

POLYPHARMACY AND POTENTIALLY INAPPROPRIATE MEDICATIONS IN ELDERLY ONCOHAEMATOLOGICAL PATIENTS REFERRED TO PALLIATIVE CARE: APPLICATION OF THE STOPPFrail CRITERIA

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BACKGROUND AND IMPORTANCE

Polypharmacy and potentially inappropriate medications (PIMs) are known problems in elderly patients, but their prevalence in cancer and end-of-life settings are less clear. Specific criteria to assist clinicians in this setting are very limited.

AIM AND OBJECTIVES

To analyse the prevalence of polypharmacy and PIMs in elderly onco-haematological patients referred to palliative care.

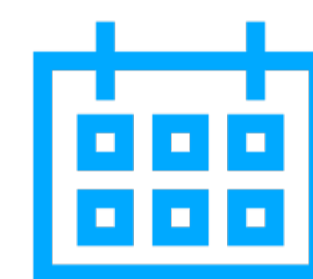
MATERIALS AND METHODS



Study design Retrospective, observational study in a third level hospital.

How?

Demographic and clinical data were collected from the electronic medical record. Polypharmacy was defined as the use of ≥ 5 chronic drugs. PIMs were screened using the STOPPFrail criteria.



When? 1 April 2020 – 30 June 2020



Inclusion criteria: Onco-haematological patients aged 65 or older referred to palliative care.

RESULTS

PATIENTS AND TREATMENT CHARACTERISTICS

N = 62 (63% men) Median **age**: 78,5 years (range 65-94) 53 (85%) **ECOG** equal or greater than 3

Comorbidities mean $2,7 \pm 1,8$ **Chronic drugs** mean $7,4 \pm 3,5$ **Polypharmacy present** in 79% of patients

Total number of PIMs detected: 85 [at least one PIM was detected in 50 (80%) patients (mean $1,3 \pm 0,9$)]

Only 9 patients (14,5%) remained alive at the end of the three-months follow up period.

MOST FREQUENT PIM DETECTED ACCORDING TO STOPPFrail CRITERIA

STOPPFrail criteria (description)	N
B1 (lipid lowering therapies)	21
E1 (proton pump inhibitors at full therapeutic dose)	17
G1 (calcium supplementation)	11
A2 (drugs without clear clinical indication)	8
I1 (antidiabetic oral agents)	8

CONCLUSIONS

- ✓ The outcomes confirm a high prevalence of polypharmacy and PIMs in elderly oncohaematological patients referred to palliative care.
- ✓ The STOPPFrail criteria might be an useful tool in the detection of futile drugs eligible for deprescription in this population.



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