NEWS

THE SUNDAY TIMES
08.09.13

‘Zombie’ drugs to manage elderly

Mark Macaskill

Almost half of elderly people in Scottish care homes are prescribed powerful psychotropic drugs, according to research.

A study found prescription levels of antipsychotics and sleep-inducing drugs were almost four times higher among over-65s in residential care than those living at home.

The findings have prompted concern that thousands of elderly people in care across Scotland are often given a chemical “cure” to make them easier to manage.

It coincides with a Scottish government review revealing that, on any given day, seven out of 10 care-home residents in Scotland are given drugs wrongly.

“This research raises serious questions as to whether some care-home residents are being prescribed psychotropic medication to make them more manageable, which would be completely unacceptable,” said Doug Anthenoor from the charity Age Scotland.

“We urge the Scottish government to act with all possible haste on its National Dementia Strategy commitment to ensure such medications are used only where there is no alternative and a clear benefit to the person receiving it.”

Jackson Carlaw, the Scottish Conservatives’ health spokesman, said: “This report raises a number of disturbing concerns, notably that some care homes are prescribing psychotropic medication to make residents more manageable. If this is the case, it is wrong and should be investigated.

“Given that most of the residents are elderly, it puts many of them at an increased risk of experiencing adverse effects from inappropriate drug interventions.”

“[It’s] essential we have enough places available in quality care homes, and that these facilities have the trust of the patients’ children, spouses or relatives.”

Data on prescriptions issued in 2011 for almost 800,000 over-65s, of whom more than 32,000 resided in care homes, was analysed by Tyler Stewart from the University of Kentucky’s Martin School of Public Policy and Administration.

The data, held by ISD, the Scottish government’s health statistics division, revealed more care-home patients were treated with psychotropics than non-care-home patients (46.8% vs 17%). Men were more likely than women to be given them (41% vs 40%).

Stewart concluded: “There are significant differences in the use of psychotropic medications based on gender and age. Whether this reflects appropriate prescribing warrants further investigation.”

There are warnings that the elderly are increasingly being admitted to care homes in poor mental and physical health because of greater emphasis on supporting individuals in their homes.

Last week a senior care worker in Scotland said that in some cases psychotropic medication was “an unavoidable treatment to ensure the health, safety and welfare of the individual and the resident group”.

He added: “Staffing levels inevitably play a role in the care of highly dependent individuals. With budgetary restraints, this can limit options available to GPs and care-home managers. However, I believe there are generally considerable checks and balances to avoid blatant misprescribing.”

The Royal Pharmaceutical Society Scotland has set up a working group to examine how pharmaceutical care in homes could be improved after it emerged thousands of elderly care-home patients were medicated incorrectly.

The errors include incorrect dosage, not giving drugs at the correct time and not ensuring patients take their drugs. Such mistakes can lead to death.

Surgeons call for check on weekend NHS care

Chairman of patient safety board wants closer scrutiny of spikes in mortality, writes Mark Macaskill

High death rates among patients admitted at weekends to some of the country’s biggest hospitals of Edinburgh (21%) and chair of the patient safety board Dr Mark Macaskill admits that “there is a very high risk”.

The new study comes after a previous one published in The Lancet revealed a “significant increase” in weekend mortality rates of 8.5%.

Researchers examined “surgeon day” data, which records mortality rates across the country, and cross-referenced it with the number of weekend admissions to the biggest hospitals.

The study, led by Dr Macaskill and undertaken by the Department of Health and Social Care, found that there was a significant increase in mortality rates of 8.5% among patients admitted at weekends.

The findings are based on data from a sample of around 50% of all hospital beds in England and are the first to be published.

Dr Macaskill said: “There is a very high risk of mortality among patients admitted at weekends to some of the country’s biggest hospitals.”

He added: “This finding is consistent with previous research and highlights the need for further investigation into the reasons behind these higher mortality rates.”

The study was carried out as part of the national patient safety programme, which aims to improve patient outcomes and reduce the risk of harm.

The findings are likely to be welcomed by health professionals and patient groups, who have long argued for more resources to be dedicated to the weekends.

However, critics have warned that the study’s findings need to be treated with caution, as they are based on data from a limited sample of hospitals.

The study found that weekend mortality rates were higher in certain specialties, including surgery, and that the difference was statistically significant in some cases.

The researchers also found that the risk of death was higher among patients who were admitted at weekends for procedures that were more complex or involved a greater degree of risk.

They concluded that further research is needed to determine the reasons behind these findings and to develop strategies to reduce weekend mortality rates.

Dr Macaskill said: “We need to understand why these differences exist and what we can do to address them.”

The study was published in the British Medical Journal and is available online at bmj.com.

The Lancet article can be found at lancet.com.

The report can be accessed at dpcj.jh.org.uk.