Deprescribing guidelines for the elderly: Preliminary outcomes of a developmental evaluation

Barbara Farrell, BScPhm, PharmD, FCSHP; James Conklin, PhD; Hannah Irving, MA; Lisa McCarthy, BScPhm, PharmD, MSc; Lisa Pizzola, MSc; Kevin Pottie, MD, MCIsc; Lalitha Raman-Wilms, BScPhm, PharmD, FCSHP; Carlos Rojas-Fernandez, BSc (Pharm), PharmD

OBJECTIVES: Polypharmacy and inappropriate medication use are growing problems. Deprescribing guidelines are a potential solution. However, approaches to developing and implementing such guidelines with primary care and long-term care practitioners have not been described. We aimed to develop and implement three evidence-based deprescribing guidelines, the first of which focused on proton pump inhibitors (PPIs). Our evaluation component provides an understanding of factors associated with successful guideline development, implementation, and uptake.

METHODS: Guideline development using AGREE-II (Appraisal of Guidelines for Research and Evaluation), and GRADE (Grading of Recommendations Assessment, Development, and Evaluation) to rating quality of evidence and strength of recommendations. Developmental evaluation using ethnographic methods including: observations and interviews with guideline development and site implementation teams, document analysis and descriptive analysis of guideline uptake and effect.

RESULTS: An evidence-based PPI deprescribing guideline was developed. Process components and resulting decision-aid algorithm will be presented. Factors that facilitated successful development included team members’ expertise in content and methods, access to additional expertise and resources through professional networks and dedicated staff support to complete work. Deprescribing guideline development processes were modified for implementation with a second guideline. Site implementation experience suggests sites more interested in how to implement deprescribing vs evidence, and that practice site priorities and processes shape ability to respond.

CONCLUSIONS: Optimizing a deprescribing guideline development and implementation process aims to facilitate clinicians’ ability to reduce inappropriate medication use. Developmental evaluation contributes to improvement of processes used to develop and implement such guidelines.