

Deprescribing Guide

1. No active condition or clear indication?
2. Medications with similar mechanisms or duplications?
3. Mechanistic antagonism?
4. Prescribing cascade (prescription of a medication for the adverse effect of another)?
5. Treatment goals appropriate to age and functional status? ([JNC](#),^c [AHA/ACA HTN](#),^c [AHA/ACA Cholesterol](#)^d, [ADA](#)^g)?
6. Dosed appropriately for renal/liver function?
7. Symptoms that are commonly associated adverse drug events?
8. Potentially inappropriate medications? ([STOPP criteria](#)^b, [Beers](#)ⁱ)
 - a. Anticoagulants – weigh stroke risk ([CHA2DS2-VASc](#)^e) vs. bleeding risk ([HAS-BLED](#)^f)
 - b. Insulin/oral hypoglycemics – intensity of glycemic control depends on patient's health status([ADA](#)^g, [AGS](#)^h)
 - c. Digoxin – narrow therapeutic window in older patients, consider safer alternative, do not exceed more than 125 mcg/d
9. Medications with high risk for adverse drug events?
10. ≥ 3 psychoactive medications?
11. Adherence concerns?
12. Cost concerns?
13. Complexity of regimen impractical?
14. Can target >1 condition with 1 medication?
15. Missing medications ([START criteria](#)^b)?

Deprescribing Guide

a. **Creatinine Clearance Calculator:** Multiple creatinine clearance methods. *Global RPh*. Available <https://globalrph.com/medcalcs/creatinine-clearance-multi-calc/>

b. **2015 STOPP/START Criteria**

[O'Mahony D, O'Sullivan D, Byrne S, et al. STOPP/START criteria for potentially inappropriate prescribing in older people: version 2. *Age and Ageing*, 2015; 44\(2\):213-18.](#)

Supplementary Data

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4339726/bin/supp_44_2_213_index.html

c. **Hypertension:**

[James PA, Oparil S, Carter BL, et al. 2014 Evidence-based guideline for the management of high blood pressure in adults: report from the panel members appointed to the Eight Joint National Committee \(JNC 8\). *JAMA*, 311\(5\): 507-20, 2014.](#)

[Whelton PK et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/AphA/ASH/ASPC/NMA/PCNA Guideline for the prevention, detection, evaluation, and management of high blood pressure in adults: Executive summary: A report of the ACC/AHA Association Task Force on Clinical Practice Guidelines. *J Am Coll Cardiol*, 2018; 71\(19\): 2199-2269.](#)

d. **Statins: ACC/AHA Guidelines**

[Stone NJ, Robinson J, Lichtenstein AH, et al. 2013 ACC/AHA Guideline on the treatment of blood cholesterol to reduce atherosclerotic cardiovascular risk in adults: a report of the American College of Cardiology/American Heart Association task force on practice guidelines. *J Am Coll Cardiol*, 63\(25 Pt B\): 2889-934, 2014.](#)

ACC/AHA CV Risk Calculator

http://my.americanheart.org/professional/StatementsGuidelines/PreventionGuidelines/Prevention-Guidelines_UCM_457698_SubHomePage.jsp

e. **CHA₂DS₂-VASc Score for Atrial Fibrillation Stroke Risk**

Hwang C. CHA₂DS₂-VASc score for atrial fibrillation stroke risk. *MD+Calc*. Available <http://www.mdcalc.com/cha2ds2-vasc-score-for-atrial-fibrillation-stroke-risk/>

f. **HAS-BLED-Bleeding Risk**

Andrade, J. HAS-BLED Score. *QxMD*. Available <http://www.qxmd.com/calculate-online/cardiology/has-bleed-score-bleeding-in-atrial-fibrillation>

g. **American Diabetes Association Diabetes Guidelines 2019**

[American Diabetes Association. Older Adults: Standards of Medical Care in Diabetes – 2019. *Diabetes Care*, 2019; 42\(S1\):S139-S147.](#)

See Table 12.1 pg. S142 for A1c Goals

[Davies et al. Management of hyperglycemia in Type 2 Diabetes, 2018. A consensus report of the ADA and EASD. *Diabetes Care* 2018; 31\(12\): 2669-2701.](#) See figures for different approaches to care based on limiting cost, minimizing risk of hypoglycemia, etc.

h. **American Geriatrics Society Diabetes Guidelines 2013: See pg 2021 for A1c Goals**

[American Geriatrics Society Expert Panel on the Care of Older Adults with Diabetes Mellitus. Guidelines abstracted from the American Geriatrics Society guidelines for improving the care of older adults with diabetes mellitus: 2013 update. *J Am Geriatr Soc*, 61:2020-26, 2013.](#)

i. **2019 Beers Criteria**

[American Geriatrics Society Beers Criteria Update Expert Panel. American Geriatrics Society 2019 Updated AGS Beers criteria for potentially inappropriate medication use in older adults. *J Am Geriatr Soc*, 2019; 67\(4\):674-694.](#)

[Steinman MA, Fick DM. Using Wisely: A reminder on the proper use of the American Geriatrics Society Beers Criteria. *J Am Geriatr Soc*, 2019; 67\(4\):644-46.](#)

[Hanlon JT, Semla TP, Schmader KE. Alternative medications for medications in the use of high-risk medications in the elderly and potentially harmful drug-disease interactions in the elderly quality measures. *J Am Geriatr Soc*, 2015; 63\(12\): e8-e18.](#)