

# Evaluation of poly-pharmacy in paediatric hospice users

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# Background

- Polypharmacy:
  - 5 or more medicines used daily
  - associated with adverse outcomes in adults
  - limited research in children

# Aims

- Is polypharmacy common in hospice users
- Frequency of inappropriate polypharmacy
  - Prescription correct?
  - Is medication effective?

# Method

- Service evaluation
- Systematic medication review

**Martin House**  
Children's Hospice

# Data collection

- Medication review
  - Medication (regular and 'as required')
  - Appropriate dose?
  - Estimation use of 'as required medication'
  - Method of administration
  - Is medication helpful?
- From notes
  - Diagnosis
  - No. specialist involved in care
  - No. hospital admissions previous year
  - Regularity of medication review

# Results

9 patients

- Age 1-19 yrs
- Diagnosis: congenital syndrome (3), static brain injury (3), cardiac (1) metabolic (1) neuro-degenerative (1) disorder
- Specialist services: range 3-8, mean 5
- Hospital admissions: range 0 -5, mean 2
- Medication review 2-6 monthly

# Regular medication

- 81 medicines
  - Range 5 -13, mean 9
  - Treatment
    - GE-reflux
    - Pain
    - Constipation
    - Promote sleep
    - Muscle tone/dystonia
    - Epilepsy
    - Increased secretions

# 'As required' medication

- 15 medicines
- Range 0-4, mean 2
- Administration:
  - 3 - daily
  - 5 - weekly
  - 3 - monthly
  - 2 - less than monthly
  - 2 - missing data



# Does it help?

- Regular medication
  - Efficacy of 75 medicines
    - 5 (7%) unhelpful
      - GE-reflux (2)
      - Increased secretions (2)
      - Pain
    - 25 (33%) unsure
      - GE reflux
      - Sleep promotion
      - Pain medication

# Conclusion

- Polypharmacy in paediatric hospice users is common
- The efficacy of 4/10 regular medicines is questionable
- Solutions:
  - Regular medication review?
  - Prescribe on trial basis?

