ADEQUACY OF ANTIDEPRESSANT MEDICATION IN ELDERLY PATIENTS

J. Delgado Rodríguez¹, L. Pérez Cordón¹, M. Bitlloch Obiols¹, S. Marín Rubio², L. Campins Bernadas¹, V. Aguilera Jimenez¹, T. Gurrera Roig¹, M Serra Prat³

¹Hospital de Mataró, Pharmacy, Mataró, Spain
²Hospital Universitari Germans Trias i Pujol, Pharmacy, Barcelona, Spain
³Hospital de Mataró, Research Unit, Barcelona, Spain

5PSQ-072. ATC code: N06 - Psychoanaleptics

BACKGROUND AND IMPORTANCE

Depression affects about 14–26% of the elderly population. It is a frequent affective disorder and one of the main reasons for medical consultation. Elderly patients usually have several comorbidities that make polypharmacy a common issue. In the light of the above information, it is especially important that their antidepressant medication is adequate.

OBJECTIVES

To assess the adequacy of antidepressant treatment and the medication related factors associated with poor quality prescriptions in elderly patients diagnosed with depression.

MATERIAL AND METHODS

Elderly patients, defined as those aged ≥70 years, diagnosed with depression in three primary care centres, from March 2018 to May 2018, were included. Demographic data (age and gender) and the treatment prescribed at the time of the study were collected from the electronic clinical history. Patients with antidepressant therapy and those without were analysed.

Also, the adequacy of the prescriptions, consulting different psychogeriatric guides and taking into account the criteria repeated in two or more guides, and the reasons for poor quality prescriptions were studied.

RESULTS

The study included 170 patients, mean age 77.3 (71–92) years and 81.2% were women.

A total of 130 (76.5%) patients were treated and 150 antidepressant prescriptions were analysed: 27 (20.8%) patients were inappropriately treated and 27 (18.0%) prescriptions were inadequate. Forty (23.5%) patients were not treated and 16 (40.0%) should have been treated with antidepressant therapy.

In total, 43 (25.3%) patients were not being adequately treated. The main reasons for the inadequate prescriptions were: 3 (7.0%) overdosing, 1 (2.3%) underdosing, 6 (14.0%) incorrect duration, 17 (39.5%) incorrect indication, including lack of treatment, and 16 (37.2%) adverse effects.

CONCLUSIONS

About 25% of elderly patients with depression had inadequate prescriptions so it is important to choose an adequate treatment in order to reduce adverse effects and improve efficacy, especially in the treatment of a prevalent disease in a fragile population. Clinical pharmacists have an important role in the detection of inadequate medication in this group of patients.

ADEQUACY

75% Adequately treated
25% Not adequately treated
40% Underdosing
37% Incorrect duration
14% Incorrect indication
7% Adverse effect
2% Overdosing

HOSPITAL DE MATARÓ
jdeltgado@csdm.cat