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Background and importance. Medication use is a modifiable risk factor and has a high prevalence in older people, where polypharmacy is common. For this reason, **medication review is one of the key components of multifactorial fall prevention interventions.**

Aim and objectives. The objective of this study is to determine if **falls in a nursing home are related to pharmacological treatment** as well as to evaluate if a pharmacist can improve treatment through **pharmacological recommendations.**

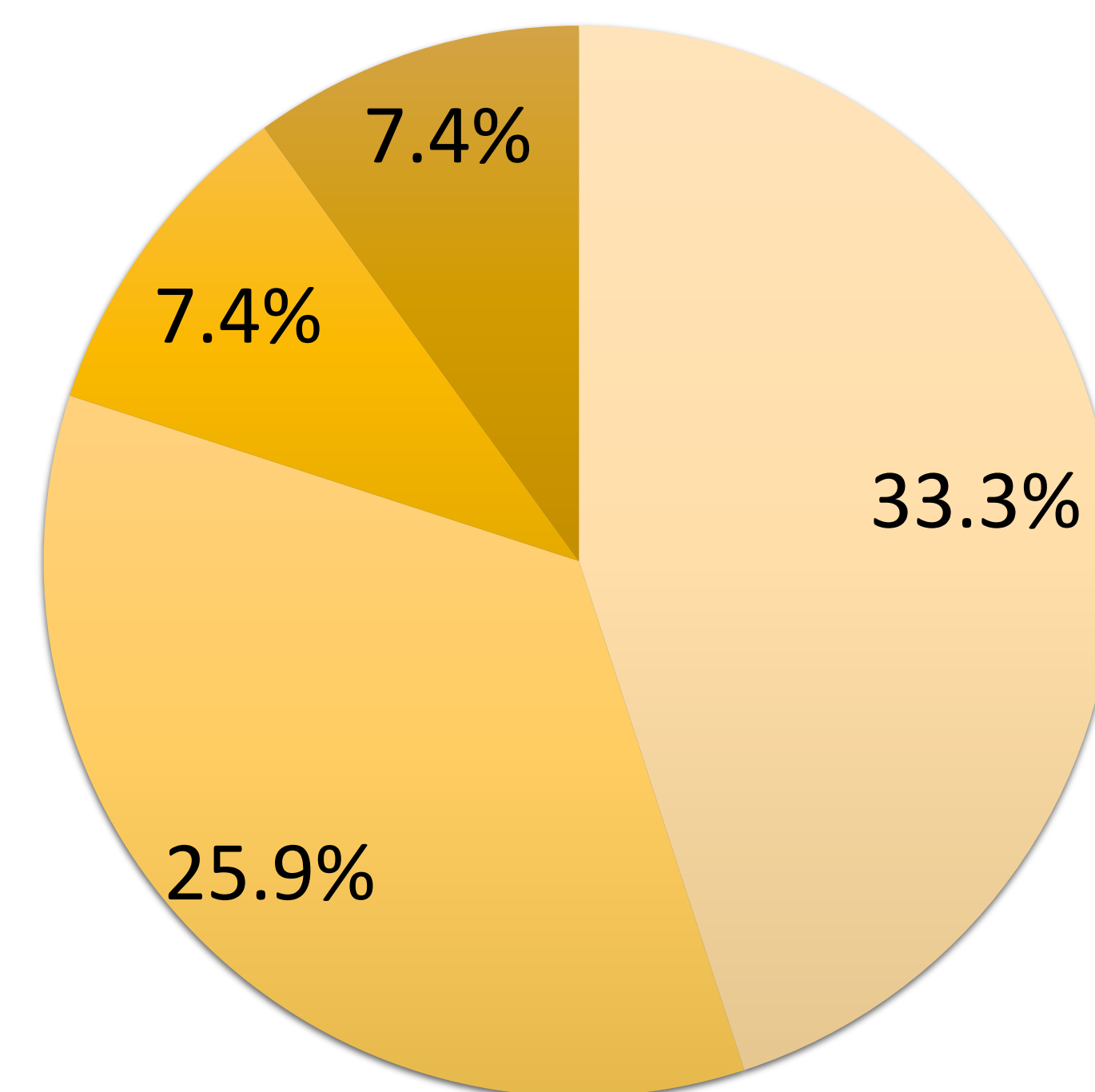
Materials and methods. Study design: **non-comparative intervention study.** Inclusion criteria: patients in whom falls were recorded in a **nursing home with 201 residents between 22/05/2023-03/09/2023.** A record of **incidents, falls and injuries** was prepared and coordinated from the Nursing Unit in which the following data were collected: demographic data of the resident, type of fall, description of the fall, condition of the resident after the fall, comorbidities and usual medication. The treatment of all patients in whom falls were recorded was reviewed by the pharmacist, assessing whether they were caused by drugs with a high risk of causing falls. **Pharmacological recommendations were made by the hospital pharmacist aimed at preventing falls.**

Results.

- 40 falls.
- 25 patients.
- 48% men.
- Median age: 84 years (72.5-95.5).
- 67.5% were identified as related to drug treatment.
- 27 pharmacological interventions.



Pharmacological interventions



- Gradually reducing the dose of sedative hypnotics until discontinuation
- Optimization of antihypertensive treatment
- Prescribing capillary glycaemia controls, assessing the adjustment of basal insulin units
- Reducing the anticholinergic burden of treatment

Conclusions. Falls related to drug treatment are common in institutionalized patients and can be identified by the hospital pharmacist. **Hospital pharmacists can also contribute to optimizing patient treatment through pharmacological interventions,** which were well accepted in our case.

The improvement measures that we intend to develop are **the implementation of a fall notification protocol to the Pharmacy Service** to identify those caused by pharmacological treatment and recommend changes in the medical team of the geriatric centers assigned to our Pharmacy Service (1,000 residents).