# Prescription profiles for pharmacological treatment of inpatients in a psychogeriatric rehabilitation unit

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## Introduction and objectives

Our psychogeriatric rehabilitation unit is focussed on chronic psychiatric patients over than 65 years old. Mean hospitalization stay of these patients is about 28 years; there is no currently such an available community resources in Catalonia like this to cover this need. Their psychiatric morbidity requires continuous therapeutic monitoring as well as organic and aged related dysfunctions (mean age of 75 years old) add complexity to the therapeutic approach and requires a multidisciplinary global attention.

**The objective** of this study is to describe and analyze the profile of pharmacological treatment prescription for these patients focusing on most used drugs, antipsychotics.

## Material and methods

We performed a cross-sectional study by collecting demographic data, psychiatric diagnoses and prescribed psychotropic drugs, taking specifically into account polypharmacy regimens. All analyses were performed using SPSS v.21 software.

## Results

From the whole sample (N=47), mean age 75 years, most of them 29 (62%) were male. Mean length of stay were 28 years.

Most prevalent psychiatric disorders were schizophrenic disorder (80%; paranoid schizophrenia was the most prevalent subtype, followed by residual, undifferentiated and disorganized subtypes), delusional disorder (9%), and schizoaffective disorder (12%).

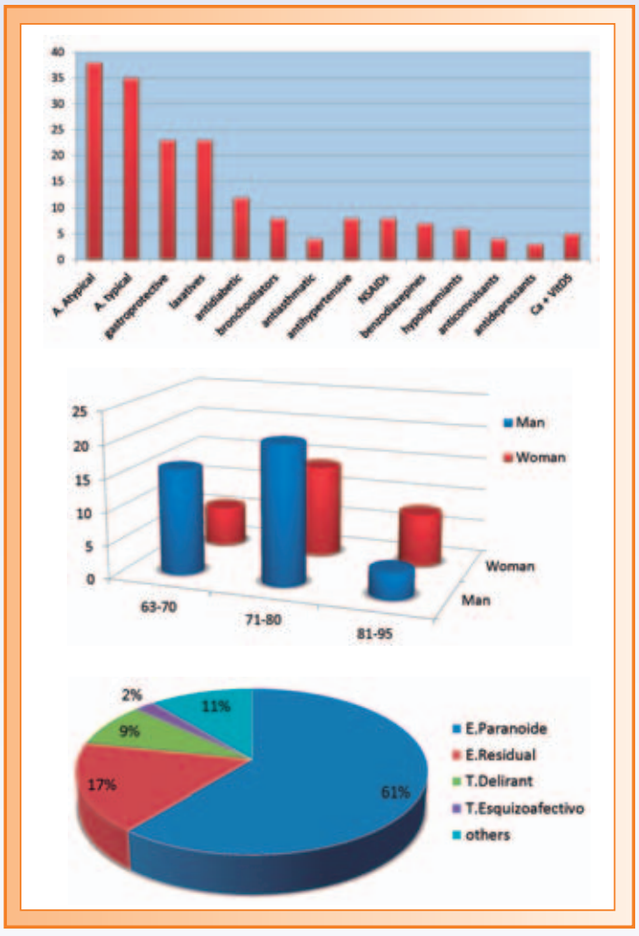
52% of patients were classified as severe cases and 35% as mild cases taking into account the Brief Psychiatric Rating Scale (BPRS) score (Figure 4). We found that negative symptoms were predominant in our clinical sample.

Total number of drugs prescribed were 306 (mean: 6,5 drugs/patient). From them, total number of drugs prescribed in fixed pattern were 248 (mean: 5,3 drugs/patient) and total number of PRN prescribed drugs (as needed schedule) were 58 (1.2 drugs/patient).

The most prescribed drugs in fixed pattern were as follows: antipsychotics (N=73; 38 of them were atypical antipsychotics and 35 were typical antipsychotics), gastroprotective agents (N=23), laxatives (N=23), antidiabetic drugs (N=12), bronchodilators and anti-asthmatics (N=8) , antihypertensive agents (N=8), 8 NSAIDs (N=8), benzodiazepines and analogues (N=7), hypolipidemic (N=6), anticonvulsants (N=4), antidepressants (N=3) and calcium with vitamin D complex (N=5).

55,3% (N=26) were treated with polypharmacy (5 or more drugs concurrently prescribed). 64,3% (N=42) were treated with antipsychotic drugs; 55% of them (N=23) received treatment with two antipsychotics, and 9,5% of them (N=4) were treated with three antipsychotics). Mean average defined daily dose (DDD) of antipsychotics were 1,16 (0,74 for patients with one antipsychotic prescribed, 1,34 for patients with two antipsychotic prescribed, and 1,68 for antipsychotic patients with three antipsychotic prescribed)

78,7% (N=37) received PRN medication. In total, 58 PRN medications were given (35 of them were psychotropic drugs). The most used were paracetamol (N=13), zolpidem (N=10), and levomepromazine (N=8).




## Conclusions

Our hospital ward have chronic patients with stabilized psychopharmacological drugs regime (except specific variations depending on temporary destabilizations) and other medication to evolve and adapt to the emergence of new diseases related to aging.

55% of patients were under stabilized polypharmacy prescription. Antipsychotic drugs were the most prevalent (29.4% of drugs prescribed on fixed pattern) and 64,3% of patients received these drugs as a fixed pattern (64,2% received antipsychotic polypharmacy showing assumed average maintenance dose per day above standard patterns (between 1,34 and 1,68 DDD), which could increase the incidence of adverse reactions.

Although it's common in psychiatric treatment, a high prevalence of PRN prescription were observed. Indication, duration and daily maximum doses should be better specified, in order to accomplish higher clinical safety and effectiveness.

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