

Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (POLY-ACH)

APPLICABLE LINES OF BUSINESS

- Medicare

MEASURE DESCRIPTION

The percentage of individuals ≥65 years of age with concurrent use of ≥2 unique anticholinergic medications.¹ A lower rate indicates better performance.

APPLICABLE MEDICATIONS

Antihistamine Medications		
• brompheniramine	• dexbrompheniramine	• hydroxyzine
• carbinoxamine	• dexchlorpheniramine	• meclizine
• chlorpheniramine	• dimenhydrinate	• pyrilamine
• clemastine	• diphenhydramine (oral)	• triprolidine
• cyproheptadine	• doxylamine	
Antiparkinsonian Agent Medications		
• benztropine	• trihexyphenidyl	
Skeletal Muscle Relaxant Medications		
• cyclobenzaprine	• orphenadrine	
Antiemetic Medications		
• prochlorperazine	• promethazine	
Antipsychotic Medications		
• chlorpromazine	• olanzapine	• thioridazine
• clozapine	• perphenazine	• trifluoperazine
• loxapine		
Antidepressant Medications		
• amitriptyline	• doxepin (>6 mg/day)	• paroxetine
• amoxapine	• imipramine	• protriptyline
• clomipramine	• nortriptyline	• trimipramine
• desipramine		

Antiarrhythmic Medications		
<ul style="list-style-type: none"> disopyramide 		
Antimuscarinic (urinary incontinence) Medications		
<ul style="list-style-type: none"> darifenacin fesoterodine flavoxate 	<ul style="list-style-type: none"> oxybutynin solifenacin 	<ul style="list-style-type: none"> tolterodine tropium
Antispasmodic Medications		
<ul style="list-style-type: none"> atropine (excludes ophthalmic) belladonna alkaloids clidinium-chlordiazepoxide 	<ul style="list-style-type: none"> dicyclomine homatropine (excludes ophthalmic) hyoscyamine 	<ul style="list-style-type: none"> methscopolamine propantheline scopolamine (excludes ophthalmic)

EXCLUSIONS

Patients are excluded if they received [hospice care](#) at any time during the measurement year.

TIPS FOR SUCCESS

- Leverage electronic medical records (EMR) to identify prescribing that meets polypharmacy criteria. Share lists with providers in the practice for review.
- Review the indication and duration for each anticholinergic medication at every visit and discontinue any medication in which potential harm outweighs the benefits.
- Discuss the benefits, risks, and availability of safer alternatives or non-pharmacological treatment options (e.g., cognitive behavioral therapy) with patient.
- Educate the patient on risks and side effects of using multiple anticholinergic medications such as cognitive decline, blurry vision, increased fall risk, and what to do if side effects appear.
- Review medication appropriateness based on current evidence and guidelines while considering the patient's co-morbid conditions, goals, and holistic picture.