

## Louisiana Pharmacists Association Educates Patients About Nonprescription Medications of Precaution in Older Adults

Every day, over-the-counter (OTC) nonprescription medications are used for numerous medical reasons by patients of all ages. However, some don't notice that those over the age of 65 require extra measures and precautions before medications for common aches, pains, and ailments can be taken. The American Geriatrics Society (AGS) periodically releases recommendations that advise healthcare providers on medications that should not be suggested for the older population. These guidelines are known as the *American Geriatrics Society Beers Criteria for Potentially Inappropriate Medication Use in Older Adults*, or commonly referenced as the "Beers Criteria." In the guidelines, both prescription and OTC nonprescription medications are listed that should be avoided or only used when no other options are available.<sup>1</sup> Although the Beers Criteria is not the only source of information that can aid pharmacists and other healthcare providers for medication use in those 65 years and older, it is the most widely used source.<sup>2</sup> As OTC medications are sometimes not reported to physicians and pharmacists by patients, it is important to disclose all current medications, whether OTC or prescription, to local healthcare providers during wellness and follow-up visits. This can reduce potential drug interactions and allow providers to obtain a more complete health and medication history for the patient. Special attention must be given to certain medications of precaution, as they can cause possible harm or injury in those 65 years of age and older.

OTC pain medications are one of the most popular topics often asked about by people of all ages as they approach pharmacists across the nation. Nonsteroidal anti-inflammatory drugs (NSAIDs) are very commonly used, as over 30% of patients aged 65 to 89 report taking NSAIDs.<sup>3</sup> However, NSAID pain medications such as ibuprofen (Advil, Motrin), naproxen (Aleve), and aspirin (at higher doses than low-dose aspirin, sometimes called "baby aspirin") are associated with an increased risk of bleeding in the esophagus, stomach, and parts of the small intestine in those 75 years and older.<sup>1,3</sup> This is called upper gastrointestinal (GI) bleeding. In addition, the 2019 update of the Beers Criteria discourages use of low-dose aspirin for reducing risks of first-time heart attacks, strokes, and other heart conditions in patients 70 years and older, also due to bleeding risks.<sup>2</sup> Adults of older age may experience more severe side effects because kidney function often begins to slow down in this age group, and medications are not eliminated from the body as quickly - this results in raised drug levels that could be harmful.<sup>3</sup> The risk for GI bleeding increases if these patients are also on blood-thinning medications, such as warfarin (Coumadin), apixaban (Eliquis), rivaroxaban (Xarelto), or clopidogrel (Plavix), to name a few.<sup>3</sup> For this reason, it is recommended to avoid long-term use of NSAIDs in this age group, unless alternative medications have been proven to not work as well, or he/she can take GI medications such as omeprazole (Nexium) or misoprostol (Cytotec) to reduce, but not eliminate, GI injury risks.<sup>1</sup> Acetaminophen (Tylenol) is a safer alternative for patients to take in place of ibuprofen or naproxen, with less severe side effects.<sup>3</sup>

As the common cold and flu season rapidly approaches every year, so does the rise of cough, cold, and seasonal allergy medication questions in pharmacies across the nation. Antihistamines are medications used for allergies and seasonal cold symptoms that are often used by patients of all ages. Many of these medications should cause those 65 years and older to be very watchful of what they are taking due to enhanced side effects. This includes diphenhydramine, chlorpheniramine, brompheniramine, clemastine, and dexbrompheniramine, which are common ingredients in many OTC anti-allergy and cold relief medications such as Benadryl, Chlorphen-12 or Chlor-Trimeton, Dimetapp and Q-Tapp. These medications, in addition to doxylamine (Unisom) and meclizine (Dramamine or Bonine), which can be used for insomnia and motion sickness, respectively, are all under a more broad class of medications, called anticholinergics.<sup>1</sup> These medications are widely known for their side effects, including but not limited to dry mouth, constipation, blurred vision, urinary retention, confusion, and memory impairment.<sup>1,2</sup> Older patients on these medications can also become less sensitive to their sedative effects with long-term use.<sup>1,3</sup> As with NSAIDs, the rate of eliminating these medications from the kidney may decrease, possibly intensifying the side effects in older adults due to increased drug levels in the body.<sup>1</sup> These medications may also increase risks of decreased mental cognition, dementia, and Alzheimer's disease.<sup>2</sup> As the side effects of these medications could cause more harm than benefit, it is highly recommended to stop taking these drugs unless absolutely necessary, and to seek alternatives.<sup>1</sup> Special precautions should also be taken with diphenhydramine, as it is often an ingredient in numerous sleep aids (such as ZzzQuil, Tylenol PM, Advil PM, etc.) in addition to its anti-allergy effects in Benadryl. Alternative antihistamine medications that have been studied with better safety results include loratadine (Claritin) and fexofenadine (Allegra), as they are less sedating.<sup>4</sup>

Overall, it is very crucial to review OTC medication use, in addition to prescription medication use, in patients 65 years of age and older. Many are unaware that some of the medications that have worked in the past may need to be reevaluated or possibly even stopped with older age. Safety is always the ultimate priority in all situations and encounters in every setting, with every medication involved. It is important that patients affected by these medications notify a physician or pharmacist if they are taking these medications, and let them know immediately if any questions arise in order to get the best outcomes of treatment.

#### References:

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