

Patient Resource Guide:

Hospice Medication Management

INTRODUCTION

There are many guidelines for starting and managing medications, but significantly fewer resources exist that address when to consider stopping therapy. Unfortunately, this can result in patients remaining on an abundance of medications near the end-of-life, increasing pill burden, with little to no symptom relieving benefit. Additionally, in certain scenarios, continuing therapy can result in prolonged medication-related side effects or put patient at an increased risk of an undesired outcome (fall, dry mouth, increased urinary frequency, confusion etc.).

Reviewing Medication Management

<p>Medication No Longer Indicated</p>	<p>Medications to prevent long-term complications of cardiovascular or other common disease states in patients with advanced age may no longer be required in patients admitted to hospice, as focus of care has likely transitioned to symptom management and comfort. Blood pressure, cholesterol, diabetes, osteoporosis, thyroid and blood thinning medications should be reviewed to determine if continuation is beneficial.</p>
<p>Medication Side Effects</p>	<p>If continued use of a medication results in you feeling side effects, such as dizziness, dry mouth, nausea, low blood sugar, light-headedness upon standing, or low blood pressure, a medication review with the hospice team may not only result in decreased side effects, but also in reduced risk of fall or other undesired event.</p>
<p>Change in Function</p>	<p>If you are having difficulty taking medications due to changes in your ability or comfort swallowing, there may be other options to continue therapy. However, if the medication is not providing symptom relief or benefit, discuss options for use with your hospice team.</p>

Medications to be Considered for Discontinuation in Hospice

Medication Class	Reasons to Consider Discontinuation
Blood Pressure Medications	<ul style="list-style-type: none"> • Often started for prevention of cardiovascular events • In the hospice setting, preventative benefits of medications often beyond life expectancy • Patients can feel less fatigued following stopping blood pressure medications
Cholesterol Medications	<ul style="list-style-type: none"> • Preventative benefit of statin therapy likely beyond remaining life expectancy • No symptom relieving benefit of statin therapy
Anticoagulation Medications	<ul style="list-style-type: none"> • Patients continued on therapy have significantly increased risk of bleeding event • Patients often continued on therapy beyond recommend date
Dementia Medications	<ul style="list-style-type: none"> • GI side effects: diarrhea, nausea/vomiting • Increased incontinence • Lack of benefit in patients with severe disease
Type 2 Diabetes Medications	<ul style="list-style-type: none"> • 38% of hospice on insulin experience hypoglycemia, 18% with severe event • Insulin injection and BG monitoring can be painful and burdensome
Vitamins/Supplements	<ul style="list-style-type: none"> • If not using for symptom management, may contribute to unnecessary pill burden • Changing nutritional status and intake can impact risk of side effects with use

Your hospice team will review your medication list and have a discussion about opportunities to reduce your pill burden and eliminate unnecessary medications. If you have questions or concerns about recommendations or changes to therapy, it is important to communicate these with your hospice team. Your goals and wishes will be taken into consideration when making decisions about medication management.