Is Your Mom on Drugs?
Ours was…here's what we did about it.

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Fervid Trimble, age 86 (2003), enjoying her apartment in a senior's residence she'd chosen for herself.

Who was Fervid Trimble?

Wife, mother, grandmother, family matriarch
teacher (MEd, U. of Idaho)

Fervid's "family care team"
Johanna, Dale, Fervid and Kathie

Fervid experienced a precipitous mental decline

Why we decided to intervene:

- Her mental and physical decline was precipitous
- Didn't fit with her diagnosis on admission
- Several new drugs had been prescribed
- We researched an interaction between a pain drug (tramadol) and an anti-depressant (citalopram), both affecting seratonin,
- We requested a medication review with facility staff

The process

- Pay attention to your loved one: watch, listen, write it down
- Research: identify REPUTABLE internet and print resources to research drugs and treatments
- Compare: symptoms with the adverse effects or interactions
- Communicate: first as a family – then with the doctor
- Timing: delays can cost precious time in reversing adverse effects
- Be respectful but persistent

"Assume that any new symptom you develop upon starting a new drug may be caused by the drug. If you have a new symptom, psychiatric or otherwise, report it to your doctor"

Public Citizen, Health Research Group

www.worstpills.org

Has a baseline for the patient been established? This is where the family comes in!

- Frail elders are often treated by people who don't know them, their medical history, or their baseline functioning
- Everyone has good intentions, but they are not seeing the big picture
- Much prescribing for the elderly is an "evidence-free zone".

A Bitter Pill: How the Medical System is Failing the Elderly
- by Dr. John Sloan

Fervid's drug interaction

Symptoms of Seratonin Syndrome:

1. Cognitive/behavioral changes: **confusion, agitation, lethargy**
2. Autonomic instability: **rapid heart rate, sweating**
3. Neuromuscular changes: **twitching a muscle or group of muscles**

Serotonin syndrome is often self-limited if it is recognized early, but it ***can be fatal left unrecognized and untreated****.*

- A further drug, usually prescribed for Alzheimer's, was suggested by the facility's Psychiatrist who had decided Fervid had "vascular dementia".
- We declined and requested that no additional drugs be prescribed without the family's consent.
- At the time we didn't know about delirium -- the result of the drugs given

Delirium

- Fervid's delirium was a result of a specific drug interaction
- But polypharmacy combined with advanced age, is often results in delirium.
- A minor change (in drugs) can precipitate a crisis among vulnerable elders.
- Delirium is a serious health threat, but also largely preventable.
- After an episode of delirium, one year mortality among frail elderly can be as high as 35 to 40%.

- Delirium Prevention Training program: IPPOD
Sunnybrook Health Sciences Centre, Toronto ON

Loss of function

- 1 in 3 elderly admitted to acute care is discharged at a higher level of disability than when admitted.
- These seniors have a risk of further disability when they return home.
- At least 50% of that disability is preventable.
- Physical activity is critical, frail patients can lose up to 5% of functional muscle mass for every day in bed.

- Dr. Janet McElhaney, Geriatrician

Delirium and confusion in any care setting will keep a patient in bed and result in loss of function.

The results of Fervid's "drugectomy"

- Normal mental status
- Physical improvement
- Returned to "training" care aides she thought needed improvement
- Formed close relationships with staff
- Joined us for family outings

Fervid enjoying white wine and oysters at her favourite restaurant with us after recovering from her diagnosis of “Alzheimer’s”

Question: Is there really an epidemic of Alzheimer's and dementia?

- The media constantly refers to the "epidemic" of Alzheimer's and dementia
- Is our standard treatment of frail elders with multiple medications and overuse of acute care a big part of the problem?
- How do you want it to be when YOU get there?

Alzheimer’s Misdiagnosis

"It's a real problem. If you're older and you get a label of Alzheimer's — even a hint that you have Alzheimer's — there's no more critical thinking about it. The difficulty in pinning down Alzheimer's makes misdiagnosis too easy."

Peter Lichtenberg,

Head of the Institute of Gerontology

Wayne State University

What we learned from Fervid

Fervid's words to her family

"It's too precious not to live—we've enjoyed each other so much. I think [love} will grow. That's the ticket into the next world. We will always be together, our love is always there and we will be part of the great growing field of love".

Fervid lived for over 4 years after her initial over-medicated, confused & delusionary state. If she had died earlier, and delusional, our family wouldn't have received these expressions of love and wisdom as her farewell to us.

A picture is worth a thousand words…

Over-medicated

After the “drugectomy”

www.bcma.org/polypharmacy-initiative

Dedicated to Fervid Trimble 1917 - 2008

A picnic in the garden with Fervid

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