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Concomitant use of anticholinergics with acetylcholinesterase inhibitors in Medicaid recipients with dementia and residing in nursing homes

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Abstract

Objectives: To evaluate the extent of concomitant use of anticholinergic and cholinesterase inhibitor medications in Medicaid recipients with dementia residing in nursing homes.

Design: Cross-sectional survey of medical claims data.

Setting: Indiana Medicaid claims for 2004.

Participants: Indiana Medicaid recipients continuously eligible for Medicaid in 2004 aged 65 and older with dementia who were residing in nursing homes and taking cholinesterase inhibitors.

Measurements: Rates of concomitant anticholinergic and cholinesterase inhibitor use, number of days residents experienced concomitant use, and concomitant use according to therapeutic class and level of anticholinergic activity were determined.

Results: A large proportion (46.7%) of 3,251 Medicaid beneficiaries living in nursing homes and taking cholinesterase inhibitors received anticholinergics concomitantly. Anticholinergics designated as Level 3, or having markedly anticholinergic adverse effects, accounted for most of the concomitant anticholinergic use. More than half (58.1%) of the individuals with concomitant anticholinergic use had 100 or more days of such use.

Conclusion: Nearly half of Indiana Medicaid recipients with dementia residing in nursing homes who were taking cholinesterase inhibitors in 2004 were using anticholinergics concomitantly. Patterns of concomitant use in the population examined may assist practitioners in reviewing their prescribing decisions for this vulnerable population.

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