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I'M SURE I NEED THEM ALL: OLDER ADULTS' EXPERIENCES OF POLYPHARMACY AND DEPRESCRIBING

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Background: Older adults are at high risk of polypharmacy, which is the use of multiple medications. Polypharmacy is associated with adverse drug events, hospitalizations, and increased healthcare costs. Deprescribing, the process of reducing or stopping unnecessary medications, is a key strategy to reduce polypharmacy. However, older adults often have complex medication regimens and may be reluctant to stop taking their medications. This study explored older adults' experiences of polypharmacy and deprescribing.

Objective: The objective of this study was to explore older adults' experiences of polypharmacy and deprescribing, including their perceptions of the need for their medications and their willingness to stop taking them.

Methods: This study used a phenomenological approach to explore older adults' experiences of polypharmacy and deprescribing. Data were collected through semi-structured interviews with 12 older adults who were taking multiple medications. The interviews were analyzed using thematic analysis to identify themes related to polypharmacy and deprescribing.

Findings: The findings of this study indicate that older adults experience polypharmacy as a burden and are often reluctant to stop taking their medications. They often have complex medication regimens and may be unsure of the purpose of their medications. They also often have concerns about the potential consequences of stopping their medications. Deprescribing was often a difficult process for older adults, and they often required support from their healthcare providers.

Conclusion: This study highlights the need for healthcare providers to take a patient-centered approach to deprescribing. They should explore older adults' experiences of polypharmacy and deprescribing and provide support and education as needed. Older adults should be encouraged to ask questions about their medications and to participate in decisions about their care.

Biography

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