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ABSTRACT

INTRODUCTION:

Polypharmacy is the concurrent usage of multiple medications. It can be associated with the prescription and use of too many or unnecessary medicines at dosages or frequencies higher than therapeutically essential.

CAUSES:

An aging population with co-morbidities requiring several different medications and an increased availability of newer medications. The patient sees several physicians and fills prescriptions at different pharmacies, but there is a failure to keep all parties informed about each other's actions. Ineffective communication and coordination between healthcare practitioners results in redundancy.

IMPACTS AND CONSEQUENCES OF POLYPHARMACY:

Adverse Drug Reactions (ADRs), medication errors made up of non-compliance link to 5% of hospital admissions.

NON-ADHERENCE TO MEDICATION REGIMENS:

Related to both physician and patient factors like large number of medications, expensive medications, complex of frequently changing schedule, adverse drug reactions, drug interactions. Etc.


GOALS AND OBJECTIVES:

The goal is to decrease drug related problems in elderly people. To raise awareness of the increased risk of drug related problems associated with polypharmacy and to provide tools, including medicines review, to identify and manage high risk patients.

CONCLUSION:

Many people have an elevated risk of adverse events due to taking a high number of prescription medications and not having the potential side effects and drug interactions explained to them. There are some interventions that can potentially reduce polypharmacy and adverse events, including routine medication reviews. To avoid polypharmacy and adverse effects due to drugs can be controlled by eliminating the unprescribed drugs and adjusting the dose of prescribed drugs.

KEYWORDS: Polypharmacy, Prescriptions , schedule , adverse events , interventions.

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