

Script – Print – Pill Pile Up: Navigating polypharmacy as we age

As we get older, the chances increase for many of us to develop chronic disease. That also means the likelihood of taking daily medications for conditions such as high blood pressure, diabetes, insomnia, arthritis and high cholesterol.

In medical terms, it's called polypharmacy.

"Polypharmacy is using or taking multiple medications," says Jessica McCuen, manager of pharmacy operations at OSF Saint Anthony Medical Center in Rockford, Illinois. "Most healthcare professionals have agreed that the number is somewhere around five or more. Generally, we say anyone who's taking five or more medications is experiencing polypharmacy."

Taking multiple prescription drugs can increase the risk of multi-drug interactions, in which one medication can affect another medication. Another potential concern is drug-disease interaction, where taking medication for one health issue can make another health problem worse.

It appears to be a bigger concern for older people. It's estimated that about one-third of adults between the ages of 60 and 70 are exhibiting some form of polypharmacy.

"Once we get to that age, we tend to have chronic diseases that have been diagnosed and we take more medications to handle those chronic diseases."

McCuen adds we don't often think about how our age can affect how medications work.

"That's when your body starts to change," she explains. "You can absorb medications differently; the way that your body works changes and then the way that you hold on to medications because of your body makeup changes too. The way that you may have absorbed or had a reaction to a medication in your 30s could be different in your 60s and 70s just because of the way that your body has changed."

People who experience polypharmacy have a bigger risk of being tired and dizzy, which increases the risk for falls. Other symptoms are weakness, loss of appetite, gastrointestinal (GI) problems and skin rashes.

And it's not just prescription medications pharmacists worry about. Over-the-counter medications and herbal supplements can negatively interact with daily prescription drugs.

It's also possible to be on a medication longer than is needed. For example, some people take a proton pump inhibitor – medicines that work by reducing the amount of stomach acid – for problems like heartburn.

"They'll just continue to take it even though they probably only need to take it for a couple of weeks and then see how they do off of it," McCuen says. "That's one of the most common ones I see that they don't necessarily need to be on."

That's why it's important to talk with your care team before starting any new medication. In fact, McCuen recommends doing a medication review with your physician or pharmacist at least once a year to make sure your medications mesh.

"Your pharmacist is really your drug and medication expert," she says. "They know a lot about the drug interactions with all your medications."

McCuen adds that it's also a good idea to use the same pharmacy whenever possible so that your pharmacist has a record of all the drugs that you're taking. That way if anything new is added they can intervene in the event you have an interaction with one of your other medications.

For more information on how to manage your medications, visit [OSF HealthCare](#).