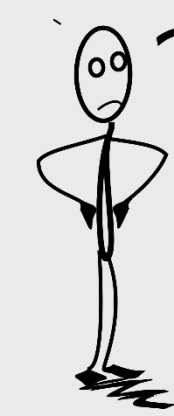


Deprescribing - but how?



Development of a **Deprescribing Manual** for the COFRAIL-Study

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Background

Frailty

- Increased risk of falls, delirium, hospitalizations

Polypharmacy

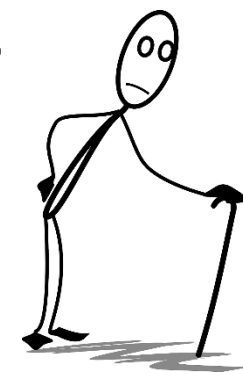
- Increased risk of adverse drug reactions (ADRs)

Deprescribing

- Systematic reduction of medication after patient-specific risk-benefit assessment

Purpose

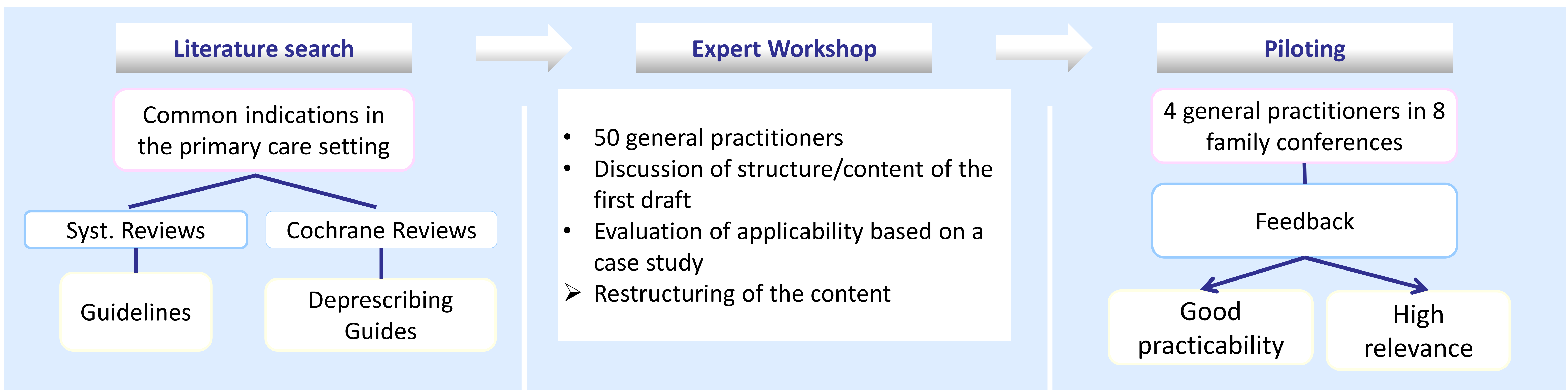
- Development of a deprescribing manual



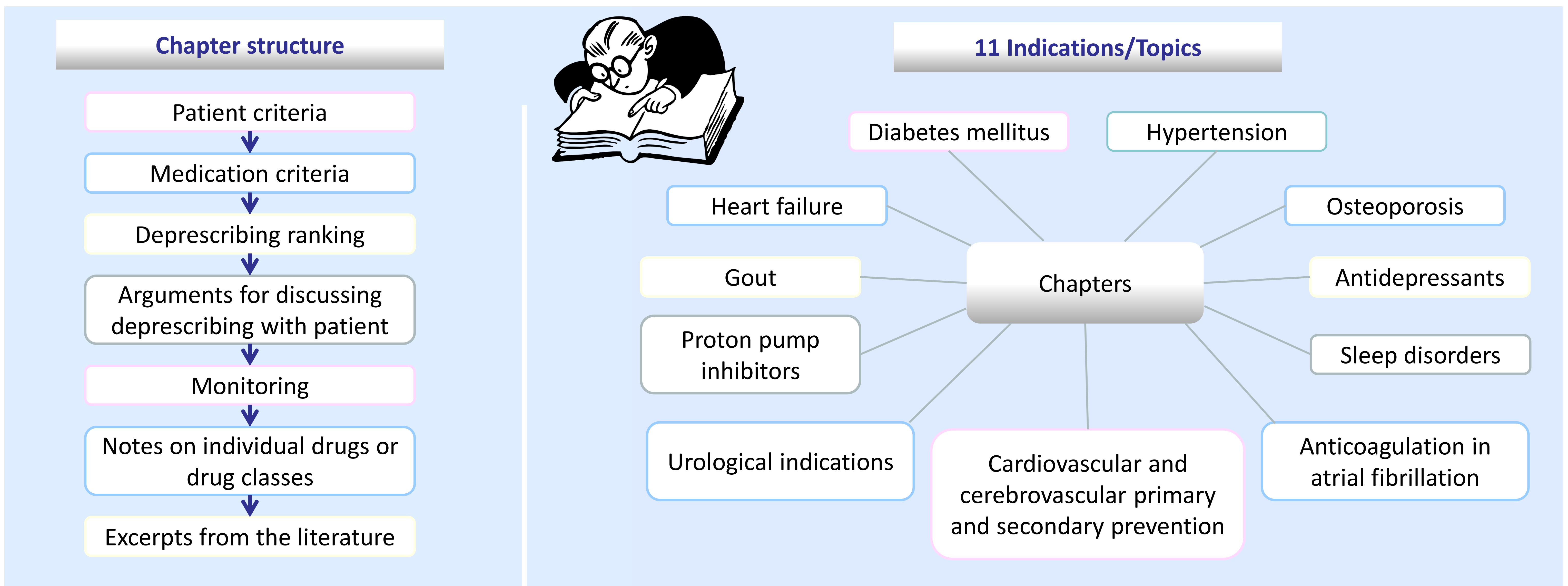
COFRAIL-Study

Study design	Cluster randomized controlled trial
Population	136 general practitioners and 621 frail geriatric patients
Intervention	Joint prioritization of treatment by physician, patient and relatives in 3 family conferences and deprescribing of medication with the help of the deprescribing manual
Data collection	Baseline (t ₀), after 6 months (t ₁) and after 12 months (t ₂)
Clinical endpoints	Primary: hospitalization rate Secondary: medication quality, quality of life, cognitive impairment, etc.

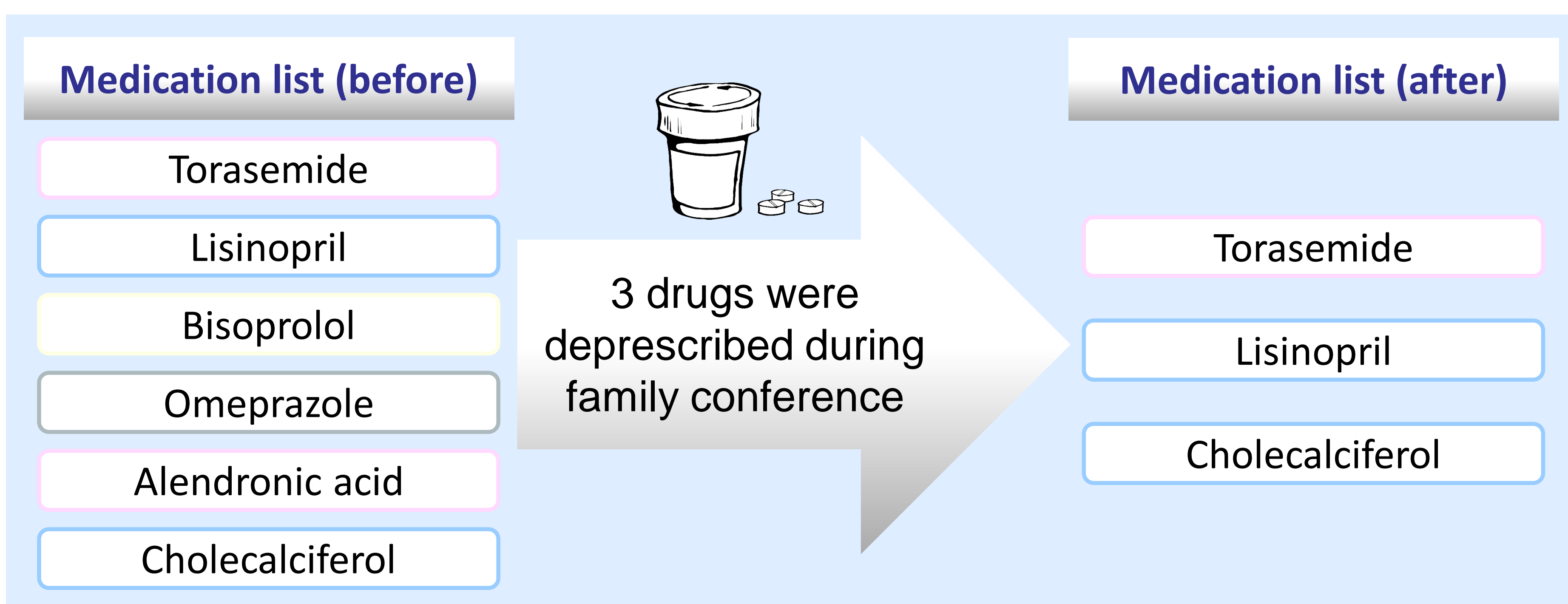
Methods



Results



Case from the COFRAIL-Study



Discussion

- The manual provides information for physicians to enable the selection of medications to be deprescribed in elderly and frail patients.
- At the same time, the structured information supports the joint decision-making within the family conference.

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