**Deprescribing in frailty**

Taken from https://g-care.glos.nhs.uk/uploads/files/DePrescribing%20in%20Frailty.pdf

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| **For Rockwood scores of 7-9**  **Severe frailty** | **Therapeutic target** | **Suggested actions** |
| **Diabetes** | Symptom control  Avoid hypos  HbA1C only to identify risk of hypos (aim >65)  Usually no BP Rx | Reduce treatment  Symptomatic drugs only – stop other drugs eg statins, BP  Stop metformin if eGFR <30 Consider stopping sulphonlyurea or insulin (type 2)  Watch for falling weight  In EOL Type 1, give low dose once daily long acting insulin |
| **Hypertension** | Usually no BP targets | Stop antihypertensives |
| **Cholesterol** | No added value | Stop cholesterol medication |
| **Epilepsy** | Treatment continues | Reduce doses if delirium  Consider midazolam by syringe driver in EOL if poorly controlled |
| **Osteoporosis** | Drugs unlikely to be of value if life expectancy < 1yr  May still consider Vitamin D | Stopping Rx if poor life expectancy |
| **Angina/IHD** | Angina less likely if immobile | Stop aspirin & statin (NNT to prevent ischaemic event 250/yr, and no sig reduction in mortality)  Stop angina drugs if asymptomatic  B blocker at low dose |
| **Heart Failure** | Continue Rx to reduce risk of terminal CCF  Furosemide in syringe driver EOL | Symptom management and less concern regarding renal function  May continue low dose ACE and diuretic even where BP is low as long as not dizzy or syncope |
| **Dementia** | Usually stop dementia drugs  Memantine for behaviour problems  Minimise other drugs to reduce risk of delirium | Delirium very likely  Management plan for delirium  Stop drugs if swallow now unreliable |
| **COPD** | Usual Rx but may be unable to use inhalers  Avoid theophylline  Avoid oral salbutamol | Anticipatory care plan for managing exacerbations at home  Consider palliative oxygen therapy |
| **Pain and analgesia** | Often reduce doses  Risk of over treatment with patches  Abbey pain scale | Titrate doses down with weight loss  Titrate all drugs down if delirium (anticholinergic burden)  Assess for constipation |