


DEPRESCRIBING TOOLS FOR THE ELDERLY: A SYSTEMATIC REVIEW

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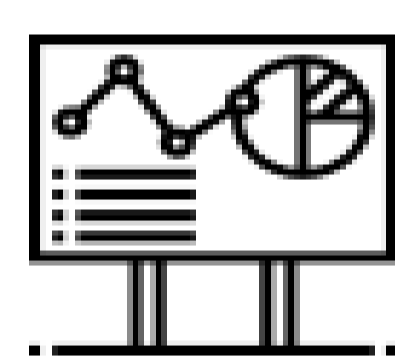
BACKGROUND AND IMPORTANCE

Deprescription is the revision of the therapeutic plan with the aim of simplifying it, taking into account the preferences of the patient, prognosis and environment. This strategy acquires special relevance in elderly patients, so they are exposed to numerous adverse effects and interactions.

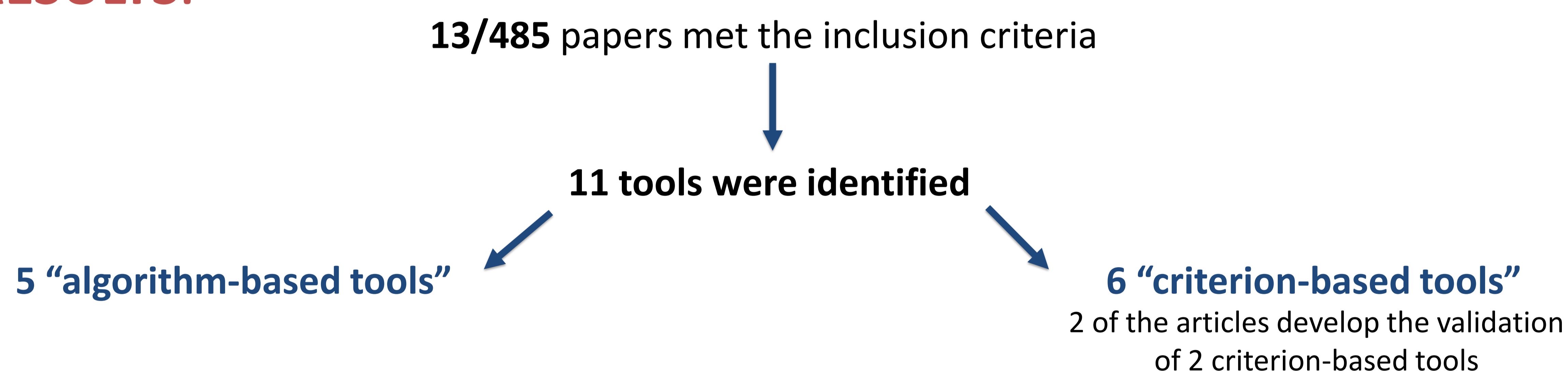
 **OBJECTIVE**
 To identify the deprescribing tools aimed at elderly patients available in the scientific literature and their main characteristics.

MATERIAL AND METHODS:

- **Systematic search** --> PubMed and EMBASE up to April-2020, applying the PRISMA method.
 - **Search strategy:** deprescribing, study population (*aged OR elderly*) and deprescribing strategies (*tool OR process OR criteria OR algorithm*).
 - **Inclusion criteria:** observational/experimental studies which created or developed a deprescribing tool in elderly patients.
 - **Exclusion criteria:** studies where the deprescribing tool is aimed at a specific medication, pharmacological group or pathology.
- Tools identified were analyzed according to whether they were **criterion/algorithm** type.



RESULTS:



All the tools were aimed at **ELDERLY** patients
 Peculiarities regarding their design, population, setting of application and items that formed the tool

	Algorithm-based tools	Criterion-based tools
Methodology	Not specified	5 used the Delphi method
Population	Patients with limited life expectancy (n=2)	Patients with multimorbidity or similar characteristics (n=1); patients with limited life expectancy (n=2)
Settings of application	Institutionalised patients (n=2), hospitalised patients (n=1), not specify the scenario (n=2)	Institutionalised patients (n=3), all healthcare settings (n=2), outpatients (n=1)

Most of the tools agree on **the pharmacological groups** that are likely to be deprescribed:
STATINS, ANTIPSYCHOTICS, PROTON-PUMP INHIBITORS, ANTIDEPRESSANTS

CONCLUSION:



Knowing and being able to use deprescription tools aimed at **hospitalized** patients or patients with **multimorbidity** can be very useful for hospital pharmacists, allowing them to carry out this activity as part of their **healthcare activity**, thus improving the **prescription** and **safety** of their patients.