



# EVALUATION OF ANTIHYPERTENSIVE PRESCRIPTIONS OF PATIENTS OF A GERIATRIC DAY HOSPITAL

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## BACKGROUND AND IMPORTANCE



Elderly patients are vulnerable to drug related complications



Regular medication reviews are conducted in our geriatric day hospital



Antihypertensive treatments are rarely reassessed

## AIM AND OBJECTIVES

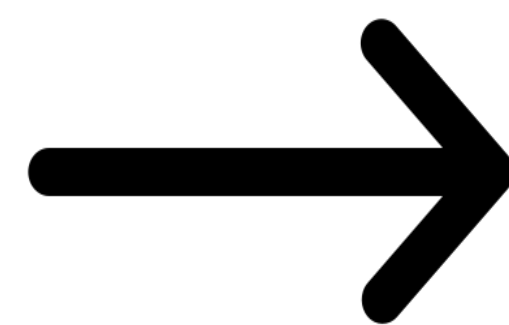


The aim of this project is a professional practice evaluation of antihypertensive prescriptions of patients of our geriatric day hospital.

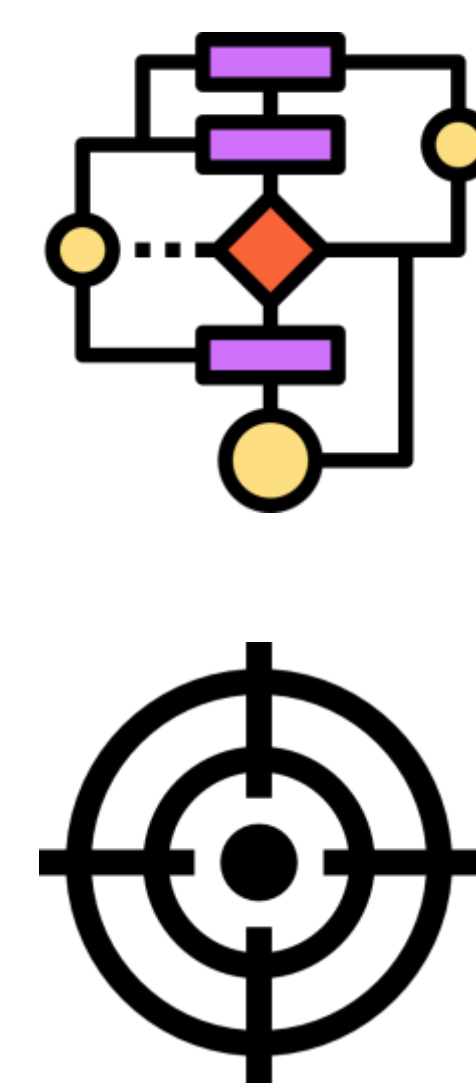
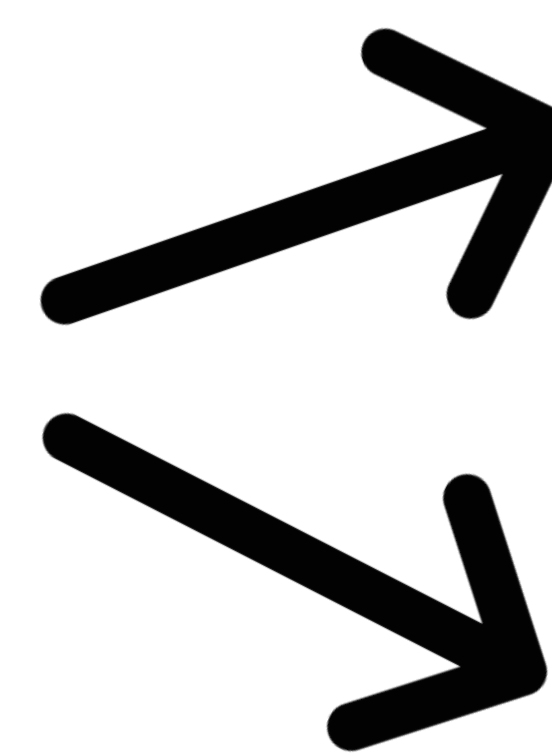
## MATERIAL AND METHODS



Gathered data for 1 month :  
- Medical history  
- Usual Medication  
- Blood pressure reading



Comparison to recommendations from academic societies



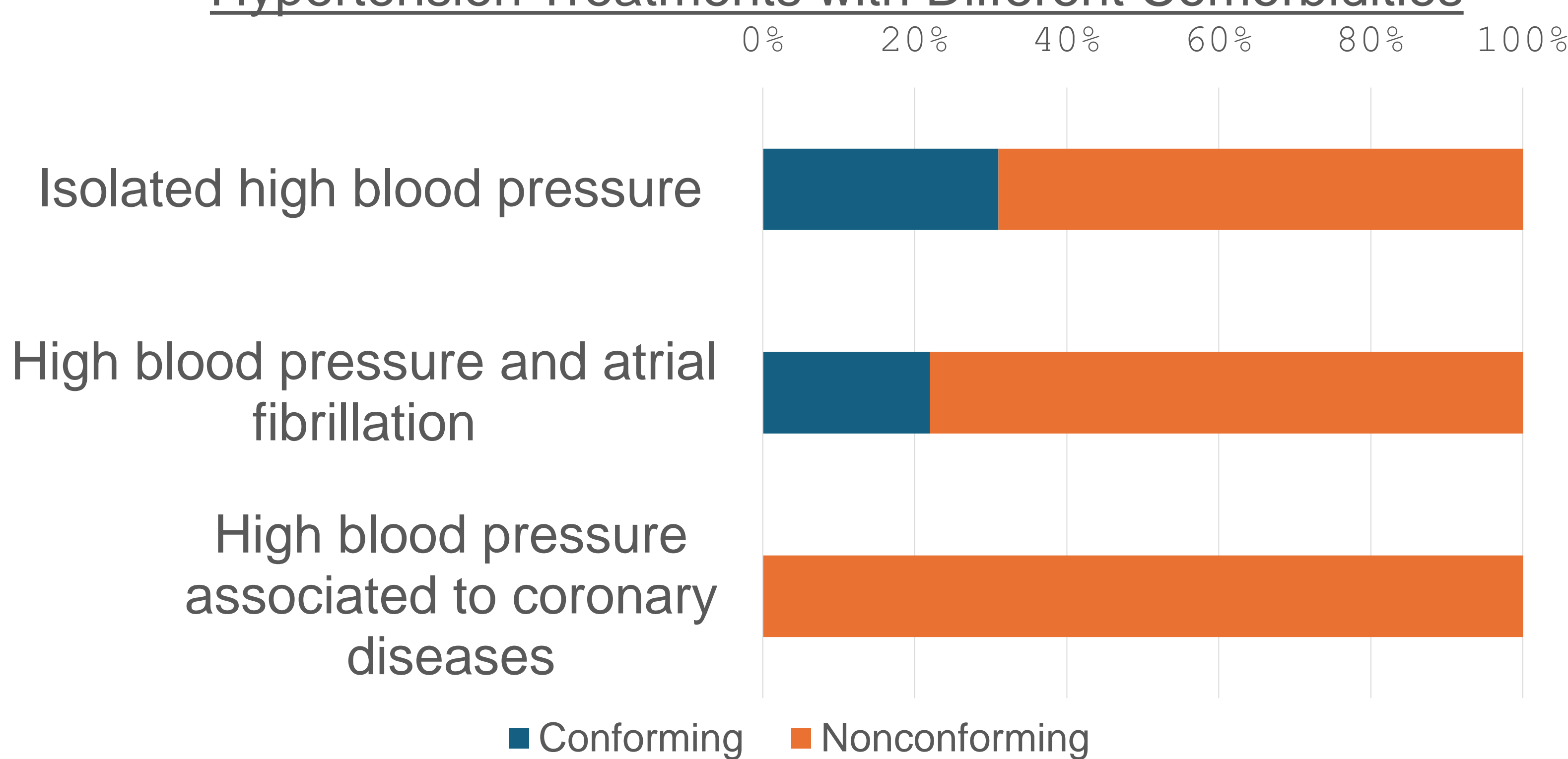
Five therapeutic algorithms depending on comorbidities linked to high blood pressure

Age-appropriate blood pressure targets (130 to 149 mmHg)

## RESULTS

- Total of 87 patients
- Nearly 55% (48/87) with nonconforming blood pressure therapies

Proportion of Conforming and Non-Conforming Hypertension Treatments with Different Comorbidities



Types of nonconformity observed by comorbidity

Co-morbidity	Type of nonconformity	Reason for nonconformity
Isolated high blood pressure	- Beta-blockers prescribed - Too high or too low blood pressure levels	Beta blockers not recommended by guidelines
High blood pressure and atrial fibrillation	- Average of 2.5 antihypertensives - Blood pressure readings below target	Guidelines recommend monotherapy when possible

## CONCLUSION AND RELEVANCE



Most antihypertensive prescriptions did not align with guidelines. While some nonconforming treatments may be necessary due to individual patient needs, regular reassessment and optimization of these prescriptions could enhance patient care.

