropriate for older adults. If deprescribing can help someone feel better, move about more easily, enjoy a conversation, take a walk, or smile again, I am delighted to be part of the solution.

I do not want people to wait for the fall, the confusion, or the accident to make a change. Instead, I want to empower them to ask the right questions about their medication use so they can determine whether their medications are needed or could be changed or reduced.

What Does This Book Provide?

This book provides information, examples, and questions to help you review your medications with your health-care providers and work with them to create action plans for safe, thoughtful deprescribing. In the following chapters, you will learn how any medication has the potential of becoming more of a risk than a benefit over time and how the effects of medications can vary depending upon a person's health status, chronic and acute health conditions, and other medications.

And you will learn the five steps of the MedStrong Medication Optimization Plan (MOP) to identify and manage medications that may no longer be necessary or beneficial, especially the ones that may increase the risk of an adverse event and lead to poorer health outcomes. You can use the MedStrong MOP for yourself or for anyone in your care. It will help you keep a check on your medications, take only what you need, and remain healthy and strong as you age.