



Atlas of Healthcare Variation consumer summary | Polypharmacy among people aged 65 years and over

The Atlas of Healthcare Variation is a website that uses maps, graphs, tables and text to show differences in health care in New Zealand by Health New Zealand district or Primary Health Organisation (PHO). The Atlas is used to start conversations about health care differences, and the reasons why differences may be happening.

[Primary health organisations – tewhatauora.govt.nz](https://www.tewhatauora.govt.nz)

In this topic area of the Atlas,¹ we can see differences in medicine prescribing by health district, including how many people are taking long-term medicines (for six months or longer) and the use of specific types of medicines such as antipsychotic² medicine and benzodiazepines.³ Polypharmacy is the prescribing of many medicines (five or more is a common number).

Older people (usually those over 65 years of age) often need several different medicines to manage their health conditions, and this can be completely appropriate. Sometimes taking all these medicines can result in side effects, and this increases with the number of medicines taken. There are different reasons for this, one of which is that getting older can affect how our bodies handle medicines.

In older people, some medicines are likely to cause side effects. Benzodiazepines (eg, diazepam) and antipsychotic medicines (eg, clozapine or risperidone) are two examples of this. Side effects include feeling dizzy when standing up, feeling sick, not thinking clearly and having blurred eyesight. These side effects can also make the person unsteady on their feet, increases the risk of falling and can affect driving. As with all medicines, it is important that the benefits of taking such medicines outweigh the risks. The aim of the Atlas is to get people talking about why some districts use these medicines more than others.

In older people, medicines such as antipsychotic medicines and benzodiazepines carry a much greater risk of adverse (bad) effects, especially in frail older people or those over 85 years of age. Common side effects of these medicines include agitation, confusion, blurred vision, drowsiness, impaired balance, falls, and bladder and bowel problems.

The percentage of adverse drug events and drug interactions (where a drug does not perform as expected due to the presence of another substance) increases with the number of medicines taken.

¹ Polypharmacy in people aged 65 years and over: www.hqsc.govt.nz/Atlas/polypharmacy.

² Medicines used to treat some mental illnesses.

³ Medicines used to treat anxiety, insomnia, pain and agitation, more commonly known as sedatives or hypnotics.

There is a lack of evidence to support the use of so many medicines for these age groups. Polypharmacy comes with increased risks, all of which lead to increased costs to both the patient and the health care system.

The Commission encourages health professionals to use the Atlas data to take a look at prescribing practices, to ensure patients are getting the best possible treatment for their condition.

What the Atlas data shows

In 2023, about 46.5 percent of people aged 65 years and over received five or more long-term medicines and about 8.1 percent of people aged 65 years or over received 11 or more long-term medicines.

The rate of dispensing of long-term medicines has increased since 2019 but rates continue to be high for Pacific peoples and in those aged 85 and over.

The triple whammy

Prescribing the 'triple whammy' is a potentially harmful combination of three groups of medicines: an angiotensin-converting enzyme (ACE) inhibitor or angiotensin II receptor antagonist (blood pressure tablet), a diuretic (water tablet) and non-steroidal anti-inflammatory drug (NSAID) or COX-2 inhibitor (types of pain killer).

Our data shows that around 21,750 New Zealanders aged 65 years and over were prescribed this combination in 2023.

The triple whammy can cause kidney harm, so health professionals should avoid prescribing the combination wherever possible and warn patients about the potential for harm if a third medication is added and to avoid over-the-counter NSAIDs such as ibuprofen.

The Commission encourages patients and consumers who are prescribed medicine to ask their doctor, nurse or pharmacist:

- what the medicine is called
- what the medicine is for
- why you need to take it
- when and how to take it.

Anyone who is worried about their medicine/s should talk to their doctor. It is important not to stop taking the medicine/s. It is recommended that you bring all the medicines you are on to your doctor when you have an appointment.

Consumer resources from the Health Quality & Safety Commission

Polypharmacy and deprescribing | Ngā rongoā maha me te whakakore tūtohu (Frailty care guides 2023) – <https://www.hqsc.govt.nz/resources/resource-library/polypharmacy-and-deprescribing-nga-rongoa-maha-me-te-whakakore-tutohu-frailty-care-guides-2023/>

Three steps to better health literacy – a guide for health care professionals. (Please note this resource is currently being updated and will be replaced) www.hqsc.govt.nz/our-programmes/partners-in-care/publications-and-resources/publication/2046

For more information on what you should know about your medicines, please go to www.hqsc.govt.nz/our-programmes/medication-safety/publications-and-resources/publication/516/.

For more information, please see:

- My Medicines is a website that contains information about medicines: www.mymedicines.nz/cdhub.
- Healthify NZ. Polypharmacy. <https://healthify.nz/medicines-a-z/p/polypharmacy>