



Guide to Support Medication Review in Older People

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A Guide to Support Medication



Review in Older People

Developed by the Northern Ireland Network of
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Section 1:

Medicines which may be appropriate to stop or alter

⚠ Chapter 1: Gastro-intestinal system

<i>Clinical context</i>	<i>Why review</i>
Anticholinergic antispasmodic drugs² e.g. aluminium antacids, hyoscine butylbromide, propantheline	
Chronic constipation where non-constipating alternatives are available.	Risk of exacerbation of constipation
Domperidone³	
Used for more than one week in >60yrs; At a daily oral dose of >30mg; Concomitant use with other QT-prolonging medicines or CYP3A4 inhibitors; In patients with CCF or cardiac conduction impairment.	Increased risk of serious cardiac side effects

Section 2:

Medicines which may be appropriate to start

⚠ Chapter 1: Gastro-intestinal System

<i>When to consider starting</i>	<i>Additional comments</i>
Fibre supplements² e.g. bran, ispaghula, methylcellulose, sterculia	
Diverticulosis with a history of constipation	Must ensure adequate fluid intake
Laxatives² e.g. senna	
Regular opioid therapy	
Proton pump inhibitors (PPIs)^{2, 18, 19c} e.g. lansoprazole, omeprazole	
Severe gastro-oesophageal reflux disease or peptic	

What next

- On-going updates
- Latest version available at www.forum.psni.org.uk
- Annual publication April 2016
- Disseminate and share
- Support use
- Continue to develop

