

# Reducing Medications to Meet Life's Changes

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# Declarations

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Canadian Medication  
Appropriateness and  
Deprescribing Network

# WHY ARE WE HERE?

Understand when and why it makes sense to reduce or stop medications

Gain skills and confidence to ask questions about medications and get involved in decisions





# 10

Average # of  
medications taken  
by LTC residents in  
Canada



# OUR GOAL FOR DRUGS WE TAKE

Necessary

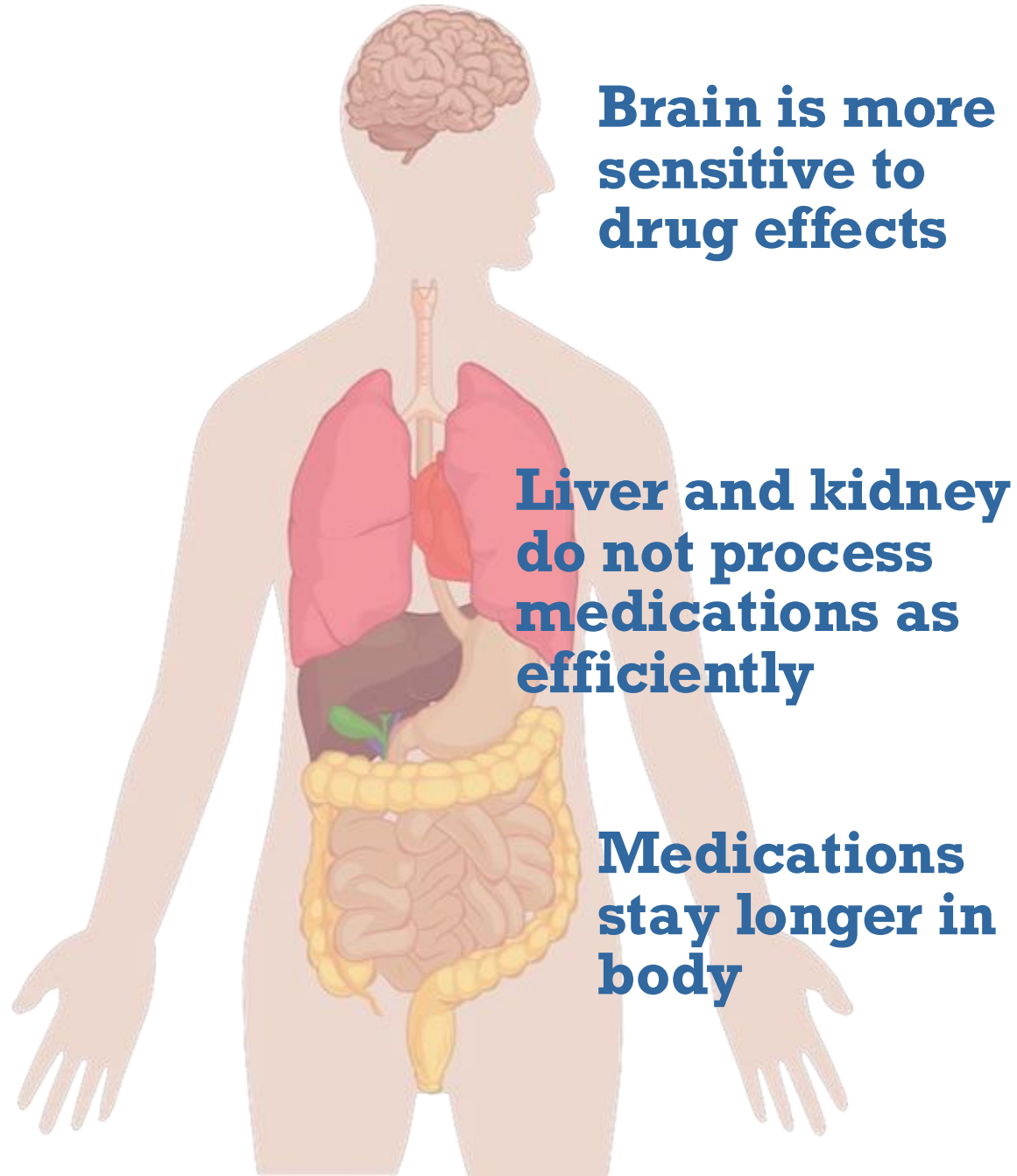
Benefits outweigh risks

Aligns with “what  
matters most”

Not too much “work”

# AS WE AGE

We handle  
medications  
differently



**Brain is more  
sensitive to  
drug effects**

**Liver and kidney  
do not process  
medications as  
efficiently**

**Medications  
stay longer in  
body**



66 years old



84 years old

More medications

More chronic diseases

Change in function, activities

Change in “what matters most”

# LIFE CHANGES

**What is necessary,  
beneficial, and  
safe can change**



**Lower  
quality  
of life**

**Higher  
chance of  
falls**

**Higher chance  
of going to  
hospital**

**Annoying**

**Mind and body  
might not work  
as well**

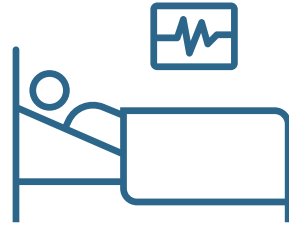


# **MEDICATION OVERLOAD**

Reassessing medications is good  
practice



Care  
transitions



Change in  
health  
status



Care  
conference



You have a  
question or  
concern

When is a good time to  
reassess?

“A conversation  
about options”

“A medication  
checkup”

”Medication  
review”

Starting a  
medication

Increasing a dose

**Backing off**

**Making sure  
medications  
are a good fit  
an individual  
person**

# REMEMBER OUR GOALS

Necessary

Benefits outweigh risks

Aligns with “what matters most”

Not too much “work”

# When to back off a drug

No longer necessary

Harms outweigh benefits

Doesn't fit with “what matters most”

Too much work

# When to back off

No longer necessary

Harms outweigh benefits

Doesn't fit with “what matters most”

Too much work

Reduce medication  
burden

Maintain or improve  
quality of life



People change over time

Reassessing medications is good  
practice

Understand when and why  
makes sense to reduce or  
stop medications

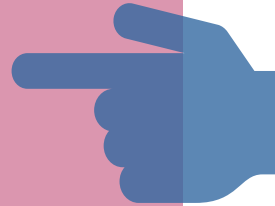
# When to back off a drug

No longer necessary

Harms outweigh benefits

Doesn't fit with "what matters most"

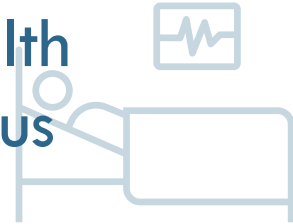
Too much work




**Different for everyone!**



Care transitions 

Change in health status 

Care conference 

You have a question or concern 

Healthcare  
professional

Best decision for  
an individual

Patient/resident or car

Expert on medications  
and diseases



Expert on yourself or  
loved one

Expert on your or your  
loved one's experience

# Doctors tell us...

It's hard to keep up to date records about a patient's medications

Patients or  
carers can  
keep track  
of

- ✓ The reason for taking a medication
- ✓ How long a medication has been taken
- ✓ Is the medication working?
- ✓ Are there any side effects?

# Tracking medication history and experience – key elements

- Medication name (e.g. prescriptions, eye drops, creams, over-the-counter, vitamins, herbals, etc.)
  - Both regular and ‘as-needed’
- **Reason for use**
- Directions and how it is taken
- **When it started and expected duration**
- Who prescribed it
- **The effect** – both good and bad



# Keeping track of medication history and experience

## Homework #1 – Fillable Medication Record

### MEDICATION HISTORY AND EXPERIENCE

Update this record each time a medication is added or stopped, or dose changes. Bring this medication record to all appointments with a doctor, pharmacist or health care provider. The list of medications should be reviewed regularly to see if all of the medications are still needed.

Name: _____	Emergency contact name: _____
Date this form was last updated: _____	Emergency contact phone number: _____
Last updated by: _____	Pharmacy name: _____ Pharmacy phone number: _____

### CURRENT MEDICATIONS

Include all prescription and over-the-counter drugs, vitamins and supplements. Don't forget to list any eye/ear drops, patches, creams, inhalers, nasal sprays or injections. |

Medication name and how it is taken (Dose, route, when and how often) (Route: by mouth, in eyes or ears, on skin, etc.)	Reason(s) for use	Start date	Stop date or expected duration	Prescribed by	Additional information (e.g., changes in doses, side effects to watch for, if it helped symptoms, any monitoring at home and what are the results?)



<https://deprescribing.org/talking-about-medications-workshop-materials/>

# Things to think about

Why am I taking this drug?

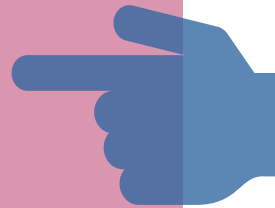
Is this drug (still) necessary?

Is this drug helping?

Is this drug causing harm?

Does this fit in my life?

What is important to me?



**Different for everyone**

Healthcare  
professional

Best decision for  
an individual

Patient/resident or car

Expert on medications  
and diseases



Expert on yourself or  
loved one

Expert on your or your  
loved one's experience

Medication	When Started (Reason for Use)	Response
Lorazepam	15 years ago after husband died, couldn't sleep	Usually sleeps through night, no sleep complaints
Diabetes medications	Thinks has been on same ones at least 5 years	Thinks her BG is good, has lows "once and a while" (she had a fasting BG of 3.1 a few wks ago)
Gabapentin	Started by previous GP for back pain, back pain was bothering her a few months ago, locum increased dose from 300 mg BID to 300mg TID	Doesn't notice a difference from an increased dose, but thought this helped when first started
Pantoprazole	~15 years ago for bad heartburn after husband died	No ongoing problems with heartburn or indigestion

Example of medication history



Is this still  
necessary?

Prescriptions sometimes  
get continued for many  
years when they might only  
be need for a limited  
amount of time

## Examples

Proton pump inhibitors for  
heartburn

Antidepressants for depression  
many years ago

Pain medications like Tylenol®

Do harms outweigh benefits?

Is this drug helping?

Experiencing side effects?

**Common side effects**

**Example of drugs that might contribute or cause**

**Drowsiness, sedation, cognition changes, dizziness, falls**

Benzodiazepines and Z drugs (sleeping pills)

Opioids

Antipsychotics

Sedating antidepressants (trazodone, mirtazapine)

Gabapentin or pregabalin



# What matters most?

<https://myhealthpriorities.org/>

Maximize  
quality of  
life?

BOTH?

Reduce  
risk of  
future  
disease?

Healthcare  
professional

Best choice may  
be to stop or  
reduce a  
medication

Patient/resident or car



“Pause and  
monitor”

# WHAT CAN YOU DO?

Be an expert on medication history and experience

Ask questions

Have a conversation

Gain skills and confidence to ask questions about medications and get involved in decisions

# HELPFUL RESOURCES

# Medication decisions in LTC



## Having conversations about your medications.

Take part in decisions about your medications with your healthcare provider. Consider using the prompts or questions below to help you when having these important conversations.

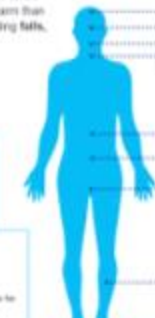
- "It is important to me that...."
- "What are the different options available to me? Are there any non-drug options?"
- "What are the risks and benefits of each option?"
- "I would prefer...."



## Identifying People for Medication Assessment.

It's likely that someone you care for takes a medication that may do more harm than good, causing serious risks, including falls, fractures and hospitalizations.

Spot the signs and report possible medication-related side effects in the people you care for.



Your voice matters in making a difference.

1. Spot a change (new, worse or improvement) in the people you care for.
2. Report your concerns with reading staff that may prevent a medication assessment with a pharmacist or nurse.
3. Follow up with reading staff on resident outcomes.

What is a medication assessment?  
A medication check of a resident's medications to see if any or most of them might be causing the problem.



## Shared Decision-Making in Medication Management.

Take part in decisions about medications. Discuss goals and preferences with your care team. Ask questions to help healthcare providers share their knowledge to make a shared decision about the best medication plan.

Get involved in decisions about medications.



### 5 KEY STEPS to participate in shared decision-making about medications.

1. CONSIDER that a decision about your medication may need to be made.
2. SHARE goals of care and preferences.
3. ASK about the benefits, risks and expected outcomes of each option and listen to what the healthcare provider says about reasonable expectations.
4. Feel like you UNDERSTAND each option, ask questions if not sure.
5. HELP make an informed decision about medication options and let your healthcare provider know if you change your mind.

What is the "care team"?  
Everyone involved in helping you make informed decisions about your medication options. Includes doctors, pharmacists, nurses, caregivers and family.

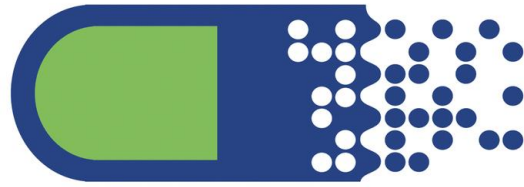


deprescribing.org  
Reducing medications safely to meet life's changes. Making medication adjustments that meet people's goals, not just the pill.

### Identifying LTC Residents for Medication Assessments: The important role of the care team

Last updated: July 6<sup>th</sup>, 2021

<https://deprescribing.org/resources/deprescribing-in-ltc-framework/>



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<https://www.deprescribingnetwork.ca/useful-resources>



# Medication Safety Toolkit



Canadian Medication  
Appropriateness and  
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Available online at <https://www.deprescribingnetwork.ca/>



# Brochures

Available online at <https://www.deprescribingnetwork.ca/>





# TAKE HOME MESSAGES

Reassessing medications is good practice

Sometimes reducing or stopping medications is the best care

Be an expert in your or your loved one's medications

Ask questions about medications



**Always speak to your doctor,  
pharmacist or nurse before  
stopping any medication.**

# THANK YOU!



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