

11th World Congress on

ALZHEIMER'S DISEASE & DEMENTIA

March 20-21, 2019 Sydney, Australia

Adverse drug events in the elderly in hospital were associated with comprehensive geriatric assessment score**Akane Oyama, Yasushi Takeya, Tsuneo Nakajima, Miyuki Takeya, Shuko Takada, Yoichi Takami, Ken Sugimoto, Koichi Yamamoto and Hiromi Rakugi**
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It has known that the number of medications is associated with increasing risk of Adverse Drug Events (ADEs). In elderly people, poly pharmacy has also been associated with adverse clinical outcomes, such as disability and cognitive impairment, falls and fractures, malnutrition, hospitalization, mortality and increasing medical costs. Prescribing drugs to elderly patients should pay special caution because of age related change in metabolism, excretion, metabolism and distribution. Independent risk factors for ADEs have been known more than 5 or 6 medication, age, comorbidity and specific drugs (antipsychotics, anti-infective medication and anticoagulant and antiplatelet drugs etc.). Large majority of ADEs are preventable. The basic goal of our study was to identify the kinds of patients who more susceptible to ADEs for efficiently reducing ADEs. Our study was a retrospective study for seeking another risk factors related with ADEs in elderly inpatients from 2014 to 2017 in our department. We suspected that physical and cognitive impairment is also the risk factor of ADEs. Physical frailty was assessed by checking by hand strength, walking speed, physical activity, exhaustion and weight loss for two or three months and cognitive function was checked by MMSE. The number of ADEs was 28% in our hospitalized patients. Risk factors of ADE in previous studies were also risk factor of ADEs in our study. Major risk factor of ADEs identified in our study were comorbidity, duration of hospitalization and total score of CGA7 but MMSE score and physical frailty not related with AEDs. To reduce preventable ADEs in elderly inpatients, we may pay more attention to comorbidity and comprehensive geriatric assessment.

Biography

Akane Oyama has specialty in geriatric medicine especially dementia and poly pharmacy. He is a Member of the Japanese Society of Internal Medicine and Japan Society for Dementia Research.

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