Qeios

Peer Review

Review of: "The Process of Polypharmacy Management in Older Adults: A Grounded Theory"

Robyn Gillespie[1]

1. University of Wollongong, Australia

I always love work that focuses on listening to the older adult patient- they are often the silent voice in the discussion about polypharmacy management. Thanks for choosing to make their views known.

Title suggest you slightly alter this to be ‘The process of polypharmacy management by older adults- a grounded theory.

Introduction- from a patient perspective ‘appropriate polypharmacy’ needs to consider more than clinical need or evidence. It should also take into account treatment burden. Your introduction would be strengthened if you referred to the work on treatment burden carried out by Janet Krska et al. Treatment burden directly impacts quality of life beyond considerations about adherence. Reference to work considering a person centred or patient perspective earlier in the introduction would help to orient the read to the main focus of this research- the patient.

It would be good to see a clear definition of medication management in the introduction, rather than a reference to one qual study, as this is a key concept in this paper.

The claim that most studies exploring medication management rely on quantitative methods overlooks the contribution of some great qualitative studies. For example Ian Maidment et al’s work in the MEMORABLE study. I suggest you read this if you haven't already.

Aim- please define who you are including as an older adult.

Methods- more information is required to describe how patients were recruited for the study.

I do like that you reviewed your analysis with some of the participants- what was the outcome of this?

Results- the process described in 4.6 belongs in the discussion.

doi.org/10.32388/URTLHQ

Discussion-

A good discussion of the results however I would have liked to see you engage with more of the literature in this space. That would have added a lot more depth to the points you have made.

For example, the discussion would be strengthened by reference to the growing body of literature coming out of the UK on person centred medicines optimisation for older people with polypharmacy- See the work by Joanne Reeve and others. read Turk et al 2022 Optimising a person-centred approach to stopping medicines in older people with multimorbidity and polypharmacy using the DExTruS framework: a realist review

You have made a statement about the central role of health literacy however you have not defined this in the intro, you did not measure health literacy or present any qualitative results in the context of discerning the use of health literacy skills to manage medications. Please revisit this claim.

Please revisit the claim that there are no current validated measurement tools- suggest again that you read Janet Krska's work 'Living with Medicines Questionnaire'.

Limitations- Poor medication management of polypharmacy is a major contributor to hospitalisation in older age. Because of this fact, the medication management experiences of hospitalised patients may not represent those of the general population of older adults who are managing their medications in their own home.

Hoping that you study does make a difference when medications are being prescribed or deprescribed for older adults.

Declarations

Potential competing interests: No potential competing interests to declare.