Stay Safe

Understanding polypharmacy and anticholinergic medications

Polypharmacy occurs when a patient uses multiple medications at the same time. **Anticholinergic medications** are a class of medications used for common conditions such as allergies, nausea, muscle spasms, mental health issues, and overactive bladder, but they can cause unwanted effects.

Why is it important?

Increased risk of side effects: Patients aged 65 and older are at a much higher risk of experiencing unwanted side effects when taking multiple medications. Studies show an 88% increased risk of health challenges, including falls and memory changes.



What can you do?

Discuss your medications: Talk to your healthcare provider about anticholinergic medications you may be taking and any side effects such as dizziness, dry mouth, blurred vision, sudden confusion, and falls.

Ask about alternatives: Discuss with your healthcare provider if there are safer medication options or non-drug options available.

Educate yourself: Understand the potential risks associated with your medications. Know which medications are anticholinergic medications.

Review regularly: Have regular medication reviews with your healthcare provider to determine if each medication is still needed.

Stay informed: Keep a list of your medications, including dose and reasons for use. Bring this list to every doctor appointment.

Key recommendations for older adults

Limit Anticholinergic Medications: The American Geriatrics Society recommends avoiding using two or more anticholinergic medications at the same time because it can increase the risk of falls, memory changes, and sudden confusion.^{1,3}

Know the risks with anticholinergic medications

Medications that can increase the risk of falls, confusion, and other side effects include:¹

- Antidepressants like amitriptyline
- Antihistamines like diphenhydramine
- Anti-nausea medications like promethazine
- Antiparkinsonian agents like benztropine
- Antipsychotics like olanzapine
- Antispasmodics like dicyclomine
- Bladder control medications like oxybutynin
- Muscle relaxants like cyclobenzaprine

See page 2 for a list of common medications.

If you need to stop a medication

Never stop taking a medication abruptly without talking to your healthcare provider. Some medications require a slow decrease to reduce withdrawal symptoms. If you have concerns about your medications or the risk of polypharmacy, reach out to your healthcare provider for guidance and support.



Anticholinergic medications[†]

Antidepressants:

- amitriptyline
- amoxapine
- clomipramine
- desipramine
- doxepin > 6 mg/day
- imipramine
- nortriptyline
- paroxetine

Antihistamines:

- brompheniramine
- chlorpheniramine
- cyproheptadine
- dimenhydrinate
- diphenhydramine- oral
- doxylamine
- hydroxyzine
- meclizine
- triprolidine

Anti-nausea medications:

- prochlorperazine
- promethazine

Antiparkinsonian agents:

- benztropine
- trihexyphenidyl

Antipsychotics:

- chlorpromazine
- clozapine
- olanzapine
- perphenazine

Antispasmodics: (*excludes eye products)

- atropine*
- clidinium-chlordiazepoxide
- dicyclomine
- homatropine*
- hyoscyamine
- scopolamine*

Bladder control medications:

- darifenacin
- fesoterodine
- flavoxate
- oxybutynin
- solifenacin
- tolterodine
- trospium

Muscle relaxants:

- cyclobenzaprine
- orphenadrine

Source

- 1. The 2023 American Geriatrics Society Beers Criteria Update Expert Panel. American Geriatrics Society 2023 Updated AGS Beers Criteria for potentially inappropriate medication use in older adults. J Am Geriatr Society. 2023; 71(7):2052-81. doi: 10.1111/jgs.18372.
- 2. Maher RL, Hanlon JT, Hajjar ER. Clinical Consequences of Polypharmacy in Elderly. Expert opinion on drug safety. 2014; 13(1):57-65. doi: 10.1517/14740338.2013.827660.
- 3. Campbell N, Boustani M, Limbil T, et al. The cognitive impact of anticholinergics: a clinical review. Clinical Interventions in Aging. 2009; 4:225-33. doi: 10.2147/cia.s5358.

† Includes combination products that contain a target medication listed and the following routes of administration: buccal, nasal, oral, transdermal, rectal and sublingual. Injectable and inhalation are excluded.

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