

## Rational pharmacotherapy for older adults!

The problems resulting from inappropriate drug treatments have been the subject of extensive debate. Estimates suggest that less than half of all patients are committed to their treatment plan and administer their prescribed medicines correctly.

A quarter of all older adult patients are thought to suffer from adverse effects and a large proportion of all hospital admissions are due to problems caused by medicines. On average, Finns over the age of 75 living at home take eight medicines, while the figure for those in institutional care is more than ten.

Despite the ready availability of evidence, healthcare professionals continue to face these issues in their everyday practice. The question that must be asked is, why is knowledge failing to transform practice?

Some thirty years ago, the World Health Organisation (WHO) set its sights on rational pharmacotherapies. For rational pharmacotherapies to become a reality, the services provided by and resources available to stakeholders in the healthcare sector must be aligned. The goal is for patients to receive the correct medication at the right time, to have the knowledge and skills to use them appropriately and to derive benefit from them. The patient must remain at the centre of all healthcare provision at all times.

A further challenge is posed by the anticipated disruption to the continuity of care, as fewer resources will be available to meet growing need. No single healthcare profession will be able to meet this challenge on their own.

Healthcare policy places an emphasis on multiprofessional operating models in the pursuit of rational pharmacotherapies. It is therefore vitally important for everyone providing a client or patient-facing service within the health and social care sector to possess some pharmacological training.

Pharmacological expertise is also needed in the assessment of pharmacotherapies as part of the prescription and treatment review process. Multiprofessional approaches should be deployed to ensure that the whole is more than the sum of its parts.

Advances in IT bring new opportunities for monitoring effects and emphasising the central role of the patient.

The goal is to promote rational pharmacotherapies for the entire population. Due to demographic changes and the particular nature of older adult patients' pharmacological requirements, it will be necessary to attend to their treatments first. The established models can then be applied more widely to benefit the population as a whole.

In Finland, we are fortunate to benefit from the expertise of the highly skilled staff needed to make this goal a reality. I am thrilled to be able to say that Fimea has established a multiprofessional network comprising frontline healthcare practitioners to rationalise pharmacotherapies for older adults. It is only through changes to everyday practice and wide ranging cooperation that we will achieve our aim of rational pharmacotherapies for all.

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