



Seniors at Risk:

**RXPert USA's
Medication Therapy
Management**
A system to protect
America's
most vulnerable
citizens from
medication-related
problems

Provided by:



acps

Acadiana Consultant Pharmacy Service

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RXPert USA



RxPert USA

What will one of every three seniors suffer this year?

A Fall

- More than 11 million seniors—one of every three—will fall this year (Sattin 1992; Tinetti, Speechley, and Ginter 1988), and approximately one in 10 of those falls will result in a serious injury such as hip fracture or head injury (Tinetti 2003). More than 500,000 seniors will suffer hip fractures annually by 2040 (Cummings, Rubin, and Black 1990).
- Each year, 35% to 40% of generally healthy seniors living in the community fall (Campbell, Spears, and Borrie 1990). Because nursing facility residents are older, more frail, and more cognitively impaired, approximately 50% fall each year (Rubinstein, Josephson, and Robbins 1994).
- About 20% of hip fracture patients will die within five years of the fracture (Cooper 1997), yet thousands of those deaths are **PREVENTABLE**.
- Most people do not realize that falls can be a medication-related problem.
- Risk factors for falls include medication use, advanced age, decreased mobility and strength, balance impairment, neurological disease, cardiovascular disease, incontinence, visual impairment, and cognitive impairment.
- Certain medications—such as high blood pressure medications, antidepressants, sleep aids, antiseizure medications, and heart antiarrhythmic medications—can contribute to falls in the elderly for a variety of different reasons. Perhaps a drug causes dizziness in an elderly patient, and that patient has not been properly instructed on how to rise and walk while on the medication. Standing up too quickly could result in a fall. Or, perhaps a drug causes frequent urination, and a patient constantly gets up during the night. One of those bathroom trips could cause a fall, and possibly a hip fracture.

Medication-related falls and hip fractures are preventable

- Consultant pharmacists can assess seniors' drug regimens for exposure to risks that may contribute to falls, recommend drug therapy changes, and educate the patient and caregiver on how to avoid dangerous situations. Medication management is an effective fall prevention measure (Cooper 1997).

“No risk factor for falls

is as potentially

preventable or reversible

as medication use.”

(Leipzig, Cumming, and Tinetti 1999)

America's Senior Care Pharmacist

See how we can **HELP**

**Call for an appointment Today
with a Senior Care Clinical Pharmacist with 20 years of
experience in this field (337) 457-4604**



How do we **PREVENT** medication-related problems?

ACPS - **RxPERT USA's**

senior care pharmacist is a specialist in geriatrics, geriatric pharmacotherapy, and the unique medication-related needs of the geriatric population. This expert is uniquely qualified to identify individuals who are at high risk for medication-related problems that interfere with the goals of therapy. By applying expert knowledge to seniors wherever they reside, we can identify, resolve, and prevent more medication-related problems. As many as 50% of medication-related problems are preventable (Gurwitz JH et al., Am J Med, 2000). The most important aspect of our practice is **senior care pharmacy**—the delivery of high

quality pharmaceutical care to at-risk seniors in home and community settings.

ACPS - RxPERT USA's clinical pharmacist with 20 years of experience in this field can:

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- Ensure that a patient's drug therapy is appropriate, effective, safe, and used correctly
- Determine whether a sign, symptom, syndrome, or decline in function is medication-related
- Identify medications that may cause or aggravate common geriatric problem areas and recommend to your physician changes in your drug therapy which will reduce cost, prevent medication related problems, prevent drug interactions, prevent or alleviate adverse drug reactions and improve your quality of life.

See how we can **HELP**

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