

2019 November Health Notes by Evelyn Ames (includes October plus additional information)

A technical computer glitch meant the October 2019 Health Notes were not in the WWURA Newsletter. They are included in November. Additional information/guidelines are added about cautions and benefits in using medications.

January 2019 the American Geriatrics Society (AGS) “unveiled its latest update to one of geriatrics’ most frequently cited reference tools: The AGS Beers Criteria® for Potentially Inappropriate Medication Use in Older Adults. With more than 90% of older people using at least one prescription and more than 66% using three or more in any given month,¹ the AGS Beers Criteria®—a compendium of medications potentially to avoid or consider with caution because they often present an unfavorable balance of benefits and harms for older people—plays a vital role in helping health professionals, older adults, and caregivers work together to ensure medications are appropriate.” Beers Criteria® describe particular medications with evidence suggesting they should be:

- Avoided by most older people (outside of hospice and palliative care settings);
- Avoided by older people with specific health conditions;
- Avoided in combination with other treatments because of the risk for harmful “drug-drug” interactions;
- Used with caution because of the potential for harmful side effects;
- Dosed differently or avoided among people with reduced kidney function, which impacts how the body processes medicine.

Consider these five questions to ask about any new drug. 1.

1. How and when do I take this drug?
2. What could the side effects be and how long should they last?
3. Can this new drug interact with those I am currently taking as well as with supplements?
4. How will I know if this medication is working and what is the time period to experience the effects?
5. Is there a need for follow-up and if so, how soon should I check with my doctor?

The 2019 October Health Notes. **Mixing Foods and Medications: Interaction of Common Foods and Various Medicines.** An AARP online survey (over 1800 adults over age 50) in 2016 found 75 percent of those participating take a prescription medication on a regular basis. Percentages were higher for those 65 and older. Of these, over 80 percent take at least two prescription drugs and over 50 percent take four or more. African American and low-income individuals tend to take more medications. Other reports (e.g., Nat Inst on Aging) suggest that more than 80 percent of older patients (ages 57 to 85 years) use at least one prescription medication daily, with more than 50 percent taking more than five medications or supplements daily. The following chart lists common foods that have the potential for interactions with medications. Suggestions included how to safeguard oneself.

FOOD: Bananas, green leafy vegetables, oranges, salt substitutes

Don’t mix with ACE inhibitors such as captopril (Capoten), enalapril (Vasotec), and lisinopril (Prinivil, Zestril), used to lower blood pressure or treat heart failure. Avoid mixing with some diuretics, such as triamterene (Dyrenium). Diuretics are used to reduce fluid retention and treat high blood pressure. **WHY:** Are all high in potassium. Potassium helps provide electrical signals to heart-muscle cells and other cells. Consuming them with listed medications could increase amount of potassium in body and possibly lead to an irregular heartbeat or heart palpitations—which could be deadly.

FOOD: Broccoli, Brussel Sprouts, cabbage, kale, and spinach.

Don’t mix with blood thinners such as warfarin (Coumadin). **WHY:** Foods containing a lot of vitamin K can reduce drugs’ ability to thin blood. In some people with heart disease, this could trigger a heart attack or a

stroke. Suggestion: do not overload on leafy greens; maintain a consistent diet. Avoid overuse of raw kale (which is a blood thinner).

FOOD: Cheese, yogurt, milk, calcium supplements, antacids with calcium.

Don't mix with Tetracycline (which is an antibiotic used to treat bacterial infections). **WHY:** Calcium in these foods and products can interfere with the body's ability to fully absorb the antibiotic. In general, tetracycline works better if taken 1 hour before or 2 hours after eating.

FOOD: Alcohol, avocados, bananas, chocolate, salami.

Don't mix with drugs such as metronidazole (Flagyl) and linezolid (Zyvox), which are used to treat bacterial infections. **WHY:** These foods, along with tap beer, red wine, and sherry, contain tyramine, an amino acid that can cause blood pressure to spike if taken with linezolid. Tyramine is also found in foods that are aged, pickled, fermented, or smoked, such as processed cheeses, anchovies, and dry sausage. Alcohol and metronidazole together could cause nausea, stomach cramping, and vomiting.

FOOD: Soybean flour and walnuts.

Don't mix with thyroid drugs such as levothyroxine (Levothroid, Levoxyl, Synthroid). **WHY:** High-fiber foods can prevent the body from absorbing medications. One study found drugs were better absorbed when taken at bedtime rather than a half-hour before breakfast, which is what is usually recommended in the instructions.