2017-01-13, 6:57 AM MedStopper



## MedStopper is a deprescribing resource for healthcare professionals and their patients.

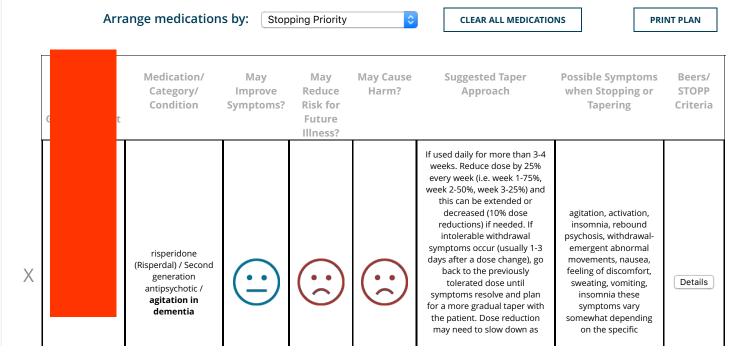
1	Frail elderly? 🗸			
2	Generic or Brand Name:			
	ASA			
3	Select Condition Treated	*		
	Generic Name	Brand Name	<b>Condition Treated</b>	Add to
				MedStopper
	5-aminosalicylic acid	Pentasa, Rowasa, Asacol	Select Condition 😊	<u>ADD</u>
	ASA	Aspirin	other	<u>ADD</u>
	oxprenolol	Trasacor	Select Condition	<u>ADD</u>
	rasagiline	Azilect	Select Condition	ADD

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## **MedStopper Plan**

rasagiline



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					one gets to smaller doses (i.e. 25% of the original dose). Overall, the rate of discontinuation needs to be controlled by the person taking the medication.	antipsychotic	
X	citalopram (Celexa) / SSRI / <b>depression</b>		(5)	(5)	If used daily for more than 3-4 weeks. Reduce dose by 25% every week (i.e. week 1-75%, week 2-50%, week 3-25%) and this can be extended or decreased (10% dose reductions) if needed. If intolerable withdrawal symptoms occur (usually 1-3 days after a dose change), go back to the previously tolerated dose until symptoms resolve and plan for a more gradual taper with the patient. Dose reduction may need to slow down as one gets to smaller doses (i.e. 25% of the original dose). Overall, the rate of discontinuation needs to be controlled by the person taking the medication.	nausea, diarrhea, abdominal pain, sweating, headache, dizziness, cold and flu-like symptoms, anxiety, irritability, trouble sleeping, unusual sensory experiences (e.g. electric shock-like feelings, visual after images), sound and light sensitivity, muscle aches and pains, chills, confusion, pounding heart (palpitations), unusual movements, mood changes, agitation, distress, restlessness, rarely suicidal ideation	Details
X	oxazepam (Serax) / Benzodiazepine / insomnia		$\odot$		If used daily for more than 3-4 weeks. Reduce dose by 25% every week (i.e. week 1-75%, week 2-50%, week 3-25%) and this can be extended or decreased (10% dose reductions) if needed. If intolerable withdrawal symptoms occur (usually 1-3 days after a dose change), go back to the previously tolerated dose until symptoms resolve and plan for a more gradual taper with the patient. Dose reduction may need to slow down as one gets to smaller doses (i.e. 25% of the original dose). Overall, the rate of discontinuation needs to be controlled by the person taking the medication.	rebound insomnia, tremor, anxiety, as well as more serious, rare manifestations including hallucinations, seizures, and delirium	Details
X	galantamine (Nivalin, Razadyne, Razadyne ER, Reminyl, Lycoremine) / Cholinesterase inhibitor / Alzheimer's		$\odot$	(:)	Tapering not required		None
X	allopurinol (Zyloprim) / Xanthine oxidase inhibitor / <b>gout</b>	(:)	(:)	(:)	Tapering not required		None
X	calcium (multiple brands) / Calcium / osteoporosis (with or without previous fracture)		(1:)	():	Tapering not required		None
X	naproxen (Aleve , Naprosyn , Anaprox)	_	_	_	Tapering not required		

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	/ NSAID / <b>general</b> <b>pain/osteoarthritis</b>	(:)	(3)	(5)			Details
X	felodipine (Plendil) / Calcium antagonist dihydropyridine / blood pressure	(3)	CALC / NNT	(5)	If used daily for more than 3-4 weeks. Reduce dose by 50% every 1 to 2 weeks. Once at 25% of the original dose and no withdrawal symptoms have been seen, stop the drug. If any withdrawal symptoms occur, go back to approximately 75% of the previously tolerated dose.	chest pain, pounding heart, heart rate, blood pressure (re- measure for up to 6 months), anxiety, tremor	Details
X	hydrochlorothiazide (Microzide) / Thiazide / <b>blood</b> <b>pressure</b>	(:)	CALC / NNI	$\odot$	If used daily for more than 3-4 weeks. Reduce dose by 50% every 1 to 2 weeks. Once at 25% of the original dose and no withdrawal symptoms have been seen, stop the drug. If any withdrawal symptoms occur, go back to approximately 75% of the previously tolerated dose.	chest pain, pounding heart, heart rate, blood pressure (re- measure for up to 6 months), anxiety, tremor	Details
X	metformin (Glucophage) / Metformin / <b>type 2</b> <b>diabetes</b>	(3)	CALC / NNI	(:)	Tapering not required	symptoms of increased thirst/increased urination, re-measure A1c in 3 months, measure blood glucose only if high glucose symptoms occur/return	None
X	atorvastatin (Lipitor) / Statin / reduce CVD risk (no history of heart attack or stroke)	(:)	CALC / NNI		Tapering not required		None
Χ	alendronate (Fosamax) / Bisphosphonate / osteoporosis (with or without previous fracture)		NNI NNI		Tapering not required		None
Χ	ASA (Aspirin) / ASA / other	?	?	();	Tapering not required		Details

PRINT PLAN

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