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Assessing pros and cons of common strategies to evaluate IMUP

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Background & Aims: Functional and cognitive impairment, geriatric conditions (i.e. falls) and limited life expectancy are common features in the elderly. Such conditions might limit the efficacy of drugs or increase the side effects risk, questioning the appropriateness of their prescription.

Methods: We review and discuss the main existing instruments and criteria for the evaluation of the appropriateness of prescription in the elderly.

Results: Several instruments are today available to help physicians during the drug prescription and revision process. Both softwares providing computerized decision support and pharmaceutical care approaches have been demonstrated able to reduce the burden related to inappropriate prescription.

The Medication Appropriateness Index, Beers' criteria and Screening Tool of Older Person's Prescriptions (STOPP)/ Screening Tool to Alert doctors to Right Treatment (START), Fit for The Aged (FORTA) list are the most used both in clinic and research. Conflicting evidence from intervention studies shows a reduction in hospital admission, improved quality of life and drug-related issues.

Conclusions: Sparse and contrasting evidence shows a benefit, in terms of reduced drug inappropriateness after the application of appropriate prescription criteria and computerized decision support soft wares. Further studies should be carried out to confirm such benefits and to provide evidence regarding the potential positive effect on functional outcomes.