POLYPHARMACY AND INAPPROPRIATE DRUGS IN PATIENTS WITH OROPHARYNGEAL DYSPHAGIA

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BACKGROUND AND IMPORTANCE
Oropharyngeal Dysphagia is a symptom where patients who present it usually have multiple nutritional, functional, morbidity and quality of life complications. It is associated with a higher incidence of aspiration pneumonia. OD can be caused by adverse effects of medications, such as dopamine antagonists (DA), central nervous system depressants (CNSD), anticholinergic drugs, which block the action of acetylcholine, among others.

AIM AND OBJECTIVES
To analyze the prevalence of polypharmacy (≥ 5 chronic drugs) and inappropriate drugs (anticholinergics and CNSD) in patients with OD. It was also calculated anticholinergic risk (AR) using different anticholinergic scales (AS).

MATERIAL AND METHODS
A retrospective observational study was carried out in a general tertiary hospital.

RESULTS
Characterization of the population
N = 60 patients 4 lost
Sex: 28 women vs 28 men and median age 73.2 [IQR 14.5 – 90.3]

Potencial medications to cause OD
461 drugs analyzed 104 potencial dangerous

Types of drugs that could cause OD
most prescrite drug: tamsulosin

CONCLUSIONS AND RELEVANCE
• It is observed that there is a high percentage of patients with OD are polymedicated.
• The prevalence of AR is high.
• A good pharmacological review with AS must be carried out and try to make a description, to reduce the anticholinergic load and the number of drugs.