

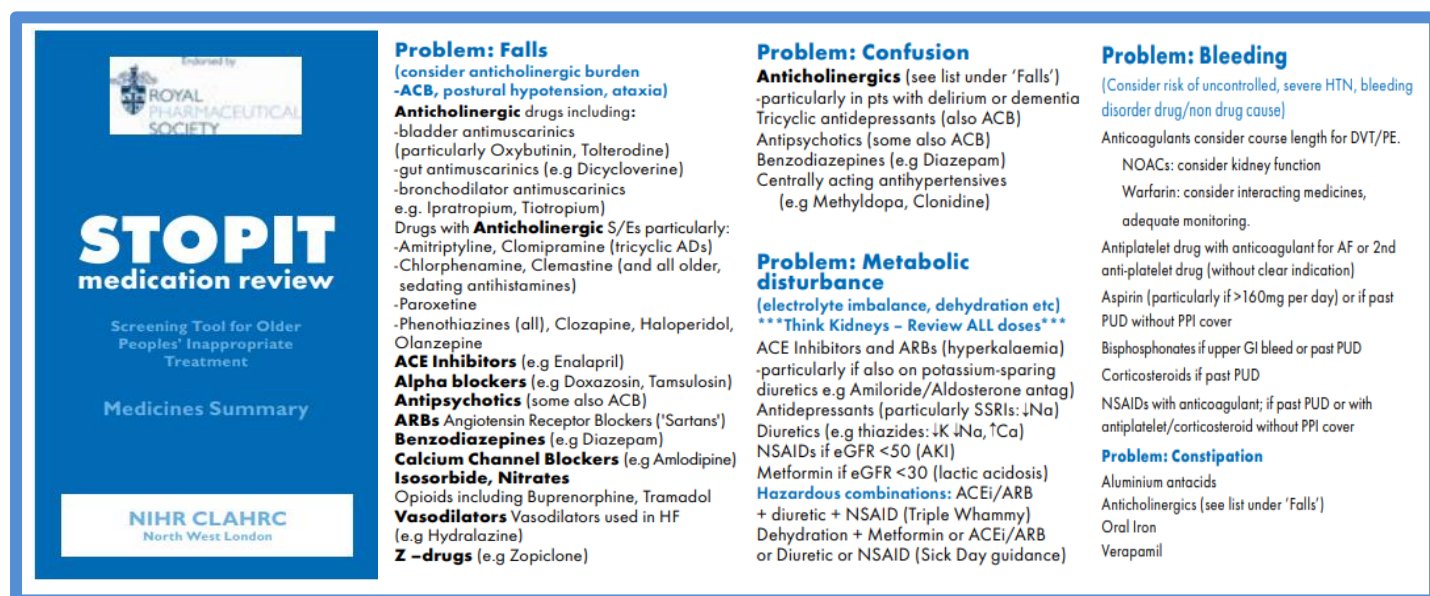
Prescribing tip for information
Supporting Deprescribing

STOPIT - A Medication Review Tool

Polypharmacy and inappropriate prescribing are well-known risk factors for adverse drug reactions, which commonly cause adverse clinical outcomes in older people.¹ Elderly patients can present with medicines-related problems and can be prescribed additional medication to try and combat the problem.²

[STOPIT: Screening Tool for Older Peoples' Inappropriate Treatment](#), has been specifically developed to help clinicians in acute situations to stop any inappropriate medication that may be contributing to the patient's presenting complaint and prevent further medication from being prescribed.²

- Unlike other deprescribing tools, recommendations are organised by the problems which patients experience, making it particularly useful for clinicians dealing with **presenting complaints** in GP surgeries and Care Homes.
- Presenting problems addressed by the STOPIT tool include:
 - Bleeding
 - Falls
 - Confusion
 - Constipation
 - Metabolic disturbances



The image shows a summary card for the STOPIT medication review tool. The card is blue and white with the following content:

STOPIT medication review
Screening Tool for Older Peoples' Inappropriate Treatment
Medicines Summary
NIHR CLAHRC North West London

Problem: Falls
(consider anticholinergic burden -ACB, postural hypotension, ataxia)
Anticholinergic drugs including:
-bladder antimuscarinics (particularly Oxybutinin, Tolterodine)
-gut antimuscarinics (e.g Dicycloverine)
-bronchodilator antimuscarinics e.g. Ipratropium, Tiotropium)
Drugs with **Anticholinergic** S/Es particularly:
-Amitriptyline, Clomipramine (tricyclic ADs)
-Chlorphenamine, Clemastine (and all older, sedating antihistamines)
-Paroxetine
-Phenothiazines (all), Clozapine, Haloperidol, Olanzapine
ACE Inhibitors (e.g Enalapril)
Alpha blockers (e.g Doxazosin, Tamsulosin)
Antipsychotics (some also ACB)
ARBs Angiotensin Receptor Blockers ('Sartans')
Benzodiazepines (e.g Diazepam)
Calcium Channel Blockers (e.g Amlodipine)
Isosorbide, Nitrates
Opioids including Buprenorphine, Tramadol
Vasodilators Vasodilators used in HF (e.g Hydralazine)
Z -drugs (e.g Zopiclone)

Problem: Confusion
Anticholinergics (see list under 'Falls')
-particularly in pts with delirium or dementia
Tricyclic antidepressants (also ACB)
Antipsychotics (some also ACB)
Benzodiazepines (e.g Diazepam)
Centrally acting antihypertensives (e.g Methyl dopa, Clonidine)

Problem: Metabolic disturbance
(electrolyte imbalance, dehydration etc)
Think Kidneys – Review ALL doses
ACE Inhibitors and ARBs (hyperkalaemia)
-particularly if also on potassium-sparing diuretics e.g Amiloride/Aldosterone antag)
Antidepressants (particularly SSRIs: ↓Na)
Diuretics (e.g thiazides: ↓K ↓Na, ↑Ca)
NSAIDs if eGFR <50 (AKI)
Metformin if eGFR <30 (lactic acidosis)
Hazardous combinations: ACEi/ARB + diuretic + NSAID (Triple Whammy)
Dehydration + Metformin or ACEi/ARB or Diuretic or NSAID (Sick Day guidance)

Problem: Bleeding
(Consider risk of uncontrolled, severe HTN, bleeding disorder drug/non drug cause)
Anticoagulants consider course length for DVT/PE.
NOACs: consider kidney function
Warfarin: consider interacting medicines, adequate monitoring.
Antiplatelet drug with anticoagulant for AF or 2nd anti-platelet drug (without clear indication)
Aspirin (particularly if >160mg per day) or if past PUD without PPI cover
Bisphosphonates if upper GI bleed or past PUD
Corticosteroids if past PUD
NSAIDs with anticoagulant; if past PUD or with antiplatelet/corticosteroid without PPI cover
Problem: Constipation
Aluminium antacids
Anticholinergics (see list under 'Falls')
Oral Iron
Verapamil

- Developed in North West London from the STOPP/START medication review tool,¹ [STOPIT](#) is a straightforward tool to use, easy to refer to and quick to read.²
- A reminder card (as seen above) can be printed [here](#).
- Depending on the setting preliminary studies found between 24%-72% of patients had at least one medication stopped or adjusted because of using this tool. Reduction in pill burden and medication cost was also observed.²

References:

1. [STOPP/START criteria for potentially inappropriate prescribing in older people: version 2 | Age and Ageing | Oxford Academic \(oup.com\)](#)
2. [Screening Tool for Older People's Potentially Inappropriate Treatments – 'STOPIT' medication review tool – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](#)

To contact the Medicines Optimisation Team please phone 01772 214302

If you have any suggestions for future topics to cover in our prescribing tips please contact Nicola.schaffel@nhs.net