

PRESCRIPTION GUIDE ADAPTED FOR THE ELDERLY (PAPA guide) WITH THE EUROPEAN STOPP/START (S/S) LIST.

5PSQ-108

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CONTEXT

- 40.5% of people over the age of 75 suffer from **polymedication** → **high iatrogenic risk**.
- Medication-related iatrogenesis = **20% of emergency hospitalizations** among the elderly
- **Limiting this risk** is one of the challenges facing clinical pharmacy → **prescribing aids** have been created = the PAPA guide, revised in 2015, and the European S/S list of 2023.

OBJECTIVES

- Analyze the divergences between the PAPA guide and the S/S list to check their concordance.

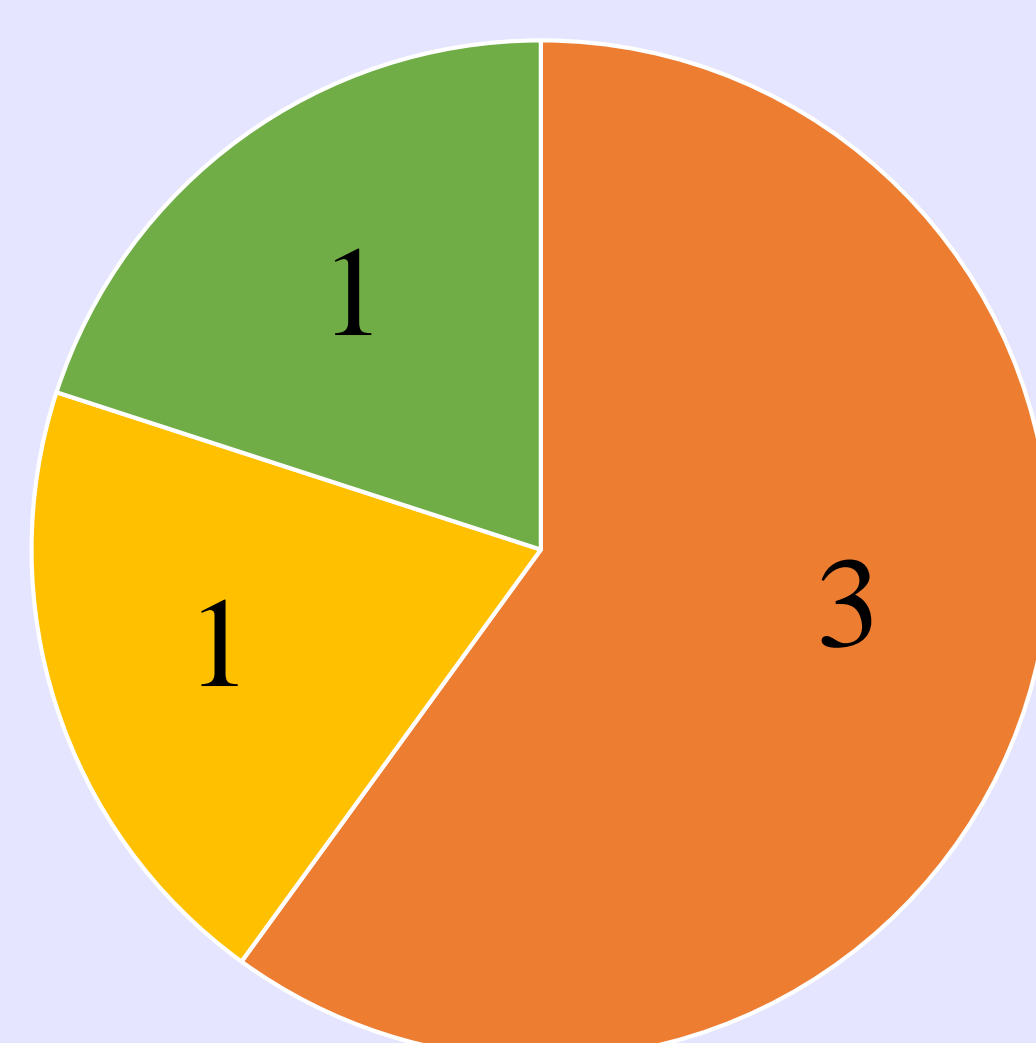
METHOD

- We recorded the prescriptions of patients
 - ❖ > 75 years of age
 - ❖ Hospitalized in a post-emergency ward.
- We **analyzed** them using the **PAPA guide** and the **S/S list** → **Identify any divergences** in prescribing non-conformities (PNC) between these two guidelines.

RESULTS

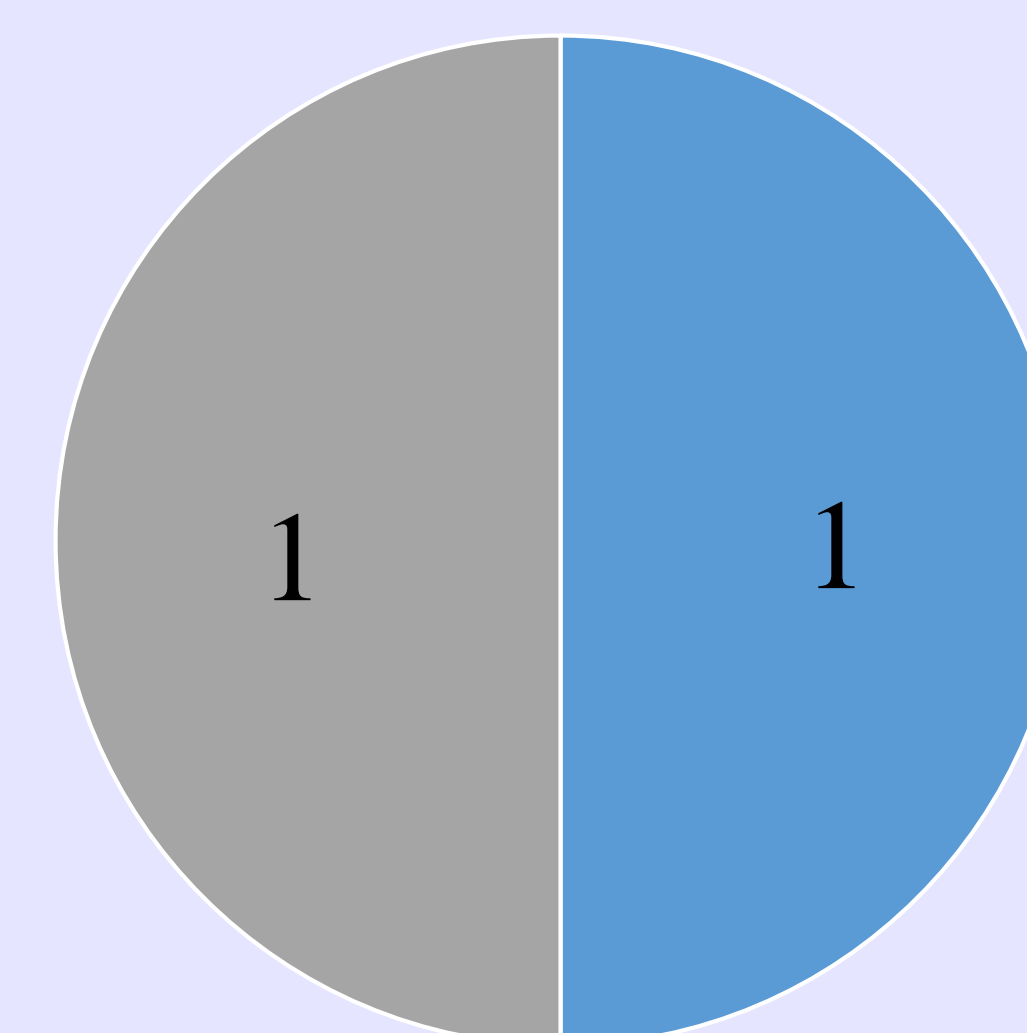
- **50 patients**, aged between 75 and 100 years (mean = 85.6 years) → **438 prescription lines**.
- ➔ **1.60% PCN divergences** (7/438) between these 2 tools.

5 PCNs that the S/S list does not mention



- Contraindicated combinations: converting enzyme inhibitor/angiotensin II receptor antagonist + aldosterone antagonist after age 80
- Contraindication: cognitive risk of biperiden
- Wrong indication : mirtazapine for insomnia

2 PCNs that the PAPA guide does not mention



- Class duplication: 2 antihistamines simultaneously
- Risk of adverse effects: systematic use of tramadol

DISCUSSION-CONCLUSION

PAPA guide	S/S list
Last update 2015	Last update 2023
Certain drugs are not referenced = dapagliflozin, tafamidis, and anagrelide Certain pathologies are not listed = asthma and allergies	Does not take dosage into account.
Booklet organized by pathology	Digital platform + detailed arguments for each molecule

- These 2 tools are thus in **agreement**, but the comparison remains complex → **different biases** and different **formats** ➔ **Their use is therefore complementary.**

