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International collaboration leads to new guideline to reduce medications in older Australians.

A new National Health and Medical Research Council (NHMRC) approved* guideline released today will assist healthcare professionals reduce prescribing of unnecessary medications in older Australians with dementia.

In 2017 there was an estimated 413,000 Australians living with dementia. People with dementia often have multiple health conditions, leading to prescribing of multiple medications. However, over time, these medications can cause harm. This guideline gives doctors and other healthcare professionals an important tool to navigate the complex process of optimising medication use in people with dementia.

Developed by the University of Sydney, in conjunction with the Bruyère Research Institute (Canada), the guideline contains seven recommendations that reflect the current evidence about when and how to trial withdrawal of two commonly prescribed medications.

Cholinesterase inhibitors and memantine are the classes of drugs that can show benefit in the treatment of symptoms of dementia. Approximately 20,000 people with dementia in Australia are prescribed a cholinesterase inhibitor yearly with this number increasing.

Appropriate use of cholinesterase inhibitors and memantine involves both prescribing these medications to individuals who are likely to benefit, and deprescribing (withdrawing) them for individuals where the risks outweigh the benefits.

“Clinical Guidelines can help General Practitioners and other healthcare professionals to make informed decisions,” explained guideline developer and NHMRC-ARC Dementia Research Development Fellow, Dr Emily Reeve.

“The availability of these deprescribing guidelines will provide a resource to help them, in conjunction with people with dementia and their family, decide when it is suitable for these medications to be withdrawn.

“It also gives guidance on how the medications should be withdrawn and what monitoring to do after discontinuation.”

The Australian and New Zealand Society for Geriatric Medicine has endorsed the guideline and “supports the principles of appropriate use of medications in older people and welcomes the development of these recommendations to guide clinicians and aid consumers in the goal of better, more individualised prescribing and deprescribing in older people with dementia.”

The guideline emphasises the need to consider the individual as well as their values, preferences and goals of care. Use of this guideline has the potential to reduce medication induced harm, reduce burden of taking medications and release money, which can be spent on non-pharmacological treatment.

The development of the guideline is part of a project funded through the NHMRC Cognitive Decline Partnership Centre (CDPC), to help determine how to manage medicines in people with dementia better in the future.
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*NHMRC’s approval of the guideline recommendations indicates that they have met the NHMRC standard for clinical practice guidelines.

To access the guideline and supporting documents go to: http://sydney.edu.au/medicine/cdpc/resources/deprescribing-guidelines.php

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