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Medication Assessment in the Older Adult: Using the Beer's List

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**Purpose of the Education**
- Describe appropriate pharmacologic principles of medication use in older adults
- Review Beer’s List Criteria (American Geriatric Society)
- Identify inappropriate and/or overlooked medication for the older adult
- Share with BH Unit staff, patients, families

**Education Pointers**
- Always have detailed list of medications and reasons for use
- For patients with dementia or cognitive decline, POA/guardian needs to have this information and make sure it is readily available during a hospitalization
- Bring all medications to outpatient visits
- Work with the older adult to keep medication up-to-date and dispose of older prescription drugs and OTC medication
- Meet with Pharmacist for medication reconciliation

**Beers List Red Flag Medications**
- Diphenhydramine (many OTC products): Tylenol PM, Advil PM, Equate Sleep Aid—anticholinergic, constipation, risk of dementia
- Benzodiazepines: alprazolam, diazepam, clonazepam, lorazepam—altered mental status
- Opioids: worst offenders are fentanyl, oxycodone—overdose

**Unit Education about Medications according to American Geriatric Society Beer’s Criteria for potentially Inappropriate Medications for the Older Adult**

**Changes in older adults that contribute to problems with adverse side-effects**
- Age related changes in pharmacokinetics (absorption, distribution, metabolism, excretion)
- Pharmacodynamics (physiologic effects of the medication)
- Cautions with increase in relative body fat and decline in CrCl
- Decreased clearance prolongs medication half-lives
- Increased sensitivity to effects of selected drugs
- Polypharmacy and changes in hepatic function creates variability in drug metabolism

**American Geriatric Society Beer’s Criteria**

**Polypharmacy in Older Adults**
- Polypharmacy means more than 5 medications
- Common in the older adult
- Prescription use by elderly adults (62-85 years)
  - At least one medication used by 87%
  - 5 or more prescriptions by 36%
  - Over the counter medications by 38%
- Medicare beneficiaries discharged from hospital to SNF used an average of 14 medications

**References**