Medications are often the first line of defense to manage the acute illnesses and chronic health conditions that affect many older adults. As important as these medications are, they can have serious risks. This video gives you, as a family caregiver, advice about understanding medications and preventing side effects. The other related videos in this series focus on the other “4Ms”: What Matters, Mentation (memory and mood), and Mobility.

**Medications and Older Adults**

As adults age, the way their bodies absorb medications changes, often leaving them at risk for side effects and harmful interactions with other drugs. People living with cancer and other chronic conditions are particularly vulnerable. People who live in long-term care facilities may be at risk of taking too many behavior modification and antianxiety drugs. Those with low incomes are also at risk because they may not have the ability to obtain and pay for needed prescriptions.

While many drugs are prescribed for short-term use, people with chronic health conditions often take several medications for extended periods. Sometimes medications are prescribed by different providers who do not know what other medications the person may be taking. Medications may also be prescribed to counter the side effects of other medications, adding to the potential for harmful effects.

*Polypharmacy* is the term used to describe the use of multiple drugs. It is not always the provider who urges the use of prescription drugs. Many older adults grew up in an era when miracle drugs were touted as cures for everything. When people of this generation see a physician or nurse for a health problem, they may expect to be treated with some kind of medication and become dissatisfied if they are not prescribed one. As a family caregiver, you can help your family member or friend strike the right balance between too many and too few medications.

**High-Risk Drugs**

Some conditions require medications that should be monitored carefully as they can cause serious side effects. It is important to discuss why the drug is being prescribed and what to look out for.

Here is a list of commonly prescribed drugs that are considered high-risk for some people. Remember that the potential risk should always be weighed against the potential benefits; ask the physician, nurse practitioner, or pharmacist to explain why the drug has been prescribed and what to look out for.

- Blood thinners (Often prescribed for heart conditions, these drugs don't actually thin the blood, but they prevent clots from forming.)
- Antiseizure medications
- Sleeping pills (often called sedatives)
- Pain medications
- Diabetes medications (such as insulin)
- Opiates (also called narcotics)
- Antipsychotic or antianxiety drugs to modify behavior
- Blood pressure medications
- Some over-the-counter drugs, such as aspirin, antacids, and laxatives

These are not new drugs; they are standard medications that have been used for years. But that doesn’t mean that they are safe and effective for every person in every situation, especially if a person is taking other medications. You can play an important role in managing this aspect of your family member or friend’s care.

**Medications in the Hospital**

All the videos in this and other Home Alone Alliance Series stress the importance of bringing your family member or friend’s current medication list to the hospital,
whether it is a planned admission or an emergency visit to an emergency department. Keeping this list up to date is essential; sometimes family caregivers forget to take a medication off the list that was prescribed for a limited time—for example, an antibiotic. Or they may forget to add a medication that was prescribed by a provider seen only once. Over-the-counter drugs and nutritional, herbal, or other supplements, which don’t require prescriptions, should also be on the list.

In the hospital, a nurse or pharmacist will go over the medication list with you and your family member or friend. He or she may also ask questions about why and when the medication was prescribed as conditions change. The health care team knows that medication errors are one of the primary reasons discharged patients come back to the hospital.

In keeping with the emphasis on “What Matters” described in another video in this series, your family member or friend may have clear preferences about the undesirable effects of some medications and in what form they are easiest to take. For example, if it’s important for your family member or friend to stay alert to talk to family and friends, a medication that causes daytime sleepiness might not be a good choice. On the other hand, if being as pain-free as possible is a primary goal, the sleepiness that is associated with the medication might be acceptable. Also, many older adults have difficulty swallowing large capsules and may prefer a liquid if that form is available.

Before a patient is discharged, the hospital staff will review the medications that the person reported taking prior to admission and the ones prescribed for going home. This process is called medication reconciliation, or informally “med rec.” This list should be explained to you at discharge so that you can ask any questions. In particular, look out for medications that are duplicates (two pills of the same drug where one has the trade name and other has the generic name) or medications that were dropped during the admission but need to be reinstated.

This list now becomes the person’s current medication list; be sure to bring it to the next health care provider’s appointment.

Organizing Medications at Home
Keeping track of many medications, which are supposed to be administered at different times and either with or without food or with other restrictions, is a big job. A pill organizer is a helpful tool available at a pharmacy.

There are also apps that monitor medication and alert you or the person that the next dose is due. Remember that any tool is only as good as the information you enter.

Medications can be expensive. Be sure to ask about the cost of newly prescribed medications, and if they are covered by the patient’s insurance. There may be alternatives that are cheaper and equally effective. Many pharmaceutical companies have programs to help low-income patients obtain their medications; the company's website will have a number to call.

An important part of organizing and managing medications is keeping an accurate record, which means updating the medication list as things change. Many caregivers use a notebook as a diary to keep track of medications and dates of visits to the physician or nurse practitioner or for therapy, and to note any new problems or questions about care. Also take note of any special instructions about storage (refrigerated or in a dark place, for example) or about how to take the medication—with meals or when one does not plan to drive.

Medication management can be challenging. But it can improve your family member or friend’s health and well-being and is well worth the effort.

Additional Resources
- Many of the other videos in the Home Alone Alliance Series have information about medications, including those that are not administered in pill form, such as infusions and injections. Check out the “Managing Medications” and “Operating Specialized Medical Equipment” series at https://www.aarp.org/ppi/initiatives/home-alone-alliance/family-caring-caregiving-videos/.
- ConsumerMedSafety, a nonprofit organization, has lists of high-risk medications and other information at https://consumermedsafety.org/.
- The United Hospital Fund’s Next Step in Care guide, Medication Management: A Family Caregiver’s Guide, has other important suggestions. The guide is free and available in English, Spanish, Chinese, and Russian. You can find it at https://www.nextstepincare.org/Caregiver_Home/Medication_Management_Guide/.
A Management Form you can fill out and update as needed is available at https://www.nextstepincare.org/Caregiver_Home/Medication_Management_Form/. This form is free and available in four languages.

Another good medication management form is available from AARP. Go to https://assets.aarp.org/external_sites/caregiving/resources/pdfs/personal_medication_record.pdf. This form is available in English and Spanish.

For a description of medication reconciliation, see Carol Levine and Dr. Jeffrey Schnipper, “The Important Thing to Do Before Leaving the Hospital,” at https://www.nextavenue.org/before-leaving-hospital/.

Some nonprofit organizations, such as Needy Meds, provide information on getting financial help. Go to https://www.needymeds.org/.

For more information, go to www.AARP.org/nolongeralone.

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