



# Are you worried about the medications older family members are taking?

*By Johanna Trimble and Janet Currie*

Often, adult children are the first to notice the effects of prescription medications on their parents or other family members.

Common adverse effects can include problems with memory, over-sedation, confusion, dizziness, balance problems, increased falling or behaviour that is unusual.

## Some facts about medications and older adults:

- Two out of three older Canadians take at least five medications and one out of four take at least ten.
- All drugs have the potential for adverse drug reactions, even those bought over the counter.
- The risk of having adverse drug reactions increases with the number of drugs taken.
- Adverse drug reactions can be mild or serious, temporary or permanent. Problems can begin suddenly with a new drug or take time to develop.
- In general, older adults are more sensitive to prescription medicines because their bodies process drugs differently. Smaller doses may be effective and safer.
- Prescriptions for older adults may increase over the years, even though some may no longer be necessary or safe. This is especially likely if more than one doctor is prescribing.



## Are new symptoms caused by medications?

Whenever anyone experiences new or worrisome symptoms, the possibility that it may be due to a prescription drug should be considered, especially if new drugs are being used.

It is important to remember that new symptoms are not necessarily caused by a health condition or due to aging.

Regularly reviewing the list of medications a person takes (especially if they are taking more than five drugs) is recommended for people of *any* age.



## Being sensitive

Be sensitive when talking to an older family member about any changes you see in them or concerns you are having about their medications.

- Your family member may have already noticed new symptoms and be worried that their health is getting worse. They may also fear that reducing some medications will be dangerous.
- Explain that “taking charge” is not your intention but that starting with a review of all their medications by a pharmacist, doctor or nurse is a reasonable thing to do and could improve how they feel.
- Ultimately, most older people are concerned about maintaining their independence and prefer to make their own health decisions.

## Making a medications record

Help your family member put together a record of their prescriptions.

First, with your family member’s consent, ask their pharmacist to print out a list of medications. This is also a great opportunity for you and your family member to ask the pharmacist any questions you may have.

If your family member goes to multiple pharmacies, each pharmacy will usually only have a partial list of prescribed medications. It is very important to double check that the list of medications is complete.

The information on the printed list can help your family member create their own medication list, which can be entered on a pen and paper grid or on an Excel spreadsheet. Make sure to include over-the-counter drugs and supplements on the list.

This medications record should include the name of the drug, the dose, what it was prescribed for, how many times a day it is taken, when it was prescribed and who prescribed it. The Canadian Medication Appropriateness and Deprescribing Network provides a sample record form for your use here: <https://bit.ly/2MxRlw5>

MEDICATION RECORD						
Update this record each time you add or stop taking a medication, or when you change your dose. Include all prescription and over-the-counter drugs, vitamins and supplements.						
Your name: _____ Date you last updated this form: _____				Emergency contact Name: _____ Phone number: _____		
Bring this record to your doctor, pharmacist or other health care provider when you are reviewing your medications or have concerns that new symptoms may be a result of a drug you are taking. Your list of medications should be reviewed regularly to see if you still need all the drugs you are taking.				Indicate any allergies or intolerances: _____		
Medication name (brand name/generic name)	Form (pill, liquid, patch, eye drops etc.)	Dosage and instructions	Reason for use	Prescribed by	Start date	Stop date
E.g. Lipitor / atorvastatin	E.g. Pill	E.g. 20 mg, once a day	E.g. High cholesterol	E.g. Dr. Smith	Feb. 12, 2018	

Page 1 of 1

If your parent or family member is unable to request a list themselves, you may need to produce official documentation showing you as their healthcare decision-maker. This may mean having a “representation agreement” or a similar document that names you as the person who can make health care decisions on their behalf.

## Medication reviews

**Ask your parent or family member if they would be willing to have a medication review.**

- Explain that medication reviews by a pharmacist, a nurse or a doctor are a normal process and are used to make recommendations about drugs, to check for possible dose problems or drug interactions, whether some drugs are no longer needed and if it is possible to deprescribe\*.
- Depending on your province, a pharmacist may be able to provide medication reviews free of charge if a person is taking a certain number of drugs. Check with your local pharmacist to see if this is the case.
- Ask your family member if they would be willing to have you come with them to discuss the results of the medication review with the pharmacist.
- Ask for the medication review to be sent to your family member’s doctor. Make sure the results of the medication review are discussed with the doctor. Be sure a longer consultation appointment is requested to do so.
- Be aware that some older Canadians may not feel comfortable raising new symptoms that may be medication-related with their doctors because they feel this may be seen as impolite indicating a lack of trust.

## Medication reactions in the hospital

**What do you do if your parent has had a bad reaction to a medication while in the hospital or during a visit to the emergency department?**

- Be sure to find out which drug caused the problem and note the information on the medication list you are keeping.
- Make sure this adverse drug reaction is reported in your family member’s medical record.
- Many people are taken off a problematic drug at the hospital, only to have the same drug or drug class prescribed again in the community later, due to lack of communication. This may result in another emergency hospital visit. The hospital discharge information does not always reach the right person at the right time.



## Looking out for your family

You can be an invaluable help and resource to your loved ones. Respectfully discussing your concerns, and offering practical solutions and a helping hand can prevent serious health issues. Your support can also help your family member maintain their independence and feel empowered about their health.



**\*Deprescribing** means reducing or stopping medications that may not be beneficial or may be causing harm. The goal of deprescribing is to maintain or improve quality of life.

**Learn more about managing medications by visiting this website:**

[DeprescribingNetwork.ca](http://DeprescribingNetwork.ca)

**About the authors:**

*Johanna Trimble is a patient safety advocate and member of the BC Patient Voices Network. She is a member of the Geriatrics and Palliative Care Subcommittee of the Council on Health Promotion for Doctors of BC. As an honorary lecturer, she co-teaches first year medical students at UBC in Community Geriatrics as well as pharmacy students on medication issues in Long Term Care. Johanna is an active member of the Public Awareness Committee of the Canadian Medication Appropriateness and Deprescribing Network.*

*Janet Currie is a social worker who has been involved with patient and medication safety issues for over 17 years. She is particularly concerned about the safety and efficacy of psychiatric drugs and their impacts on seniors. She was previously a member of the core Executive of the Canadian Medication Appropriateness and Deprescribing Network, the past co-chair of the Canadian Women’s Health Network and was a two-term member of Health Canada’s Expert Advisory Committee on the Vigilance of Health Products. She owns and manages a website on psychiatric drug safety and has frequently testified to the Canadian Senate and the Parliamentary Standing Committee on Health on prescription drug surveillance and adverse drug effects. She completed a PhD on medication safety and off-label prescribing at UBC. At the time of this article’s publication, Janet was Chair of the Public Awareness Committee of the Canadian Medication Appropriateness and Deprescribing Network.*