

## **Abstract:**

Drug-related problems have an enormous impact in the elderly population and in society as a whole. Various study results suggest that approximately 30 percent of all hospital admissions in elderly patients may be medication related and that the monetary costs associated with drug-related problems in the ambulatory care population may approach \$77 million. Because the elderly population is a rapidly growing population segment of our society, these already enormous costs are only expected to increase. Currently, approximately 15 percent of the Department of Defense (DoD) eligible beneficiary population is older than 65 years of age. The Beers criteria for screening potentially inappropriate medication use in older adults has been widely used as a guide in analyzing prescribing trends in the elderly and has been applied to nursing home as well as community-dwelling elderly individuals. However, the criteria have never been applied to the DoD elderly beneficiary population. A preliminary medication use evaluation analysis at one military treatment facility found significant use of Beers-defined, inappropriate medication use in the elderly. Hence, the primary objective of this study (phase one) is to determine the incidence of inappropriate prescribing in the elderly DoD population using the recently updated Beers criteria. The secondary objective, evaluated in phase two of this study, is to determine if clinical pharmacists can assist with reducing the amount of inappropriate medication prescribing in the elderly at one military treatment facility. Patients older than 65 years assigned an Internal Medicine primary care manager (PCM) at one military treatment facility and who have been identified as using an inappropriate medication in the previous year at least two times will be called and referred to the pharmacy medication management clinic. Using the patient's visit with a clinical pharmacist -- who in collaboration with the patient's PCM -- as the intervention, a patient's drug therapy will be evaluated pre- and post- an appointment for the number of recommendations accepted that reduced inappropriate prescribing. Further, patients assigned to the intervention group will have their medication profile evaluated against a comparable control group to determine if any difference exists between the groups regarding the percentage of inappropriate medications prescribed for each sample. As clinical pharmacists are utilized as providers throughout the DoD, successes discovered at the investigating military treatment facility could easily be replicated throughout the DoD resulting in greater optimization of drug therapy in the elderly population.