

Top 30 Drugs to Avoid in the Elderly

| Drug Name | Drug Class | Disease Considerations | Concerns with Use | Severity | Alternatives |
|--|---|---|---|--------------------|--|
| <i>Brand (Generic)</i> | <i>Therapeutic Class</i> | <i>If the patient has a disease state or condition listed, consider the concern with use of the drug in the patient</i> | <i>Lists concerns/potential problems of use of the drug in the patient</i> | <i>Low or High</i> | <i>When applicable, an alternative therapy is listed and consider this in the patient</i> |
| Catapress (Clonidine) | Alpha 2 agonist | | CNS adverse effects and orthostatic hypotension | Low | |
| Darvocet (Propoxyphene) | Analgesic | | Offers small analgesic advantages over acetaminophen with the adverse effects of other narcotics | Low | Depending on severity of pain: Acetaminophen, Ibuprofen, Vicodin/Lortab, Percocet, etc. |
| Zyprexa (Olanzapine) | Antipsychotic | Obesity | Appetite stimulation may lead to weight gain | Low | |
| Estrogens | Estrogen | History of DVT or clots, HTN, smokers | Increased risk of cardiovascular events, clots, carcinogenic evidence (breast and endometrial) | Low | |
| 0 | | | | | |
| Cardura (Doxazosin) | Alpha Blocker | Stress Incontinence | Polyuria and worsening of incontinence. Cardura also has the potential to cause hypotension and dry mouth. | High | For BPH, Tamsulosin(Flomax). For HTN, beta-blocker, calcium-channel blocker, ACE inhibitor. |
| Minipress (Prazosin) | Alpha Blocker | Stress Incontinence | Polyuria and worsening of incontinence | High | |
| Hytrin (Terazosin) | Alpha Blocker | Stress Incontinence | Polyuria and worsening of incontinence | High | |
| Demerol (Meperidine) | Analgesic | | Not an effective oral analgesic at doses commonly used. Can cause confusion. | High | Dilaudid, Oxycodone, Oxycontin |
| Macrobid (Nitrofurantoin) | Antibiotic | | Can cause renal impairment | High | Chose alternative depending on bug sensitivity |
| Anticholinergics As a Class | | 1. Bladder Outflow Obstruction 2. Stress Incontinence 3. Cognitive Impairment 4. Chronic Constipation | 1. Decreased urinary flow causing urinary retention 2. Polyuria and worsening of incontinence 3. CNS altering effects 4. Exacerbation of constipation. Anticholinergic agents may produce enhanced anticholinergic effects in this population. | High | |
| Detrol (Tolterodine) | Anticholinergic | Bladder Outflow Obstruction | Potent anticholinergic effects including decreased urinary flow causing urinary retention | High | |
| Bentyl (Dicyclomine) | Anticholinergic/ Antimuscarinic | 1. Bladder Outflow Obstruction 2. Cognitive Impairment | 1. Urinary retention caused by decreased urinary flow. 2. CNS altering effects Efficacy is uncertain in this population. Avoid- especially in long-term use. | High | Avoid long-term use |
| Levsin (Hyoscyamine) | Anticholinergic/ Antimuscarinic | 1. Bladder Outflow Obstruction 2. Cognitive Impairment | 1. Urinary retention caused by decreased urinary flow. 2. CNS altering effects Efficacy is uncertain in this population. Avoid- especially in long-term use. | High | Avoid long-term use |
| Ditropan (Oxybutynin) Including Ditropan XL | Anticholinergic/ Urinary Antispasmodic | Bladder Flow Obstruction | Poorly tolerated, causes anticholinergic adverse effects including urinary retention caused by decreased urinary flow, sedation, weakness, questionable efficacy at doses that are tolerated by this population. | High | |
| Reglan (Metoclopramide) | Antiemetic | Parkinsons Disease | Antidopaminergic/cholinergic side effects | High | Zofran |
| Antidepressants As a Class | | Bladder Outflow Obstruction | Decreased urinary flow causing urinary retention | High | |
| Wellbutrin (Bupropion) | Antidepressant/ Smoking Cessation Aid | Seizure Disorder | Lowers seizure thresholds | High | For antidepressant use: Zoloft, Paxil, Lexapro For Smoking Cessation use: Other options are available |

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| Daily Use of Prozac (Fluoxetine) | SSRI Antidepressant | | Prozac has a long half-life which increases the risk of excessive CNS stimulation, sleep disturbances, and increased agitation. | High | Zoloft, Paxil, Lexapro |
| Benadryl (Diphenhydramine) | Antihistamine | | Avoid use of this drug in the elderly population. It can cause urinary retention, confusion, and heavy sedation. | High | In emergency allergic reactions, use the lowest dose possible. Use loratidine if an antihistamine is needed |
| Vistaril (Hydroxyzine) | Antihistamine | Bladder Outflow Obstruction | Antihistamines cause potent anticholinergic effects including decreased urinary flow causing urinary retention. | High | Non-anticholinergic antihistamines such as loratidine or fexofenadine are preferred when treating allergic reactions |
| Phenergan (Promethazine) | Antihistamine | Bladder Outflow Obstruction | Antihistamines cause potent anticholinergic effects including decreased urinary flow causing urinary retention. | High | Non-anticholinergic antihistamines such as loratidine or fexofenadine are preferred when treating allergic reactions. For nausea consider using Zofran. |
| Xanax (Alprazolam) at doses greater than 2mg/day | Short acting BNZ | 1. Syncope or Falls 2. Depression | This population has an increased sensitivity to benzodiazepines 1. Impaired psychomotor function and ataxia 2. Long term use of BNZ may produce or exacerbate depression | High | Avoid long-term use and doses greater than 2mg/day. |
| Ativan (Lorazepam) at doses greater than 3mg/day | Short acting BNZ | 1. Syncope or Falls 2. Depression | This population has an increased sensitivity to benzodiazepines 1. Impaired psychomotor function and ataxia 2. Long term use of BNZ may produce or exacerbate depression | High | Avoid long-term use and doses greater than 3mg/day. |
| Restoril (Temazepam) at doses greater than 15mg/day | Short acting BNZ | 1. Syncope or Falls 2. Depression | This population has an increased sensitivity to benzodiazepines 1. Impaired psychomotor function and ataxia 2. Long term use of BNZ may produce or exacerbate depression | High | Avoid long-term use AND doses greater than 15mg/day. |
| Valium (Diazepam) | Long-acting BNZ | 1. Stress incontinence 2. COPD | The half-life in this population is longer and can last several days causing prolonged sedation. This can increase the risk for falls. 1. Polyuria and worsening of incontinence. 2. May induce and/or exacerbate respiratory depression Prolonged half-life (several days) causing prolonged sedation and increased risk of falls and fractures | High | Xanax, Ativan, Restoril, or other short or intermediate acting BNZ. |
| Soma (Carisoprodol) | Muscle relaxant | 1. Bladder Outflow Obstruction 2. Cognitive Impairment | Poorly tolerated, causes anticholinergic adverse effects including decreased urinary flow causing urinary retention, CNS altering effects, sedation, and weakness. Questionable efficacy at doses that are tolerated by this population | High | |
| Flexeril (Cyclobenzaprine) | Muscle relaxant | 1. Bladder Outflow Obstruction 2. Cognitive Impairment | Poorly tolerated, causes anticholinergic adverse effects including decreased urinary flow causing urinary retention, CNS altering effects, sedation, and weakness. Questionable efficacy at doses that are tolerated by this population | High | |
| Skelaxin (Metaxalone) | Muscle relaxant | 1. Bladder Outflow Obstruction 2. Cognitive Impairment | Poorly tolerated, causes anticholinergic adverse effects including decreased urinary flow causing urinary retention, CNS altering effects, sedation, and weakness. Questionable efficacy at doses that are tolerated by this population | High | |

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| Robaxin (Methocarbamol) | Muscle relaxant | 1. Bladder Outflow Obstruction 2. Cognitive Impairment | Poorly tolerated, causes anticholinergic adverse effects including decreased urinary flow causing urinary retention, CNS altering effects, sedation, and weakness. Questionable efficacy at doses that are tolerated by this population | High | |
| Pseudoephedrine | Decongestant | HTN | Produces an elevation in blood pressure secondary to sympathomimetic activity | High | Nasal saline if nasal congestion in present |
| Indocin (Indomethacin) | NSAID | | Produces the most CNS adverse effects of all NSAIDs and should be avoided | High | Avoid long-term use |
| Elavil (Amitriptyline) | TCA | 1. Stress Incontinence 2. Arrhythmias 3. Syncope or Falls 4. Chronic Constipation | Amitriptyline has strong anticholinergic effects and sedation properties. Avoid use in this population. 1. Polyuria and worsening of incontinence 2. Proarrhythmic effects and QT interval changes 3. Impaired psychomotor function and ataxia | High | For antidepressant use: Zoloft, Paxil, Lexapro For treatment of neuropathic pain: Neurontin |