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Polypharmacy in the elderly: medications knowledge and self-rated health

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Background: Patients' understanding of their medications has major health and economic implications. Little is published regarding medication understanding, and the knowledge about levels of polypharmacy is confusing and lacks standardization.

Objective: To examine polypharmacy in Israel and study the relationships between self-rated health, diseases and medications, and the probability of not knowing reasons for, or erring, regarding medications.

Methods: Analysis of data generated from the Israeli National Health and Nutrition Survey for ages 65 and over – 2005-6, a cross-sectional study based on interviews of a random sample.

Results: The survey included 1799 interviewees, 53% women and 47% men: 55.9% aged 65-74, 35.9% aged 75-84 and 7.3% were 85 years and older. Daily medication numbers ranged from 0 - 15 with an average of 5.6 (SD 3.5). 60% took 3-8 drugs, and 92% at least one drug. There were 24% who did not know the reasons for taking their medications and 11.5% erred regarding at least one medication – most frequently for cardiovascular drugs. When controlling for diseases, medications number and socio-demographic factors, the probability of erring about at least one reason for taking medications was significantly increased for those who assessed their health as bad or worse compared to last year (OR=1.8, 95% CI 1.14-2.8). For every additional medication, there was a 26% increased probability of not knowing or erring regarding at least one reason.

Conclusions and Application: Self-rated health is a practical indirect question to help screen for patients with poor medication understanding, which in turn, may lead to wrong usage, adverse effects and hospitalizations.