

Appendix 3 – The Improving Prescribing in the Elderly Tool (Naugler et al, 2000):

The following medications represent potentially inappropriate prescriptions in an elderly individual:

Beta-blocker and chronic obstructive airways disease

Beta-blocker and congestive heart failure

Calcium channel blocker (excluding amlodipine and felodipine) and congestive heart failure

Thiazide diuretic and gout

Long half-life benzodiazepine (chlordiazepoxide, clorazepate, diazepam, flurazepam, clonazepam, nitrazepam)

Tricyclic antidepressant and glaucoma

Tricyclic antidepressant and heart block

Tricyclic antidepressant with active metabolites (imipramine, doxepin, or amitriptyline)

Methylphenidate for depression

Nonsteroidal anti-inflammatory drugs* and peptic ulcer disease

Nonsteroidal anti-inflammatory drugs and hypertension

Long term use of nonsteroidal anti-inflammatory drugs for osteoarthritis

Anticholinergic drugs to treat side effects of antipsychotic medications

Long term diphenoxylate to treat diarrhea

* Consider acetylsalicylic acid as a nonsteroidal anti-inflammatory drug only if the dose is greater than 1300mg/day

From Naugler CT, Brymer C, Stolee P, and Arcese ZA (2000). *Can J Clin Pharmacol* 7(2): 103-107.