

THE CRITERIA FOR ESCAPE

AN ONLINE EDUCATIONAL ESCAPE ROOM
ACTIVITY ENCOURAGING APPLICATION OF THE
AGS 2019 BEERS CRITERIA® TO PATIENT CASES

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OBJECTIVES

- Identify the primary purpose of the AGS Beers Criteria®
- Identify key principles guiding use of the AGS Beers Criteria®
- Apply the AGS Beers Criteria® to patient cases

AMERICAN GERIATRICS SOCIETY 2019 UPDATED AGS BEERS CRITERIA[®] FOR POTENTIALLY INAPPROPRIATE MEDICATION USE IN OLDER ADULTS

J AM GERIATR SOC 67: 674-694, 2019 DOI: 10.1111/JGS.15767

CLINICAL PRACTICE GUIDELINE FAQs

- **Who publishes these guidelines?**
 - The American Geriatrics Society (AGS)
- **What patient populations do these guidelines apply to?**
 - Adults \geq 65 years
 - All practice settings except hospice and palliative care

CLINICAL PRACTICE GUIDELINE FAQs

- **What type of information is included?**

- There are five primary tables that contain information of interest in this patient population:
 - 2019 AGS Beers Criteria® for Potentially Inappropriate Medication Use in Older Adults
 - 2019 AGS Beers Criteria® for Potentially Inappropriate Medication Use in Older Adults Due to Drug-Disease or Drug-Syndrome Interactions that May Exacerbate the Disease or Syndrome
 - 2019 AGS Beers Criteria® for Potentially Inappropriate Medications: Drugs To Be Used With Caution in Older Adults
 - 2019 AGS Beers Criteria® for Potentially Clinically Important Drug-Drug Interactions That Should be Avoided in Older Adults
 - 2019 AGS Beers Criteria® for Medications that Should be Avoided or Have Their Dosage Reduced with Varying Levels of Kidney Function in Older Adults.

HOW TO USE THE 2019 AGS BEERS CRITERIA®

A GUIDE FOR PATIENTS, CLINICIANS, HEALTH
SYSTEMS, AND PAYORS

A CLINICIAN EDUCATION TOOL

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What is the Purpose of the AGS Beers Criteria®?

- To identify potentially inappropriate medications that should be avoided in many older adults
- To reduce adverse drug events and drug related problems, and to improve medication selection and medication use in older adults
- Designed for use in any clinical setting; also used as an educational, quality, and research tool

The logo for the American Geriatrics Society (AGS), consisting of the letters "AGS" in a bold, white, sans-serif font.

Optimizing Use of the AGS Beers Criteria®: A Guide

- As part of the update of the AGS Beers Criteria®, AGS created a workgroup to encourage optimal use of the criteria by patients, clinicians, health systems, and payors
 - Included input from key stakeholders
- Workgroup developed:
 - 7 key principles to guide optimal use of the criteria
 - Guidance for how clinicians and others can apply these principles in everyday practice

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Seven Key Principles

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7 Key Principles

- There are 7 key principles to guide optimal use of the AGS Beers Criteria®
- But, the most important take-home message is this:
Use clinical common sense!
- The AGS Beers Criteria® are intended to support, not contradict, common sense and good clinical care

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Key Principle #1

Medications in the 2019 AGS Beers Criteria® are *potentially inappropriate, not definitely inappropriate.*

- The AGS Beers Criteria® comprise meds which have unfavorable balance of benefits and harms for many older adults
 - ▣ Particularly in light of available alternatives
- But, there are some older adults in which use of AGS Beers Criteria® meds can be appropriate
- So, meds in the criteria merit special scrutiny....but they should **not** be considered definitely inappropriate for all older adults

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Key Principle #2

Read the rationale and recommendations statements for each criterion. The caveats and guidance listed there are important.

- Medication appropriateness is not black or white
- Many medications are considered potentially inappropriate only in certain circumstances
- Understanding true meaning and purpose of each criterion is critical for proper interpretation

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Key Principle #3

Understand why medications are included in the 2019 AGS Beers Criteria[®], and adjust your approach to those medications accordingly.

- It is not enough to know that a medication is included in the criteria. Clinicians should know why it is there
 - ▣ This info is provided in the “rationale” statement of each criterion
- Reason why a medication is in criteria can help guide how stringent we should be in avoiding it
- Also, allows us to individualize decision-making for individuals based on their anticipated risk

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Key Principle #4

Optimal application of the 2019 AGS Beers Criteria[®] involves ... offering safer non-pharmacologic and pharmacologic therapies.

- AGS has developed a list of alternative therapies for some commonly-used AGS Beers Criteria medications (Coming Soon)
- Often the best alternatives involve non-pharmacologic strategies, including patient counseling and lifestyle changes

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Key Principle #5

The 2019 AGS Beers Criteria® should be a starting point for a comprehensive process of identifying and improving medication appropriateness and safety.

- The AGS Beers Criteria® capture only a small percentage of medication-related problems in older adults
- The criteria work best when used as a starting point to review and discuss a patient's entire medication regimen
 - ▣ This involves addressing a range of issues including (but not limited to) medication appropriateness, adherence, and adverse events

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Key Principle #6

Access to medications included in the 2019 AGS Beers Criteria® should not be excessively restricted by prior authorization and/or health plan coverage policies.

- Incentivizing judicious use of AGS Beers Criteria® medications through insurance design can be reasonable
- But, onerous restrictions can disrupt care and hinder access to medications for patients who need them
- Programs that restrict access should be carefully targeted and give clinicians efficient opportunities to justify use

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Key Principle #7

The 2019 AGS Beers Criteria® are not equally applicable to all countries.

- The criteria were created principally based on medications available in the United States
- Prior versions of the criteria have been adapted for several countries
- It is reasonable to use broad-based categories of the criteria to identify potentially inappropriate medications

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Application of Key Principles

For...

Patients and caregivers

Clinicians

Health systems and payors

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Application of Key Principles for Clinicians

- Think of the AGS Beers Criteria® as a warning light
- Whenever you think about prescribing or renewing an AGS Beers Criteria® medication, the “warning light” should make you stop and think:
 - Why is the patient taking the drug; is it truly needed?
 - Are there safer and/or more effective alternatives?
 - Does my patient have particular characteristics that increase or mitigate risk of this medication?
 - But, keep in mind that there are situations in which use of Beers medications is justified and appropriate

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Application of Key Principles for Clinicians

- Actively inquire about symptoms that could be adverse drug effects, and assess whether these could be related to medications
- Don't automatically defer to colleagues
 - Just because another clinician prescribed a Beers criteria medication doesn't mean it is safe and/or effective
 - Use the opportunity to discuss with colleagues whether that medication is right for the patient

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Application of Key Principles for Clinicians

- Don't let the AGS Beers® Criteria distract you from closely attending to other elements of prescribing that are not addressed by the criteria.
- These include
 - Other high-risk medications (e.g. anticoagulants, hypoglycemics)
 - Medication adherence
 - Unnecessary medication use
 - Underuse of medications
 - And more (!)

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AGS Beers Criteria® Resources

Criteria

- Updated 2019 AGS Beers Criteria®
- Using Wisely Editorial (2019)
- How-to-Use Article (2015)
- Alternative Medications List
- 2019 AGS Beers Criteria® Pocket Card
- 2019 AGS Beers Criteria® in iGeriatrics App

Available at:

GeriatricsCareOnline.org


Public Education Resources for Patients & Caregivers

- AGS Beers Criteria® Summary
- 10 Medications Older Adults Should Avoid
- Avoiding Overmedication and Harmful Drug Reactions
- What to Do and What to Ask Your Healthcare Provider if a Medication You Take is Listed in the AGS Beers Criteria®
- My Medication Diary - Printable Download

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To access all 2019 AGS Beers Criteria® Resources Visit

www.geriatricscareonline.org

-  Facebook.com/AmericanGeriatricsSociety
-  Twitter.com/AmerGeriatrics
-  linkedin.com/company/american-geriatrics-society

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Objectives

- Identify the primary purpose of the AGS Beers Criteria®
- Identify key principles guiding use of the AGS Beers Criteria®
- Apply the AGS Beers Criteria® to patient cases in an educational escape room activity with your peers.

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THE ESCAPE ROOM ACTIVITY LINK

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THE ESCAPE ROOM ACTIVITY DEBRIEF

REFERENCES

- How to Use the AGS 2019 Beers Criteria® A Guide for Patients Clinicians, Health Systems and Payors. A Clinician Education Tool. Teaching Slides. Accessed December 21, 2021. <https://geriatricscareonline.org/toc/how-to-use-the-ags-2019-beers-criteria/S004>
- By the 2019 American Geriatrics Society Beers Criteria® Update Expert Panel. American Geriatrics Society 2019 Updated AGS Beers Criteria® for Potentially Inappropriate Medication Use in Older Adults. *Journal of the American Geriatrics Society*. 2019; 67 (4): 674-694. doi:10.1111/jgs.15767