

Medication Effects



Why might the resident's medication make them unwell?

- Side effects can occur when commencing, decreasing/increasing dosages or ending a period of medication treatment.
- Sometimes long-term medication can cause problems.
- Unpleasant side effects are also why some residents might refuse to take their prescribed medication.
- When side effects of a drug or medication are severe, the dosage may be adjusted or a second medication may be prescribed

Is the resident Self-medicating?

INVESTIGATE:

Have they remembered to take the correct dose at the correct time?

If they use a dossett box, are they filling it correctly?

Have they had access to over the counter medication or herbal remedies?



Older people commonly manipulate the dose and time they take certain drugs to enhance their quality of life e.g. skipping a diuretic dose if they are going out for the day, then doubling it to catch up later.

Over the counter medicines and herbal remedies may seriously increase the risk of over medication or create interactions between the drugs, but the resident may feel that their privacy is invaded if their room and belongings are searched for these- Check your homes policy on this and ask the relatives.

Check the resident's prescription and INVESTIGATE



- Have any new medications, creams and lotions been started recently?
- Has their regular dose or application increased or decreased?
- Has the resident's medication, cream or lotion been stopped suddenly?
Or been unavailable today?
- Did the resident refuse their medication, creams or lotions earlier today? Or during the previous shift?
- Were the medications, creams and lotions given or applied at the correct time?



Are the prescribed medications long term?

Are there more than 4 medications on the resident's prescription?

Has 6 months passed since the medication was reviewed by the GP or Pharmacist?

Has the resident a history of reacting to a particular drug or type of drug?

Find out if the resident has an allergy or had a previous reaction towards a type of drug/cream

How long ago was the last incident?

How long had they been on the medication/cream before?

Is this a new problem?

Ask the resident about their symptoms or observe the resident to find out.

When did the symptoms start?

How long after taking the medication did they become unwell?

Have they taken someone else's medication by mistake e.g. from a self medicating resident?

When a resident has delirium they may be too ill and too confused to self medicate safely.

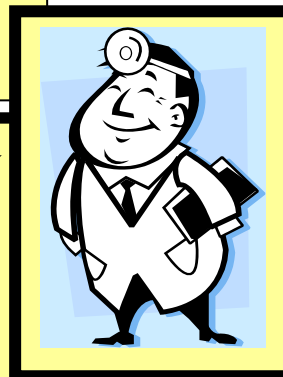


The resident may need extra help to take their medication until they are feeling better, check with the GP and the resident's relatives.

Monitor the resident carefully
Look after the resident's physical needs
Take extra precautions to prevent falls

Call the GP

Use the checklist to describe the resident's symptoms and the history
Inform the GP or pharmacist of any extra medications you find
Ask the GP for a full medication review



Prevent medication effects

Reassess the resident's ability to self medicate once they are well again.



Ensure that all medications are kept securely to prevent them being taken by other residents who are confused.

Ask for the medications to be reviewed when there are 4 or more/ or every six months.

Discourage relatives and friends from bringing over the counter drugs into your home

A few side effects of commonly used drugs:



Antibiotics: The most common side effects with antibiotic drugs are diarrhoea, feeling sick and being sick. Fungal infections of the mouth, digestive tract and vagina can also occur with antibiotics because they destroy the protective 'good' bacteria in the body (which help prevent overgrowth of any one organism), as well as the 'bad' ones, responsible for the infection being treated



Anticholinergics: These are drugs that are used to relieve depression, Parkinson's disease, allergies and migraine. They can cause confusion, memory loss, disorientation and blurred vision, unsteadiness and a rapid heartbeat. The elderly are most at risk of the side effects as their metabolism is less efficient and the drugs remain in their systems longer.



Analgesics: Many pain killers contain Codeine which can cause constipation as it slows down the metabolism. The non-steroidal anti-inflammatory drugs such as Ibuprofen & Diclofenac can cause stomach pains or cramps, blood in the vomit, or something that looks like coffee grounds, or if they produce bloody or black, tar-like stools with a distinctive smell.

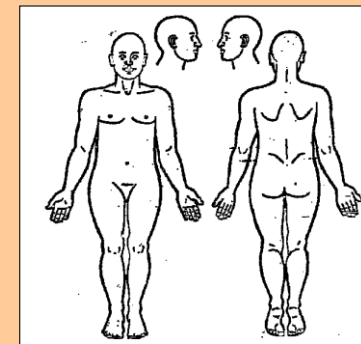
Creams and Lotions

Creams and lotions for skin conditions are just as important as tablets or medicines.



Sometimes these can be forgotten because they are kept in a different place to medications.

Sometimes carers and nurses are a little squeamish about skin conditions and they might be worried or feel reluctant to apply them.



Make sure that all the staff know what skin preparations are prescribed for a resident and understand how it helps them.

Make sure that it is clear to all staff where a resident's skin preparation is usually kept.

Make sure they know how to do this properly and at the right times.

Check that the creams or lotions are being applied to the correct parts of the resident's body.

Remember to wash your hands before and after applying creams