

DIFFERENCES IN TREATMENT COMPLEXITY BETWEEN MULTIMORBIDITY PATTERNS IN THE OLDER POPULATION

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Background

In the context of population aging, polypharmacy is strongly associated with multimorbidity.

Studies have revealed the existence of multimorbidity patterns.

No studies have evaluated if medication regimen complexity is different between the multimorbidity patterns.

Objective

Analyze the extent to which treatment complexity differs between multimorbidity patterns in the older population.

Material and Methods

- **Study design:** retrospective observational study.
- ❖Inclusion criteria: patients ≥65 years with more than one chronic conditions (according to Quality and outcomes framework database) and with criteria of polypharmacy (>5 medicines/day) who were admitted to an internal medicine unit between September/October-2014.
- **Exclusion criteria:** patients who were assigned to more than one multimorbidity pattern.
- ❖Variables collected:
- Demographics
- Multimorbidity pattern: cardiometabolic, mechanical and psychogeriatric (Prados-Torres A et al, 2012)
- Number of chronic conditions and chronic medicines
- The medication regimen complexity index (MRCI) (George J et al, 2004)
- **❖Statistical analysis:** T-student test was applied to compare MRCI in the patterns of multimorbidity using SPSS-20.

Results N= 51

Variable		Frequency
Sex (%	Sex (% male)	
	65-74 years	29
Patients aged (%)	75-84 years	57
	>85 years	14
Number of chronic	Number of chronic diseases, n (SD)	
Number of chronic	Number of chronic medicines, n (SD)	
MRCI TOTAL	Dosing frequency	13,7±6,8
(32,5±15,2)	Dosage form	12,7±5,5
	Additional directions	6,0±4,3

Multimorbidity- pattern N (%)	Diseases n (SD)	Medicines n (SD)	MRCI n (SD)
Cardiometabolic 31(60,8%)	5,8±2,8	11,2±3,9	35,3±15,
Mechanical 13(25,5%)	5,4±2,25	10,2±4,7	30,9±16, 4
Psychogeriatric 7(13,7%)	5,1±1,6	8±1,3	23,5±4,8

There were no significant differences between the MRCI in the patterns of multimorbidity.

Conclusion

Treatment complexity does not differ between multimorbidity patterns in the older population.