

PS-007: Inappropriate prescribing of benzodiazepines in comorbid older patients at hospital discharge



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Introduction

**Potentially
Inappropriate
Prescriptions**



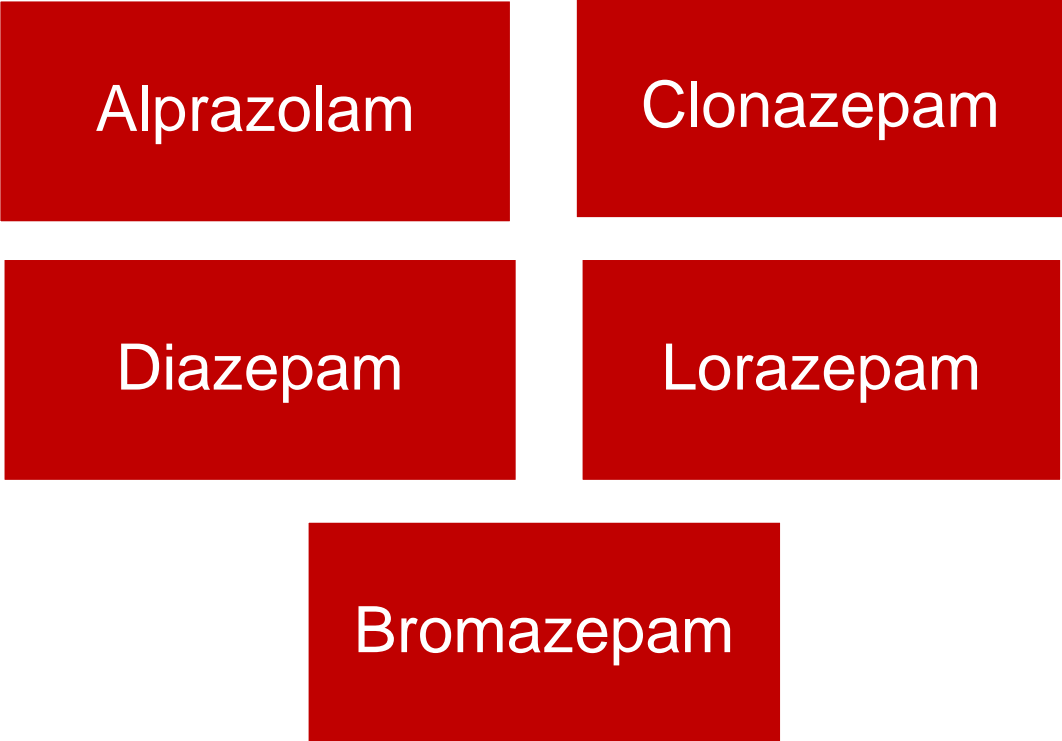
➤ Benzodiazepines are among the most commonly prescribed drugs among older people despite large evidence exist on the increased sensitivity and slower metabolism in this group of patients.

➤ Hospital discharge represents a critical moment of care transition where the inappropriate prescription of benzodiazepines might be detected and potentially avoided or corrected.

➤ Hospital pharmacists are ideally placed to play an active role in it.

The objective of our study was to determine the prevalence of the potentially inappropriate prescriptions (PIP) of benzodiazepines among comorbid older patients at hospital discharge.

Results



Benzodiazepines were potentially inappropriate according to Beers 2012 criteria in 11 cases (6.67% of the prescriptions containing a benzodiazepine) for the treatment of insomnia, agitation, or delirium.

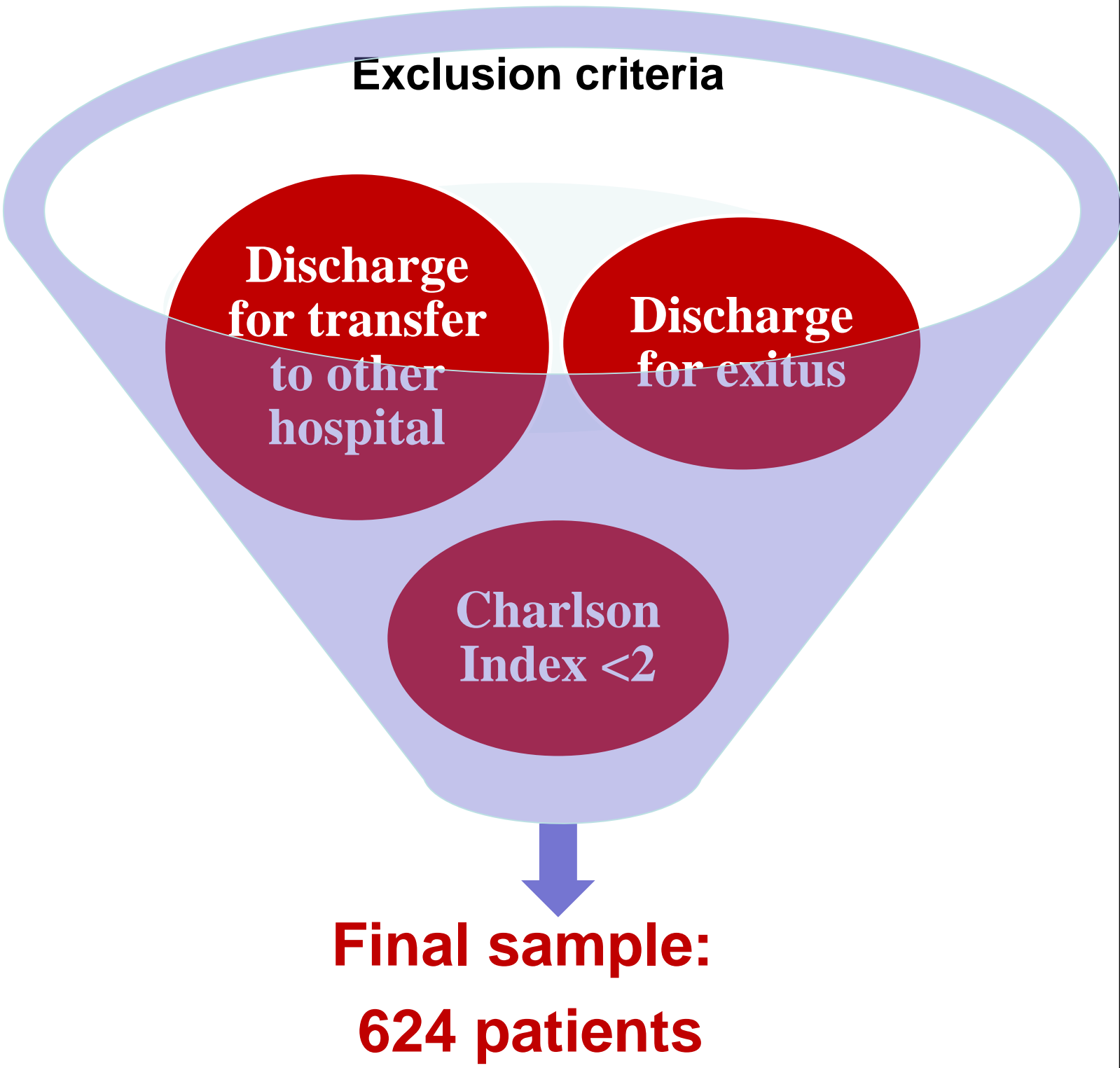
Number of patients with benzodiazepines prescriptions	PIPs with benzodiazepines (Beers Criteria 2012)
165 (26.40 %)	11 (6.67%)

Methods



When? July 2011 – June 2012

15 % random sample → 1004 older patients



Conclusions

✓ We found that 6.67 % of the benzodiazepines were inappropriately prescribed in co-morbid older patients at hospital discharge.

✓ Hospital pharmacists should be involved in the medication review and in the reduction of PIP including benzodiazepines.

✓ Further research about prescription appropriateness of benzodiazepines among older people in different healthcare settings would allow understanding the extent of the problem and contribute in the potential preventability of PIP.

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