

POLYPHARMACY AND INAPPROPRIATE DRUGS IN PATIENTS WITH OROPHARYNGEAL DYSPHAGIA

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BACKGROUND AND IMPORTANCE

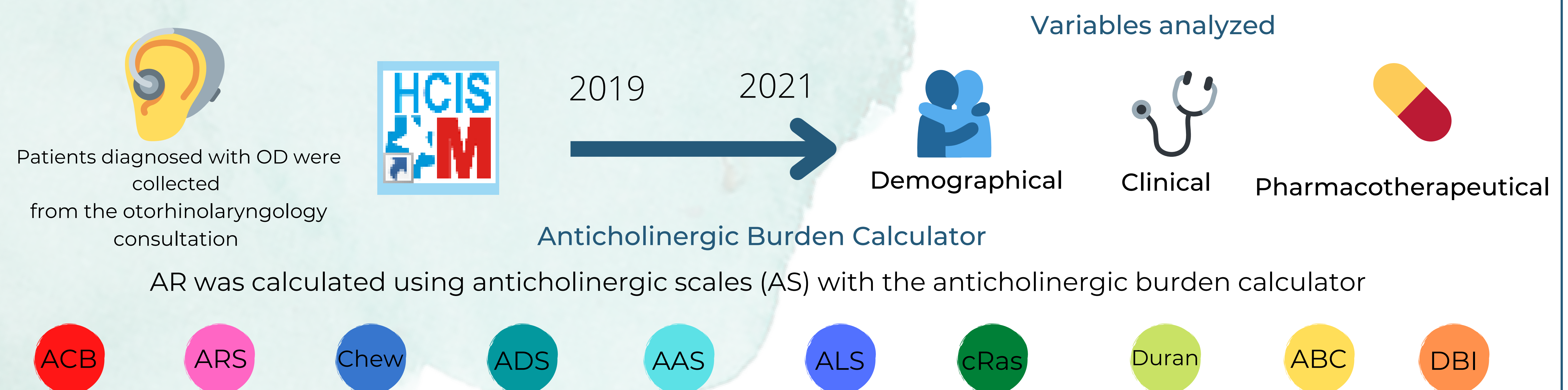
Oropharyngeal Dysphagia is a symptom where patients who present it usually have multiple nutritional, functional, morbidity and quality of life complications. It is associated with a higher incidence of aspiration pneumonia. OD can be caused by adverse effects of medications, such as dopamine antagonists (DA), central nervous system depressants (CNSD), anticholinergic drugs, which block the action of acetylcholine, among others.

AIM AND OBJECTIVES

To analyze the prevalence of polypharmacy (≥ 5 chronic drugs) and inappropriate drugs (anticholinergics and CNSD) in patients with OD. It was also calculated anticholinergic risk (AR) using different anticholinergic scales (AS).

MATERIAL AND METHODS

A retrospective observational study was carried out in a general tertiary hospital.

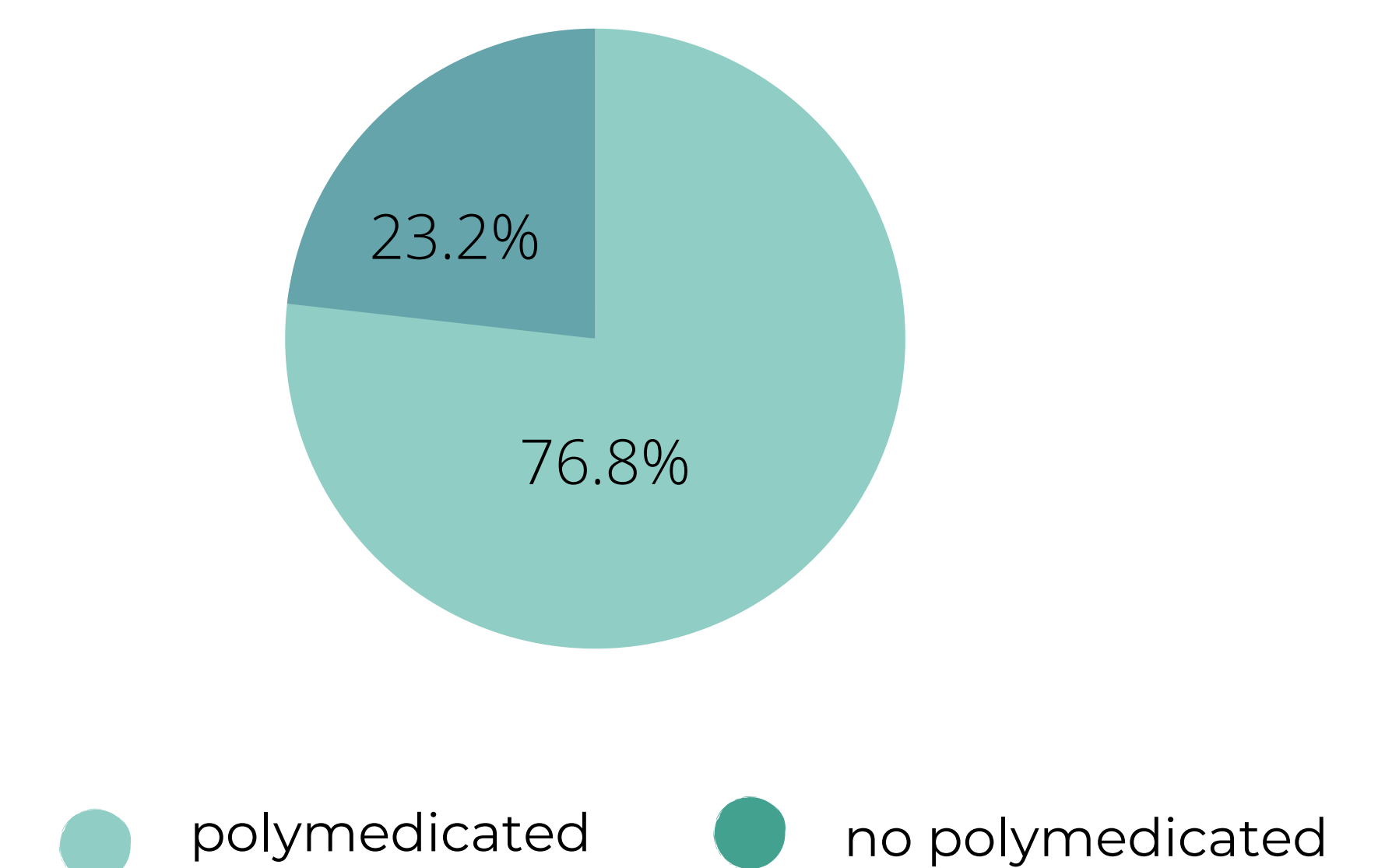


RESULTS

Characterization of the population

N = 60 patients → 4 lost

Sex: 28 women vs 28 men and median age 73.2 [IQR 14,5 – 90,3]

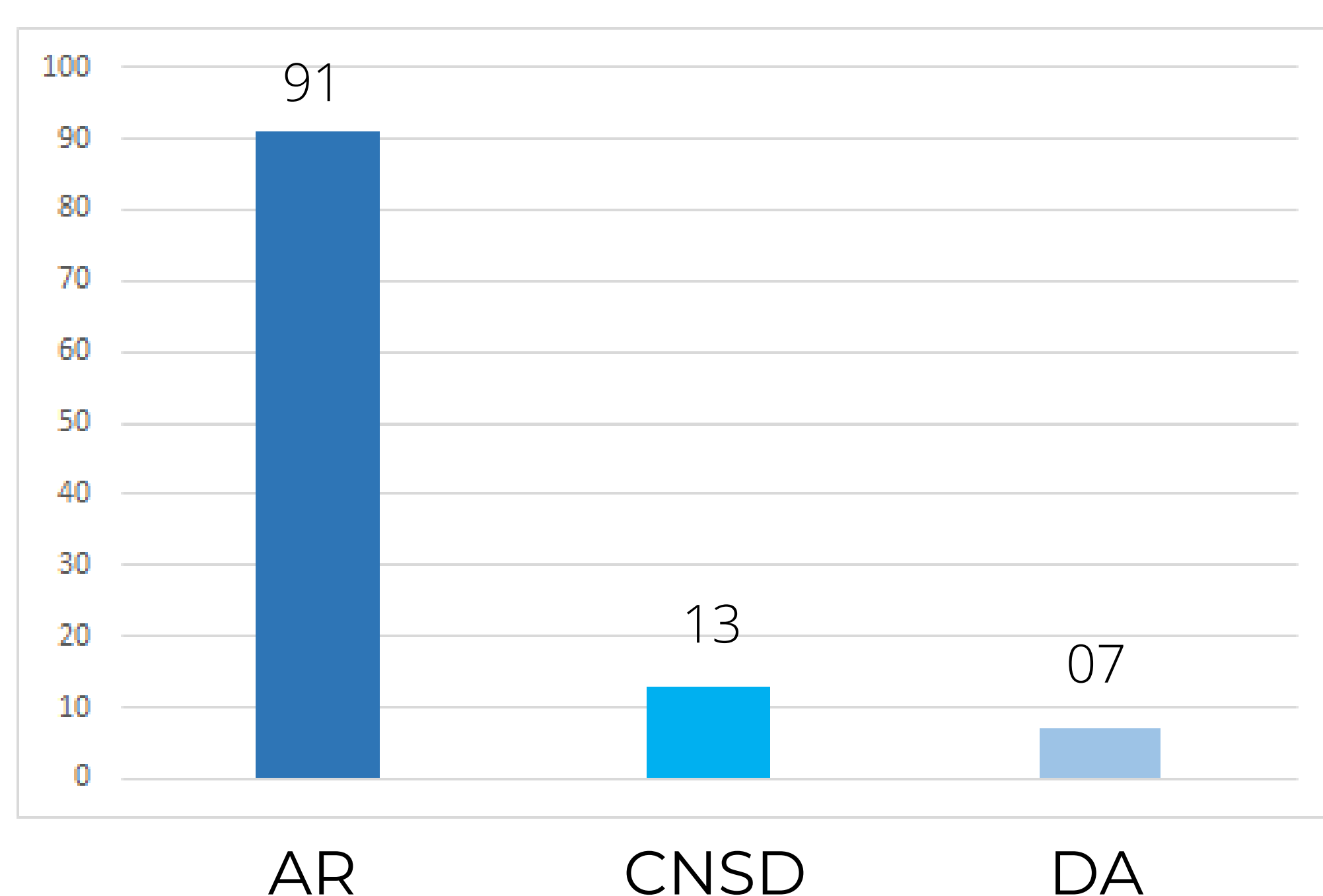


Potential medications to cause OD



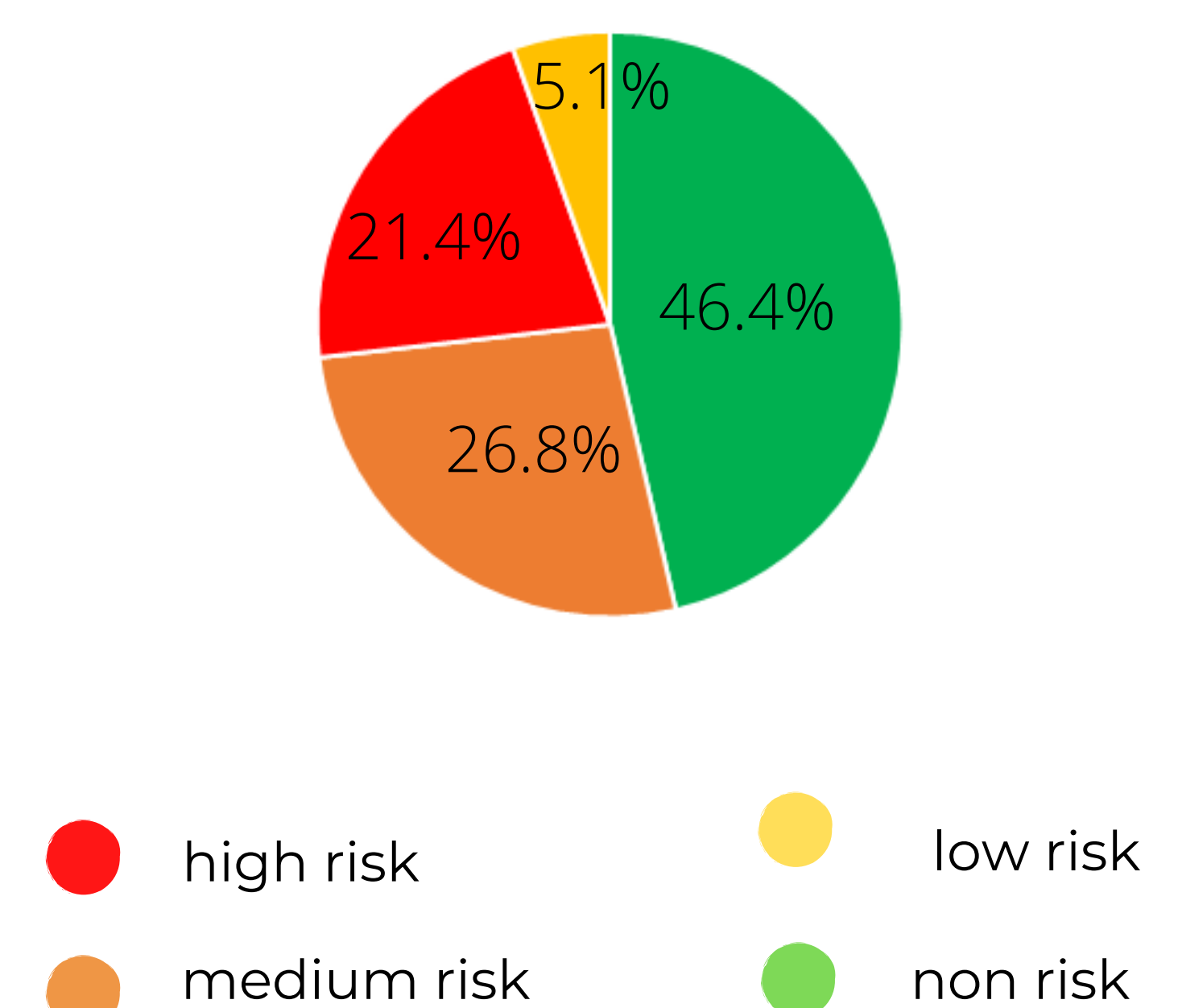
461 drugs analyzed → 104 potencial dangerous

Types of drugs that could cause OD



most prescribe drug: tamsulosin

Anticholinergic risk



CONCLUSIONS AND RELEVANCE

- It is observed that there is a high percentage of patients with OD are polymedicated.
- The prevalence of AR is high.
- A good pharmacological review with AS must be carried out and try to make a description, to reduce the anticholinergic load and the number of drugs.

