

Ageing and older people

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DOES THE USE OF PSYCHOTROPIC MEDICATIONS INCREASE ON ENTERING A CARE HOME? A PROSPECTIVE PHARMACOEPIDEMIOLOGICAL STUDY

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Background There is ongoing concern about the extensive use of psychotropic agents in nursing and residential home care. These drugs have been described as 'chemical restraints' in that they can be used to sedate and subdue patients. However, it is possible that the high usage in this population reflects patient characteristics rather than treatment policies within institutions.

Objectives To compare the use of antidepressant and anxiolytic drugs in a cohort of older people before and after their admission to a care home.

Design Record linkage of data was carried out relating to patient registration, care home addresses and electronic prescribing for a 2 year period from 2008 to 2010 for 250,864 people aged 65 years and over. Data was available for 1,676 patients who had their prescribing history for the 6 months before and 6 months after entry to a care home. Multiple regression analysis was used to compare medication levels of residents with those who did not enter a home and paired samples t-tests and McNemara's test was used to compare prescribing rates pre and post entry.

Results Antidepressant and anxiolytic use was higher among care home residents than in those living in the community, OR=3.21 (95% CI 3.10 to 3.33) and OR=2.27 (95% CI 2.18 to 2.36) respectively, after adjustment for age and sex. Use was however higher on admission, as 37% of those who entered a care home received an antidepressant prescription in the 6 months prior to entry compared to 23% of the community living population, though some of this was due to increased use just prior to admission. For those admitted psychotropic drug use had further increased to 44% ($p < 0.001$) within 6 months after admission.

Conclusion The higher use of psychotropic drugs in care home residents appears to be primarily determined prior to entry, though it also continues to increase significantly afterwards. Further work is required to determine the appropriateness of these prescribing patterns.