

# The GeriJournal



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## The Heat is On

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Summer is on its way, and as the mercury climbs, so too does the risk of heat exhaustion and heat stroke. The elderly are at increased risk of experiencing heat related disorders because they often suffer from multiple chronic diseases. A number of medications can also impair the body's ability to cope with the warmer weather.

The good news on the medication front is that many of the most problematic meds are seldom used nowadays because of their poor adverse effect profiles. The older antipsychotics such as Stelazine and Mellaril (no longer available), had strong anticholinergic activity, and markedly reduced sweat production by the skin. The same is true of the tricyclic antidepressants (e.g. Elavil, Tofranil, Aventyl and Desipramine) which were once the first option in the treatment of depression.

We still use a number of drugs with anticholinergic

activity. Some good examples are Zyprexa®, and drugs used for urinary incontinence (e.g. Ditropan®, Detrol®). Beta-blockers can also be problematic, because they reduce our ability to move blood to the skin, where it can be cooled. Finally, diuretics are a concern because they can cause dehydration.

Keep your residents cool this summer. Give them lots to drink and pay special attention to those taking drugs that reduce their heat tolerance.

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## Actonel Joins the List

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On June 6<sup>th</sup>, Actonel® joined the list of regular ODB Formulary medications. As a result, Actonel® no longer requires a limited use code to be covered. It now shares the same "non-LU" status that Fosamax® (alendronate) achieved a few months ago.

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## Watch Those SSRIs

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Hyponatremia (low serum sodium) can occur with any SSRI (Paxil®, Zoloft®, Celexa®, etc.), and is caused by an irregularity called SIADH. In SIADH, excess anti-diuretic hormone (ADH) is produced. The kidneys are stimulated to retain water, and the subject becomes "water toxic". The sodium in the bloodstream is diluted, and weakness and lethargy may occur.

The hyponatremia can also cause CNS disturbances, such as confusion, agitation and delirium. Electrolytes should always be examined to ensure hyponatremia is not the cause of behavioural changes in residents who are undergoing treatment with SSRIs.

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## LactuLESS

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Are you having trouble budging your med cart these days? Does the thought of opening the bottom drawer strike fear in your heart? Has lactulose become the #1 beverage on your unit?

If you answered yes to any of these questions, it's time to consider ordering lactulose in bulk. Facilities that have implemented this system are experiencing increased ordering and administration efficiencies and decreased medication cart weight.

Lactulose bulk ordering allows the nurse to order all of the residents' lactulose at one time, without having to access peel-off labels. It also allows the nurse to carry only one or two unlabeled bottles of lactulose in the cart at any given time. Speak to your consultant pharmacist about this procedure. We can send you the documentation for your P & P manual, and in-service your staff if you wish to implement it.

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