


# Polypharmacy & Deprescribing in General Practice

Polypharmacy is the concurrent use of multiple medications. This is an issue for all patients with co-morbidities, although most prominent in the elderly, with approximately two thirds of people aged 75+ years taking five or more medications. Polypharmacy can be associated with multiple side effects, interactions and patient harm. Deprescribing is the process of withdrawal of an inappropriate or redundant medication with the goal of managing polypharmacy and improving outcomes. Managing polypharmacy, and effective deprescribing, is a challenging area of practice for GPs and registrars alike.

<b>TEACHING AND LEARNING AREAS</b> 	<ul style="list-style-type: none"> <li>• Definitions of polypharmacy and deprescribing</li> <li>• Adverse effects and harms of polypharmacy</li> <li>• <a href="#">Prescribing in the elderly</a></li> <li>• <a href="#">Approach to de-prescribing medications, including common target drugs e.g. PPIs, statins</a></li> <li>• Benefits and practicalities of arranging a <a href="#">Medication Management Review</a></li> </ul>				
<b>PRE-SESSION ACTIVITIES</b> 	<ul style="list-style-type: none"> <li>• Read the BPAC article <a href="#">Polypharmacy in Primary Care</a></li> <li>• Read the AFP article <a href="#">Thinking through the medication list</a> on appropriate prescribing in the elderly</li> </ul>				
<b>TEACHING TIPS AND TRAPS</b> 	<ul style="list-style-type: none"> <li>• Supervisor to review and discuss a couple of their own patients with polypharmacy</li> <li>• De-prescribing is best achieved in close partnership with the patient</li> <li>• Drug cessation should be considered in all patients as a part of regular medication review</li> <li>• Each co-morbidity will have its own guidelines - for patients with multi-morbidity, the art is to try to combine guidelines sensibly for the individual patient and not to follow each one slavishly</li> </ul>				
<b>RESOURCES</b> 	<table border="0"> <tr> <td data-bbox="343 1668 430 1792"><b>Read</b></td> <td data-bbox="430 1668 1498 1792"> <ul style="list-style-type: none"> <li>• NPS MedicineWise News - <a href="#">The dilemma of polypharmacy</a></li> <li>• 2014 MJA article <a href="#">First do no harm: a real need to deprescribe in older patients</a></li> <li>• Consultant Pharmacy Services <a href="#">Deprescribing Resources</a></li> </ul> </td> </tr> <tr> <td data-bbox="343 1792 430 1854"><b>Watch</b></td> <td data-bbox="430 1792 1498 1854"> <ul style="list-style-type: none"> <li>• <a href="#">Bohemian Polypharmacy</a> - a parody of Queen's classic song Bohemian Rhapsody</li> </ul> </td> </tr> </table>	<b>Read</b>	<ul style="list-style-type: none"> <li>• NPS MedicineWise News - <a href="#">The dilemma of polypharmacy</a></li> <li>• 2014 MJA article <a href="#">First do no harm: a real need to deprescribe in older patients</a></li> <li>• Consultant Pharmacy Services <a href="#">Deprescribing Resources</a></li> </ul>	<b>Watch</b>	<ul style="list-style-type: none"> <li>• <a href="#">Bohemian Polypharmacy</a> - a parody of Queen's classic song Bohemian Rhapsody</li> </ul>
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<b>FOLLOW UP/ EXTENSION ACTIVITIES</b> 	<ul style="list-style-type: none"> <li>• Ask the registrar to undertake the clinical reasoning challenge under exam conditions</li> <li>• Registrar to present a case of a patient with polypharmacy and approach to deprescribing</li> </ul>				



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## Clinical Reasoning Challenge

Hillary Thrift is an 87-year-old widower who has recently moved into the region and is now a patient of your practice. She presents for repeat scripts. She is frail but otherwise relatively well.

Her medication list is as follows:

- Atorvastatin 40mg mane
- Irbesartan 75mg daily
- Allopurinol 100mg daily
- Panadol Osteo 2 tabs tds
- Pantoprazole 40mg mane
- Lasix 20mg mane
- Amitryptiline 10mg nocte
- Stemetil 5mg prn
- Alendronate 70mg weekly

QUESTION 1. In considering deprescribing in a patient with polypharmacy, what are the MOST IMPORTANT factors in prioritising which medications to withdraw? List up to FOUR factors.

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

QUESTION 2. You wish to seek input into managing Mrs Thrift's complex medication regime in order to guide your decision making. What is the MOST IMPORTANT community-based intervention for medication management you can arrange as a GP?

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## ANSWERS

### QUESTION 1

In considering deprescribing in a patient with polypharmacy, what are the MOST IMPORTANT factors in prioritising which medications to withdraw?

- Medications with the least utility e.g. resolved illness, limited efficacy
- Medications with highest risk e.g. potential for serious adverse effects
- Medications with the most significant adverse impact on wellbeing
- Medications which the patient wishes to cease
- Medications with complicated administration regimens

### QUESTION 2

You wish to seek input into managing Mrs Thrift's complex medication regime in order to guide your decision making. What is the MOST IMPORTANT community-based intervention for medication management you can arrange as a GP?

- Pharmacist-facilitated home medicines review