Background/Introduction

Objectives

1. To discuss useful and impactful pharmacist-led interventions to prevent harm resulting from polypharmacy and PIMs

Methods

- A review of the literature was conducted using the PubMed electronic database
- Search criteria included: articles published in the English language between the years of 2005-2019, using combinations of the words “Geriatric,” “Oncology,” “Polypharmacy,” and “Potentially inappropriate medications”
- Articles were individually screened twice for relevance via abstract review. Articles that did not meet relevancy were excluded.
- The most common themes, definitions, and ideas found throughout the relevant literature were included and summarized in this review.

Study Design

- This is a meta-analysis that builds on previous systematic reviews, such as Sharma et al. (2017), and further synthesizes data into meaningful tables for analysis, supporting the position that pharmacists are best equipped to intervene and combat polypharmacy
- A literature search was conducted using the PubMed electronic database, with criteria as defined in the Methods section

Discussion

- Polypharmacy is an increasing concern as patients grow older and live longer. Elderly patients with multiple chronic conditions are at an increased risk for Poly/PIM.
- Medication regimens are becoming increasingly complex, especially in conditions that require many supportive care medications (i.e. cancer)
- Methods for pharmacists to combat polypharmacy:
  - Geriatric Assessment (GA)
  - Rational prescribing
  - Tools to aid in the process:
    - EHRs
    - Beer’s list criteria
    - Screening Tool for Older People’s Prescriptions (STOPP)
    - Medication Appropriateness Index (MAI) tool

Conclusion

- Poly/PIM are issues plaguing the care of elderly patients, especially those with cancer. The negative outcomes associated with poly/PIM are well elucidated.
- Pharmacists are uniquely positioned to combat polypharmacy issues. Pharmacists can effectively and efficiently optimize medication regimens due to extensive pharmacotherapeutic training and education
- Opportunities exist for such optimization and review, such as MTMs, CRMs, in LTC facilities, in the community, ambulatory care settings, and at transitions of care (ex. discharge/transfer)

References