

A PRELIMINARY SURVEY ON DAILY DRUG INTAKE IN OLDER PATIENTS IN COMPLIANCE WITH EAHP POLICY STATEMENTS ON AN AGEING SOCIETY

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Background

The **elderly** are particularly at increased **risk of ADRs** attributed to:

- physiological changes;
- pharmacokinetic and pharmacodynamics changes;
- polypharmacy;
- poor compliance.

Methods

A preliminary **prospective study** was performed by the TP on September 2018 on **60 elderly patients**. After acquiring informed consent, **patient questionnaires** were administered to evaluate the correct use of **drugs, OTC drugs, supplements, and herbal products**.

Objectives

- identify the **risk factors** inherent the **daily drug intake**, in order to **prevent/reduce the incidence of ADR** and to increase the reporting of them.
- stimulates the **patient reporting** to the **pharmacovigilance system**.

An **educational brochure** has been created and sent to the elderly during the interviews.

Results

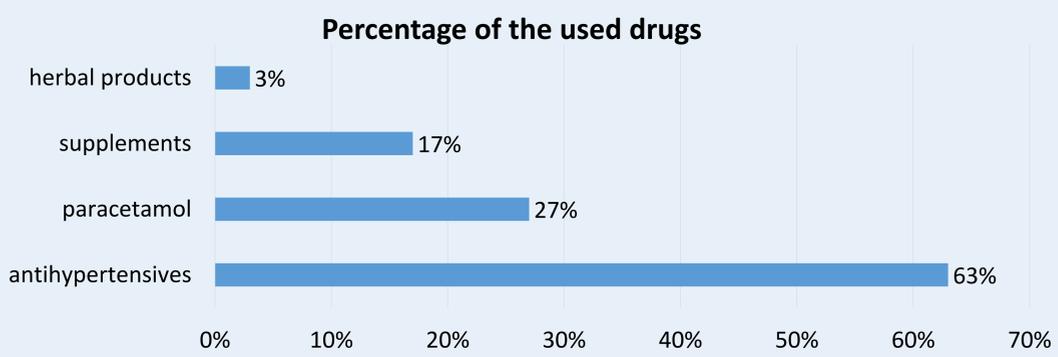
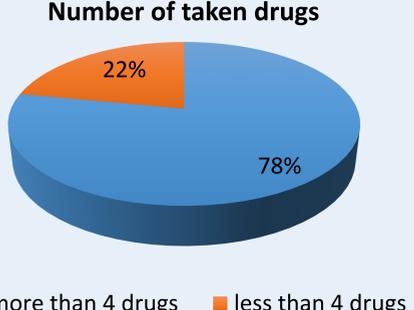


- **Age:** average of 72,7 years;
- **Sex:** 70% (42/60) males and 30% (18/60) females;
- **Kind of Patients:** 95%(57/60) outpatients and 5%(3/60) inpatients;
- **Reasons for hospitalization:** 46,6%(28/60) cardiovascular diseases;
- **Patients in polytherapy (≥ 4 drugs):** 78,3%(47/60).

- **Antihypertensives** were the most frequently used 63,3% (38/60);
- 16/60 (26,6%) of patients reported the use of **Paracetamol** when needed;
- 10/60 (16,6%) patients reported the use **supplements**;
- Only 2/60(3,3%) patients the use of **herbal products**.

- **Betamethasone**;
- **Iopromide**;
- **Ranolazine**;
- **Levofloxacin**;
- **Cefuroxime**;
- **Amoxicillin clavulanate**.

- **Diarrhea and procrastination related to Nintedanib**;
- **Head and hand tremor related to Tacrolimus**.
- These ADRs have been reported in the pharmacovigilance system.
- A good adherence therapy and knowledge of ADR reporting methods emerged from the interviews.



Conclusions

The direct approach with the elderly patient has been important to focus on their particular needs and multidisciplinary team work has improved the risk/benefit ratio of the therapies. Further data will be recorded.



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