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THE TRUTH ABOUT POLYPHARMACY IN ELDERLY INPATIENT POPULATION.

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Introduction: There is increasing concern about the use of multiple medications in psychiatric patients. Older adults make up 15% of the population yet they account for 30% of the prescribed medications. There is increased risk of falls, confusion and consequent functional decline as a result of potential interactions and adverse drug events.

Aims/Objectives: To document the extent of polypharmacy and potential drug interactions in elderly inpatient population at the point of discharge.

Methods: 25 consecutive discharge summaries from an elderly mixed (organic and functional) inpatient unit were evaluated.

Results: out of 25 (15 female and 10 male) patients with age range of 59-97 years, an average of 6.5 drugs (Range:2-17; Median:6) were prescribed. An average of 3.1 pair of interactions (Range:0-15; Median:3) were noted. Potentially hazardous interactions (Average 0.68; Range:0-4) was a worrying trend in this patient group.

Conclusions: Polypharmacy is commonplace in elderly patients and is worrisome. Different strategies like in-house pharmacist may offer some safeguards though further research is needed.