

Polypharmacy Reduction

Victoria-South Island LTCI
Community of Practice
Working Group



FOCUS

This document focuses on preventative medications for events such as stroke, MI, cancer, fractures, seizures, and gout. Medications for reducing pain, nausea, SOB, urinary dysfunction, depression, anxiety and other symptoms are typically not reduced because they provide quality of life through symptom control. The exception is when they cause harmful side effects.

SOURCE

In early 2023, long-term care physicians in Victoria and the South Island held a series of meetings as part of the Vic-SI LTCI Community of Practice Working Group to reach a consensus on the best approach to polypharmacy reduction in LTC. This process resulted in the guideline below, which was reviewed and endorsed by Island Health's South Island LTC Medical Advisory Committee. Polypharmacy reduction is defined as the process of reducing medications to benefit the resident through reduced medication side effects and pill burden. The medication changes need to be congruent with the resident's goals of care.

STEPS TO REDUCE POLYPHARMACY



1

ESTABLISH MEDICATION GOALS OF CARE (GOC)

It is important to start with an understanding of a resident's views on medications. Ask them how they feel about medication reduction. What are their worries? What do they see as the benefits? Have similar conversations with families. These conversations will reveal if there is willingness to accept new perspectives on preventative medication. These conversations will set the stage for future conversations as loved ones become increasingly frail. (see GOC guidelines)

Use questions to help families put medication use in context:

- How much is your loved one enjoying life now?
- How do they feel about their dependence on nursing care?
- How does your loved one feel currently about taking medications?

Inform the family how their loved one experiences taking medications:

- Are the pills being crushed?
 - *crushed pills taste very bad*
- Are the pills being hidden?
 - *could this affect other food intake?*
- Does staff have any comments about how the loved one takes medication?

Inform the family of medication effects:

- Use [Medstopper.com](https://www.medstopper.com) and share NNT for the preventative medications currently in use
- Share common side effects of medications
- Share evidence to help family make decisions
 - *studies showing reduction is not harmful, studies showing individual risks*

Try using a scale such as: *resentment, reluctance, acceptance, and appreciation*

STEPS TO REDUCE POLYPHARMACY



2

DETERMINE HOW MUCH THE FAMILY WANTS TO BE INVOLVED WITH FUTURE MEDICATION CHANGES

Understand the family's expectations for communication and approval of medication reductions to ascertain the amount of consultation required prior to implementing medication changes.

- Residents who tend toward medication reluctance are more likely to prioritize comfort over continuing with preventative medication. With this group it is possible to ask for permission from family to do rational medication reduction independently.

- Residents and families who accept and appreciate the preventative medication paradigm may be less likely to agree to independent medication reduction.

Tip: Communication using Island Health email can make this communication faster (See guidelines for communicating by email to families).

3

START REDUCING MEDICATIONS

When thinking about stopping a medication, try thinking if you would start the same medication at this point.

- Start with medications that are likely causing undesirable symptoms, (nausea, malaise, bradycardia, electrolyte abnormalities).
- Reduce medications that treat symptoms that no longer exist. Monitor for symptom relapse and restart at lower dose if needed.
- Stop primary prevention medications that are not aligned with the resident's goals of care.

TIPS

INVOLVE THE CLINICAL TEAM

- Have a meeting with the care home pharmacist to understand how they can help with identifying medications to stop, follow up on the effect of stopped medications, and discuss the changes with the family.
- Discuss your medication reduction style of practice with the Director of Care or senior nurse at the care home. Ask for their support with encouraging front-line care staff to collect the necessary information (subjective or objective) to assess the effect of the medication changes.

USE CLINICAL SCALES TO HELP WITH ASSESSMENTS OF MEDICATION EFFECTS

- Pain scales: [ABBEY](#), [CNPI](#), [Doloplus 2](#), [MOBID-2](#), [PACSLAC II](#), [PAINAD](#)
- Behavior charting: [Dementia Observation System \(DOS\)](#).
- Sleep: Sleep charting
- Blood Pressure: Ask the clinical staff to ensure BP's are measured three times with the resident in a relaxed, seated position

NOTE

Reducing polypharmacy for long-term care residents is a constant activity. Plan on continually working on this aspect of care.

