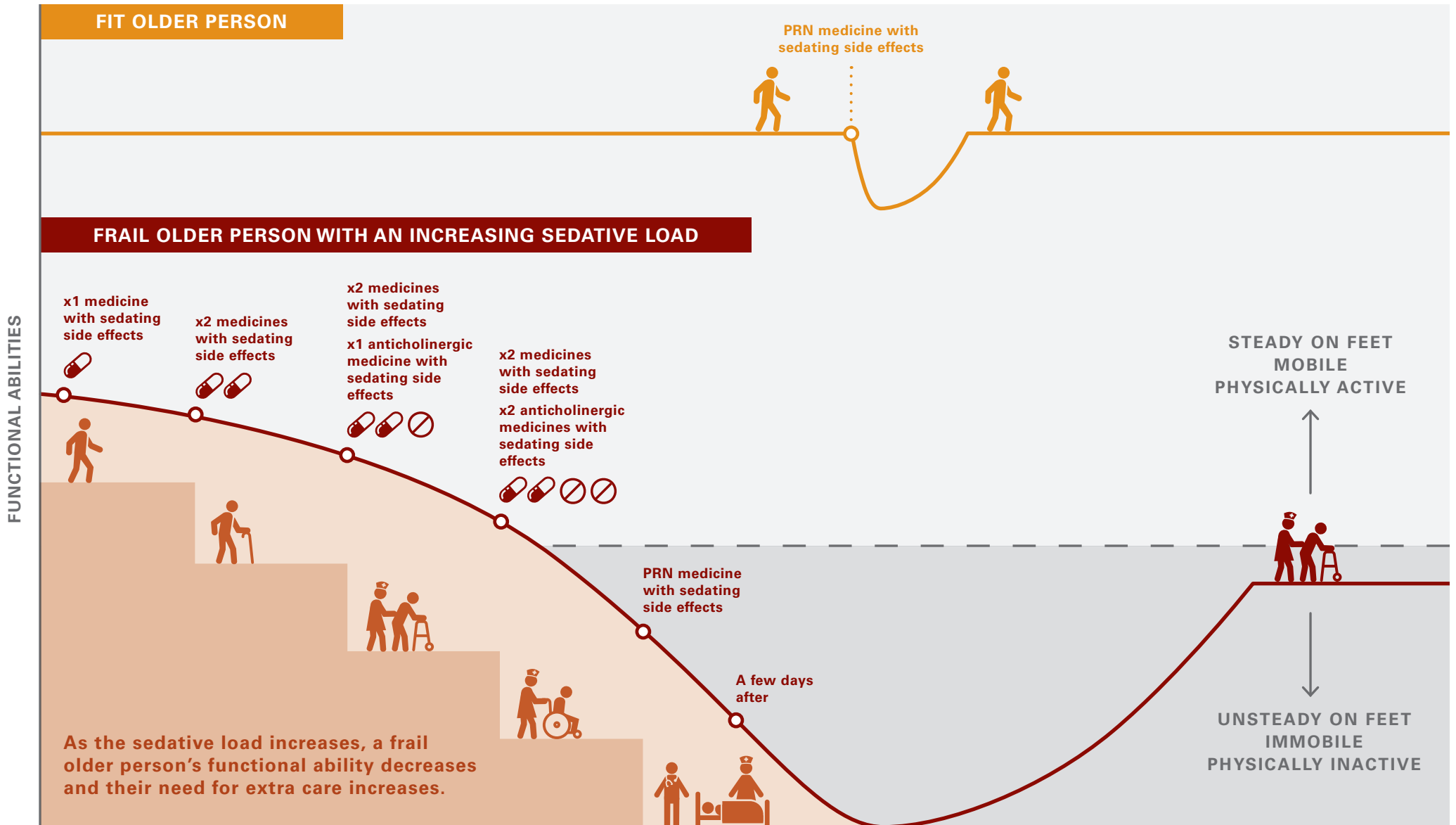


# Identifying the effects of an increasing sedative load



Adapted from: Clegg A, Young J, Iliffe S, Rikkert M, Rockwood K. Frailty in elderly people. The Lancet. 2013; 381: 752-62.

# Sedation and confusion can contribute to an older person's overall functional decline and frailty.<sup>1</sup>

A frail older person typically has several chronic health issues and uses multiple medicines.<sup>2,3</sup> The sedative load can unintentionally build up over time with the use of many of these medicines.<sup>4</sup> For a frail older person, even a minor event, such as taking an 'as required' (pro re nata [PRN]) medicine or starting a new medicine, can trigger a disproportionate change in their health; tipping the balance from being mobile to immobile, from being steady on their feet to falling, or from being independent to dependent.<sup>3</sup>

Once the balance is tipped, an older frail person is often unable to recover to their previous health status, and may begin a downward spiral into immobility, functional decline, falls, delirium, incontinence, admission to hospital, and death.<sup>3</sup> As frailty increases, so too does the need for extra care.<sup>3</sup> **See diagram over page.**



## How medicines affect the body as people get older

In older people:

- some medicines, including opioids, benzodiazepines and antipsychotics can stay in the body for longer, exerting prolonged side effects, such as drowsiness and confusion making it difficult to function or walk independently<sup>2,5</sup>
- sensitivity to the effects of medicines is often increased, for example the side effects of sedation, confusion and memory impairment are enhanced with benzodiazepine use, even when given at standard doses<sup>5,6</sup>
- some medicines take longer to be excreted by the kidneys<sup>5,6</sup>
- there is an increased risk of adverse drug effects, for example, antipsychotics and medicines for Parkinson's disease can cause orthostatic hypotension<sup>2,5</sup>

**Observe residents for and report any declining physical or mental ability when a new medicine is added to their regimen, or the dose of a medicine is changed. Ask the resident's GP if a medicines review has been conducted in the last 2 years.<sup>7</sup>**

## References

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