

ABSTRACT NO: *ICCPR-SPS-052***Pharmacist-Led Medication Reviews and Deprescribing: Strategies to Tackle Polypharmacy in Older Adults**Daisy Priya. P\*<sup>1</sup>, M. Dheenadhayalan<sup>2</sup>\*<sup>1</sup>Pharm. D Intern, Department of Pharmacy Practice, School of Pharmaceutical Sciences, Vels Institute of Science, Technology and Advanced Studies (VISTAS)<sup>2</sup>Assistant Professor, Department of Pharmacy Practice, School of Pharmaceutical Sciences, Vels Institute of Science, Technology and Advanced Studies (VISTAS)

Email: 20408102@velsuniv.ac.in

**Abstract**

Polypharmacy remains a major problem among older adults, and has become a global risk factor for geriatric patients. Polypharmacy refers to the use of five or more medications at the same time, and although it may be necessary in the elderly population due to multiple comorbidities and age related pathological changes, inappropriate polypharmacy can result in an increased risk of adverse effects, drug interactions and medication non-adherence. Especially in geriatric patients, it can lead to cognitive decline, hospitalizations, and increased healthcare expenditures. Pharmacist-led interventions such as medication reviews and deprescribing are very useful in detecting various drug related problems that may occur due to inappropriate polypharmacy. It also reduces the possible medication burden. The aim of this review is to provide a current update on the benefits, and barriers associated with pharmacist-led medication reviews and deprescribing, and to highlight the clinical impact of such strategies in geriatric patients. A comprehensive literature search was conducted across specific databases such as PubMed, Science Direct, and Google Scholar for studies published in the last seven years, from 2018 to 2025. Pharmacist led medication reviews and deprescribing has shown to significantly improve geriatric health by resolving drug related issues and reducing patient exposure to unnecessary medications. Furthermore, deprescribing not only minimizes harm but also allows for shared decision making between patients, physicians and clinical pharmacists. Implementation of deprescribing could be limited due to different barriers like prescriber resistance, and lack of particular guidelines, but the growing evidence suggests this intervention to be promising.

**Keywords:** polypharmacy, geriatric, pharmacist-led medication review, deprescribing