LeadingAge Midwest
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Medication Reviews as a Fall Intervention

During the 2024 Spring Conference, LeadingAge Iowa had several great breakout sessions. A presentation from Omnicare Pharmacy discussed the importance of deprescribing in older adults. A separate breakout session (also presented by a Pharmacist) included how to use your vendors to reduce hospitalizations. In this session, Rob Leffler with Synchrony Health Services discussed that one of the top three causes of hospitalizations in older adults are none other than… FALLS.

These two breakout sessions had one thing in common – certain medications increase older adults risk of falls, which increases their risk of hospitalization. While a medication review seems like a great idea to assist with fall prevention, how do we make it practical and meaningful? During the breakout session a question was asked of the presenter – if you could pick anywhere to start when conducting a medication review as a fall prevention strategy where would you recommend? The answer was great – the beers list!

The American Geriatrics Society reviews a list of medications that may potentially be inappropriate for use in older adults. This is referred to as the "Beers Criteria". While these medications are more likely to cause adverse events in adults, they must be evaluated individually based on each resident's health history. The risks vs. benefits should be discussed with both the resident (or their representative as applicable), their physician, and your consultant pharmacist may be helpful in this interdisciplinary team as well.

If you would like to use a medication review as a fall intervention, I would strongly encourage you to develop a form or a template progress note to provide evidence of your intervention to surveyors. Using the answer from the breakout session, one place that you could start is by reviewing the resident's medications to determine if they are on any medications that are included in the Beers Criteria.

Here are a couple resources for you when reviewing the Beers Criteria

- American Geriatrics Society 2023 updated AGS Beers Criteria which includes medication classes, names, rationale, recommendation, quality of evidence, and strength of recommendation.
- Cleveland Clinic Beers Criteria article which includes a shorter list of classes of medications included and reasons why it is included.

The consultant pharmacist will be the best person to advise you of what the best process is for potentially discontinuing specific medications to avoid any adverse events from discontinuation. Of course, always seek a physician's order for the recommendations and once the medication has been discontinued then follow up assessments should be

conducted to ensure that there are not adverse events from stopping the medication. In addition, you'll want to establish a practice for monitoring the resident's falls. If you discontinued the medication and the resident continues to have falls, it will be important for you to consider additional interventions. This could include potentially looking at other medications that could be discontinued or reviewing the fall for RCA and developing interventions based on the cause. If there are not medications discontinued, to maintain compliance with F689 in the federal regulations you would need to establish a different fall intervention to attempt to reduce or eliminate the resident's falls. This is where the documentation of the medication review will be helpful to identify if medications are potentially appropriate for discontinuation or not.