

Polypharmacy and Deprescribing

A plain-English guide for you and your family

WHAT IS HAPPENING

Polypharmacy means taking many medicines at the same time—usually five or more. It happens slowly: you see one doctor for your heart, another for diabetes, another for joint pain, and each one adds a pill. Nobody sits down and looks at the whole list together. Sometimes a new symptom (like dizziness or trouble sleeping) is actually a side effect from one of your current pills, but instead of stopping that pill, a new one gets added to treat the new problem. Before long, you're taking ten or more medicines, and they start bumping into each other—one makes another work too strongly, or cancels it out, or overloads your liver and kidneys so levels build up and cause confusion, falls, or bleeding. The fix is called deprescribing: your doctor reviews every medicine with you, stops the ones that aren't helping or aren't needed anymore, and keeps only what truly protects your health. It's safe when done slowly and together, and it often makes you feel clearer, steadier, and stronger.

What you might feel

- Taking five or more medicines at the same time (prescription, over-the-counter, or supplements)
- Confusion, dizziness, or falls that started after a new medicine was added
- Trouble keeping track of doses, missing doses, or taking the wrong pill
- New or worsening symptoms that look like a disease but are actually a side effect (for example, shaking, slow movement, or trouble peeing)
- Feeling tired, weak, or foggy-headed all the time
- Stomach upset, nausea, or bleeding in the gut
- Kidneys or liver not working as well (seen on blood tests)
- Going to the hospital or emergency room because of a medicine problem

Call the doctor right away if...

- New confusion, severe dizziness, or a fall—especially after starting or changing a medicine

- Black or bloody stools, vomiting blood, or severe belly pain (signs of stomach bleeding)
- Very slow heart rate, chest pain, trouble breathing, or fainting (possible toxic levels or dangerous interaction)
- Sudden shaking, stiff muscles, or trouble moving (may be medicine-induced parkinsonism or serotonin syndrome)
- Cannot pee, severe constipation, or blurry vision with a racing heart (anticholinergic overload)

What the care team will do

- Create a complete medication list by checking pill bottles, pharmacy records, and asking family members what the patient actually takes at home.
- Check kidney function with serum creatinine (a blood test measuring waste that kidneys remove) and calculate estimated glomerular filtration rate before every deprescribing decision.
- Screen every medicine against the Beers Criteria list to identify high-risk drugs that cause falls, confusion, or bleeding in older adults.
- Assess for anticholinergic burden by counting how many medicines block acetylcholine, then watch for dry mouth, constipation, blurry vision, confusion, or inability to urinate.
- Document orthostatic vital signs by measuring blood pressure and heart rate lying down, then again after standing for one minute and three minutes.
- Teach the patient to taper one medicine at a time when deprescribing, waiting at least two weeks before stopping the next drug, and report new symptoms immediately.
- Schedule a follow-up visit within two to four weeks after any deprescribing change to reassess symptoms and check if the stopped medicine was truly unnecessary.

Medicines you may be given — and why

Deprescribing is a process, not a single drug

Deprescribing means carefully stopping medicines that may no longer help or that cause more harm than good. As people age or conditions change, some medicines that once made sense may now raise the risk of falls, confusion, kidney trouble, or drug interactions. The goal is to keep only the medicines that truly help you reach your health goals and drop the ones that don't. This is done step by step, with close monitoring, never all at once.

Where this information comes from

- American Geriatrics Society Beers Criteria 2023

- STOPP/START Criteria (Screening Tool of Older Persons' Prescriptions / Screening Tool to Alert to Right Treatment)
- CDC Medication Safety Program
- Institute for Healthcare Improvement (IHI) Age-Friendly Health Systems

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