

# Older adults often prescribed meds linked to higher side effect risks

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Drugs with high-risk anticholinergic properties can lead to risks of developing serious adverse events, such as cognitive impairment, falls, dementia, and even mortality in older adults. Yet, relatively little is known about prescribing trends of high-risk anticholinergic medications in the United States of America.

Researchers in the University of Minnesota College of Pharmacy conducted a repeated cross-sectional analysis of the 2006-2015 National Ambulatory Medical Care Survey to understand more.

They found that physicians' prescribing behavior remained stable over time, and these drugs were prescribed in about six percent of visits over a ten-year period. The findings were recently published in the *Journal of the American Geriatrics Society*.

"High-risk anticholinergic prescribing should be avoided because there are safer alternative medications for [older adults](#)," said the lead study author, Greg Rhee, Ph.D., M.S.W., adjunct assistant professor in the College of Pharmacy.

Anticholinergic medications block the neurotransmitter acetylcholine, which is part of the nervous system and plays a role in involuntary muscle contractions. These drugs are often prescribed for urinary, respiratory and gastrointestinal disorders. They're also often used to treat depression.

"Older [adults](#) are vulnerable to these medications due in part to physiological changes as they age. In general, older adults have a higher likelihood of developing [adverse drug events](#) from taking multiple medications," Rhee said.

The research team investigated whether prescribing patterns of high-risk anticholinergic drugs have changed over time and whether these patterns vary by physician specialty and

anticholinergic class among older adults in their office-based care. They also estimated demographic and clinical correlates factors independently associated with these high-risk anticholinergic [medication prescriptions](#).

They found:

- six percent of doctors' visits studied within the survey period listed an anticholinergic medication - suggesting he prescribing pattern varies by physician specialty (e.g., psychiatrists and urologists had higher rates of listing an anticholinergic medication);
- that by medication class, antidepressants were the most prevalent among anticholinergic drugs prescribed to older adults;
- women were more likely to receive high-risk anticholinergic prescriptions;
- patients from the South were more likely to receive high-risk anticholinergic prescriptions;
- patients with prescribed six or more medications had a greater likelihood of being prescribed high-risk anticholinergic prescriptions.

The research team acknowledged the study had limitations. The survey does not include emergency department or hospital visits. Therefore, the study results may actually underestimate the full impact.

Rhee noted that the prevalence of high-risk anticholinergic prescriptions was stable over time, but varied by physician specialty and [drug](#) class. He recommends increasing awareness of potential adverse effects and encouraging providers to prescribe less-risky medications.

**More information:** Taeho Greg Rhee et al, National Prescribing Trends for High-Risk Anticholinergic Medications in Older Adults, *Journal of the American Geriatrics Society* (2018). [DOI](#):

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