

DE-PRESCRIBING GROUP

Targeted De-Prescribing in Patients with CKD to Decrease Polypharmacy



M BATTISTELLA [PI], M BEAULIEU, C BOHM, S DIXON, A GARG, M LEFEBVRE, J MARIN, C ORSULAK, M TONELLI, J WILSON PATIENT PARTNERS: A DESJARLAIS, D MCCANN, B WALDVOGEL



70%/

Improper meds

THE PROBLEM

Hemodialysis (HD) patients have complex health conditions and are prescribed many different medications. Furthermore, many medications prescribed to HD patients are never reassessed or DEPRESCRIBED, leading to POLYPHARMACY.

DEPRESCRIBING: identifying and discontinuing medications whose

harms outweigh their potential benefits

POLYPHARMACY: the use of many medications (usually 5 or more)

STUDY MEDICATIONS

We conducted analyses of provincial databases to assess medication use patterns in HD units across Canada.

Nine classes of medications were chosen:

- Alpha-1 Blockers

- Quinine

- Benzos & Z-Drugs
- Gabapentinoids
- Proton Pump Inhibitors
- Urate Lowering Agents
- Loop Diuretics
- Prokinetic Agents

- Statins

Phase 1 Background Research

2020 & BEYOND

IMPLEMENTATION

- Roll out the deprescribing tools at 4 sites across Canada to find out on how they are used in practice.
- Gather data to inform a large scale national roll-out

LARGE SCALE NATIONAL ROLL-OUT

- Develop a website to host all the deprescribing toolkits
- Share the tools on a widespread, national scale

- We've developed videos (see QR code) and bulletins to keep patients
- Patients will provide feedback to validate these tools.

PATIENT INFORMATION TOOLS

informed and involved about the decision to deprescribe.

Ask to see a sample of our patient information tools!

THE SOLUTION: TARGETED DEPRESCRIBING TOOLKITS

We developed medication-specific deprescribing tools to help clinicians identify inappropriate medications and guide them in safely stopping them or using the lowest possible dose.

OOLKIT COMPONENTS

- Deprescribing Algorithms (for clinicians)
 - Evidence Tables
 - Monitoring Tools (for clinicians)
 - Patient Information Tools: videos + bulletins

NATIONAL VALIDATION

15 clinicians reviewed 3 algorithms each & provided comments.

De-prescribing group reviewed & Revised Algorithms).

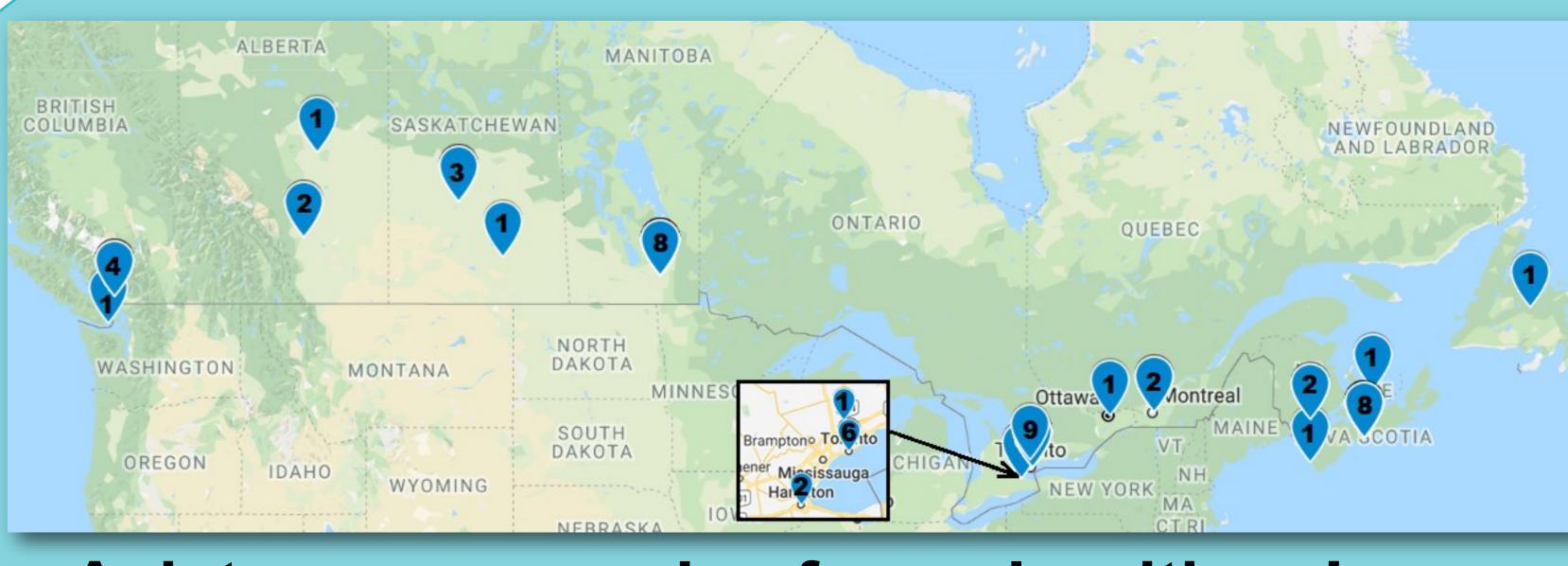
Entire process repeated 2 more times.

Phase 4 Develop & Validate Patient Info Tools

Phase 2

Develop

Algorithms



→ Ask to see a sample of our algorithms!

EVIDENCE TABLES

- We developed tables summarizing the scientific research on the use of these medications in patients on hemodialysis
- These will help encourage nephrology clinicians to deprescribe







Phase 3

Validate Algorithms

Evidence Summary

