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, AHA/ACA HTN, AHA/ACA Cholesterol, ADA)*?

6. Dosed appropriately for renal/liver function?

7. Symptoms that are commonly associated adverse drug events?

8. Potentially inappropriate medications? *(STOPP criteria, Beers)*
   a. Anticoagulants – weigh stroke risk *(CHA2DS2-VASc)* vs. bleeding risk *(HAS-BLED)*
   b. Insulin/oral hypoglycemics – intensity of glycemic control depends on patient’s health status *(ADA*, AGS)*
   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)*?
Deprescribing Guide


b. 2015 STOPP/START Criteria


Supplementary Data

[http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4339726/bin/supp_44_2_213__index.html](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4339726/bin/supp_44_2_213__index.html)

c. Hypertension:


d. Statins: ACC/AHA Guidelines


ACC/AHA CV Risk Calculator

[http://my.americanheart.org/professional/StatementsGuidelines/PreventionGuidelines/Prevention-Guidelines_UCM_457698_SubHomePage.jsp](http://my.americanheart.org/professional/StatementsGuidelines/PreventionGuidelines/Prevention-Guidelines_UCM_457698_SubHomePage.jsp)

e. CHA2DS2-VASc Score for Atrial Fibrillation Stroke Risk


f. HAS-BLED-Bleeding Risk


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


i. 2019 Beers Criteria

