

[IMAGE]

The Perils of Prescription Medications

Each year, elderly people in the U.S. make almost 17 million outpatient visits, either to their doctor's office or to a local hospital. Many of these visits occur so that patients can either fill an existing prescription, or get a new prescription for medication. Unfortunately, elderly patients sometimes receive drugs included in the Beers Criteria. Also known as the "always avoid" list, the Beers Criteria contains approximately three dozen medications that can cause adverse side-effects when given to older people, ranging from memory problems to dizziness, falls and high blood pressure.

To see how often elderly people receive inappropriate medications, the author of this study reviewed more than 8,100 outpatient visits made by senior citizens to doctors' offices and hospitals between 1995 and 2000. The analysis showed that in 7.8 percent of the visits - nearly one in 12 - an elderly patient received one or more drugs from the "always avoid" list. Elderly women over age 65 were twice as likely to get an inappropriate prescription than elderly men, and the risk of getting an unsafe medication was higher for patients who took several medications compared to those who took fewer medications.

Receiving the wrong medication can have serious - even fatal - consequences. If you (or a family member) is above the age of 65 and on prescription medication, here are a few recommendations:

- Ask the doctor if he or she is aware of the Beers Criteria.
- Bring a list of drugs you (or your family member) is taking to each doctor.
- Before starting a new medication, talk to the doctor about possible side-effects.
- Also, before starting a new medication, ask about taking tests on memory, mood and balance, so that any changes can be monitored.

To learn more about senior health, visit www.chiroweb.com/find/archives/senior/

Reference:

Rauch Golding M. Inappropriate medication prescribing for elderly ambulatory care patients. *Archives of Internal Medicine*, Feb. 9, 2004;164(3), pp. 305-312.

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