# GERIATRIC MIG PICO DE POEM OCTOBER 2021

Polypharmacy among older adults with dementia compared with those without dementia in the United States

## PRESENTING QUESTION

What is the prevalence of polypharmacy among older persons with dementia (PWD) compared to older persons without dementia (PWOD) attending outpatient visits in the United States.



### INDEPENDENT VARIABLE

Persons with dementia aged ≥65 years attending outpatient visits.

#### COMPARATOR

Persons without dementia aged ≥65 years attending outpatient visits.



#### OUTCOMES

- After adjustment, PWD had significantly higher odds of being prescribed
   ≥5 medications (AOR 3.0; 95% CI: 2.1-4.3) or ≥10 medications (AOR 2.8;
   95% CI: 2.0-4.2) compared with PWOD
- The median number of medications in PWD was eight compared with three in PWOD (p < 0.001).</li>

## TIMEFRAME

Cross-sectional analysis of outpatient visits recorded in the nationally representative National Ambulatory Medical Care Survey (NAMCS), 2014-2016.

## SYNOPSIS

- PWD is defined as individuals with a diagnosis of dementia on the NAMCS encounter form and those receiving an anti-dementia medication
- Compared visits with PwD and PWOD in sociodemographic, practice/physician factors, comorbidities, and prescribing outcomes.
- The unweighted sample involved 918 visits for PWD and 26,543 visits for PWOD, representing 29.0 and 780 million outpatient visits.
- Regression analyses examined the effect of dementia diagnosis on contributions by clinically relevant medication categories to polypharmacy (defined as being prescribed ≥5 prescription and nonprescription medications)
- After adjustment, PWD had significantly higher odds of being prescribed ≥5 medications (AOR 3.0; 95% CI: 2.1-4.3) or ≥10 medications (AOR 2.8; 95% CI: 2.0-4.2) compared with PWOD.

#### KEY TAKEAWAY

- Persons with dementia had significantly higher odds of being prescribed ≥5 or ≥10 medications than PWOD.
- The most significant sources of medications among PWD were cardiovascular and central nervous system medications.
- PWD had higher odds of receiving at least one highly sedating or anticholinergic medication (AOR 2.5; 95% CI: 1.6-3.9).
- Addressing polypharmacy in PWD will require cross-cutting and multidisciplinary approaches.

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