

# ANTICHOLINERGIC RISK IN OLDER PEOPLE LIVING WITH HIV

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## BACKGROUND AND IMPORTANCE

The high prevalence of polypharmacy in older people living with HIV (PLWH) might increase anticholinergic risk (AR) and pose an additional risk of side effects.

## AIM AND OBJECTIVES

To determine AR in older PLWH using different anticholinergic scales (AS) and to identify the drugs associated with AR.

## MATERIAL AND METHODS



How?

- Observational and retrospective study at a third level hospital
- Demographic, clinical and pharmacotherapeutic data were obtained from the electronic medical record and the regional electronic prescription database.
- AR was calculated using 9 different AS with the anticholinergic burden calculator ([www.anticholinergicscales.es](http://www.anticholinergicscales.es))
- AR scores were classified in low, medium and high risk



When?

1 January 2021-31 July 2021



Inclusion criteria

PLWH aged 65 or older

## RESULTS

### Patients and treatment characteristics

N = 153 patients (85% men)

Median age: 72 years (IQR 69-76,5)

Median VACS index: 39 (IQR 33-48)

Non HIV comorbidities (median): 5 (IQR 3-6)

Number of chronic drugs (median): 5 (IQR 3-7)

Any grade of AR was detected in 55,2% (n=84) patients when the nine AS were used simultaneously.

All AS identified at least one patient with AR.

Anticholinergic Scale	Low risk n (%)	Medium risk n (%)	High risk n (%)
Anticholinergic Cognitive Burden Scale	20 (69)	3 (10.3)	6 (20.7)
Anticholinergic Risk Scale	11 (84.6)	1 (7.7)	1 (7.7)
Chew's Scale (CS)	35 (71.4)	9 (18.4)	5 (10.2)
Anticholinergic Drug Scale	28 (62.2)	11 (24.4)	6 (13.4)
Anticholinergic Activity Scale	5 (31.2)	7 (43.8)	4 (25)
Anticholinergic Load Scale (ALS)	34 (85)	5 (12.5)	1 (2.5)
Clinician-Rated Anticholinergic Scale	22 (78.6)	4 (14.3)	2 (7.1)
Duran's Scale	13 (65)	6 (30)	1 (5)
Anticholinergic Burden Classification	0	0	6 (100)

Thirty different drugs with anticholinergic properties were identified.

The most common were: psychotropic drugs (38.7%), oral antidiabetics (22.6%) and histamine-2 blockers (11.3%)

## CONCLUSIONS AND RELEVANCE

Our population shows a high prevalence of AR. The use of AS might be a helpful tool in the revision of chronic therapy in older PLWH. Due to the differences in calculating AR, further research is needed to determine the most appropriate AS to use in this population.