

Taking Aim at Easy Targets

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For the past few decades, there has been considerable concern regarding the number of prescription drugs taken by the elderly population in the U.S. The number of [drugs prescribed](#) to those over 65 years of age has grown considerably in the past 25-plus years:¹

- *Taking at least one drug* - Almost 90 percent (89.7 percent) of seniors took at least one prescription drug in the past 30 days as of study years 2007-2010. This is up from 73.6 percent in study years 1988-1994.
- *Taking three or more drugs* - The percentage of seniors taking three or more drugs in the past 30 days of the study period almost doubled, from 35.3 percent in 1988-1994 to 66.8 percent in 2007-2010.
- *Taking five or more drugs* - The percentage of seniors taking five or more drugs almost tripled from 1988-1994 to 2007-2010, increasing from 13.8 percent to 39.7 percent.

The same disturbing trend has been quietly affecting children (under 18 years of age) as well. The percentage taking at least one prescription drug (in the past 30 days during the years studied) grew more modestly, from 20.5 percent to 24.0 percent. But the increase in the percentage of children taking three or more drugs jumped up by more than 50 percent during the study period, from 2.4 percent to 3.8 percent.

Of even greater concern is the number of drugs given to children, particularly infants, in hospitals. [A study](#) in *JAMA Pediatrics* (formerly *Archives of Pediatric & Adolescent Medicine*) presents some sobering data:²

- "On the first day of hospitalization, the typical (median) exposure of an infant patient in a children's hospital was 4 distinct generic drugs and therapeutic agents, and this number dipped to 3 on hospital day 2 and then rose to 4 by hospital days 3 through 30."
- "For patients 1 year or older, in children's hospitals, the median level of exposure was 5 distinct drugs and therapeutic agents on day 1 and rose to 9 by day 30."

In addition to being exposed to multiple drugs from the first day, many of these children are also exposed to "off-label" drugs. These are drugs that prescribed for children that "have not been formally studied in this population and most are not labeled for use in children."

The authors of an [earlier study](#)³ published in the same journal looked at the experiences of patients in 31 pediatric hospitals. They noted that "at least 1 drug was used off-label in 297,592 (78.7%) of 355,409 patients discharged during the study. Off-label use accounted for \$270,275,849 (40.5%) of the total dollars spent on these medications."

The study concluded that "most patients hospitalized at tertiary care pediatric institutions receive at least 1 medication outside the terms of the Food and Drug Administration product license. Substantial

variation in the frequency of off-label use was observed across diagnostic categories and drug classes. Despite the frequent off-label use of drugs, using an administrative database, we cannot determine which of these treatments are unsafe or ineffective and which treatments result in substantial benefit to the patient."

Children and elderly are the most vulnerable patient populations. This is because they overwhelmingly rely on family members to make / help make their health care decisions. Generally speaking, they are less likely to be informed / skeptical about the drugs they are prescribed.

Children and elderly patients are growth sectors in the drug industry's quest for profit. They are a significant part of the drug industry annual revenue, which now exceeds a quarter of a trillion dollars for prescription drugs alone.

You usually can't be there when your patients take their children / parents to see a medical provider.

But you can [educate them](#) to ask questions about what drugs are being prescribed and why.⁴ Your best approach is to seek out medical professionals who have a similar (or at least conservative) philosophy regarding the necessity for drugs and are willing to co-manage your patients. These are the providers you will want to refer your patients to before polypharmacy becomes an issue.

References

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4. Petersen DM Jr. "Beginning 2012 With Some Brutal Honesty." *Dynamic Chiropractic*, Jan. 1, 2012.

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