ALLIANCE-MIDMED MEDICAL SCHEME

Patient Booklet: Deprescribing

Reducing Medication to Stay Safe

Odes Medical

Prepared by Odes Medical Consultancy Pty Ltd on behalf of Alliance-Midmed Medical Scheme.

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DEPRESCRIBING: WHAT IS IT?

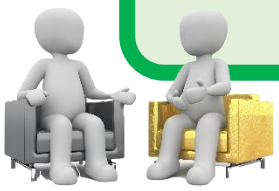
As life changes, our medication needs change.

Medications that were once good for us may not be the best choice now.

The process of re-evaluating and safely removing medication that is no longer right for us is known as “Deprescribing”.

It is important to periodically have our doctor review the medications that we are on, and adjust them to ensure our optimum health.

With our doctor’s guidance, we can safely eliminate medication that has become unnecessary, and improve our health!



DEPRESCRIBING: WHO IS IT FOR?

Change in Health

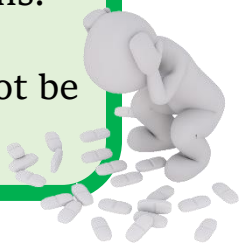
Whether our health improves (we get better) or declines (we get a new illness or become frailer), we should re-look at our medications with the doctor.

We do not want to be taking medication that we no longer have to, or that our body can no longer safely handle!

Change in Medication

Whenever we start or stop a medication, the doctor will need to look at how it will affect us considering our other medications.

It could be that medications that were once good for us may not be the best choice now!



Change in Age

As we age, our body changes.

We might think that as we get older and more frail, our body requires more medicine.

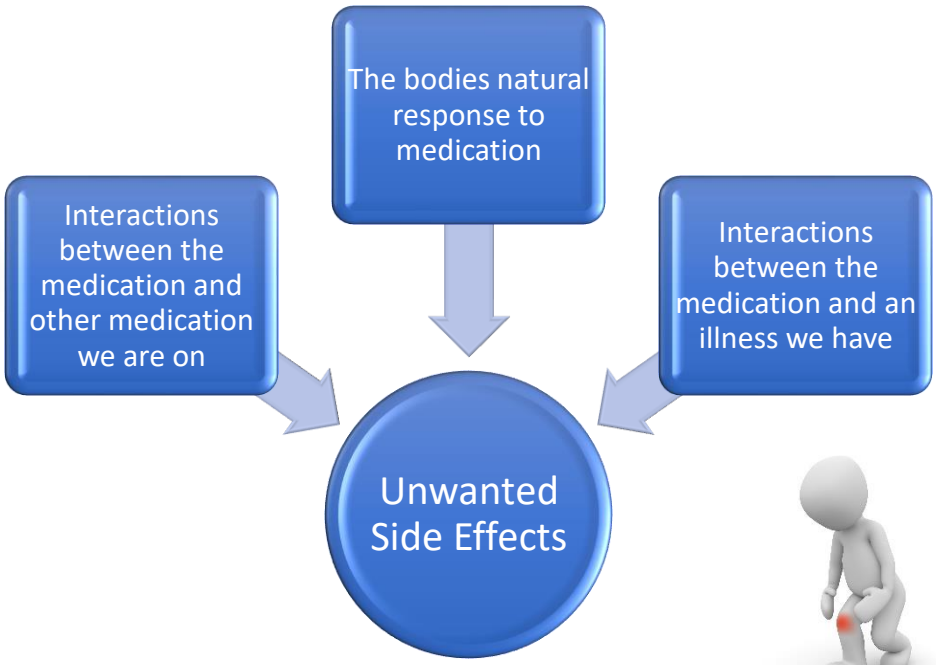
However, this is not always true.

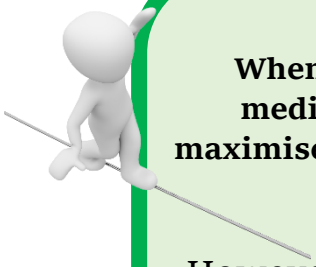
As our bodies become frail, our metabolism slows, our blood flow changes and our bodies elimination of waste slows down. Because of this, lower dosages of medication are often as effective as the higher dose we had when we were younger.

In fact, to continue on the original dose is now harmful to our bodies!

THE PROBLEM WITH UNNECESSARY MEDICATION

Medication often has unwanted side effects.





When the medication is needed, then it is important to take the medication for the benefit we get. The dosage is initially set to maximise the benefit to our body while minimising these negative side effects.

However, if we are taking medication that we don't need, or in doses that are too high, we are suffering these negative side effects for no reason!

Side effects from too much medication may include:

Decreased Functioning

Confusion

Cognitive impairment

Dizziness

Falls

Increased expenses

Co-payments for:

Medicine

Hospitalisation

Service providers

Treatments for side effects

More doctor visits

More hospitalisations

Risks of hospital-acquired illnesses

Complicated medicine regimens

Remembering to take all medications

Mistakenly taking too little medicine

Mistakenly taking too much medicine

Increased risk of Geriatric Syndromes

Depression

Cognitive impairment

Frailty

Falls

Malnutrition

Decreased ability to perform activities of daily living

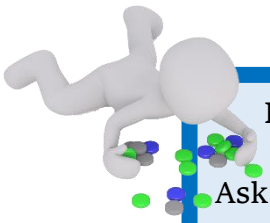
THE BENEFITS OF DEPRESCRIBING

Benefits of taking the correct levels of medication

- Improved quality of life
- Easier to take the necessary medication and take it correctly
- Avoid unwanted side effects from over-medicating
- Avoid worsening disease
- Avoid problems from medication reacting with other medication
- Decreased hospitalisations
- Decreased falls
- Improved cognition
- Increased level of functioning
- Increased life expectancy

People over 65 years old, and especially when over 85 years old, are at the highest risk of being over-medicated!

HOW TO SAFELY DECREASE MEDICATION



Medication may only be stopped or changed on Doctor's advice.

Ask the doctor to review the medication list and see what is unnecessary.

If the doctor says to continue with medication, then it is very important to listen!

The doctor needs the full picture, everything we are taking, to properly review our medication.

When visiting the doctor make sure to take with:

All **prescribed** medication.

All **over-the-counter** medication.

All **supplements/vitamins**.

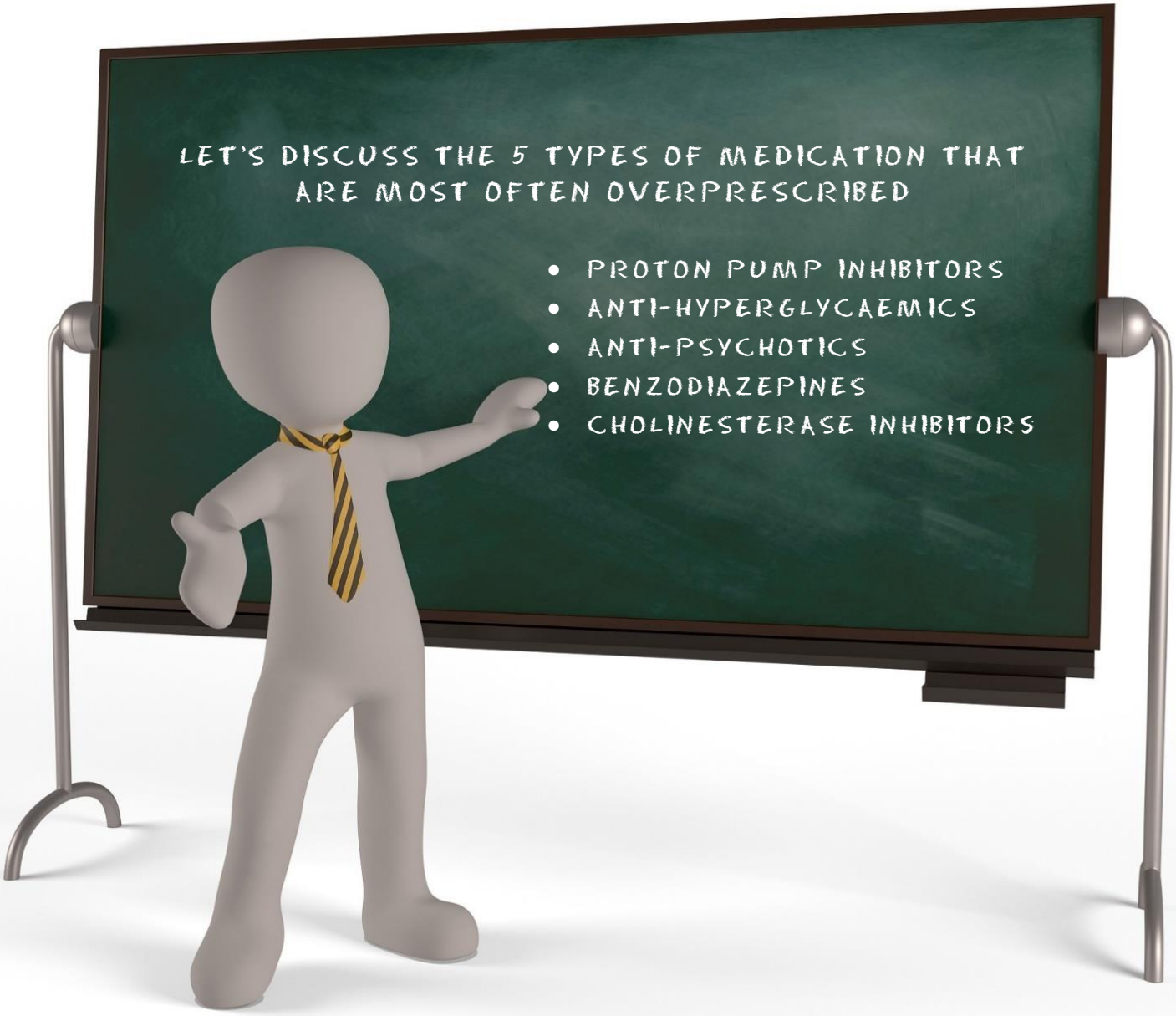
Important questions to ask the doctor:

- Why am I on this medication? What is it for?
- Is it effective for the purpose it was prescribed based on good research?
- Do I still need to take this medication?
- Do any of the other medications I am on achieve the same thing?
- Do I need this dosage or would a lower amount of medication also be adequate?
- What is the benefit to me?
- What are the risks/ side effects of continuing this medication?
- Is there a cheaper option of a similar type of medicine?

- Does the medicine interact harmfully with other medicines I am taking?
- Does this medicine have any effects on another illness I have?
- What will happen if I go off/ decrease this medication?
- Are there any lifestyle changes or non-medication treatment options that would allow me to stop or decrease the medication?
- Are any of the medicines I am taking being used to treat a side effect of a different medicine?
- Is there another medicine I could take which has less unwanted side effects?

When it comes to our health, we can't be scared to ask questions!

MEDICATION TO LOOK OUT FOR WHEN DEPRESCRIBING



Proton Pump Inhibitors

Such as: Omeprazole (e.g. Losec);
Esomeprazole (e.g. Nexium); Lansoprazole (e.g. Lansoloc).

Used to decrease the amount of acid made by the stomach glands.

Why would this be prescribed?

Short-term treatment (<8 weeks):

- Peptic ulcer
- H.Pylori infection
- Symptoms of reflux
- Symptoms of indigestion
- Erosive oesophagitis

Long-term treatment:

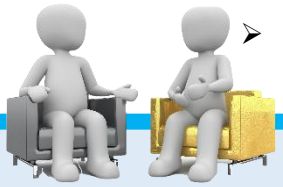
- Hypersecretion of acid
- Barrett's oesophagus
- Severe oesophagitis
- Chronic NSAID use with bleeding risk
- Bleeding/chronic GI ulcer
- Reflux that is not responding to any other measures

What are common side effects?

- Headache
- Rash
- Nausea / vomiting
- Abdominal pain
- Diarrhoea / constipation

Possible effects from long term use

- Increased frailty
- Lowered immunity, increasing risk for serious infections (diarrhoea and pneumonia)
- Osteoporotic fractures
- Vitamin B-12 deficiency and hypomagnesemia
- Kidney disease



What should we discuss with the doctor?

- Is this still necessary? (Especially when it was for short-term treatment).
- Does the risk of side effects outweigh the benefit?
- Could a lower dose have a good outcome?
- Could this medicine be decreased or stopped? (If the symptoms recur, the medicine can be re-prescribed).
- What non-medicine approaches can be used instead? (Heartburn symptoms, for example, can sometimes be alleviated by a controlled diet, avoiding meals 2-3 hours before bedtime, etc).
- Could occasional symptoms be managed with an over-the-counter medicine (such as Gaviscon)?

Anti-hyperglycaemics

Such as: Insulin, Metformin (e.g. Glucophage, Mylan-Metformin); Gliclazide (e.g. Diamicron); Pioglitazone (e.g. Actos); Vildagliptin (e.g. Galvus); Sitagliptin (e.g. Januvia).

Used to reduce blood sugar levels.

Why would this be prescribed?

- Type 2 diabetes
- To avoid high blood sugar levels

What are common side effects?

Hypoglycaemia (low blood sugar) is a common side effect of these medications.

Hypoglycaemia can cause:

- Dizziness (falls, injuries)
- Loss of coordination (falls, injuries)
- Confusion/ impaired cognition
- Blurred vision
- Slurred speech
- Nightmares
- Seizures
- Loss of consciousness / coma
- Increase risk of heart/ eye/ kidney disease
- Nerve damage
- Death

What should we discuss with the doctor?

- Is this still necessary? (It might not be needed if glycaemic control is good).
- Does the risk of side effects outweigh the benefit?
- Could a lower dose have a good outcome?
- Could this medicine be decreased or stopped? (If the glucose levels become high, the medicine can be re-prescribed; Monitoring of blood glucose will determine what is needed).
- What non-medicine approaches can be used instead? (Lifestyle changes: diet and exercise).

Anti-psychotics

Such as: Haloperidol (e.g. Serenace);
Risperidone (e.g. Risperdal); Clozapine (e.g. Cloment).

Used to reduce and control many psychiatric symptoms such as hallucinations, aggression and agitation.

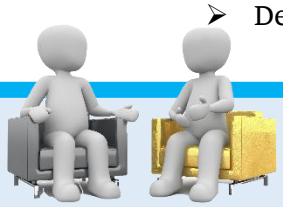
Why would this be prescribed?

Used in treatment of:

- Schizophrenia
- Depression
- Bipolar disorder
- Anxiety disorders
- Tourette syndrome
- Insomnia
- Psychosis in dementia
- Psychosis in Parkinson's disease

What are common side effects?

- Weight gain
- Increased risk of diabetes
- Dry mouth
- Dizziness
- Balance problems/ falls
- Drowsiness / excessive sleepiness
- Effects on motor control and coordination
- Spasms / tremors/ jerky movements
- Abnormal gait
- Urinary tract infections
- Heart problems
- Strokes
- Death



What should we discuss with the doctor?

- Is this still necessary for me?
- Does the risk of side effects outweigh the benefit?
- Could a lower dose have a good outcome?
- Could this medicine be gradually decreased or stopped? (If the symptoms recur, the medicine can be re-prescribed).
- What non-medicine approaches can be used instead? (Dementia symptoms, for example, can sometimes be alleviated by therapies, environmental changes, activities and relaxation. Sleeping problems, for example, can be managed by avoiding caffeine, exercise, big meals and alcohol in the afternoon; having a dedicated sleep zone).

Benzodiazepines

Such as: Clonazapam (e.g. Klonopin, Rivotril);
Diazepam (e.g. Benzopin, Betapam, Diastat, Pax, Valium);
Lorazepam (e.g. Ativan, Tranqipam, Tran-Qil);
Midazolam (e.g. Dormicum, Midacum, Versed);
Alprazolam (e.g. Xanax, Xanor).

Used to slow down the brain's functions,
causing calm, drowsiness and sleep.

Why would this be prescribed?

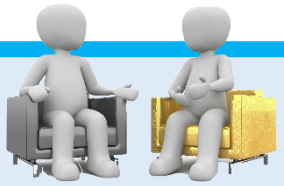
Used in treatment of:

- Anxiety disorders
- Sleep disorders

Note: This medicine is usually only prescribed for a short period of time as it becomes less effective after repeated use.

What are common side effects?

- Dependence on the medication
- Memory disorder
- Dementia
- Functional impairment
- Daytime drowsiness
- Accidents/ falls



What should we discuss with the doctor?

- Is this still necessary for me? (For example, as you age you may require less sleep and taking medication to sleep more is not necessary).
- Does the risk of side effects outweigh the benefit?
- Could a lower dose have a good outcome?
- Could this medicine be gradually decreased or stopped? (If the symptoms recur, the medicine can be re-prescribed).
- Are there safer medications available that would also be effective?
- What non-medicine approaches can be used instead? (If taken to manage sleep problems, for example: Avoid caffeine, exercise, big meals and alcohol in the afternoon; have a dedicated sleep zone; consult a psychologist or sleep specialist).

Cholinesterase inhibitor

Such as: Donepezil (e.g. Aricept);
Rivastigmine (e.g. Exelon); Galantamine (e.g. Reminyl).

Used to decrease the breakdown of acetylcholine.

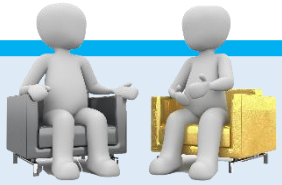
Why would this be prescribed?

Used in treatment of:

- Alzheimer's disease
- Parkinson's disease dementia
- Lewy body dementia
- Vascular dementia

What are common side effects?

- Nausea/ vomiting/ diarrhoea
- Dizziness
- Confusion
- Headache
- Insomnia
- Agitation
- Weight loss
- Falls



What should we discuss with the doctor?

- Is this still necessary for me?
- Does the risk of side effects outweigh the benefit?
- Could a lower dose have a good outcome?
- Could this medicine be decreased or stopped? (If the symptoms recur, the medicine can be re-prescribed; The family will need to have a plan for monitoring the condition).
- What non-medicine approaches can be used instead?

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