

DEPRESCRIBING

Are you on too many meds?



What is Deprescribing? Deprescribing is the planned process of reducing or stopping medications that may no longer be of benefit or may be causing harm. The goal is to reduce medication burden while improving quality of life.

Deprescribing involves patients, caregivers, healthcare providers and policy makers

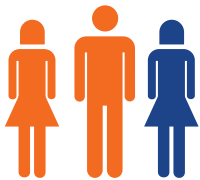


Deprescribing should be done in partnership with a health care provider. There may be reasons to continue taking certain medications or reasons why close supervision is needed while stopping.



Medications **SHOULD NOT** be stopped without first consulting a doctor or health care professional.

Are seniors taking too many meds?



2 out of 3 Canadians over the age of 65 are on **at least 5 different prescription medications** – some of which may cause more harm than good.



1 out of 4 Canadians over the age of 65 take **at least 10 different prescription medications**.

(CIHI, 2014)

Why deprescribe?



Taking medications may be necessary for health, improving symptoms or prolonging life expectancy. However, as we get older, the benefits and risks of medication may change.



The risk of harmful effects and hospitalizations increases when taking many prescription medications.

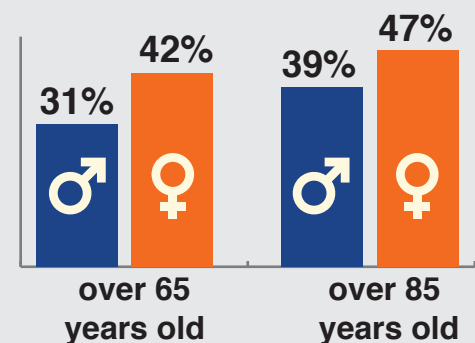


With age, some medications can become unnecessary or even harmful because of short-term or long-term side effects, and drug interactions.



Older women are typically more susceptible to adverse effects of medications and more likely to be prescribed risky meds.

Seniors who fill at least one risky prescription in Canada



(Morgan *et al.*, 2016; yearly data from 2013)

Medications are considered risky when a safer drug or non-drug therapy exists that can be used to treat the same symptoms.

The cost of risky medication

\$419 MILLION

Canadians spend \$419M per year on potentially harmful prescriptions. This does not include hospital costs.

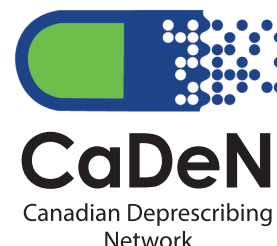
\$1.4 BILLION

Canadians spend \$1.4B per year in health care costs to treat harmful effects from medications, including fainting, falls, fractures and hospitalizations.

(Morgan *et al.*, 2016)

What can be done?

The Canadian Deprescribing Network (CaDeN) is a group of health care leaders, academic researchers and patient advocates working together to promote appropriate medication use across Canada.



CaDeN's goals are to:

- Reduce harm by raising awareness and cutting risky prescriptions for seniors by 50% by 2020.
- Promote health by ensuring access to safer drug and non-drug therapies.

CaDeN is initially focusing on three classes of medications that should be considered for deprescribing in seniors:

- **Benzodiazepines** (e.g. diazepam, Valium®, lorazepam, Ativan®, alprazolam, Xanax®)
- **Proton pump inhibitors** (e.g. pantoprazole, Pantoloc®)
- **Sulphonylureas** (e.g. glyburide, Diabeta®)



They are overused, may cause more harm than good and safer alternatives exist.

What can you do?

Educate yourself about what medications you are taking and why: <http://bit.ly/222N2k6>

Engage in a discussion with your health care provider about deprescribing options and alternate therapies.

Spread the word about deprescribing to friends and family, advocacy groups and government representatives.

Use MedStopper to assess whether you are taking any risky meds: <http://medstopper.com/>

Download information on how you can stop certain meds (EMPOWER brochures): <http://deprescribing.org/resources/deprescribing-information-pamphlets/>

Learn more about deprescribing on CaDeN's website: <http://deprescribing.org/caden/>

Ask questions, stay informed, be proactive, and participate in making smart choices.

References

- Canadian Institute for Health Information (CIHI). Drug use among seniors on public drug programs in Canada, 2012. Revised October 2014. Ottawa, ON: CIHI:2014.
- Morgan et al. Frequency and cost of potentially inappropriate prescribing for older adults: a cross-sectional study. *CMAJ Open*, 2016;4:E346-E51.