

Medicines and Good Mental Health in Later Life

A report on a UK survey of the availability of community-based pharmaceutical care for older people with mental health needs

SUMMARY

As a result of poor understanding of why they have been prescribed and the experience of side-effects many older people cease taking their medication. Remembering to take medication and in the right quantities is crucial to the maintenance of health and well-being, particularly amongst older people who may take a number of medicines. Research has repeatedly shown that people are more likely to take their medication if they have received accurate and appropriately delivered information about its benefits and any adverse effects. Whilst the focus of this survey was to explore the needs of older people in taking medication to reduce the symptoms of dementia or depression, it is clear that many older people need help to understand and have support with all medication they may be prescribed.

The Mental Health Foundation is interested in the concordance issues for older people with dementia and/or depression in relation to prescribed medication. It is particularly concerned to see:

- Improved independence and empowerment of older people with dementia and/or depression and their families in relationship to medication issues.
- Improved access to information and support for older people living alone as evidence suggests they tend to be ineligible for receipt of 'anti-dementia drugs'.
- Improved access to high quality drug treatments for depression.

A community-based UK wide survey was carried out to explore how far pharmaceutical advice and support is extended to older people with dementia and/or depression. It was conducted shortly before the publication of the National Service Framework for Older People, ⁽¹⁾ which identifies the need for 'the use of medicines for and by older people to be improved'. The survey findings suggest that many older people have difficulties in understanding the role of, and in regularly taking medication and that professionals - most particularly pharmacists - are committed to developing home based visiting services to offer support and advice to older people and their carers. At present there is very limited investment in this type of service.

BACKGROUND

Whilst there is an obvious role for pharmacists in hospital settings and chemists, their role in working alongside older people with mental health problems living at home, is substantially unexplored. The Department of Health (England) funded a project in Southern Derbyshire to examine the wider potential role of community pharmacists to improve concordance. ⁽²⁾

This work found that by enabling pharmacists to adopt a wider role they have the potential to achieve the following:

- **Reduction in health problems and distress** amongst older people with mental health problems and their families. As a consequence of taking prescribed medication appropriately, receiving new or changed medications appropriately, and being offered expert advice and guidance, older people and their carers are not only likely to be healthier and safer but also less confused, and clearer about the role and purpose of prescribed medicines.
- **Fewer hospital admissions** due to the reduction of the incidence of drug-induced toxicity caused by inappropriate combinations or doses of medicines. Adverse reactions to medicines are implicated in anything between 5%-17% of hospital admissions. As admission to long-term care often succeeds a stay in hospital - the numbers of residential care admissions could also be reduced.
- **Reduction of health problems** that are actually caused by the wrong dosage or type of drugs and an ensuing reduction of demand on a range of other health services, particularly GP's and other primary health care providers.
- **Equal access to treatment:** Some medicines are under-used by older people, for example antidepressants are not always prescribed for older patients who would benefit from their use.
- **Effectiveness of drugs:** As many as half of older people taking prescribed medication may not be taking these medicines as intended. Increasing understanding amongst users and their carers is likely to ensure greater levels of adherence to a medication regime, and a reduction in stockpiling of drugs and/or inappropriate consumption of drugs. Dosage instructions on the medicine label are often inadequate.
- **Wasted Spending on Drugs:** Repeat prescribing causes wastage of up to 10% of the total prescribing cost. For each £1 spent on employing pharmacists to review medication regimes, there can be £2 of cost saving in reduced prescribing.

THE SURVEY

Building on this work, a UK wide survey was commissioned by the Mental Health Foundation to identify the need for and value of providing pharmaceutical support to older people (64+ years) with mental health problems living in their own homes. The research pharmacist who had conducted the Department of Health funded project carried out the survey.

The postal survey was targeted at managers of Community Mental Health Teams (CMHTs), Hospital and Community Pharmacists and branches of the Alzheimer's Society. The response rate was a third of the total.

THE FINDINGS

The main survey findings are summarised below. They are divided into two groups; those relating to older people and their families, and those about pharmaceutical support services.

Users with mental health problems and their families: Current Difficulties and Potential Benefits

- Respondents consider that a very high number of older people with mental health problems regularly have difficulties around their medication. Particularly

prevalent difficulties are: obtaining information on medicines, understanding the instructions for taking medicines, removing tablets from their container; and taking the medicines as prescribed. Having someone to contact with medication queries is also viewed as a significant need.

- A home visiting service, prescription collection & delivery, medication review and compliance aids are considered the most beneficial services a community pharmacist could provide for users. Advice and education to the carer is also considered important.

Pharmaceutical Support Services: Current Limitations and Future Developments

- Only a third of respondents consider that pharmaceutical support for older people with mental health problems is routinely available; particular concerns are around prescription delivery and collection, and compliance aids. Some of the 'good practice' home based visiting services cited were short-term projects or only covered a proportion of PCG/Ts in one area.
- There is little formalised support provided by pharmacists on medication issues to community mental health teams or social services. The development of pharmaceutical care plans, following a pharmaceutical needs assessment, (an integral part of pharmaceutical care) was similarly low. Few pharmacists have services in place to improve the link between primary and secondary care.
- Although there are home based pharmaceutical services available in some areas, there is little consistency between areas or even between services in the same area. Continuity of care between hospitals and community teams on medication issues was identified as a particular concern.
- Approximately half the pharmacist respondents indicated a commitment to providing a home visiting service to older people with mental health problems in the future. The specific services identified include: medicines management, medication reviews, compliance aids, dementia advice, liaison services for discharged patients, and the participation of pharmacists in teams for the elderly.
- The major reason given for not having these pharmaceutical services available is a lack of funding to release pharmacists from their hospital or pharmacy roles within chemists

Overall there appears to be low levels of pharmaceutical support being offered to older people with mental health problems living at home. Despite this, there is strong commitment to developing additional services and widespread concern about the difficulties that this group of users experience in taking medication appropriately and safely.

THE IMPLICATIONS

The impact of developing appropriate pharmaceutical support to older people with mental health problems - predominantly dementia and depression - is of interest to a range of stakeholders. The survey findings are timely and mirror recent policy developments around pharmaceutical care for older people.

The document 'Medicines and Older People'⁽³⁾ which was published alongside the National Service Framework for Older People, (Department of Health, 2001) recognises: 'As access to a pharmacy can be a problem for older people who have dementia or depression, community pharmacists need to be able to make home visits. Pharmacists are not currently funded for time spent away from their hospital/pharmacy and for providing compliance aids'. Funding is needed to release pharmacists to make

home visits and to spend the time liaising with other professional. They will also need training to ensure the development of the necessary knowledge and skills'.

The Report also acknowledges that: 'A period of sustained service development is needed across the UK to promote the equitable development of a cost effective home-visiting community pharmacy service that assists older people who have depression and/or dementia to understand and determine the use of medication in enhancing their health and well being'. One of the most effective ways to build upon the 'Medicines and Good Mental Health in Later Life' survey would be to develop a pilot service in each of the seven health regions of the UK.

This pilot service would be able to offer:

- An evidence-based **service model** that is replicable
- Evidence of **cost-effectiveness** for policy makers and commissioners
- **Job descriptions** and specifications for pharmacists and operational policies
- **Training materials** needed to introduce, develop and maintain a service
- **Outcome measures** determined by service user and carers, service providers and commissioners
- **An information suite** for users, their family, friends and carers in a range of media for users (video, tape, leaflet, internet) and for telephone advice lines (NHS direct/Care direct etc)

REFERENCES

- 1 *National Service Framework for Older People (2001)* London: Department of Health
- 2 *Extending Pharmaceutical Adherence in Older People in Southern Derbyshire (2001)* D. Harris (in press)
- 3 *Medicines and Older People (2001)* London: Department of Health

Further Information

The Mental Health Foundation is setting up a learning network concerned with mental health in later life and is open to anyone who is interested in participating. Any further developments in relation to Medicines and Mental Health & Later Life will be posted on the web site. Please send an email to mhf@mhf.org.uk if you are interested in being notified when this is available.

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