## POTENTIALLY INAPPROPRIATE MEDICATIONS IN ELDERLY AMONG THE PRESCRIPTIONS OF PSYCHOTROPIC MEDICATIONS

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## **ABSTRACT**

**Introduction:** The increase of the elderly population requires further assistance in health. The risks of pharmacotherapy in elderly justified the development of a special classification, the "potentially inappropriate medications in elderly". The psychotropic medicines are present in these lists because of the large potential to cause adverse reactions in this age range. Objectives: To characterize the sociodemographic and prescription profile in elderly users of psychotropic medicines. Methods: Crosssectional study with all elderly users of the Unified Health System who received psychotropic medicines in a medium-size city of the state of Minas Gerais in 2012. The penultimate prescription containing psychotropic medicines of each user in this system of the city was analyzed. Results: The majority of the elderly patients were women (69%), with an average of 72 years old, who withdrew psychotropic medicines in monotherapy (66,2%), in only one date (92,4%). 21,8% of the patients utilized two psychotropic medicines and 12,0% utilized more than two. These medicines had been prescribed by only one doctor in mostly of the cases (92,4%), whose specialization was mostly Medical Clinic. Only 0,9% of the prescriptions were made for psychiatrists. 11,1% of the patients had at least one potential medicine interaction or medicine in therapeutic duplicity and 13% of the patients had at least one medicine in subdose. The occurrence of at least one potentially inappropriate medication was very common among psychotropic medicines, being benzodiazepines the main drug. There is a strong force of recommendation to avoid all types of benzodiazepines for the treatment of insomnia, agitation or delirium in elderly people, because of their slower metabolism and their big sensibility to these medicines. There was evidence of direct association between having potentially inappropriate medication with the increase of the number of psychotropic medicines, having more than one prescriber, withdrawing the drug in multiple dates, having medicine interactions or therapeutic duplicity and inverse relation with obtaining the prescription provided by a psychiatrist and taking medicine in sub-doses. Conclusion: It is necessary that the health professionals consider what is part of the process of getting sick and what is part of the process of physiological aging to better understand the techniques for a proper prescription.

**Key-words:** Elderly; Psychotropic medications; Potentially inappropriate medications.