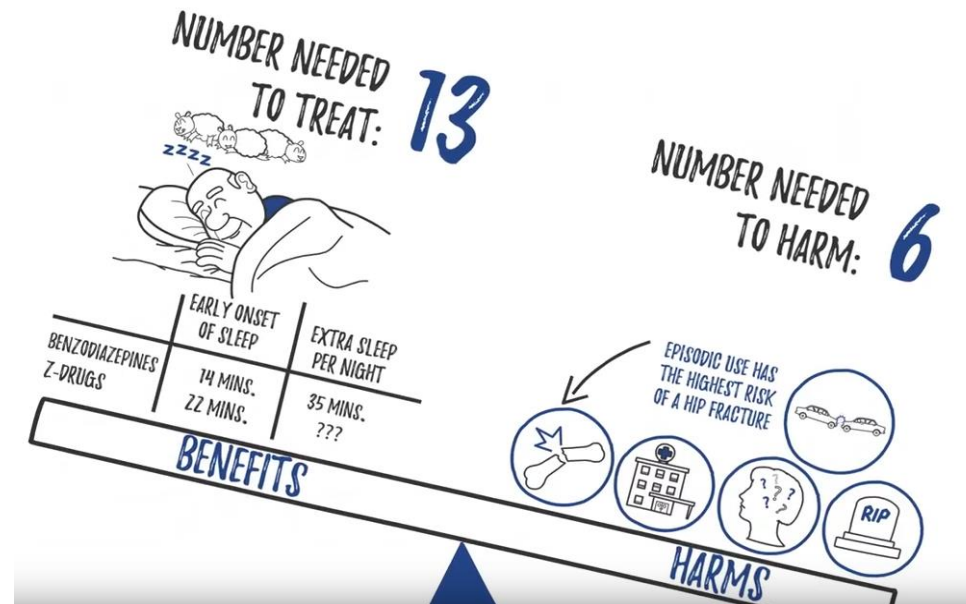UCLouvain

Barriers and enablers for benzodiazepine receptor agonists deprescribing in Belgian nursing homes: a qualitative study

Perrine Evrard, Amber Damiaens, Anne Spinewine

Louvain Drug Research Institute

Benzodiazepines receptor agonists (BZRA) use in older people

NUMBER NEEDED TO TREAT: 13

zzzz

NUMBER NEEDED TO HARM: 6

BENZODIAZEPINES Z-DRUGS

	EARLY ONSET OF SLEEP	EXTRA SLEEP PER NIGHT
	14 MINS. 22 MINS.	35 MINS. ???

BENEFITS

EPISODIC USE HAS THE HIGHEST RISK OF A HIP FRACTURE

RIP

HARMS

➡ Not recommended for more than a **4 weeks –** period in most cases

Canadian Deprescribing Network

Use in Belgian nursing homes

- 52,4 % of NHRs

- Potentially inappropriate prescriptions:
  - Between **21,1** to **98,3%** of BZRA

➡
- Potential overprescribing
- Room for deprescribing

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BZRA deprescribing

Deprescribing: Discontinuing medications which are no longer needed or which may put the patient at risk, under the supervision of a Healthcare Professional, with the goals of managing polypharmacy and improving outcomes. (Reeve, 2017, Eur J Clin Pharmacol)

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Tapering-off program

Be sure to talk to your doctor, nurse or pharmacist before you try reducing your dose or stopping your medication.

WEEKS	TAPERING SCHEDULE							✓
	MO	TU	WE	TH	FR	SA	SU	
1 and 2								
3 and 4								
5 and 6								
7 and 8								
9 and 10								
11 and 12								
13 and 14								
15 and 16	✗		✗	✗		✗		
17 and 18	✗	✗	✗	✗	✗	✗	✗	

EXPLANATIONS

● Full dose ◗ Half dose ◔ Quarter of a dose ✗ No dose

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BZRA deprescribing

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Barriers and enablers of BZRA deprescribing in older adults : A systematic review

- 23 included studies

- Main results: Perceived barriers and enablers depend on stakeholders
  - Importance to evaluate barriers and enablers in the specific context

- 4 studies in Belgian NH.
  - Evrard, JAGS, 2020 ; Bourgeois, Eur Geriatr Med, 2014 ; Anthierens, Journal of clinical nursing, 2009 ; Bourgeois, EJCP, 2014
  - 1 qualitative, 3 quantitative
  - No qualitative data on residents' or GPs' points of view
  - No study with all stakeholders involved
  - No qualitative study based on a psychological theory

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Objectives

➡️ To evaluate the point of view on BZRA use and deprescribing in nursing homes from different perspectives :

- General Practitionners'
- Residents'
- Relatives'
- Health Care Providers (HCPs) involved in nursing homes:
  - -Nurses
  - -Pharmacists
  - -…

➡️ Inform the design of an intervention specifically targeting barriers and enablers of BZRA deprescribing in nursing homes

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Methods : Study design

- Interviews in minimum 5 NHs (Purposive sampling)

General Practitioners :
Face-to-face interviews
- 1 with the coordinating physician
- 1 with another GP
12 GPs currently interviewed

Health Care Providers :
Focus group interview
5 to 8 participants
Minimum **2 nurses** (one chief nurse) and a **pharmacist**
5 FGs performed with various profiles

Residents and relatives :
Focus group interview
4 to 8 participants

5 FGs with 21 residents and 5 relatives

These interviews will be **theoretically informed** via the use of the **Theoretical Domains Framework (TDF)**
Analysis : Deductive coding into TDF domains and selection of most relevant TDF domains

Inductive coding

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Methods: Analysis

Framework for analysis : Theoretical Domains Framework – TDF

- Developped for the identification of barriers and enablers of a specific behavior
- Regroup 33 theories containing 128 constructs
- Distinction in 12 separated domains (TDF v2 : 14 domains)
- Each domain : possible explanation for health-related behavior change

TDF-v2 domains

Knowledge	Intention
Skills	Goals
Social, professional role and identity	Memory, Attention and Decision processes
Beliefs about capabilities	Environmental context and resources
Optimism	Social influences
Beliefs about consequences	Emotion
Reinforcement	Behavioural Regulation

Michie S, Qual Saf Health Care, 2005 ; Cane J, Implementation Science, 2012 ; Atkins L, Implementation Science, 2017

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Results : Most relevant domains

TDF domains	Stakeholders	
Knowledge		HCP
Skills	GP	HCP
Beliefs about capabilities	GP	HCP
Beliefs about consequences		HCP
Goals	GP	HCP
Memory, attention and decision process	GP	HCP
Environmental context and resources	GP	HCP
Social influences	GP	HCP

Nursing home residents and relatives
Knowledge on medications taken
Communication with NH staff and GPs
Perceived efficacy and necessity of BZRA
Influence of the environment
Considerations regarding deprescribing

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Results : Most relevant domains

TDF domains	Stakeholders	
Knowledge		HCP
Skills	GP	HCP
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Results: Environment

Barrier
- Strict time schedule in Nursing homes

GP HCP
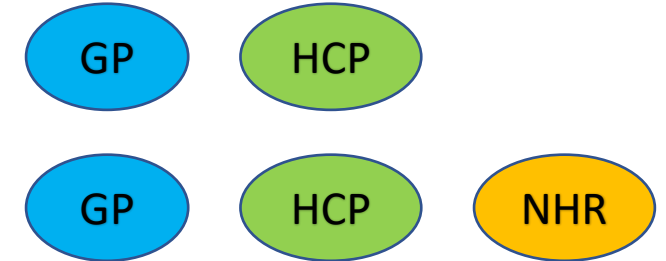
Barrier
- Community noises

GP HCP NHR

"On ne sait pas dormir au calme ici au home. Il y a des gens qui passent, qui crient les nuits… Qui sont perdus mais on n'en peut rien nous. » NHR

Barrier
- Unfavorable environment for sleep (hard bed, lack of air, room temperature, lights)

HCP NHR

Barrier
- Use of BZRA to keep a smooth NH environment

HCP

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Results: Environment

Barrier • Lack of pharmacological alternatives

GP HCP

Enabler • Need for an alternative during the process

GP NHR

Barrier • Difficulties to implement non-pharmacological alternatives (staff availabilty, time constraints, acceptability of NHRs)

GP HCP

« Tu te retrouves la nuit, là avec 80 résidents. Tu vas rester avec quel résident ? Tu es seul garde de nuit, tu vas t'investir à 1000% chez qui ? Tu vas laisser tomber qui, tu vas t'occuper de qui ? Il faut voir le côté pratique » Nurse

Barrier • Lack of psychologist access

GP HCP

Enabler • Interesting daytime activities

GP HCP NHR

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Results: Environment

Enabler
- Multidisciplinary work, medication review

GP   HCP

> *"Ce qui serait génial ce serait de pouvoir … Comme on fait dans les hôpitaux hein, faire un tour de salle ou une espèce de réunion multidisciplinaire une fois tous les deux mois. On devrait pouvoir faire ça. »* GP

Barrier
- Hierarchy impeding multidisciplinary work

HCP

Barrier
- High number of visiting GPs

GP

Results: Environment

Barrier
- Lack of NH staff

« *Nous la nuit c'est encore pire hein. 3 pour 143* » Nurse

GP HCP NHR

Barrier
- Time constraints

GP HCP

Barrier
- Feeling of global anxiety inside th NH

GP HCP NHR

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Results : Most relevant domains

TDF domains	Stakeholders	
Knowledge		HCP
Skills	GP	HCP
Beliefs about capabilities	GP	HCP
Beliefs about consequences		HCP
Goals	GP	HCP
Memory, attention and decision process	GP	HCP
Environmental context and resources	GP	HCP
Social influences	GP	HCP

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Perspectives

➡️ Analysis of data from Flanders
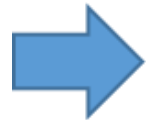
➡️ Design of an intervention towards BZRA deprescribing in Belgian nursing homes
  - Based on barriers and enablers evaluation
  - With stakeholders involved

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