

Benzodiazepine Use by Elderly Patients

The Problem

Benzodiazepine use by elderly patients is associated with adverse outcomes including increased risk of falls and fractures, motor vehicle accidents and cognitive impairment.

The Aim

Reduce benzodiazepine use among elderly patients seen in the Gerontology Ambulatory Clinic.

The Measure

% of patients with whom benzodiazepine use was discussed (including recommendations to reduce or discontinue benzodiazepine use when appropriate).

The Team

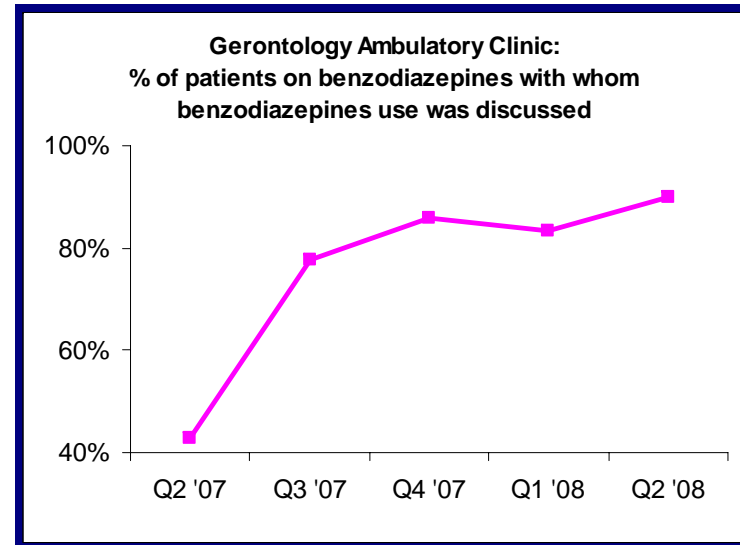
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The Interventions

- The Division of Gerontology has reached a consensus on the importance of reducing benzodiazepine use among their elderly patients (when appropriate).
- A QI Project Coordinator reviewed the electronic medical records of Gerontology patients who are on benzodiazepines to determine whether benzodiazepine use was discussed with the patient.
- Data was collected on a quarterly basis and trended on the Gerontology QI Dashboard.
- Performance feedback was provided to the Gerontology faculty via emails, as well as presentations at faculty meetings.

The Results/Progress to Date

The % of patients on benzodiazepines seen in the Gerontology Ambulatory Clinic, with whom benzodiazepine use was discussed (including recommendations to reduce or discontinue Benzodiazepine use when appropriate), was 43% in Q2 2007 (Apr.-Jun.) and increased to 90% by Q2 2008.



Lessons Learned

Benzodiazepines use is prevalent in older adults and its use - risks vs. benefits - should be discussed and documented diligently.

Next Steps

Continue to monitor this measure with the goal of maintaining > 90% compliance; add additional QI measures to the Gerontology QI Dashboard.



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