



IS YOUR GRANDMA ON DANGEROUS MEDS?

English

By Annie Webb

Many people can relate to this story: my grandma was suffering from chronic pain from arthritis, anxiety and insomnia. On top of her blood thinners, cholesterol drugs and other medications, her doctor prescribed Ativan (a benzodiazepine) as a sleeping aid and anti-anxiety medication, and OxyContin (an opioid), which is [at the root of our current opioid crisis](#). This is a woman who had never had a problem with prescription medication or addiction before.

At the time, family members were unaware that these medications carried severe risks, especially for seniors. The doctor seemed to think, "who cares, she's 91, let her have her pills" and there were no other alternatives provided for my grandma. No one knew what to do. Massage, physiotherapy, alternative medicine and psychologists are expensive and time-consuming, not covered by public health insurance, and inaccessible to the elderly who often don't drive and live off of a small pension.

My grandma became increasingly inactive and isolated. She fell several times and became increasingly frail. She insisted on continuing to be prescribed OxyContin because of her arthritis pain.

When she was hospitalized for the last time, the geriatrician took her off all her medication, knowing well that it was causing her more harm than good. But it was too late, she was already on her death bed.

How and when did this become a problem?

Seniors are prescribed a lot of medications, many of which are helpful. Some medications help seniors that suffer from chronic diseases live meaningful and active lives. However, some medications, like sleeping pills, antipsychotics (often prescribed for dementia) and opioids do more harm than good.

How many medications are seniors on?

- **2 out of 3** Canadians over the age of 65 (65.9%) take **at least 5 different prescription medications**.
- **1 out of 4** Canadians over the age of 65 (27.2%) take **at least 10 different prescription medications**.
- **More than 40 percent** of seniors over the age of 85 take **10 or more medications**.

(CIHI 2014)

Studies have repeatedly shown that the more prescription drugs you're on, the higher your chances of harmful effects of medication and hospitalizations. This is even more prevalent for seniors who are experiencing age-related changes to the body. Adverse effects of medication include side-effects, drug interactions, falls, fractures, memory problems and confusion, overdoses, hospitalizations and risk of death.

In fact, **1 in 200 seniors** are hospitalized each year in Canada due to harmful effects of their medication (compared to 1 in 1000 non-seniors). Falls are the leading cause of injury hospitalizations for seniors in Canada (CIHI 2011). **20–30 % of hip fracture patients die within one year** (Kong *et al.* 2012), and 30% of them are institutionalized within a year after the fracture (Morin *et al.* 2012).

Not only are seniors taking too many medications, but many are also being prescribed medication indicated in the [Beers list](#) as being inappropriate for seniors. Others, like proton-pump inhibitors should only be used for a short amount of time.

Canadian seniors who are prescribed at least one risky medication:

- 65 years old and over: **31% of men** and **42% of women**
- 85 years old and over: **39% of men** and **47% of women**

(Morgan *et al.* 2016)

Common risky medications for seniors include:

- **Benzodiazepines** (e.g. diazepam/Valium®, lorazepam/Ativan®, alprazolam/Xanax®)
- **Antipsychotics** (e.g. quetiapine/Seroquel®, risperidone/Risperdal®, aripiprazole/Abilify®)
- **Proton-pump inhibitors** (e.g. pantoprazole/Pantoloc®, esomeprazole/Nexium®, omeprazole/Losec®)
- **First-generation type-2 diabetes drugs** (e.g. glyburide/DiaBeta®)
- **First generation antihistamines** (e.g. promethazine, brompheniramine, diphenhydramine)
- **Opioids** (e.g. oxycodone/ Percocet®/OxyContin®/Oxycet®; hydrocodone/ Vicodin®/Lortab®/Norco®; meperidine/Demerol®; fentanyl/Sublimaze®/Duragesic®/Actiq®/Fentora®)

These medications increase the risk of cognitive impairment, dizziness, confusion, strokes, falls, fractures and motor vehicle accidents etc.

What to do?

It is of increasing national and international concern that older people are being prescribed more medications than ever before, many of which are inappropriate for seniors, who are suffering from far too many harmful effects.

There is a growing movement of physicians, pharmacists, nurses, patient advocates in Canada called the [Canadian Deprescribing Network](#) (CaDeN), who are raising awareness about this problem. Deprescribing is "the planned process of reducing or stopping medications that may no longer be of benefit or may be causing harm". More information on deprescribing is available on their [fact sheet](#).

One of the most important things to do is to **ask doctors, nurses or pharmacists the right questions about medications**, and to **specifically ask for a medication review**. Here's a great resource for this (click on it for the [print-ready version](#)):

5 QUESTIONS TO ASK ABOUT YOUR MEDICATIONS when you see your doctor, nurse, or pharmacist.

- 1. CHANGES?**
Have any medications been added, stopped or changed, and why?
- 2. CONTINUE?**
What medications do I need to keep taking, and why?
- 3. PROPER USE?**
How do I take my medications, and for how long?
- 4. MONITOR?**
How will I know if my medication is working, and what side effects do I watch for?
- 5. FOLLOW-UP?**
Do I need any tests and when do I book my next visit?

Keep your medication record up to date.

Remember to include:

- ✓ drug allergies
- ✓ vitamins and minerals
- ✓ herbal/natural products
- ✓ all medications including non-prescription products

Ask your doctor, nurse or pharmacist to review all your medications to see if any can be stopped or reduced.

Logos: IRMP, CPSI/ICSP, CoDeN, CaDeN, SafeMedicationUse.ca

Visit safemedicationuse.ca for more information.

Look out for your family members' health, ask the right questions and help them be proactive about their health.

Source: <https://spacedoutsdentist.com/2017/02/12/is-your-grandma-...>

Tagged: deprescribing, pills, medications, seniors, grandma, opioids, addicted, oxycodone

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