
Medication use in Older Persons

Initiative Type

Model of Care

Status

Close

Added

10 January 2018

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05 February 2024

URL

<https://clinicaexcellence.qld.gov.au/improvement-exchange/medication-olderpersons>

Summary

Frequently prescribed medicines in older people include those with anticholinergic and sedative effects. These medicines are used in adults to treat medical conditions that often occur later in life, such as urinary incontinence, sleep and pain disorders, dementia and mental illness. In many instances the benefits of these medicines do not justify the risk of harm for older adults. The use of these medicines is associated with adverse effects including (but not limited to): impairment of

physical and cognitive function, sedation, falls and fractures, and an increased risk of mortality. Their use in older people is also associated with economic costs such as an increased risk of hospitalisation.

Key dates

Dec 2016

Dec 2017

Implementation sites

All Queensland Public Hospitals

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Aim

The project aims to investigate the use of antipsychotics, benzodiazepines and medicines with

significant anticholinergic action in older adult inpatients of Queensland Health public hospitals. The project also aims to identify the frequency of use of these medicines at various sites throughout the state, including metropolitan, regional and remote hospitals. Their use within various clinical units will also be investigated.

Benefits

- provides a base-line understanding of the frequency of use of antipsychotics, benzodiazepines and medicines with significant anticholinergic action, in older adult inpatients of Queensland Health public hospitals.
- identifies if remoteness impacts likelihood of use of these medicines.
- identifies if their use is more likely in certain clinical areas.
- identifies if falls risk assessment tools impact likelihood of use of these medicines.
- identifies the frequency with which indications are annotated for the audited medicines on the medication record form.

Background

A clinical audit of the use of antipsychotics, benzodiazepines and medicines with significant anticholinergic action in Queensland Health public hospitals throughout the state has not been undertaken previously. The audit intends to identify the frequency of use of these medicines at various sites throughout the state, including metropolitan, regional and remote hospitals. Their use within various clinical units will also be investigated. The results of the audit will be used to identify common areas within Queensland Health public hospitals where quality improvement initiatives will be most effective to optimise the use of these medicines in older inpatients.