Handout: Medicine checks

What people with LTCs should know about their medicines

1. Name of medicine
   Remember, there are two names:
   - Brand name – created by the pharmaceutical company that made the medicine e.g. Voltaren.
   - Generic name – the active ingredient in the medicine e.g. Diclofenac.

2. What is the medicine used for and how does it work?
   Some medicines are used for lots of different reasons e.g. tricyclic antidepressants can be used for nerve pain, depression and sleep.

3. When, how often, dosage, how do I take this medicine and for how long?
   Some medicines work in the body all day, so for example they only need to be taken once a day. Other medicines such as antibiotics, work for a shorter time, so people need to take the medicine two or three times a day.
   Antibiotics, are usually only taken for a short time. Other medicines need to be taken long term – for months, years or sometimes for life.
   If a person is taking their medicine regularly that means they are taking it as instructed on the medicine label.
   Sometimes a person is prescribed medicines PRN. PRN is Latin for ‘pro re nata’ meaning ‘as needed’ which is usually about three times a week not every day.
   Other medicines can’t be stopped suddenly and the person needs to talk to their GP or pharmacist about how the person needs to gradually reduce and then stop the medicine.

4. Does this medicine cause problems (interact) with other medicines I am already taking?
   Some medicines can affect how other medicines work. This is called an interaction. Interactions can also be caused by medicines you can buy at the supermarket or pharmacy, and also herbal supplements and rongoā. So, you need to ask the person what other medicines they are taking.

5. Is there anything I shouldn’t eat or drink with this medicine?
   Some foods, alcohol and illegal drugs can also cause interactions. For example, you may not be able to eat certain foods or drink alcohol with some medicines.

6. What possible side effects can I expect and what are serious side effects I need to tell my doctor/pharmacist about?
   All medicines have side effects. Some side effects are serious and need to be immediately reported to the GP/pharmacist in case the medicine needs to be adjusted or stopped.
   Health professionals need to tell people with LTCs about:
   - common side effects, how soon they will start, how long they could last and how to deal with them, including if you need any tests.
   - serious side effects (e.g. breathing problems) and when and who you need to call to get help.
7. What tests or monitoring will I need to make sure the medicines are working?

To make sure the medicine is working and the dose is right, the person might need regular blood tests or their blood pressure checked regularly. For example, a person’s HbA1c (blood sugar) is tested every three months.

People need to know what tests they will need and how often.

(Adapted from www.healthnavigator.org.nz/medicines/m/medicines-questions-to-ask/)

There is excellent information about lots of different medications on the Health Navigator website. Show this website to your people with LTCs and their whānau/families.

Process for doing a medicine check

As a health coach you are able to collect information about what the person knows about their medicines. A doctor or nurse might ask you to do this if they are concerned someone doesn’t know about their medicines. Be really clear with the person that you are collecting this information so you can give it to their doctor or nurse in case they need to follow up with the person and go through their medicines. You are not able to give the person any advice about their medicines because you are not qualified. However, you can write down the person’s questions and comments.

1. Start by asking the person to bring all their medicines with them when they come to their appointment with you. If you are meeting the person at home, this will make checking their medicines easier.

2. Before you meet the person, print off a list of their medicines from their records.

3. Find out what the person already knows about their medicines e.g. “Tell me which medicine you know the most about” or “Tell me which medicine you know the least about.”

   Ask the person which medicine they want to start talking about – it might be the one they know the most about or the one they know the least about. And always check with the person if they forget to take their medicines. Say “Most people forget to take their medicines from time to time, how often do you forget?”

4. Go through the questions and fill in the medicine check form.

5. Write down comments or questions the person has e.g. doesn’t understand their medicine labels.

6. Write down details of any other medicines the person is taking e.g. vitamins, supplements, rongoā and any other medicines they buy from their pharmacy or supermarket.

7. At the end, tell the person that you are going to give the form to their doctor or nurse to see if the doctor or nurse wants to follow up with the person.

8. Make sure you follow up with the person’s doctor or nurse and you store the completed forms with the person’s patient records.
Scenario

Lenny is a 29-year-old Māori/Samoan man with gout, high blood pressure and high cholesterol. Lenny has a job as a Team Leader of a group of industrial abseilers. Lenny really likes his job and understands that he needs to keep taking his medicines (especially his gout medicines) so he can keep working. Lenny sometimes forgets his other medicines. Here is a record of Lenny’s medicine check.
## Lenny’s medicine check form

<table>
<thead>
<tr>
<th>Medicine Name</th>
<th>Used for &amp; how it works</th>
<th>When, how &amp; how long I take medicine, dosage</th>
<th>Interactions with other medicines, food, drink</th>
<th>Side effects</th>
<th>Serious side effects</th>
<th>Tests I might need &amp; how often</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medicine 1</strong></td>
<td>Brand: Colgout Generic – Colchicine</td>
<td>Pain in my joint where I get gout attacks</td>
<td>Once a day in the morning for another 2 months. Never go over the dose.</td>
<td>Don’t know</td>
<td>See serious side effects</td>
<td>Stomach pains, diarrhoea, feeling sick, burning feeling in throat.</td>
</tr>
<tr>
<td><strong>Medicine 2</strong></td>
<td>Brand – Apo-Allopurinol Generic - Allopurinol</td>
<td>Protects my kidneys and joints by bringing uric acid down.</td>
<td>Once a day in the morning. 450mg for rest of my life.</td>
<td>Don’t know</td>
<td>Can cause gout attacks.</td>
<td>Skin rash when you start – didn’t happen to me.</td>
</tr>
<tr>
<td><strong>Medicine 3</strong></td>
<td>Brand – Apo-Propranolol Generic - Propranolol</td>
<td>Protects my heart and kidneys by bringing my blood pressure down.</td>
<td>Once a day in the morning with water. Do not crush or chew.</td>
<td>Not sure</td>
<td>Tiredness, headaches, dizziness.</td>
<td>Problems with breathing, wheezing, chest tightness, swelling of ankles or feet.</td>
</tr>
<tr>
<td><strong>Medicine 4</strong></td>
<td>Brand: Lorstat Generic: Atorvastatin</td>
<td>Yes. Protects my heart by bringing my cholesterol down.</td>
<td>20mg each day in the morning long-term.</td>
<td>Not sure</td>
<td>Bowel and tummy problems but they went away..</td>
<td>Dark pee, yellow eyes or skin, sharp pain in puku, rash.</td>
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<td><strong>Medicine 5</strong></td>
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<td><strong>Medicine 6</strong></td>
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**Comments and questions**

See comments about interactions and side effects. Lenny never forgets his Allopurinol or Colgout but has forgotten his Lorstat and Propranolol a couple of times. So he now tries to take all his medicines together in the morning.
**Medicine check form**

Name ........................................ Date........................ Place..........................

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</table>
This medicine may make you sleepy and make it dangerous to drive or operate machinery. Limit alcohol intake.

May cause sleepiness – limit alcohol

60 TOPIRAMATE TABLETS 25MG (TOP)

Take TWO tablets at night. Swallow whole. Do not crush or chew. Do not stop taking without consulting your doctor.

Mr Kevin Brown
6539109/0 25 April 2019 Dr G Jones

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