

Deprescribing gets support from Canada's seniors, survey shows

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Most Canadians over 65 years of age take a lot of prescription drugs—two-thirds, in fact, take more than five a day, while two out of every five of Canadians over 80 take more than 10 a day. And many worry it's all too much, a new national survey by Université de Montréal researchers has found.

The phone survey of 2,665 men and women ages 65 years or older was done last year between August and October. Preliminary data were presented at scientific meetings in April and May in Toronto and Texas and the results are published today in the *Journal of the American Geriatrics Society*.

The survey is the first of its kind in the world to find out what ordinary people, rather than clinicians or scientists, know about the growing movement of "deprescribing"—reducing or stopping medications that are of no apparent benefit to patients and which, in some cases, might actually be doing them harm.

Dr. Justin Turner, a post-doctoral fellow in pharmacy at UdeM and a researcher at the Institut universitaire de gériatrie de Montréal, designed the survey and analysed its results with his supervisor at the Institut, Dr. Cara Tannenbaum, an UdeM professor of medicine and pharmacy.

Among their findings:

- 60% of Canadians 65 or older think appropriate prescribing should be a national government priority;
- 65% know that some medications can potentially be harmful to seniors;
- 48% have gone online or elsewhere to learn more about the [harmful effects](#) of medications;
- only 7% have heard the word "deprescribing" before;
- 41% have asked their doctor about stopping certain medications;

- francophone Canadians are 72% less likely to be aware of harmful effects of medications than anglophones;
- patients who actively seek information about the potential harms of their medications are four times more likely to ask their doctor about deprescribing;

This summer, the Canadian Deprescribing Network launched a bilingual website on [medication](#) safety and deprescribing for the general public.

Medications are defined as inappropriate when the potential for harm outweighs the potential for benefit, particularly when safer alternatives exist.

"One in four older adults takes at least one potentially inappropriate prescription medication each year, increasing the risk of medication-related hospital admission and unnecessary expenditure to the health care system," Tannenbaum and Turner note in their study.

"70% of older adults are willing to deprescribe a medication, yet the prevalence of inappropriate medications remains unchanged," they add, singling out the 20% of family and internal medicine doctors and 50% of pharmacists who either don't raise the issue or are simply unaware there might be one.

Outside nursing homes, which were not included in the survey, "two-thirds of Canadian older adults are aware that some prescriptions can cause harm, half [of them] research information about medications, and only 6.9% are familiar with the term 'deprescribing,'" the researchers noted.

"Very few older adults are familiar with the term deprescribing," the authors conclude. "Healthcare providers have an important role to play in empowering [older adults](#) with information about medication harms in order to trigger safer medication management."

The telephone survey was conducted in English or French in all 10 provinces and three territories. The [survey](#) is considered accurate within two percentage points, 19 times out of 20.

More information: Justin P. Turner et al, Older Adults' Awareness of Deprescribing: A Population-Based Survey, *Journal of the American Geriatrics Society* (2017). [DOI: 10.1111/jgs.15079](https://doi.org/10.1111/jgs.15079)

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