



Can community pharmacists be elderly patients' bridge to deprescribing? A cross-sectional study

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WHY AND FOR WHO?

Older adults

- often multimorbid

- often exposed to polypharmacy and hyperpolypharmacy

Deprescribing

- reduce dose, stop or withdraw medicine causing harm or which lost benefit

- shared decision-making

How do older adults perceive community pharmacists' involvement in deprescribing?



WHAT DID WE DO AND HOW?



Three-part
questionnaire

- Sociodemographic questions
- Translated and cross-culturally adapted rPATD* questionnaire

Opinion on **pharmacist's involvement** in deprescribing and providing follow-up

- Preferred follow-up method?

- Medicine they would like to stop taking
- Medicine they would not like to stop taking

Opinion on **pharmacist's skills, knowledge, and competences**



*Reeve E, Low LF, Shakib S, Hilmer SN. Development and validation of the revised Patients' Attitudes Towards Deprescribing (rPATD) questionnaire: versions for older adults and caregivers. *Drugs Aging*. 2016;33(12):913-928. doi:10.1007/s40266-016-0410-1

** **Permission to adapt the questionnaire was given by authors**

Our patients

- 194 older adults
- 62.90% female
- 76 years (IQR 60-80)
- 5 medicines (IQR 3-7)
- 60% from urban area
- 21.6% from costal area
- 18.4% from rural area

rPATD questionnaire

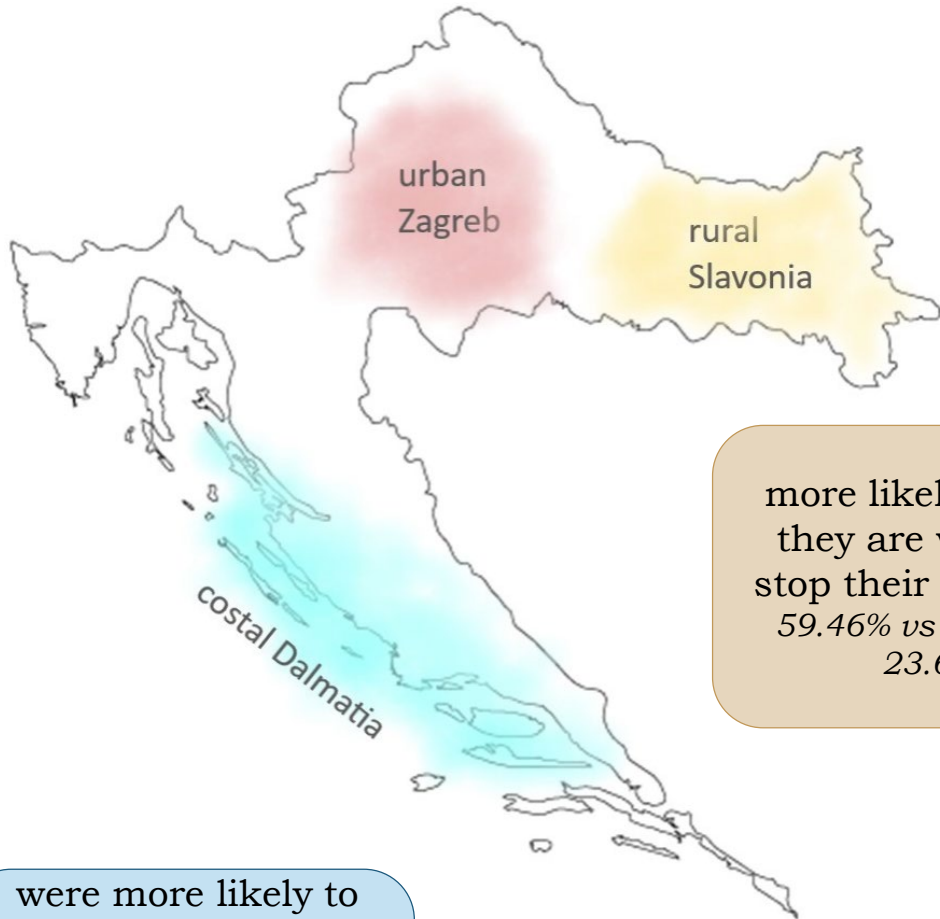
- 86.08% satisfied with their medicines
- **87.11% would be willing to stop one or more**
- 79.90% like to be involved in decision-making when it comes to medicines
- 16.49% feel they are taking one or more medicines they no longer need

Questions about pharmacists involvement

- **70.60% would feel comfortable if their pharmacists were involved in deprescribing**
- 70.10% believe their pharmacist has enough knowledge, skills, information about their medicines to suggest deprescribing
- 48.96% would prefer a pharmacy visit as a follow-up method

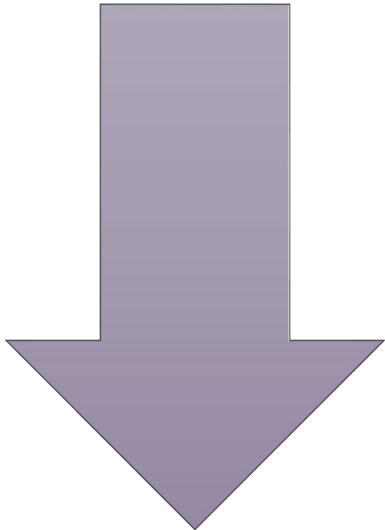
Opinion on pharmacotherapy

- those willing to have medications deprescribed were more likely to state the specific medicine
- **29.90% stated a specific medicine they would like to stop taking**
- 36.08% stated a specific medicine they would not like to stop taking



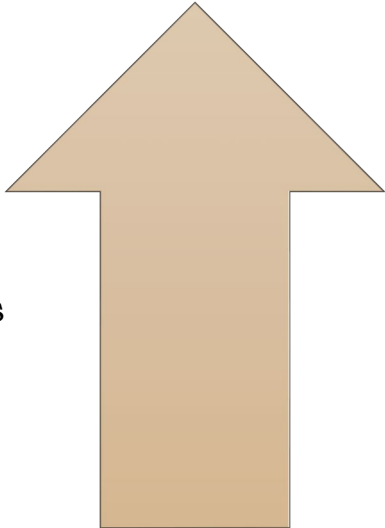
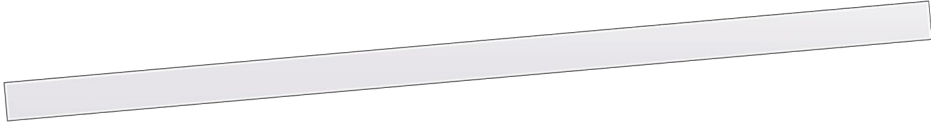
more likely to state they are willing to stop their medicines
59.46% vs 31.09% vs 23.68%

were more likely to feel uncomfortable if a pharmacist was involved in deprescribing
18.42% vs 12.61% vs 5.41%



Willing to stop

- Antihypertensives (24.52%)
- Statins (15.09%)
- Analgesics (NSAID/opioid) (11.32%)
- BZRA (9.43%)
- PPI (7.55%)
- Antiplatelet/anticoagulant (7.55%)

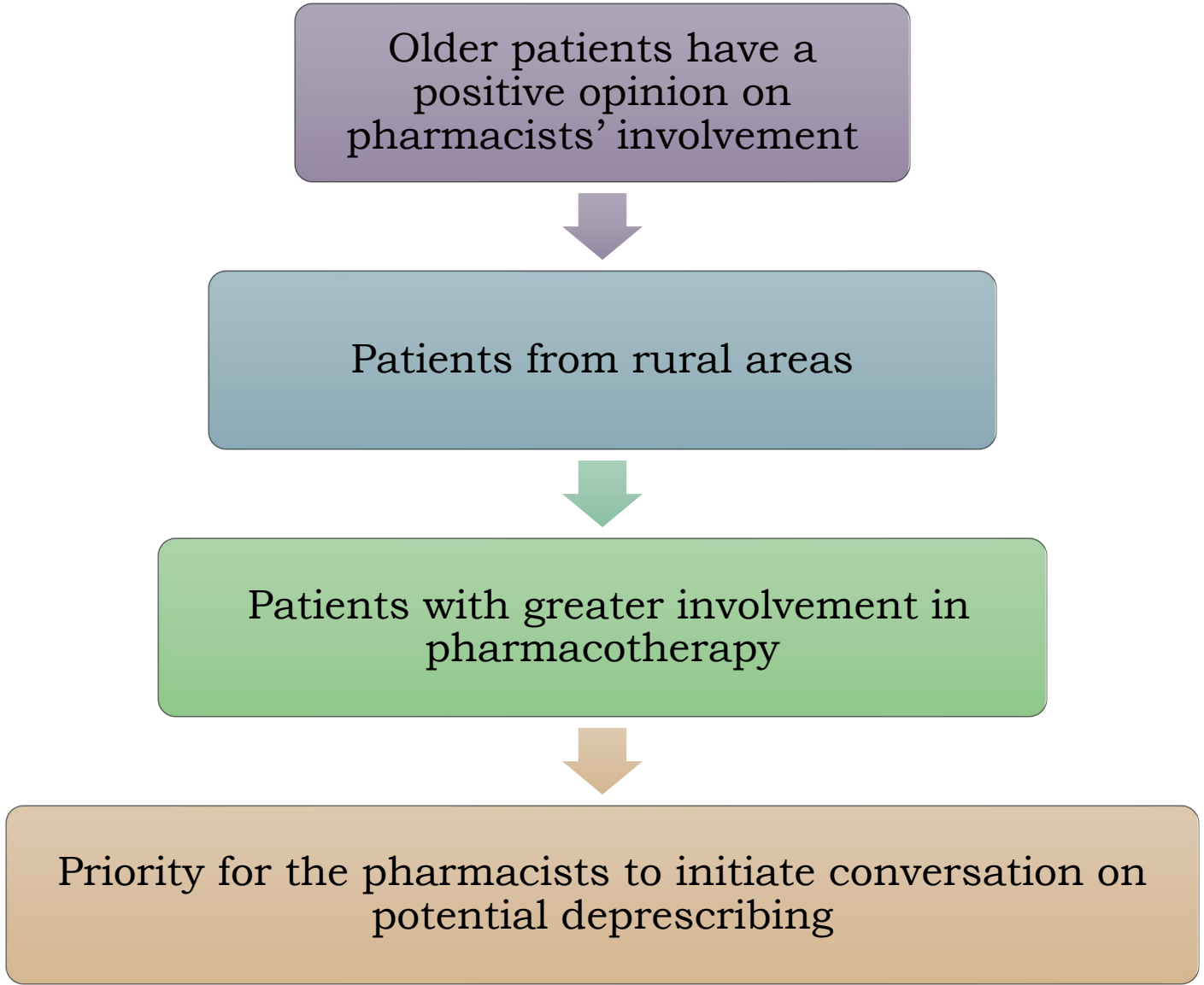


Would not like to stop

- Antihypertensives (36.23%)
- Antidiabetics (20.28%)
- Antiarrhythmics/antianginals (18.85%)
- BZRA (5.79%)
- Analgesics (NSAID/opioid) (5.79%)



FINAL THOUGHTS



Want to talk about it more? Reach out:

