ANTICHOLINERGIC RISK IN THE ELDERLY
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Anticholinergic drugs (ACD) are closely related to serious negative health outcomes in the elderly, however, they are widely used in these patients. There are several scales in the literature to predict the risk of suffering anticholinergic effects in the elderly.

To analyze the anticholinergic risk and its variability using different scales in a sample of institutionalized elderly patients.

Observational and retrospective study, which includes institutionalized patients with the following characteristics: age≥65 years, polymedicated (>5 drugs) with at least one prescribed ACD. The variables collected were: age, sex, prescribed drugs and anticholinergic risk calculated from the Anticholinergic Cognitive Burden Scale (CBA), Anticholinergic Risk Scale (ARS), Chew’s Scale (Chew), Anticholinergic Drug Scale (ADS), Duran’s Scale (Duran) and Drug Burden Index (DBI). Data were obtained from the electronic clinical history.

41 patients (73.2% Women) were included with mean age: 86.6±7.1. Mean prescriptions: 11.2±2.7.

There is a high probability of suffering anticholinergic effects in our sample of patients, however, according to the scale used, both the percentage of patients with risk of anticholinergic effects and the degree of the risk is very variable. It seems that the DBI scale tends to detect greater risk in our patients. Further studies are needed to validate the more appropriate scale for our population.