

**Published on *SeniorNavigator* (<https://seniornavigator.org>)**

## **6 Tips for Helping Seniors Manage Medication**

Americans are living longer than ever, and seniors are taking more and more medication to keep them alive. According to a [U.S. Health and Human Services report](#), more than 42 percent of those 65 and older surveyed in 2013-2014 took 5 or more different prescription drugs in the last 30 days, up from less than 14 percent between 1988 and 1994. That's a 300 percent increase in two decades.

These senior medication complications can be caused by a number of factors:

- adverse side effects from a single medicine
- an interaction between two or more medications
- improper dosage or frequency
- poor adherence—patients not taking meds because of confusion or because they forget

For seniors and their caregivers, managing all these medications can be a logistical nightmare, with potentially life-threatening consequences. A [2013 study](#) followed 1,000 elderly patients discharged from hospitals and found that almost 20 percent had medication-related complications during their first 45 days at home.

If you are supporting a family member who wants to age in place, know that seniors and medication management issues is a top driver for nursing home referrals. Here are six ways to make managing senior medications safer and easier.

### **Get Organized**

Instead of going by the labels as the pill bottles pile up, keep an updated list of all medications (generic and brand names), when and why they were prescribed, dosages and frequency. Include the prescribing doctors' names and contact information, as well as your pharmacy's number. You might also describe what the pills look like (or include a photo) and list any common side effects.

## **Rely on Mom's Pharmacist**

Pharmacists are a key ally in managing medications. Even though generic national chain pharmacies dominate the landscape, you should still try get to know the experts behind the counter. Fill all prescriptions at the same place. Introduce yourself. Ask questions, especially if you're concerned about possible interactions of multiple medications. An analysis of studies published in the Journal of the American Geriatrics Society showed that hospital readmissions due to [drug problems took a steep dive](#) after a full-time pharmacist joined the geriatric team.

## **Use Creative Reminders**

Memory aids can help you or someone in your care avoid missing daily meds. The most common is to help the patient get into a daily pattern by taking morning meds when brushing teeth or sitting down for breakfast. Seven-day pill boxes are a big help, as are color-coded charts. For seniors who are losing their memory or having other cognitive difficulties, medication dosage can be triggered by automatic dispensers with voice message automated phone reminders.

## **Switch to Blister Packs**

There's plenty of room for error when a caregiver or senior patient loads a 7-day medication container with multiple meds. "Unit-dose packaging," or blister-packed pills, is an innovative new format you can ask the pharmacist for. Instead of having to manage a handful of prescription bottles, each with a month's worth of pills, pill packs come individually packaged per dosage.

So, if the patient takes five different prescription meds and a multivitamin every morning, the morning pack contains those six pills. If the prescription is for two pills at night, the nighttime pack contains those two.

Each pack is clearly labeled with a list of medications, dosages, date and time. They come on a roll, arranged chronologically. Tear one off, take the meds and toss the package. Studies show that unit-dose packaging improves patient adherence.

## **Schedule a Brown-Bag Checkup**

Periodically, or any time a senior or caregiver becomes confused or off track, gather all the medications and over-the-counter products and show them to the patient's primary doctor or pharmacist. He or she can help get senior medications up-to-date, and can also check to make sure the dosages and frequencies are correct—or if the patient still needs the prescriptions at all.

A pharmacist or doctor can also cross-reference for unintended side effects. Even if some of the medications were prescribed by specialists, it's still a good idea to see an overall primary physician or pharmacist. Some senior centers, pharmacies and churches host brown-bag checkups for their communities. Check the "Beers List" In 1991 geriatrician Mark Beers and a panel of experts created a set of guidelines to help healthcare professionals make prescription medicines safer for older adults. The Beers Criteria, or [Beers List](#), updated regularly, was founded to minimize unnecessary medications and stress the importance of reducing multiple prescriptions when possible.

It includes a very helpful list of medications known to have adverse reactions when taken by seniors. Although it's a technical document meant for clinicians, it can serve as a helpful guide for patients and caregivers—but only as a starting point. You should always talk to your doctor about any concerns raised by the list.

---

At **WayForth** we work with families in transition due to events such as downsizing, moving to assisted living or the death of a loved one. We can empty an entire house within days, sorting what items to keep, sell, donate, and discard. Our goal is to minimize a family's stress while maximizing the value of the estate. Call us for a free consultation 1-866-616-9708.

Article Source

WayForth

Source URL

<https://www.wayforth.com>

Last Reviewed

Tuesday, March 5, 2019