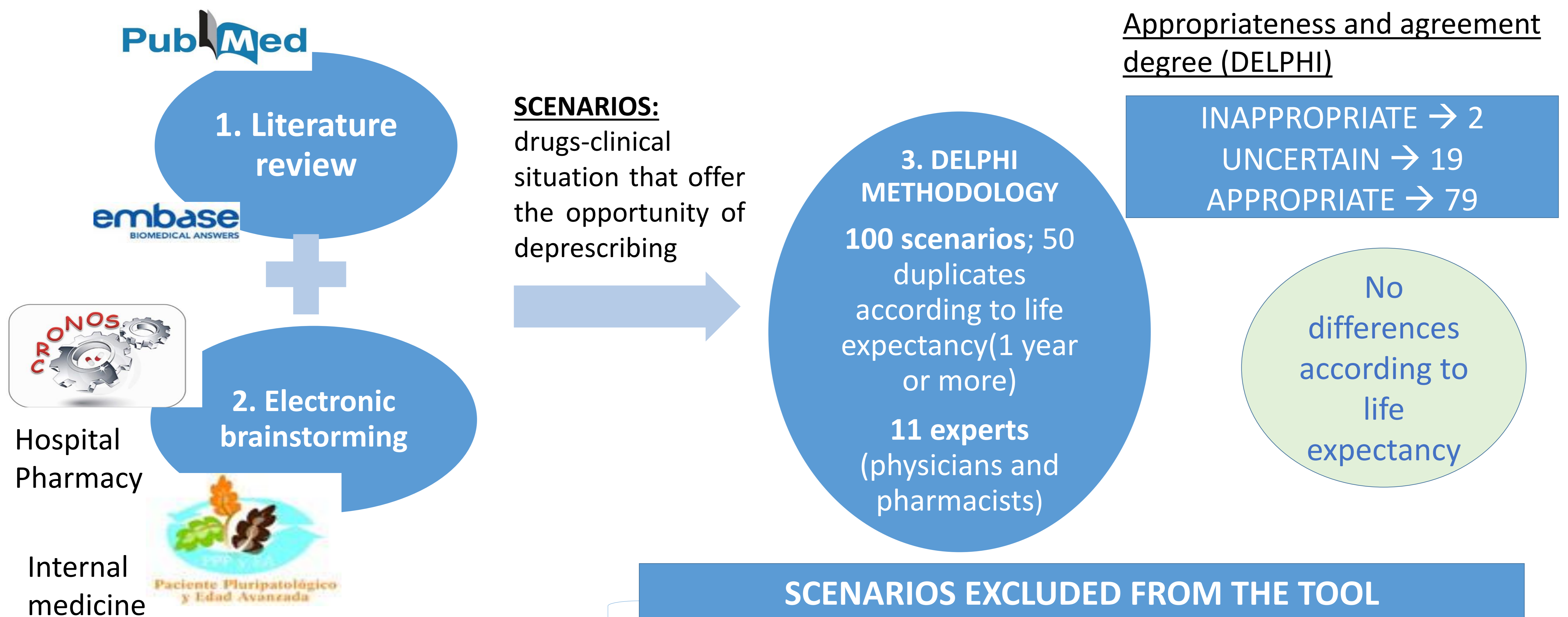


## DRUGS AND CLINICAL SITUATIONS THAT OFFER THE OPPORTUNITY OF DEPRESCRIBING IN PATIENTS WITH MULTIPLE CHRONIC CONDITIONS: LESSCHRON CRITERIA

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**Objective** → To design an easy for use tool for identifying opportunities of deprescribing related with the prognosis in patients with multiple chronic conditions



### 4. MEETING OF THE RESEARCH GROUP to discuss the content and design of the tool, according to definition of deprescribing

Review and evaluation process of long-term therapeutic plans, aiming to stop, substitute, or modify the dosage of those drugs (which have been appropriately prescribed) that under certain clinical conditions (indicating the stability of a medical condition) can be considered unnecessary or with an unfavorable benefit-risk ratio

### SCENARIOS EXCLUDED FROM THE TOOL

- **REFERRED TO ACUTE INDICATIONS:** diuretics for hydropic decompensation and acute pulmonary edema; inhaled corticosteroids for COPD exacerbations
- **CONSIDERED AS NO INDICATED:** peripheral vasodilators for venous insufficiency, metoclopramide for nausea and vomiting when there is tolerance to their origin, metformin with low BMI, iron/erythropoietin in anemia of unknown origin, proton-pump inhibitor in prophylaxis of bleeding without gastrolesive medication and inhaled corticosteroids for COPD phenotype not exacerbator

❖ **LESSCHRON CRITERIA** → 27 SCENARIOS (organized in a table according to ATC system)

**Columns (conditions of each scenario):** drug-indication for which it is prescribed, deprescribing condition, health variable to monitor and time of follow up

ALIMENTARY TRACT AND METABOLISM (4)
oral antiabetics, acarbose, metformin and vitamin D/ calcium supplements
BLOOD AND BLOOD FORMING ORGANS (4)
oral anticoagulants(2), ASA and ASA and clopidogrel combination
NERVOUS SYSTEM (8)
haloperidol/risperidone/quetiapine, benzodiazepines, Z drugs, other antidepressants (2), anticholinesterases(2) and citicoline

IMPLICATED DRUGS

CARDIOVASCULAR SYSTEM (4)
antihypertensives, nimodipine and statins in primary and secondary prevention
GENITO-URINARY SYSTEM (4)
anticholinergics(2), alpha adrenergic blockers and allopurinol
MUSCULO-SKELETAL SYSTEM (2)
Bisphosphonates in primary and secondary prevention
RESPIRATORY SYSTEM (1)
Mucolytics and expectorants

**Conclusion** → LESS-CHRON criteria allow us to identify medicines, appropriately prescribed, that under certain conditions of clinical stability and/or poor patient prognosis make them liable to withdrawal. It is necessary its validation.