

# Polypharmacy: Use of Multiple Anticholinergics in Older Adults



## Measure Description

The percentage of individuals  $\geq 65$  years of age with concurrent use of  $\geq 2$  unique anticholinergic medications. This is an inverse measure therefore **a lower rate** indicates **better performance**. This measure is also referred to as Poly-ACH.

## Calculation

### [Numerator] = Measure Compliance

The number of patients who have received at least two prescriptions for two or more distinct anticholinergic medications, with an overlap of 30 or more days.

### [Denominator] = Measure Population

The number of patients at least 65 years or older with at least 2 claims for the same anticholinergic medication.

## Did You Know?

- Anticholinergic medications can cause adverse effects in older adults, including confusion, dry mouth, blurred vision, constipation, and urinary retention, which can lead to increased risk of impaired cognitive and physical function, as well as falls.
- Once the patient falls into the numerator, they cannot get out.

## Exclusions

- Hospice Care

## Anticholinergics Include

- Antihistamines
- Antimuscarinics
- Antiarrhythmics
- Muscle relaxants
- Antispasmodics
- Antiparkinsonian Agents
- Antiemetics
- Antipsychotics

## Strategies for Rate Improvement

- Educate patients about the potential risks of concurrent therapies (e.g., increased fall risk, respiratory depression).
- Schedule a follow-up appointment to review medications and address any concerns.
- Review the indication and duration for each anticholinergic medication at every visit and discontinue any medication in which potential harm outweighs the benefits.
- Avoid the use of potentially inappropriate medications in older adults, as recommended by the American Geriatric Society.

1. American Geriatrics Society 2023 updated AGS Beers Criteria® for potentially inappropriate medication use in older adults. J Am Geriatrics Soc. 2023; 71(7): 2052-2081. doi:10.1111/jgs.18372

2. Hilmer SN, Gnjdic D. The anticholinergic burden: from research to practice. Australian Prescriber. 2022;45(4):118-120. doi:<https://doi.org/10.18773/austprescr.2022.031>



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