

Lesson One - Geriatric Medication Management

FOCUS: Introduction to Medication Management

10-15 minutes

Purpose:

Participants will learn the definition, causes, risks and management techniques for polypharmacy.

Materials:

- *Geriatric Medication Management* slide presentation
- *Medication Management Note Page*
- *Medication Management Note Page - Answer Key*

Facilitation Steps:

1. As people age, common physical conditions of aging can make it difficult to manage multiple medications. From cognitive challenges to physical issues, if medications aren't managed properly, huge risks exist. This lesson includes important medication management information that can help healthcare workers become sensitive to the difficulties geriatric patients face.
2. Distribute the *Medication Management Note Page* to the participants.
3. Share the following information with students as you show the slide presentation:

Slides 1 and 2: Introduction slides

Slide 3: Polypharmacy can be defined as the use of multiple medications per day (generally 5 or more).¹ Using a multitude of medications daily along with common conditions of aging, places

older adults at an increased risk for experiencing medication mishaps.² Two of the primary conditions of aging associated with poor medication self-management are poor manual dexterity and poor vision.³

Slide 4: There are many different statistics that are available regarding the prevalence and risks associated with polypharmacy. Here are just a few:

- A variety of global studies have shown that elderly people take an average of anywhere from 2-9 medications per day⁴
- The incidence of inappropriate medication use by geriatric patients was found ranging from 11.5-62.5%⁵
- A study of geriatric outpatients who took five or more medications found that 35% experience an adverse drug event⁶
- Geriatric patients, over the age of 65, have a four times greater chance for being hospitalized for a medication mishap than those under age 65⁷

Slide 5: Common symptoms caused by polypharmacy can be mistaken as or exacerbated by common conditions of aging. Here is a list of symptoms that can be caused by polypharmacy.⁸

Slide 6: The cost of polypharmacy management is staggering. Here are a few statistics to consider:

- The U.S. Center for Medicare and Medicaid Services estimates the annual costs of this to be over \$50 billion dollars⁹

- Medication-related AEs (Adverse Events) in general are thought to cause between 10-30% of all hospital admissions in older patients¹⁰
- In a meta-analysis of prospective studies, 100,000 deaths per year could be attributed to adverse drug reactions in the United States¹¹
- In the United States, it is estimated that 3 million older adults are admitted to nursing home due to drug-related problems at an estimated annual cost of more than \$14 billion dollars¹²

Slide 7: How can healthcare workers help? There are many ways you can help patients or their caregivers to manage their medications.

Slide 8: Here are some tips you can have your geriatric patients do called medication reconciliation:

- Keep a current list of all medications
- Review all medications with the treating physician
- Ask for a screening of adverse drug reactions¹²

Slide 9: Here are some tips for dealing with procurement issues on behalf of your elderly patients:

- Assess the patient's ability to procure medications
- Assist with identifying a way to procure medications
- Refer to a social worker if funds are an issue or consider the use of generic equivalents¹²

Slide 10: Consider these things regarding medication knowledge and what your patient really knows and understands:

- Assess the patient's understanding of dosage, frequency, special instructions and side effects

- Implement interventions including written instructions in large print, list format, schedules or charts or other organizational tools¹²

Slide 11: Take a good look at any physical issues that may impact the patient's ability to manage medications:

- Assess for manual dexterity or visual impairment
- Use non-childproof containers
- Use a pill box or easy-to-open container
- Make use of a medication calendar
- Consult with the pharmacist if tablet breaking is required and is difficult for your patient¹²

Slide 12: Declining cognitive capacity in elderly patients can have a significant impact on the ability to self-manage medication:

- Determine the patient's cognitive ability to organize and remember medication
- Use memory cues – same meal time, clock time or make taking medication a daily ritual
- Use memory-enhancing methods such as medication charts, electronic reminders, voice messages, pill boxes, or electronic dispensing devices¹²

Slide 13: Elderly patients may have many reasons for intentionally not taking their medications:

- Assess the reason for nonadherence
- Educate the patient on the risks of missing medications
- Provide positive reinforcement¹²

Slide 14: If possible, monitor the patient with each office visit, doing the following:

- Monitor adherence if possible – over and under adherence
- Monitor side effects
- Notify the prescribing provider if signs or symptoms of the condition remain or for any present side effects¹²