



















HEALTH LITERACY MODULE



Prof. Dr. Sevgi ARAS

Ankara University Faculty of Medicine, Department of Geriatrics

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- For patient compliance Digital Literacy
- For proper drug use









Do you need medications?

- Elderly people do not need to take medication for every medical problem
- If possible, do not take medication
- Drugs that affect quality of life should be considered
- Certain and accurate diagnosis should be made before treatment









Rational drug use

According to the clinical findings and individual characteristics of the subjects

- Appropriate drug,
- At the appropriate time and dose,
- Most cost effective,
- Easy to provide.









Common diseases

- Hypertension (Heart, brain, eye, kidney, vessels)
- Diabetes Mellitus (Eye, kidney, heart, nerves, vessels)
- Cholesterol elevation (Heart, brain, kidney vessels)
- 1-Doctors give you medicines to protect you from poor results
- 2-In these diseases, after treatment has started, it should continue for almost a lifetime (your doctor adjusts the type and dose of medications)
- 3-Such medicines help keep the disease within normal limits, don't completely eliminate









Commonly used drugs

- Cardiovascular drugs
- Analgesic
- Sedatives and sleeping medicines
- Antibiotics
- Epilepsy medications
- Diabetes mellitus medications
- Associated with respiratory system
- Hormones









Antibiotics

- When there is a complaint, it should not be started immediately.
- The antibiotic for the virus is different from what we know.
- It should start under doctor's supervision
- An unnecessary antibiotic may be ineffective when it is actually needed.
- Increased cost for the country's economy
- It should be taken in sufficient dose and time when started.
- Today, oral antibiotics are as effective as those in the form of injection.









Analgesics

- Do not take medication immediately for every pain
- Some analgesics reduce the effect of blood pressure and heart medications.
- Increases blood pressure, causes heart failure to exacerbate
- Can harm kidneys and liver
- Can cause stomach ulcer and stomach bleeding
- Can make blood cells breakdown
- It is best to start at the doctor's check.
- In the elderly, "Paracetamol" group drugs should be priority









Influenza drugs

- Influenza medicines are not antibiotic-like medicines against influenza (not effective against direct virus)
- Reduces flu symptoms
- Reduces the effects of hypertension and heart medications
- The doctor should start at checkup.
- Abundant liquid, vitamins and rest are important









Urinary tract infection and antibiotics

Even if there are laboratory findings suggestive of urinary infection, if there are no urinary complaints

" Do not take ANTIBIOTIC treatment"

(Excepting some states)









Sleeping drugs

- Elderly people are more difficult to enter sleep than young people.
- Early sleep, early rise, sleep duration is shortened, daytime sleepiness can be
- Internal problems should be sought under insomnia, or sleep hygiene should be considered
- Sleep medications have side effects such as drowsiness, memory impairment, falling
- Even herbal medicines and teas should not be taken except for doctor's advice.









Vitamins

- Uncontrolled intake of vitamins A, D, E, and K may be harmful.
- B12, folic acid, vitamin D levels are examined
- Vitamin D need to get enough sunlight for vitamins.
- Omega-3 can be recommended for people who do not eat fish or have high cholesterol (Use blood thinners carefully))
- There are vitamins suitable for daily necessities in nutrition products given to elderly people who can not take food.
- If we are eating regularly and balanced: we are getting what we need ...









Constipation and drugs

- In advanced age, both intestinal and leg motor activities are decreased, low water drinkable fiber foods are consumed low, many drugs are drunk
- Advanced age, weight loss, bleeding, family history---- > Colonoscopy
- Treatment: Bowel training, increase water consumption, exercise, fibrous food
- Constipation drugs: It disrupts the absorption of food and other medicines, reduces minerals, disrupts kidney function

BUT

Give them what you need to use narcotics like morphine !!!!









Over The Counter Drugs









Drug	Herb	Result
Drugs that provide potassium excretion (cortisol and diuretic)	Aloe Licoric	Increases potassium loss from intestines
MAO Inhibitors (Some depression medications)	Efedrin	Palpitations, restlessness, hypertension
	St. John's Wort, Hypericum perforatum	May form unwanted interactions with antidepressants
	Ginseng	Restlessness









Drug	Herb	Result
Phenothiazines (sedatives and sleeping pills)	Efedrin, Evening Primrose Oil	It causes an increase in hypotension and heart beat, and decreases energy.
Hypoglycemic agents (glyburide, metformin, insulin)	Ginseng	Hypoglycemia effect increases









Drug	Herb	Result
Antihypertensive agents	Efedrin	Potentially increases blood pressure
	Golden-seal	Changes in blood pressure (increase or decrease)
	Black cohosh	Hypotension
	Licorice	It can increase water and salt retention. It may remove the effects of antihypertensive drugs. Increases the potential for blood pressure rise
	Yohimbin	It can lead to hypertension crisis.
	Ginkgo biloba	When used in combination with thiazide diuretics, it may increase blood pressure.









Drug	Herb	Result
Cardiac glycosides (digoxin)	Aloe Licorice	Increases toxicity risk by increasing potential potassium excretion
	Hawthorn, Figwort, Mistletoe,Golden seal	Reduce or increase cardiac effects
	Siberian ginseng	Increases digoxin levels.
Aspirin	Ginkgo biloba	Risk of bleeding
Antiplatelet and anticoagulant drugs (Warfarin, Aspirin, Heparin, NSAID, COX-2 inhibitors)	Wedding Plum, Daisy,Fish oil, Vitamin E, Ginger, Golden seal, Ginkgo, Garlic, Feverfew, Ginseng	They increase the risk of bleeding or reduce the potential for anticoagulant effect.









Drug doses

- Drugs should be started at low doses in elderly
- The dose should be increased by long intervals and small amounts
- Pay attention to drugs with kidney excretion
- Drugs that have little effect on brain function should be preferred
- Individual treatment should be used









Elderly and drug side effect

- Drug side effects in elderly patients are 2-3 times more common in younger patients
- Among the reasons for the elderly to visit the hospital, 28% constitute drug related problems
- 70% of these drug-related applications are due to drug side effects.









Drugs most frequently associated with adverse reactions in the elderly

- Psychotropic drugs
- Benzodiazepines
- Anti-hypertensive agents
- Diuretics
- Digoxin
- NSAIDS
- Corticosteroids
- Anticoagulants
- Antidiabetics









Polypharmacy

- Use of more than 4 drugs
- More drug use from indication
- At least one unnecessary drug use









Polypharmacy in the Elderly WHY?

The elderly use more drugs because illness is more common in older persons

- Chronic diseases: DM, HT, HL,CVD, CHF, COPD, OA, Endocrine Disorders, Neurologic Disorders, Gastrointestinal Disorders, Cancers....
- Geriatric Syndromes: Dementia, Incontinence, Depression, Sarcopenia,
 Malnutrition, Sleep Disturbance....









Results of polypharmacy

- Drug side effects
- Drug-drug-disease interaction
- Treatment incompatibility
- Increase in cost
- Increased admission to the hospital
- Increased admission to the nursing home
- Cognitive dysfunction, sedation
- Fall
- Hip fracture
- Weight loss
- Death









Effects of polypharmacy

Drug reactions in the elderly often produce effects that simulate the conventional image of growing old

- Depression
- Nervousness
- Incontinence
- Fatigue, malaise
- Insomnia
- Unsteadiness
- Drowsiness
- Dizziness
- Falls Digital Literacy
 • Confusion









Prescription cascade

Avoid treating adverse reactions/side effects of drug with more drugs Examples:

• Drugs for Alzheimer's Disease.....Incontinence

Anticholinergic drugs...... Confusion...... Antipsychotic.....Parkinsonism..... Parkinson Disease drugs.... Hypotension, Falls

- Flu drugs....Hypertension....Hypertension drugs (for example calciumchannel blocker)
- Edema from a calcium-channel blockerDiuretic.... Kidney Function Disorder









For patient compliance

- Simple dosing scheme should be selected
- Less frequent dose preferred
- The label and description of the medicines must be legible
- Drugs should be placed in easily opened containers
- What medicine for what disease.... Must be written
- Patient and / or close treatment chart
- Explain why drugs are given
- Remaining drugs should be destroyed
- Treatment plan should be done regularly, drugs that are not needed should be cut off









For proper drug use

- WRONG: 'Each medical problem must be solved with medication'
- No drugs other than doctor's advice should be taken.
- When the doctor tells the drugs, he should be asked when it is not understood, the doctor should be asked for drugs use scheme.
- Which drug is being used for which illness? What is the side effect of the drug? When to visit to a doctor? It should be known
- Herbal drug may be harmful, may interact with the other routine medication. ATTENTION !!!
- The drug that is good for your neighbors can take you to the hospital !!!
- If the drug is a side effect, it is better to go to the doctor who
- started







doctor

References

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