# **QUESTION:** How do physicians prioritize different ethical considerations when attempting to deprescribe medications for older adults with cognitive impairment?

# **Study Population** and Process



689 primary care physicians in the US completed surveys

Asked to rank 9 barriers from "greatest" to "smallest" to deprescribing a medication for older adults with dementia in 2 clinical scenarios

#### 2 clinical scenarios:



If continued, the medication could cause adverse drug event



No evidence the medication is beneficial

## **Study Findings**

Physicians were most concerned about deprescribing when:



the patient or family report symptomatic benefit from the medication



the medication was prescribed by another physician

Physicians were less concerned about:



the financial impact of continuing/discontinuing a medication

**CONCLUSION:** Understanding ethical aspects of physician decision-making can inform clinician education about medication management and deprescribing decisions for older adults with moderate dementia.

## **Physician Talking Points**

Many physicians wonder about how to address deprescribing opportunities with people living with dementia.



Have you talked to your patients about the symptoms they are most concerned about?



Phrase to try: "We will review how you are feeling and your medications to determine if all of them are still needed."



Have you talked to your colleagues about stopping a medication they prescribed?



Phrase to try: "Let's consider the patient's primary goals for this year and how we could adjust their medications to support those goals."



Have you asked your patients if money is an issue when it comes to their medication?



Phrase to try: "I would like to talk to you about the cost of your medication(s). Would that be okay with you?"



