

Prescription drugs are lifesavers—but only if they're used correctly. And in the U.S., nearly half of all medications aren't taken as directed. Fourteen percent of prescriptions never get filled; 13 percent are filled but never used; 29 percent are filled but not finished, to name a few easily preventable mistakes. To get the most from your medicinesand save money check out this expert advice from some of the nation's top doctors.

By Russell Wild Illustrations by Greg Clarke



Be curious "Before you leave your doctor's office, know what your condition is and how the drug will help you," says Janice Douglas, M.D., chief of the division of hypertension at Case Western Reserve University School of Medicine in Cleveland. "Don't let the doctor say, 'Okay, you have high blood pressure, so let's get you on this medication.'" Know what your numbers are and what you're aiming to achieve. Only by knowing that you're aiming for, say, a blood pressure level below 140/90 or an LDL cholesterol level of under 100, will you know if a drug is working for you.



Don't play doctor The pharmaceutical industry has done much to develop drug therapies that can help us live longer and better lives. Painstaking research has gone into determining the dosage and effectiveness of every prescription medicine. Make sure when you leave the doctor's office or the pharmacist's counter that you understand the instructions exactly-whether you're to take one pill or two, whether once, twice, or three times a day. If the medicine doesn't seem to be working or if you're experiencing side effects, always consult your doctor. You should never tinker with the dosage on your own. The instructions are there for a reason: to be followed.

Share your life story When you meet with your doctor, discuss any and all health conditions you may have, chronic as well as acute, and reveal every medication you're taking—including nonprescription medicines, nutritional supplements, herbal products, and vitamins. You'll get better treatment if the doctor has a complete picture of your health and habits.

Watch the clock "The hour of day you take a drug can greatly alter its effectiveness," says Douglas. " Research shows a 40 percent higher risk of heart attack and a 49 percent higher risk of stroke in the morning. So if there was ever a time for your high blood pressure medication to be working at its peak, morning is it." To get that result, you might be better off taking your pills the night before: Most antihypertensives you take in the morning won't fully kick in until afternoon. Whatever drug you're prescribed, ask your doctor when the best time is to take it.

Open up to your dentist Many of

the medications used by dentistsincluding anesthesia, antibiotics, and painkillers-don't mix well with certain prescription medications. A great number of drugs can cause dry mouth. "Saliva is your best defense against tooth decay," says Richard H. Price, DMD, of the American Dental Association. " If your mouth is perpetually dry due to medication use, we might want to take extra steps, such as prescribing a fluoride gel, to make your teeth more resistant to decay." Also tell your dentist if you have conditions that compromise your general health, particularly heart valve problems. That way you'll likely receive antibiotics before having any serious mouth work done.

Make friends with your

pharmacist Your druggist knows a lot about prescription drugs. Get to know your pharmacist, and make sure that he or she knows your conditions and the pills you're taking. If you're not sure whom you should pester with questions—your doctor or pharmacist—ask both. "You can never get too much information," says Dalia Abdelmacksoud,

assistant director of clinical pharmacy services at NYU Medical Center.

Plan a review session If you're popping multiple medications, meet with your doctor every six months to review what you're taking (including supplements and nonprescription drugs). Think of it as your body's state of the union address: a chance to address any problems and even uncover problems. According to one study, one in five Americans over 65 takes at least one inappropriate prescription drug.



Stick with a workout

Careful! The amount of medicine you need may vary with age, weight, gender and more BUSTERS

The ethnicity factor The majority of Americans are Caucasian and most drug-trial participants are Caucasian. But a small difference in a few genes can affect the body's reaction to drugs. Studies show that four times as much of the popular ulcer drug Prilosec accumulates in the blood of Asian Americans as it does in Caucasians. (And the drug rises 40 to 50 percent higher and lasts 50 percent longer in the bloodstreams of all elderly people.) The manufacturer of Prilosec suggests " dose adjustments" for Asian Americans, but the advice is buried in the package insert's " Clinical Pharmacology" section—which your physician may not have read. Ask your doctor if ethnicity might affect your dosage.

The bigger the muscle, the smaller the pill The amount of

medicine you need often can be reduced-and sometimes eliminated through lifestyle changes. Weight loss, exercise, and salt reduction can lower high blood pressure. Eating less saturated fat and more fruits and vegetables can lower cholesterol. Arthritis pain can be alleviated by warm-water soaks, stretching, and the application of ice. Make sure you discuss lifestyle changes and home remedies with your doctor.

Ladies' choice Few drugs are one-size-fitsall—a problem that's magnified when women take man-size doses. "Women have different metabolisms and tend to be smaller," says University of California, San Diego professor Jay Cohen. "A 105-pound woman taking the same dosage as a 200-pound man might be taking too much." Women also tend to be more sensitive to drugs than men, adds Cohen, noting that the 1997 withdrawal of Seldane, an antihistamine, occurred because of heart problems that primarily struck women. Women should ask their doctors about medical literature that addresses gender issues (as opposed to the often oversimplified advice on the package).

Just say no Some drugs are so unpredictable when taken by older people that experts suggest you avoid them altogether, or take them in carefully calculated and monitored doses. Examples include the analgesic propoxyphene, the antiinflammatory indomethacin, the antidepressant amitriptyline, and over-the-counter drugs containing diphenhydramine (Benadryl), chorpheniramine (Chlor-Trimeton), and most other nonprescription antihistamines. Ask your doctor and pharmacist whether a lower-than-standard starting dosage might be appropriate, given your age. For a list of high-risk medicines, check out The Merck Manual of Geriatrics, available at many libraries.

Actyour age As you grow older, your metabolism changes. The liver and kidneys may work more slowly. Body composition changes. The result is that your doctor may prescribe less medication to treat a problem when you're 70 than if you were 27. In fact, the dosages for an elderly person are often half of what a younger person might need (most drugs are not clinically tested on a large number of older people). And taking standard doses when you're older can lead to side effects. Some age-sensitive drugs, according to Cohen, author of Over Dose (Putnam, 2001): ANTIDEPRESSANTS: citalopram (Celexa), bupropion (Wellbutrin), sertraline (Zoloft) ANTI-INFLAMMATORIES: naproxen (Anaprox), celecoxib (Celebrex), ibuprofen (Motrin) ANTIHYPERTENSIVES: diltiazem (Cardizem), propranolol (Inderal), moexipril (Univasc) CHOLESTEROL-LOWERING MEDS: atorvastatin (Lipitor), lovastatin (Mevacor) ULCER AND GASTRITIS MEDS: omeprazole (Prilosec)

G It's essential to stick with your doctor's plan F ROOF

Beware of the crush Some people pulverize their pills and put them in liquid. "Certain drugs will degrade and become less effective when crushed and put into a solution," says Abdelmacksoud. Some pills release medicine slowly. When these drugs are crushed, your body can absorb them too quickly. Drugs that should never be crushed: extended-release products (such as Procardia XL), enteric-coated pills (aspirin), and sublingual medications (nitroglycerin). If your doctor tells you to split pills, and they aren't scored, buy a pill splitter. But split your pills on the day you take them. (Doing it earlier may affect the medication.)



Use the right bottle

Don't make the common mistake of putting your pills in a different bottle. You could easily underdose on one medication, overdose on another, and forget which pill is for what. You could mistake a painkiller for a diuretic. The original bottle is also tinted or opaque to keep out light, which can degrade many meds. Storage instructions should be on the bottle and the package insert.

Don't drug and drive

Many medicines can cause fatigue and a slowing of reflexes. For example, a University of Iowa study found that the antihistamine diphenhydramine (Benadryl) caused more driving impairment than being legally drunk.

Leave yourself

reminders Keep forgetting to take your pills? A bevy of high-tech devices can provide you with reminders, from beeping chains and pagers to electronic pill containers and telephone or computer services. Low-tech methods include sticking notes to the bathroom mirror or refrigerator and other creative tricks. A lot of pharmacies will be happy to call and remind you that your prescription refill is due. So explore these and other options with your health care provider and your pharmacist.

Take 'em all Only the hardiest bacteria survive the first few days of an antibiotic treatment. But if you quit before the infection is completely eliminated, those surviving bacteria will be fruitful and multiply. Not only that, but you'll be contributing to a serious public health hazard—the rise of antibiotic-resistant strains of bacteria. One other way to be part of the solution: Don't push your doctor to give you unnecessary antibiotics. Half of the antibiotics given to humans are prescribed for colds, coughs, and other viral infections, which aren't helped by antibiotics.

Send old drugs packing You should always throw out your medications once they've passed their expiration dates. Try thinking of expired medicines as old car tires: They may still be functional, but the manufacturer can no longer guarantee their effectiveness. In some cases chemical decomposition can even turn a once-beneficial medicine into a poison. Use of outdated tetracycline (an antibiotic) has been linked to Fanconi's syndrome, a serious disease that can affect the kidneys and cause bones to soften. So review your medicines at least once a year and get rid of oldies that are no longer goodies.

Get medicine out of the cabinet Drugs should be stored in a cool, dry place. Ironically, one of the worst places to keep medicines is in the medicine cabinet. "Bathrooms and kitchens tend to be the moistest spots in the house," says Diana J. Mason, RN, Ph.D., and editor-in-chief of The American Journal of Nursing. "A better place for medicines is inside a dresser drawer." If you have young grandchildren who visit, make sure you pick the top dresser drawer and that the child-safety cap is always secure. A chilling one-third of all accidental prescription drug poisonings in children involve a grandparent's medication. Red stickers with the nationwide poison control hotline number-800-222-1222—are available free by sending a SASE to Council on Family Health, Emergency Stickers, 1150 Connecticut Avenue, NW, Suite 1200-B, Washington, DC 20036.

Many

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Here's how

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Doggone side effects!

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ing out your doses: taking a little now and the

Timing is everything

Sometimes beating

a side effect is as

simple as spac-

rest later. "That's often a workable solution with many high blood pressure medications (which can cause dizziness), " says Brandon Koretz, M.D., assistant clinical professor with the UCLA School of Medicine. In addition, taking the drug with food (unless the label says not to) can reduce nausea, a common side effect with many pills. Niacin is another pill that can be taken with your meal. Swallowing it with food makes your face less flushed, a frequent reaction. For diuretics, which can keep you up at night running to the toilet, a solution may be to pop them earlier in the day. Ask your doctor or pharmacist before changing the timing of your meds.

Switch, don't fight Maybe you can't tolerate a drug that other people thrive on. Or maybe a drug that helped a friend gives you hives. Most drugs have possible alternatives. If you're having problems, talk it over with the doctor who wrote your prescription.

Beware of sneaky symptoms

Some of the most common drug side effects can mimic adverse signs of aging. "A number of medications can depress the central nervous system, causing anything from memory loss to unsteadiness on the feet to erectile dysfunction," says Arthur Hull Hayes, Jr., M.D., chairman of the Council on Family Health and former commissioner of the Food and Drug Administration. If you're taking medication and you haven't felt quite yourself, talk to your doctor or pharmacist.

Add a home remedy

When changing the timing or breaking up the dosage doesn't alleviate side effects, you might consider a home remedy or a simple over-thecounter medication. Narcotics, for example, almost always cause constipation. You can often fight back by drinking prune juice or taking a stool softener or stimulant laxative (but don't overdo it, overuse of laxatives is a common problem). Antibiotics often cause diarrhea and vaginal yeast infections. Yogurt with active cultures can help restore the natural flora found in the digestive tract. Many drugs, from buspirone (BuSpar) to fluoxetine (Prozac) to lovastatin (Mevacor), can cause xerostomia, a fancy word for dry mouth. Avoiding salty, spicy, and acidic foods—and drinking sips of water-may help you feel less parched. Several nonprescription products, generically called artificial salivas, can also give comfort.

Save the vitamins!

Certain drugs can drain your body of nutrients when taken for long periods of time. Antibiotics, anticonvulsants (seizure medications), and diuretics can deplete nutrients in your system. One countermeasure is to take supplements. Talk to your physician rather than self-dose. **Ask for a cheaper drug** Sometimes the ticket to big savings is trading a new drug for one that's been on the market for some time. "Newer isn't always better, in fact, the opposite is often the case," says Over Dose author Cohen. "Some of the newer antibiotics being prescribed for sinusitis, bladder, and respiratory infections are terribly expensive, yet they don't work any better than penicillin or doxycycline, which cost mere pennies per dose. And they generally cause fewer side effects." Likewise, the acid blockers Zantac and Pepcid (now sold over-the-counter) are all many people need for mild heartburn, says Cohen.





Cross the border Day trips to Canada and Mexico have become a popular way to save money on prescriptions. Before you go, get the okay from your doctor. Once you're there, stick to licensed pharmacies, bring a copy of your prescription, and make sure you buy the right drug at the right dosage.

Shop around Keeping all your prescriptions at one pharmacy helps your druggist to track them. But drug prices can vary wildly from one pharmacy to the next, so keep looking if a price seems high. Also, you can often find savings by shopping online or by mail order. Many drugstore chains have sites that offer better deals than their stores. The National Association of Boards of Pharmacy maintains a complete list of sites at www.nabp.org/vipps/consumer/ listall.asp.

Uncover the coverage If you have prescription coverage, use it. If a certain drug is turned down because it's not in the health plan's "formulary" (a list of covered drugs), don't despair. In many cases, the formulary will cover a similar or identical drug. If there isn't a suitable replacement, ask your doctor to help you get an exception. "If a doctor says a drug not on our formulary is the only one the patient responds to, then we'll cover it," says one prescription plan executive.

Request samples Ask your doctor for free samples, particularly if you only need a one-time supply. Caution: Even though it's free now doesn't mean it won't cost a bundle when you fill your prescription. If it's a drug you'll need to keep taking, ask if it's the best choice over the long haul.

Get special discounts A new program called Together Rx became available in June 2002. For Medicare enrollees with no drug coverage and incomes of up to \$28,000 (\$38,000 for couples), the program offers discounts on products from such leading drug companies as Abbott Laboratories, AstraZeneca, Aventis Pharmaceuticals, Inc., Bristol-Myers Squibb Company, GlaxoSmithKline, Janssen Pharmaceutica Products, L.P., Novartis, and Ortho-McNeil Phamaceutical, Inc. There is no cost to enroll. 800-865-7211; www.together-rx.com. Pfizer has its own discount card, the Pfizer Share Card, for Medicare enrollees with no prescription drug coverage and incomes of less than \$18,000 (\$24,000 for couples). A 30-day supply of a Pfizer drug is \$15. 800-717-6005; www.pfizerforliving.com. The same income and Medicare rules apply to the Lilly Answers Card. 877-795-4559; www.lillyanswers.com. A 30-day supply of a Lilly drug is \$12. More than two dozen states have programs to help the needy cover drug costs. If you're enrolled in an AARP health insurance plan, you have free access to its Prescription Savings Service, which offers discounts on drugs through the mail or at 46,000 pharmacies. If you don't have an AARP-sponsored policy, you can buy an identical service called Member Choice. 800-439-4457; www.aarppharmacy.com.

Go generic Generic drugs typically cost 50 percent or less than brand name drugs. But are generics just as good? Sometimes there are minor differences, such as the flavoring and color, but there are no differences in the active ingredients. The FDA sees to that. Ask your doctor if the generic version is a good idea for you. In the alchemy of medicine, one plus one does not always equal two

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Drug-Herb Interactions

GINKGO may exaggerate the body's response to anticoagulants or antiplatelet agents. GINSENG can decrease the effectiveness of the anticoagulant warfarin. SAW PALMETTO doesn't mix well with estrogens; it can increase the hormone's effects. VALERIAN in conjunction with opiates or barbiturates can seriously sedate you.

Drug-Drug Interactions

ACID REDUCERS (H2 receptor antagonists) may slow the metabolism of theophylline (an asthma drug), any of the tricyclic antidepressants (amitriptyline, doxepin), and an anticoagulant. VERAPAMIL, a blood pressure medication, can increase the risk of muscle soreness in people taking statin drugs for high cholesterol. SEDATIVES and ANTIHISTAMINES can combine to severely slow your reaction time, making driving or operating machinery dangerous. WARFARIN (Coumadin), an anticoagulant used to treat blood vessel conditions, can interact with many other medications. A particularly bad mix is warfarin and any nonsteroidal anti-inflammatory drug (NSAID), such as aspirin, ibuprofen, or naproxen. Serious bleeding may result. VIAGRA must never be used by anyone taking medicines that contain nitrates. This includes nitroglycerin, the heart drug. Your blood pressure could drop to an unsafe or life-threatening level.

Drug-Condition Interactions

SLEEPING PILLS can complicate a breathing problem such as emphysema or sleep apnea. NASAL DECONGESTANTS and BRONCHODILATORS can be dangerous when taken by those with heart disease or high blood pressure, thyroid disease, or diabetes. Many ANTIHISTAMINES, DECONGESTANTS, and ANTITUSSIVES for coughing are not recommended for those who have difficulty urinating due to an enlarged prostate.

Drug-Food Interactions

ASPARAGUS, SPINACH, and BROCCOLI and similar foods can neutralize anticoagulants. These vegetables are high in vitamin K, which promotes blood clotting. GRAPEFRUIT or GRAPE-FRUIT JUICE interacts with most statin drugs prescribed for lowering cholesterol, increasing the risk of side effects. Orange juice may be a suitable alternative. When taken with food, the absorption rate of the osteoporosis medicines alendronate (Fosamax) and risedronate (Actonel) is cut in half.

Ten Questions to Ask Your Doctor or Pharmacist About a New Prescription

- 1. What's the name of the drug you're prescribing?_____
- 2. Is a less expensive generic version of this drug available?_____
- 3. How much will I be taking and how many times a day?____
- 4. What time of day is best to take the medication? Should it be taken with food or without? ______
- 5. Does the medication need refrigeration?
- 6. What side effects, if any, might I experience? What should I do if they occur?_____
- 7. Is it safe to take this drug with other drugs or supplements? Can I drink alcohol while I am on

this medication? _

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- 8. What do I do if I miss a dose? ____
- 9. How long will I be taking the drug?_____
- 10. Do I need to finish the entire dosage you're prescribing for me? What do I do if I

feel better before that? _

How to Proofread a Prescription

Before you leave the druggist's counter, compare your doctor's prescription to the label on your bottle. You might catch a deadly mistake. June McKoy, M.D., of the Feinberg School of Medicine at Northwestern University in Chicago, tells of a patient who was given Lanoxin (a heart drug) instead of Levsin (a drug for irritable bowel). To catch similar errors, follow this prescription for proofreading: Is your name correct on both the prescription and the medicine bottle? If you have a name such as Bob Jones or Mary Smith, make sure you include your middle initial. Is the name of the medication correct? Look carefully. Some drug names are similar. Norvasc, for example, is for high blood pressure. Navane is for psychosis.

Is the dosage the same as what your doctor

told you? Are the instructions clear? Doctors and pharmacists often communicate in Latin.

With the help of the mini-dictionary above right, you can decipher their dialogue.

latin	abbreviation	meaning
ante cibum	ac	before meals
bis in die	bid	twice a day
gutta	gt	drop
hora somni	hs	at bedtime
oculus dexter	od	right eye
oculus siniste	r OS	left eye
per os	po	by mouth
post cibum	pc	after meals
pro re nata	prn	as needed
quaque 3 hora	a q3h	every 3 hours
quaque die	qd	every day
quater in die	qid	4 times a day
ter in die	tid	3 times a day

Tips for Traveling With Medications

KEEP your medicine with you—not in checked luggage. BRING more than enough medicine for your trip. REVIEW your dosage schedule with your doctor or pharmacist before you leave and discuss whether you should make allowances for changes in time zones. KEEP a list of all your medicines and dietary supplements.

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