

# Polypharmacy

#### RELEVANCE IN WORKERS' COMP

Polypharmacy is the simultaneous use of multiple medications in an individual patient.

Injured workers who require medication for their injury may already be taking drugs for unrelated conditions, or they may need additional drugs for the side effects of their injury-related medication.

Polypharmacy has largely negative connotations of inappropriate therapy on the part of prescribing physicians. There are some situations in which polypharmacy is appropriate or necessary, but the increased risk is not always accompanied by increased effectiveness. Polypharmacy can often lead to unintended consequences.

#### AT A GLANCE

- There are a number of medical conditions for which polypharmacy is rational and indicated
- If not monitored, polypharmacy can become inappropriate and escalate the situation, causing serious side effects, including death<sup>1,2</sup>
- Early detection and intervention is critical to preventing serious harm and optimizing treatment outcomes
- Claims professionals have several options available to intervene when necessary



### Appropriate Use

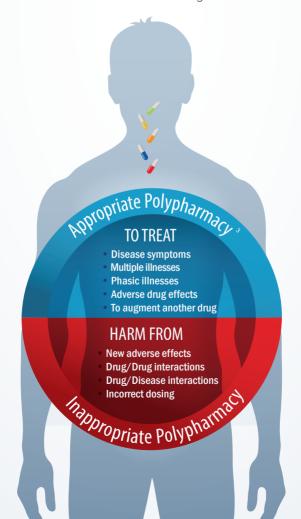
Prescribing multiple medications may be necessary and rational to gain adequate control of the following conditions — as long as prescribers and claims professionals are familiar with the full range of medications being used, prescribed or otherwise.

- Hypertension
- Diabetes
- Pain

- Anxiety
- Psychological conditions
- Seizure disorders

Polypharmacy may also be indicated when:

- A patient has multiple illnesses
- A clinician wishes to suppress or prevent symptoms such as seizure disorders, anxiety and psychiatric disorders
- There is a need to boost the effects of another drug



### **Red Flags**

The scenarios below are typical of what is seen in workers' compensation. Would you have noticed the red flags?

#### DRUG/DRUG INTERACTION

Too Much or Too Little?

Chris is a claims professional managing a recent workers' compensation claim involving a patient who had suffered a shoulder injury in the workplace, prohibiting him from working even a computer. The patient was given a prescription for dextroamphetamine, as well as Ambien®. The PBM alerted Chris about a potential polypharmacy issue between these two medications. What should Chris do?

**Recommendation:** He should contact the prescribing physician(s) immediately. In cases where a sedative (Ambien) and CNS stimulant (dextroamphetamine) are being used together, there's a strong chance of one drug being prescribed to offset the effects of another.

#### MUITIPLE PRESCRIBERS

More Doctors, More Confusion

When injured on the job, Travis received a prescription for duloxetine (Cymbalta®), prescribed by the workers' comp physician to handle his pain. In dealing with the pain and reduction in mobility, Travis began experiencing signs of depression. His family physician prescribed escitalopram (Lexapro®). Is this a drug duplication?

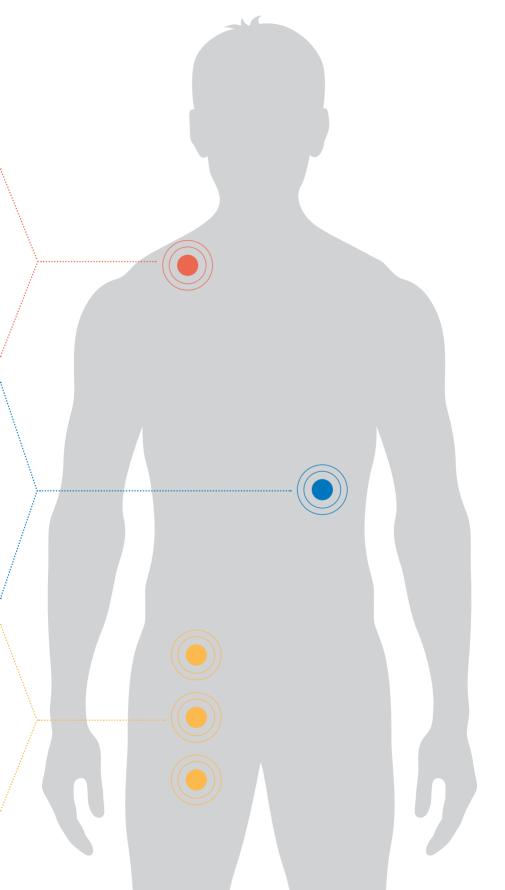
**Recommendation:** This could be a drug duplication. While Cymbalta is approved for use in pain management, it may also be effective for treating the underlying depression. Lexapro use is probably unnecessary. Claims managers should contact both prescribing physicians to get a sense of how they've intended the drugs to be used. In this case, use of both medications could result in a very serious interaction. It is wise to ensure the prescribers are aware of all medications being prescribed to their patient.

#### **DUPLICATION**

On Track or Overkill?

Melinda's family physician prescribed an oral NSAID for her hip pain. When she asked if she should continue the topical NSAID cream the workers' compensation physician had prescribed, her family physician said yes. Yet when the claim came in to the claims professional, both drugs were flagged and the claim was held up in review. Why?

**Recommendation:** The duplication in NSAID use could have caused serious harm to Melinda. Also, one form would have been sufficient. If Melinda's family physician felt she needed a more potent drug, he could have instructed her to stop using the cream and stick with the oral form of the drug.



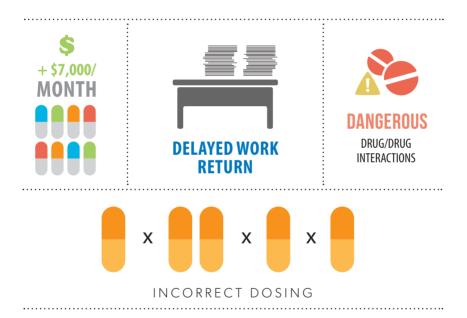
## Implications in Workers' Compensation

#### SAFFTY & COST

Polypharmacy can pose safety concerns to the patient that include drug-drug and drug-disease interactions. Taking more medications also puts the patient at risk for more adverse effects.

Polypharmacy also represents a significant financial concern for payers, not only for the costs of the initial polypharmacy, but also for the additional treatments to address resulting adverse effects.

If early detection and clinical intervention do not occur, polypharmacy can lead to increased complications for patients, and higher costs for payers.





### **CLINICAL INTERVENTION**

Clinical intervention is imperative.

Intervention can lead to:

- Simpler drug regimens Improved patient outcomes
- Increased patient safety Reduced costs

#### References

- 1. Scott IA, Hilmer SN, Reeve E, et al. Reducing inappropriate polypharmacy: the process of depre scribing. JAMA Intern Med. 2015;175(5):827-34.
- 2. Dovjak P. Tools in polypharmacy: current evidence from observational and controlled studies. Z Gerontol Geriat. 2012;45:468-472.
- $3.\ Werder\ SF,\ Preskorn\ SH.\ Managing\ Polypharmacy:\ Walking\ the\ fine\ line\ between\ help\ and\ harm.\ Current\ Psychiatry.\ 2003;2(2):24-26.$

#### Resources

Healthesystems. Polypharmacy: More Drugs, More Prescribers, More Risk. *RxInformer* journal. Fall 2013. https://rxinformer.healthesystems.com/article.php?id=49

Healthesystems. The Problem of Polypharmacy: When More Is Less. RxInformer journal. Spring 2013. https://rxinformer.healthesystems.com/article.php?id=69

Policy Impact: Prescription Painkiller Overdoses www.cdc.gov

Three ways to contact a Healthesystems pharmacist for more information:







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