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Pharmaceutical Care: Statement on Drug Therapy in the Elderly (2001)



Canadian Society of Hospital Pharmacists
Société canadienne des pharmaciens d'hôpitaux

Pharmaceutical Care: Statement on Drug Therapy in the Elderly

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Pharmaceutical Care: Statement on Drug Therapy in the Elderly

THE ELDERLY ARE AT PARTICULAR RISK FOR THE OCCURRENCE OF DRUG-RELATED PROBLEMS OFTEN DUE TO MULTIPLE DRUG THERAPY ASSOCIATED WITH MULTIPLE DISEASE STATES. CSHP ENDORSES THE IMPORTANCE OF PHARMACOTHERAPY ASSESSMENT IN THE ELDERLY.

Drug therapy is often associated with the development of drug-related problems which may lead to illness, hospitalization, or possibly death. Since physiological functions change with age, the pharmacokinetics and pharmacodynamics of medications may be altered. Adverse drug events may result if the above factors are not recognized and taken into consideration in the patient's medication regimen.

Some of the common factors which can result in drug-related problems in the elderly include:

- a) Communication problems due to sensory, cognitive and motor defects which may result in failure of the elderly to understand how and when to take their medications;
- b) Complicated dosage regimens which may be difficult to understand and adhere to;
- c) Self-medication and use of non-prescription medication which may lead to drug interactions and adverse effects; and
- d) inadequate explanation of the appropriate usage and benefits of the medication.

One role of the pharmacist in the care of the elderly patient is to ensure that the medication regimen achieves the desired therapeutic outcome with the lowest potential for adverse effects. It is also important that this therapy be provided at a reasonable cost to the patient.

Another goal of the pharmacist is to communicate medication information and to ensure that the patient understands the information. It is imperative that the elderly patient (or substitute decision-maker, if appropriate) be involved in the decision making process. The benefits of active involvement may include better adherence to the medication regimen as well as increased awareness and

subsequent detection of adverse effects. Also, increased knowledge may prevent or reduce unnecessary problems when self-medicating with non-prescription medications.

In order to achieve the above goals, the pharmacist should provide comprehensive pharmaceutical care to the elderly patient whenever possible. The elderly should be recognized as one sector of the population which would benefit from monitoring by pharmacists. Their medication profiles should be monitored routinely for drug related problems and for optimization of pharmacotherapy.

Assessments of, and recommendations for, the patient's therapy should be communicated to the physician and other health care providers. Open communication among the patient, the pharmacist, and other members of the health care team should be maintained to ensure optimal medication therapy.

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Guidelines to Optimize the Practice of Pharmaceutical Care in the Health Care Facility, Canadian Society of Hospital Pharmacists, Ottawa, Ontario, 2000.

Note: *the title of this guideline was changed in 2009 to Pharmaceutical care: guidelines on optimizing the practice of pharmaceutical care in the healthcare facility.*

Guiding principles for enhancing the likelihood of positive medication use outcomes in geriatric patients. A position statement of the United States

CSHP Mission:

CSHP is the national voice of pharmacists committed to the advancement of safe, effective medication use and patient care in hospitals and related healthcare settings.



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Pharmacopeia. The United States Pharmacopeial Convention, Inc., 2000. (www.usp.org)

Statement on Pharmaceutical Care, Canadian Society of Hospital Pharmacists, Ottawa, Ontario, 2000.

Note: *the title of this statement was changed in 2009 to Pharmaceutical Care: Statement.*

Strand LM, Morley PC, Cipolle RJ, et al. Drug-related problems: their structure and function. *DICP Ann Pharmacother* 1990; 24: 1093-7.