

Do I take too many medications?



BY MARK M RYAN, MD

The CDC published a [report](#) in 2019 describing prescription drug use among adults aged 40-79 in the United States and Canada: 83% of adults in their 60s and 70s had used at least one prescription drug in the previous 30 days, and 33% had used five or more prescription drugs in the previous 30 days. The most commonly used prescription drugs were cholesterol, high blood pressure, and diabetes medications.

For adults with two or more chronic conditions such as arthritis, asthma, COPD, heart disease, diabetes, depression, or hypertension, taking more than five medications is common and often necessary for the patient's health. Taking more than five prescription medications, however, is known as polypharmacy and places a patient at higher risk of drug-drug interactions, difficulty taking medications as prescribed, and side effects including falls and cognitive impairment. As a physician, I prescribe medications with the intention of helping patients; however, I find that sometimes the most helpful thing I can do is to "deprescribe" medications.

"Deprescribing" medications is a medically supervised process of decreasing or stopping medications that are no longer needed or may be causing side effects. Medications that patients have taken for years may no longer be needed or a lifestyle change can better manage a health condition. Oftentimes diabetes medications and blood pressure medications need to be reduced or stopped when patients change their diet or lose weight.

Here are several points to consider and discuss with your physician if you are concerned with the number of medications you are taking:

- Ask your doctor if there are lifestyle changes that you can make that would eliminate any of your current medications
- When a new medication is prescribed, ask your doctor how long you should expect to take it
- Make an appointment with your primary doctor immediately after a hospital or emergency room visit to review any medication changes
- Review any over-the-counter medications or supplements you are taking with your doctor - some of these products can duplicate or interact with prescription medications.

AUGUST IS IMMUNIZATION AWARENESS MONTH



There will be several new vaccines this fall:

1. Updated COVID-19 vaccine:

- COVID-19 vaccines will be updated to provide protection against the dominant Omicron variant XBB.1.5 by the fall of 2023. The current "Bivalent" vaccines are obsolete and offer protection against strains of the virus no longer found in the general population.
 - a. The CDC recommends everyone above age 6 have at least one updated Pfizer or Moderna vaccine regardless of whether they received any original COVID vaccines.
 - b. Waiting three months after testing positive for COVID or receiving an older version of the vaccine reduces the risk of side effects from vaccination

2. RSV vaccine:

- a. The headline is that AREXVY (RSV vaccine) reduces the risk of developing RSV infection by 83% compared to placebo.
- b. The real numbers were 40 cases of RSV among the 12,494 receiving a placebo and 7 cases of RSV among the 12,466 receiving a vaccine. There were no deaths due to RSV in either group and adults above the age of 80 were not included in the study. The effect of the vaccine lasted ~ six months.
- c. Bottom line: if you have COPD, heart failure, or have been hospitalized in the past for breathing issues - you should consider getting this vaccine.



IN THE NEWS

Does weekend-only exercise make a difference in my health?

Logging more than 150 minutes of moderate-to-vigorous physical activity per week - regardless of how it was distributed - prevents heart disease.



Guidelines from every major health organization recommend ≥ 150 minutes of moderate to vigorous physical activity every week based on the [health benefits](#) of lengthening life and lowering the risk of heart attack, stroke, diabetes, and dementia with this level of activity.

Moderate activity is defined in several ways, but one I find most useful is the “talk test”. A person doing moderate-intensity aerobic activity can talk, but not sing, during the activity. A person doing vigorous-intensity activity generally cannot say more than a few words without pausing for a breath. 150 minutes of moderate-to-vigorous activity can be a challenge for some patients to fit into their day-to-day schedules, and many patients tell me that they are active but do not exercise regularly - listing yard work and household cleaning or improvement projects as their activities of choice. Do these “weekend warriors” get the same benefit as people going to a gym to exercise every day?

Researchers from Harvard [studied](#) 89,573 people (average age, 62) who wore a wrist-based activity monitor like a Fitbit for 2.5 years. 40% of participants were classified as “weekend warriors” getting more than half of their weekly 150 minutes of activity in 1-2 days. 25% were regular exercisers and distributed their 150 minutes of activity evenly throughout the week. 35% were inactive and had less than 150 minutes of activity per week.

After 6.3 years of follow-up, patients with more than 150 minutes of moderate-to-vigorous activity per week - regardless of when they performed it - had significant cardiovascular benefits compared to patients with a more sedentary lifestyle: 20% lower risk of atrial fibrillation, 31% lower risk of heart attack, and 37% lower risk of heart failure, and 19% lower risk of stroke.

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