Older Adults Are Often Prescribed Possibly Harmful Drugs

Drugs such as Xanax and ibuprofen are landing seniors in hospitals—and costing them a bundle.

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New findings published in the Journal of the American Geriatrics Society suggest that a third of older adults in the United States are prescribed potentially harmful medications—drugs whose risks outweigh the benefits—putting them at greater risk for hospitalization and higher health care costs, reports Medical News Today.

For the inquiry, researchers at the University of Buffalo reviewed data from a 2011 to 2015 health care services survey to determine the rate at which potentially inappropriate medications are prescribed to adults over 65. This includes drugs such as antidepressants, first-generation antihistamines, benzodiazepines (for anxiety and other conditions), nonsteroidal anti-inflammatory drugs, or NSAIDs (for pain) and proton pump inhibitors, or PPIs (to reduce the production of stomach acid).

When focused on prescriptions for 33 classes of drugs deemed inappropriate for older people by the American Geriatric Society, investigators found that 34% of adults age 65 and older received a prescription for at least one of these drugs.

Results showed that those who received these drugs were 17% more likely to be hospitalized and 26% more likely to visit an emergency room.

Doctors were also found to prescribe older adults more medications than those under 65 (8.7 versus 4.5). In addition, older adults had added health care costs totaling $458 annually plus an extra $128 for prescription drugs.

There was a small but statistically significant decline (meaning it likely wasn't due to chance) in the overall prescription rate of these classes of drugs to older individuals from the start of the study to the end (35.3% to 32.5%). But researchers noted that prescriptions for some of the more problematic drugs, such as benzodiazepines, NSAIDs and PPIs, were being doled out at the same rate.

Collin Clark, PharmD, the study's first author and a clinical assistant professor in the School of Pharmacy and Pharmaceutical Sciences at Buffalo, called the harm experienced by older adults

from these medications a “major public health challenge.”

“Interventions are needed to target unnecessary and inappropriate medications in older adults,” study authors concluded. “Deprescribing is currently in its infancy in the United States, and further work is needed to implement these interventions to reduce unnecessary health care utilization.”

For related coverage, read “Doctors Are Prescribing Kids Drugs That Aren’t FDA-Approved for Certain Conditions.”

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