

Optimising a whole-person-centred approach to stopping medicines in older people with multimorbidity and polypharmacy: a realist review within the tailor medication syntheses

Geoff Wong, Kamal Mahtani, Amadea Turk, Joanne Reeve, Emma Wallace, Elizabeth Mitchell, Daniel Lasserson, Tom Walley, Edward Ranson, Tom Fahey, Richard Byng, Nia Roberts, Dee Mangin, Janet Krska

Link to protocol: https://www.crd.york.ac.uk/prospero/display_record.php?RecordID=104176

Many patients take several medicines a day for the long-term. For some, their medicines do them good, but for others, their medicines may be a burden or even be harmful. These patients may do better if long-term medicines are stopped. The Tailor Medication Synthesis project aims to provide clinicians and patients with the information they need to make individual decisions about which medicines provide benefit and which they could stop. Doctors and patients alike have described feeling anxious about knowing when and how to stop long term medicines. Uncertainty about the risks involved can prevent people from making decisions. Patients ask their doctor, 'what will happen if I stop this medicine?'. Until now, doctors may not have had access to the right information to be able to give a good answer.

To create the knowledge needed to help patients and doctors to stop medications safely we will use two methods to critically review and pull together what is already know from published literature. We will undertake a scoping review. Our team will look for all the published studies on stopping medicines, especially those involving people who have many medical conditions and who take many tablets every day. When we have collected all the studies, we will summarise what they tell us about when and how to stop medicines and what effect doing so has on patients. We hope that we will then know when it is safe to stop which medicines and how to do it.

At the same time we will also do a realist review. For some medicines, we may find there are no research studies to tell us what will happen if medicines are stopped. In that case, doctors and patient have to work together to make the best decisions they can, drawing on all the information available the research evidence, the patient's own knowledge about their priorities and daily life, and the doctor's professional wisdom. Doctors have asked for guidance on how best to do this. In order to answer this question, we will use an established research method called realist synthesis to pull together all the evidence, so that we can describe the principles of best practice and advise doctors and patients how to proceed. To do this work, we have assembled a team of people with expertise in prescribing and the use of medicines; academics with experience of the methods used in these sorts of reviews; and patients.