

Prevalence of Polypharmacy and Its Associated Factors among Older Adults Attending Medical Clinics at Teaching Hospital Kalutara

Sulakshana U.A.D.S., Rodrigo W.M.D., Disanayake D.M.T.M., Rajapaksha R.M.T.N., Wijesuriya W.A.I.C., Nisansala M.W.N., Senarath N.S.A.S.N.
Faculty of Nursing, KIU, Sri Lanka

#Corresponding author: sumihiri.sulakshana@gmail.com

Background: Polypharmacy incidence is gradually increasing with multifactorial comorbidities and its prevalence is highly reported in the elderly. Polypharmacy increases the risk of adverse drug-related events and other consequences among older adults. Assessment of the prevalence of polypharmacy and its associated factors are vital.

Objectives: To assess the prevalence of polypharmacy and its associated factors among older adults attending medical clinics at Teaching Hospital Kalutara

Methods: A descriptive cross-sectional study was carried out among randomly selected 410 volunteered older adults (>65 years) attending medical clinics at Teaching Hospital Kalutara. A pre-tested, interviewer-administered questionnaire consisted of baseline characteristics, data related to disease conditions and medication usage was used to collect data. Data were analysed using descriptive and inferential statistics using SPSS version 25.0.

Results: The age ranged between 65-95 years and the mean(\pm SD) age was 73.0(\pm 6.8) years old. The majority was female (61.4%), Sinhalese (71.8%), unemployed (51.2%), married (47.4%), and educated up to secondary education (70.1%). Hypertension (62.9%) and Diabetes (42.9%) were highly prevalent. Commonly prescribed medicines were angiotensin-2-receptor antagonists (60%), nitrates (70.1%), anti-diabetics (73.6%), analgesics (55.6%), blood coagulation-related medicines (61.4%) and hyperlipidemia medicines (52.2%). Polypharmacy was prevalent among 89.9% of older adults. Polypharmacy incidence was associated with self-income ($p=0.016$), employment ($p=0.015$), and disease conditions such as myocardial infarction ($p<0.001$), hypertension ($p<0.001$), heart failure ($p=0.004$), and stroke ($p=0.002$). Polypharmacy was not associated with other demographic characteristics such as age, gender, ethnicity, employment, and disease conditions such as chronic kidney diseases, diabetes mellitus, asthma and chronic obstructive pulmonary diseases, and thyroid diseases.

Conclusion: Polypharmacy is highly prevalent among older adults. Employment, income level, and cardiovascular diseases are associated with polypharmacy. Further studies are recommended to assess polypharmacy-related consequences among older adults.

Keywords: Ageing, Older adults, Polypharmacy, Prevalence