

## Supporting Community Substance Abuse Services for Michigan's Older Adults

A Quarterly Newsletter

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### When Medication Hurts Instead of Helps

Highlights from the  
*Alliance for Aging Research*  
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### A Common Sense Approach:

*Safe Use of Medication by Older  
Adults*

As the older adult population grows, our awareness of the importance of knowing the answer to this questions grows - "When is Medication Use a Risk?"

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## Older Adults: A High Risk Group for Substance Abuse

"A High Risk Group For Substance Abuse" as a title probably congers images of misbehaving teens or wild eyed, young adults full of themselves and ready to PARTY! Few of us are prepared to think of our elders, our parents in particular, older relatives, or friends as being "at risk." More and more - as the older population grows in number - they are.

The factors leading to this conclusion are several: there are biological changes that occur as we age, and an increased likelihood of medication use. In some cases, seniors may lack accurate information in a usable form about the medication prescribed.



Older adults are almost **six** times more likely than other age groups to be hospitalized for adverse medication reactions.

Increased isolation, unresolved grief, and noncompliance issues emerging from social and financial realities create risks for older adult substance abuse, as well.

Other factors framing the substance abuse risks for our elders are less

obvious, hidden within demographic and research data presented from a multitude of sources - universities, research centers, medication manufacturers. Risk issues for seniors extend beyond those associated with prescription medication to over-the-counter drugs, vitamins, supplements, and other compounds. And let's not forget - alcohol!

*Risks due to high consumption of drugs:*

- Older adults constitute approximately 13% of the population.
  - Older adults purchase 40% of all over-the-counter medications.
  - Older adults consume more than one-third of all prescription drugs.
- According to the Harford Institute for Geriatric Nursing, 2008*

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## A HIGH RISK GROUP CONTD.

*Risks caused by the number of medications taken concurrently:*

•79% of adults 65 and older are on medication, with 39% taking five or more prescription drugs and up to 90% taking over-the-counter drugs.

(Hartford Institute for Geriatric Nursing, 2008)

•As the medication circulating in the body increases, the potential for adverse drug reactions (ADE) is high. Adults 65 and over have two to three times as many ADE's as younger adults. (An Emerging Opportunity: Addressing Alcohol and Other Drugs and Mental Illness in Older Adult, National Institute of Alcohol Abuse and Alcoholism, 1995)

*Risks created by biological intolerance:*

•Most drugs have been produced for younger individuals, few specifically for older adults.

•17.5% of the 30 million Medicare recipients are prescribed medications generally unsuitable for their age group because of lack of awareness or inadequate options. (Adapted from When Medicine Hurts Instead of Helps. Alliance for Aging Research)

•According to the Food and Drug Administration: *Medicine and You: A Guide for Older Adults*, as the body ages, changes can affect the way medicines are absorbed and used. For example, changes in the digestive system can affect how fast medicines enter the bloodstream. Changes in body weight can influence the amount of medicine needed to take and how long it stays in the body. The circulation system may slow down, which can affect how fast drugs get to the liver and kidneys. The liver and kidneys also may work more slowly affecting the way a drug breaks down and is removed from the body.

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## When Medication Hurts Instead of Helps

*Getting older? Wondering if you'll be independent? Or will you develop one or more of the litany of aging-related health conditions - loss of vision, hearing deficits, painful joints, heart failure, difficulty breathing, arthritis? perhaps cancer?, or an emotional problem, such as depression or anxiety? Is there any relief on the horizon?*

The most significant health care technology, affecting a majority of older adults, is medication. The safe and appropriate use of prescription and over-the-counter medication can prevent or delay



illness, limit disabling conditions, and prolong life. We hear of "medication miracles" in cases where the effective application of medication restores an individual to functional, independent living.

### All well and good? Right? Maybe not...

A report issued by the Alliance for Aging Research, a nonprofit organization promoting medical research on human aging, draws attention to the darker side of the medication scene. The report, *When Medication Hurts Instead of Helps*, highlights data from fifty principle studies, which indicates older adults in America are at high risk of being harmed by medications.

The report points out individuals age 65 plus are most vulnerable to the harmful effects of medication due to biological changes which accompany aging and the number of medications being use. One study noted America's elders are six times more likely to require hospital care because of damage caused by medication

Age related illness' (mentioned above), the slowing down of the biological processes of absorption, distribution, metabolism, and elimination, plus the potentially potent combination of prescribed and non-prescribed substances, can create a maelstrom - a medication nightmare!

Adding to the problem is the possibility elders may react to the medications they use. Some older patients display paradoxical effects - the opposite of the intended effects. Some of the research indicated problems caused by the potency of medication, leaving the elder "at risk" for biological intolerance. The medicine, designed for younger populations, creates a medical imbalance in the elderly. Some of the iatrogenic results are caused by incomplete assessment, others occur when the alternatives to the medication are limited or absent.

The focus of the *When Medicine Hurts Instead of Helps* Alliance for Aging Research report is to highlight prevention strategies to reduce the risk of harmful medication use. Key approaches suggested for older adult



patient advocates, and caregivers include: Encouraging pharmaceutical companies to study medication effects in older adults using pre and post marketing clinical trials; Developing labels to help older adults understand the appropriate and effective use of over-the-counter medication; Requiring competency in geriatric pharmacy for health care and aging service professionals; and Providing accurate, up to date information to family and caregivers of older adults to prevent misuse of medication.

# A Common Sense Approach: *Safe Use of Medication by Older Adults*

*As the older adult population grows, our awareness of the importance of knowing the answer to this question grows -*

*“When is Medication Use a Risk?”*

## *Common Sense About Medication:*

Part of the answer involves common sense. We know that some older adults have vision problems and need LARGER PRINT medication information, including medication WARNING labels. Many elders suffer from arthritis and will benefit from easier to open packages. Literacy may be an issue for some. And always a major concern for all income levels - WHAT DOES IT COST?

There are other questions that seem obvious, but when not answered create the potential for risk associated with harmful use or misuse. For example:

- What is the medication called?
- What is this drug supposed to do?
- Is this a brand name medicine or a generic drug?
- Are the instructions for taking the prescription clearly understood?
- Are the common side effects known?

- What is the medication for?
- Can this medicine be used safely with other prescription drugs?
- Can it be used safely with over-the-counter medications?
- Will alcohol use effect the medication?
- What foods or activities need to be avoided?
- Is there written information available? In various languages?

For medical, social work, and aging services professionals, these “common sense” aspects of older adult medication use create ongoing challenges. Seniors who have been healthy, using few or no medication, have to be educated and monitored. Individuals may hold values or myths passed on from generations passed regarding drug use. Noncompliance with the instructions requires constant vigilance for caregivers - both professionals and family members.

Are we currently prepared to apply common sense as we set out to solve these ever increasing risk factors? At what level is the risk of harm lessened sufficiently? Are we going to accept medical health and independence for a fortunate percentage of our growing elder population, or will we be determined to improve conditions for all aging Americans?

The questions we raise today have been the focus of community based initiatives to provide supportive care for seniors for the past two decades, and from time to time, new initiatives create foundations for future paradigms.

Serious challenges remain: for state-wide and national organizations to provide accurate, up-to-date information; for local pharmacies and medical groups to provide affordable services; for substance abuse prevention and treatment organizations to promote healthy choices and effective alternatives and for all of us to seek common sense solutions which insure safe use of medication.



## A High Risk Group contd.

### *Risks due to abuse or misuse of prescription medications:*

- For individuals 85 years of age and older, 35% of visits to the physician resulted in prescriptions for three or more medications. (Cancer Control, 1998)
- An estimated 35% of older adults experience adverse drug events and almost half of these are preventable. (Harford Institute for Geriatric Nursing, 2008)
- According to the Center for Disease Control and Prevention, among those age 65 and older, falls are the leading cause of injury death. One out of three adults age 65 and older falls each year. Falls of older adults may be drug induced due to both prescription and over-the-counter drug effects and interactions that may cause dizziness or drowsiness.

### *Risks due to abuse or misuse of over-the-counter medications*

- The most common and prevalent form of medical care among older adults is self-medication with use of over-the-counter drugs.
- In a nationwide study of the use of over-the-counter drugs, older adults reported experiencing 4.2 everyday health problems during a two week period. Of these problems, 35% were not treated at all; 11% were treated

with home remedies; a physician or dentist was consulted for 13% of the problems; a previously prescribed medication was used 15% of the time and 35% of the time over-the-counter medications were used. (Evashwick, 1999)

- Many older adults do not consider over-the-counter drugs as medicine and do not report using them to physicians. Drug interactions can easily occur.
- Older adults are seven times more likely to use over-the-counter medications than the general population and at least half of these medications are analgesics.
- Forty percent of people over age 60 use over-the-counter medications every day and 80% of these use alcohol, prescription drugs, or both. (Growth At Any Age, A Comprehensive Resource Guide, 2nd Ed - 1998)

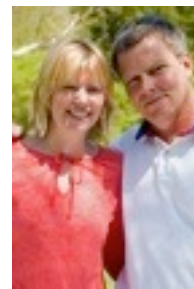
### *Risks due to the use, abuse, or misuse of alcohol by older adults*

- An estimate 2.5 million older adults experience alcohol related problems, and 21% of individuals over 40 have a possible diagnosis of alcohol abuse or dependence resulting in hospital costs of \$60 billion per year. (Schonfeld and Dupree, 1995)
- Older adults experience consequences with less alcohol consumption due to their heightened sensitivity to alcohol or the presence

of such coexisting diseases as diabetes, hypertension, cirrhosis, or dementia. (Atkinson and Gazini, 1994)

- Rates of alcohol related hospitalizations among older adults are similar to those for heart attacks. (National Institute of Alcohol Abuse and Alcoholism, 1995)
- Studies consistently find elders are less likely to receive a primary diagnosis of alcoholism than younger adults. (Booth et al., 1992)

Older adults remain a population in which substance abuse is under diagnosed and under treated. Communities need collaboration across service systems, creative initiatives, and an ongoing commitment to addressing older



adult substance abuse problems. As Baby Boomers continue to age and the older adult population continues to increase, additional funding is needed for effective

substance abuse prevention and treatment programs for seniors. The general public will benefit from health education and training, as well as, increasing knowledge by way of information to insure successful aging for all older adults and their families in the decades to come.

# Gerontology Network

*Gerontology Network is a nonprofit, service organization made up of Affiliate programs that work together to enhance the quality of life and promote the independence of older adults, their families and care providers. Established in 1979, Gerontology Network ([www.gerontologynetwork.org](http://www.gerontologynetwork.org)) provides training and education, assessment and counseling, respite and emergency response programs, vision services and support to families and care providers. We also partner with a variety of organizations to identify and meet the ever expanding needs of the at-risk seniors in our community.*

## Kent County Older Adult Substance Abuse Services...

To find out more about Gerontology Network's Substance Use Treatment and Recovery Services please contact the Outreach & Assistance program. The next Substance Use Treatment and Recovery group session is scheduled for June 2011. Call Gerontology Network's Outreach & Assistance program for details: (616) 456-6135 or 1-800-730-6135.

## Resources On the Web...

The inclusion of a site on this list does not indicate endorsement by *Gerontology Network Profile*.



*Network180* is the community mental health authority for Kent County. Network180 connects individuals and their families to services for mental illness, substance use disorders or developmental disabilities. ([www.network180.org](http://www.network180.org))

*Northwest Regional Council (NWRC), Northwest Washington's Area Agency on Aging website, ([www.nwrcwa.org](http://www.nwrcwa.org)), provides a Medication Awareness Handbook for Older Adults.*

*Substance Abuse & Mental Health Services Administration's, [www.samhsa.gov](http://www.samhsa.gov), mission is to reduce the impact of substance abuse and mental illness on America's communities.*

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