

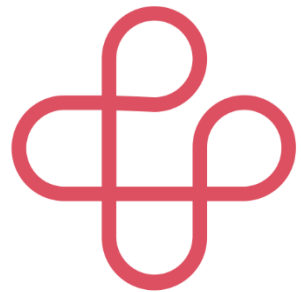
1999
3.1%



2014
8.0%



Quantifying problematic prescribing cascades



saphia

Scientific Association of Pharmacists in Amsterdam

A.K. Mohammad^{1,3}, J.G.Hugtenburg², J. Vanhommerig⁴, P.M.L.A. van den Bemt³, P. Denig³, F. Karapinar-Çarkit¹

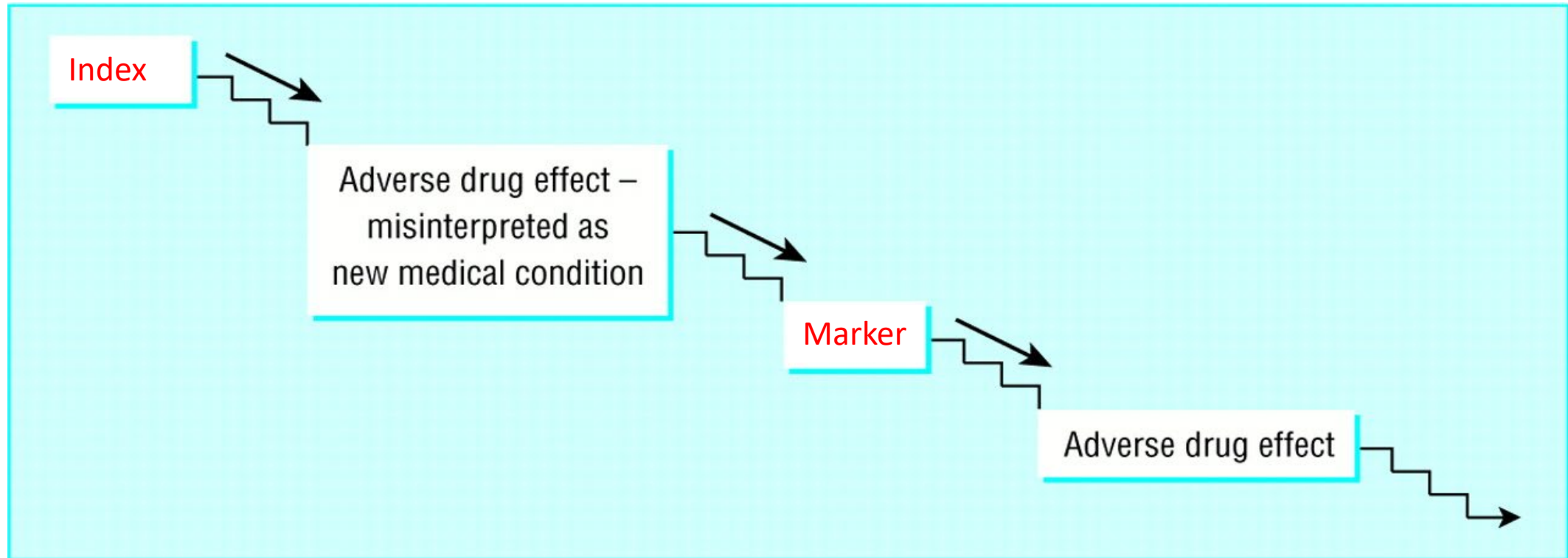
1Department of Clinical Pharmacy, OLVG Hospital, Amsterdam, The Netherlands

2Department of Clinical Pharmacology, Amsterdam UMC, location VUMC, Amsterdam, The Netherlands

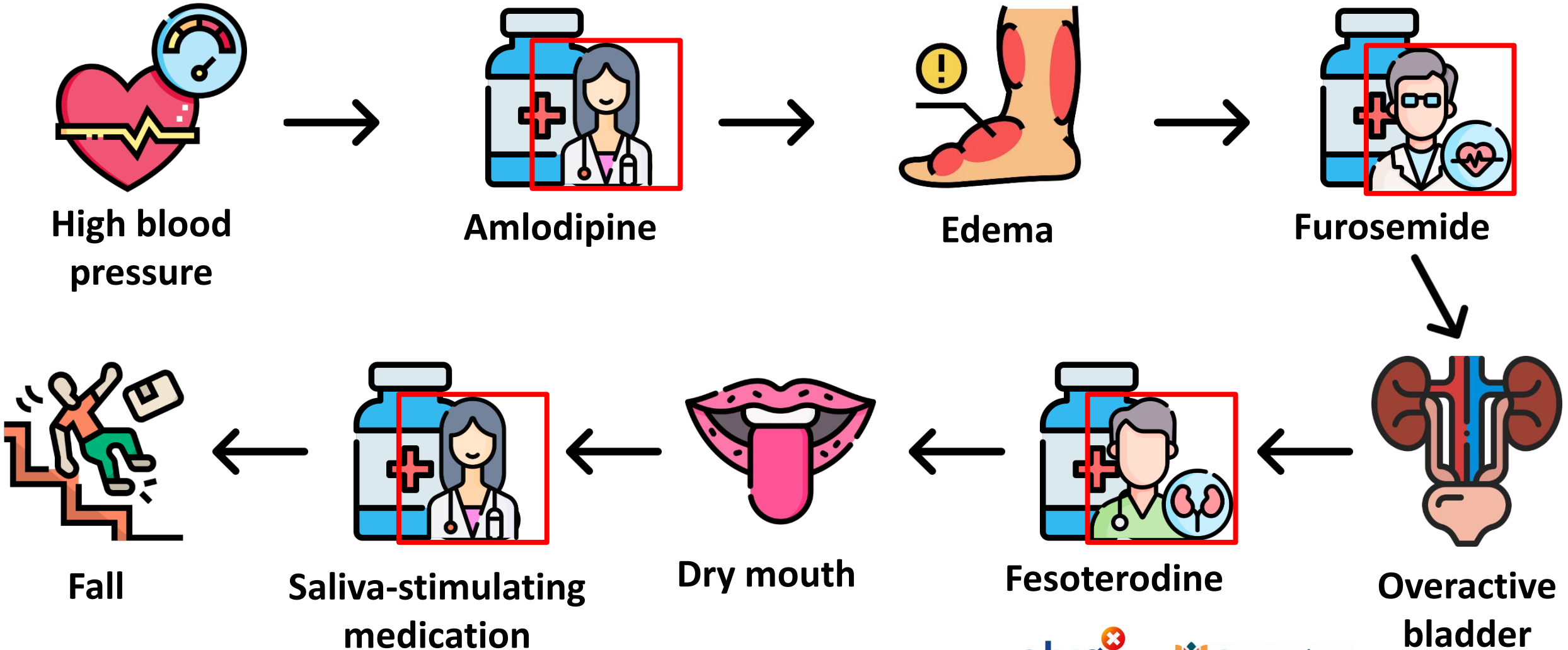
3Department of Clinical Pharmacy and Pharmacology, University Medical Centre Groningen, Groningen, The Netherlands

4Department of Research and Epidemiology, OLVG Hospital, Amsterdam, The Netherlands

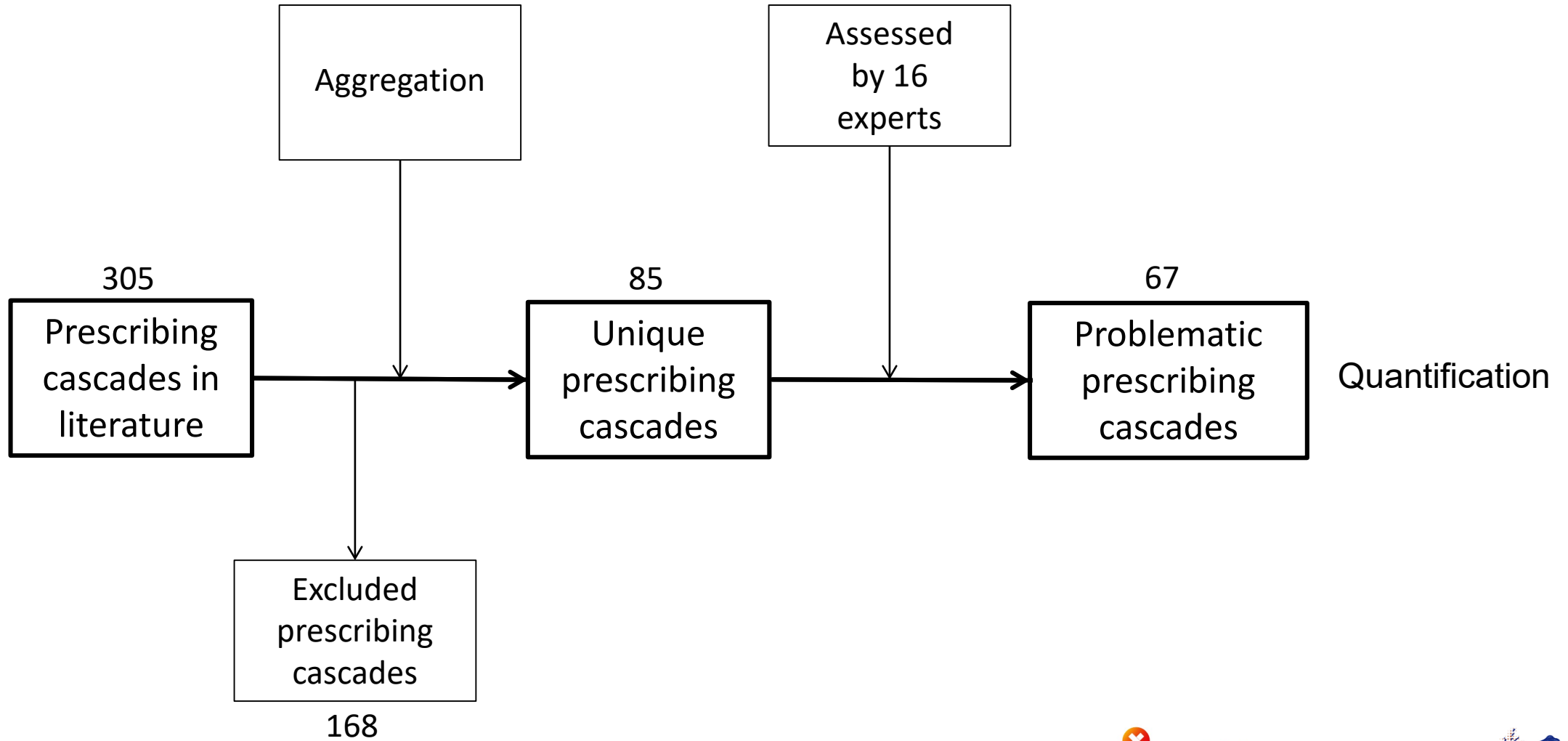
What is a prescribing cascade?



An example



Quantifying problematic prescribing cascades

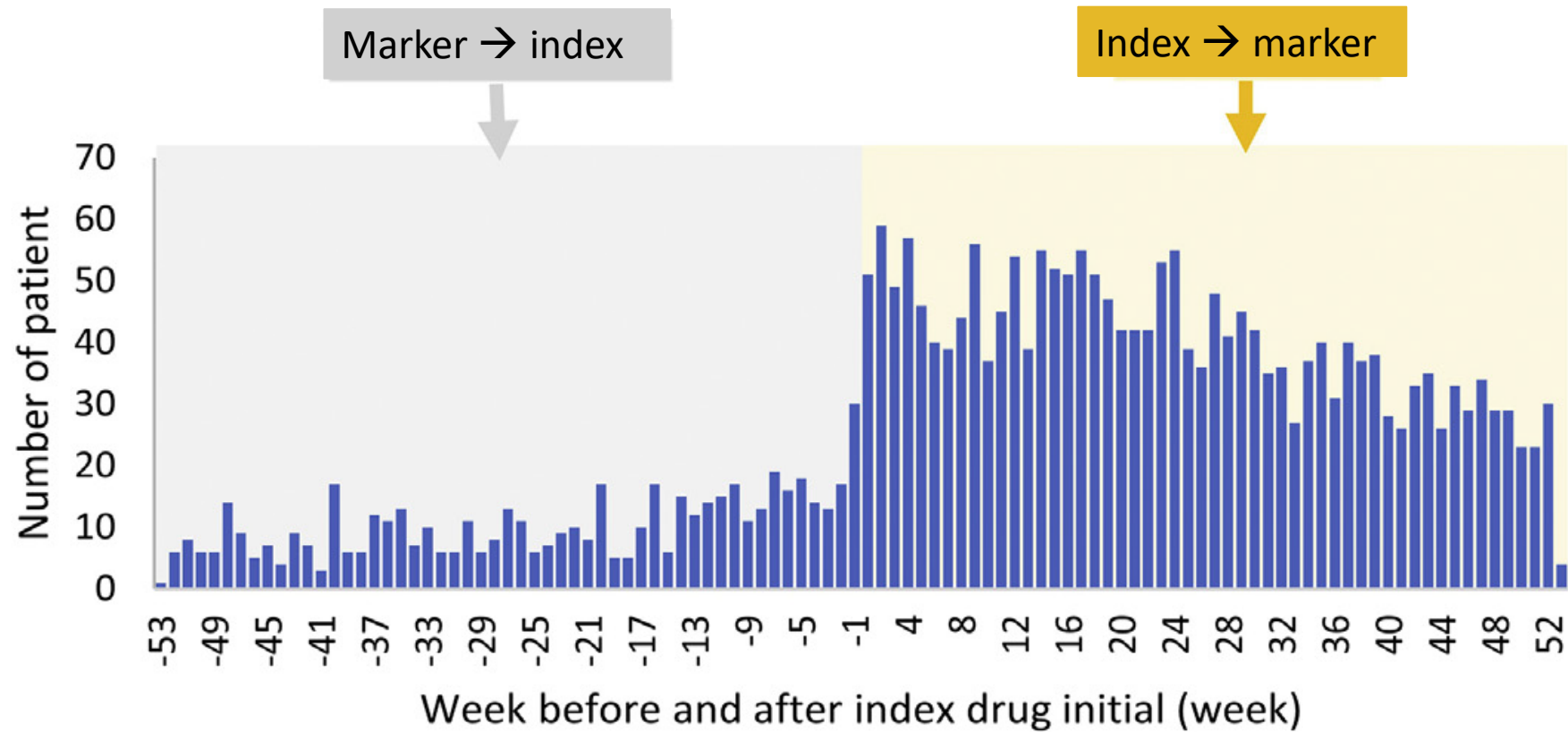


Prescription Sequence Symmetry Analysis (PSSA)

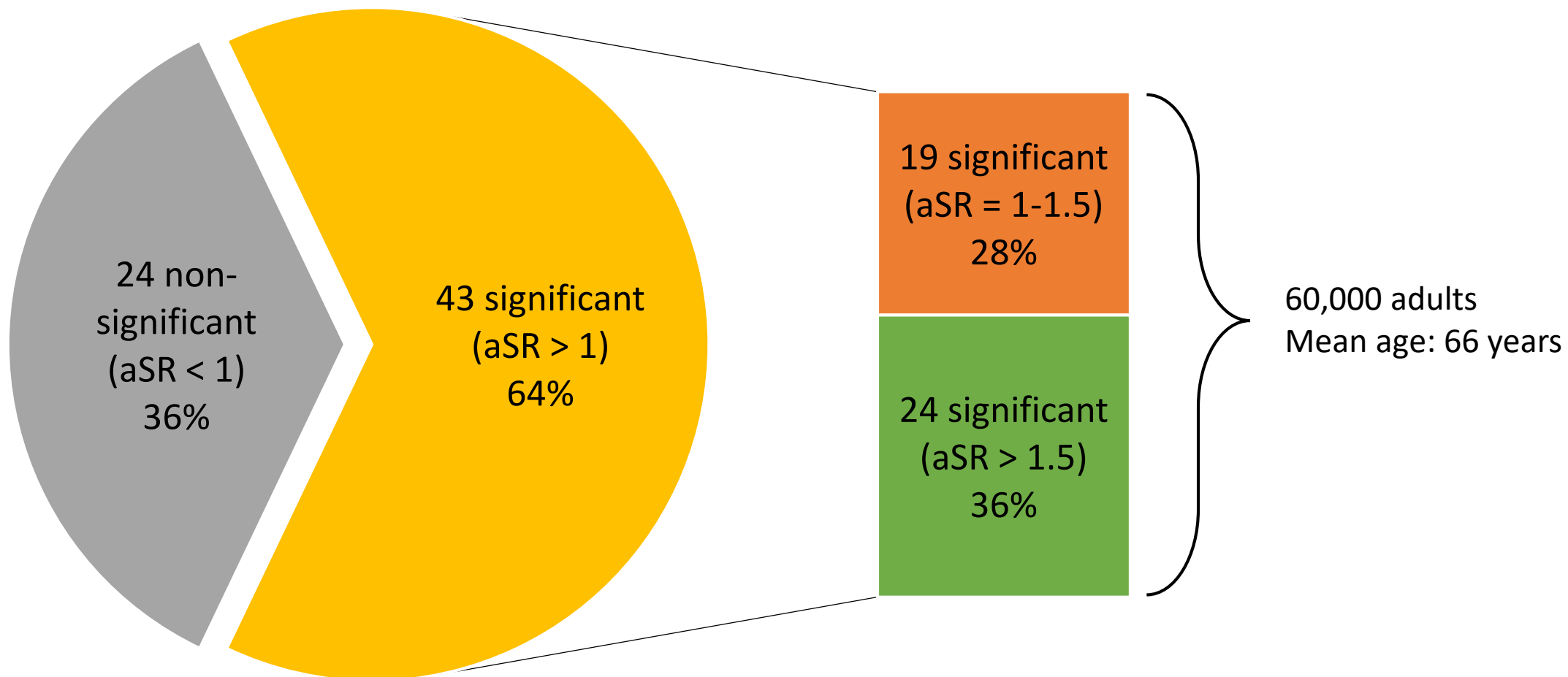
$$\text{crude sequence ratio (cSR)} = \frac{\text{Cases (index} \rightarrow \text{marker)}}{\text{Controls (marker} \rightarrow \text{index)}}$$

Adjustment for prescribing trends → adjusted sequence ratio (aSR)

Prescription Sequence Symmetry Analysis (PSSA)



67 problematic prescribing cascades



Three highest aSRs

Index medication	ADR	Marker medication	cSR (index-marker)/ (marker-index)	aSR (95% CI)
Lithium	Parkinsonism	Dopaminergics	5.56 (50/9)	<u>5.12 (4.41-5.83)</u>
Amiodarone	Hypothyroidism	Thyroid hormones	5.68 (454/80)	4.87 (4.64-5.11)
Lithium	Tremor	Proranolol	132 (99/33)	2.79 (2.39-3.18)

Conclusion

- 64% of problematic prescribing cascades have a significant association
- 60,000 adults might be using unnecessary medication.

Take-home message

'Any new symptom in an older adult should be considered a drug side effect until proven otherwise'.



Thank you for listening