

Episode 8 – Knowing Your Medications

(Intro) Julie: Do you have an upcoming surgery? Are you feeling a little overwhelmed? Then this is the podcast for you. Welcome to 'Operation Preparation'. You are listening to the Pre Anaesthetic Assessment Clinic Podcast, or PAAC for short, from St. James's Hospital Dublin. Here, we put together a series of short episodes to help you, your family, and your loved ones learn more about your upcoming perioperative experience.

Fiona: Welcome back to 'Operation Preparation'. My name is Fiona, and I'm a junior doctor working in anaesthesia. With me today, I have Rosie and Julie, two clinical nurse specialists working in the clinic. Today, we're going to discuss medication management around the time of surgery. So to begin, Julie, can you tell me why it is important to know your medications?

Julie: Yeah. Thanks, Fiona. So I suppose today, we're just going to talk through the importance of knowing your medications as you prepare for your surgery, but also highlighting the importance of knowing your medications in general terms for your overall health. And it's just to note that if you ever have any query related to your prescribed medication, always check back in with the doctor that has prescribed it or the pharmacist that has dispensed it for you. In the pre anaesthetic assessment clinic, we constantly talk about informed consent and being an active participant in your care, and this is just as important when it comes to your medications. So when prescribing a medication, the health care professional prescribing it should explain both the benefits and the risks associated with the medicine while outlining any side effects to be aware of. And then you as a person, you also have a responsibility taking the medications to ensure that:

- you're happy to go ahead and take them
- that you're happy to accept any risks that they may be associated with taking them
- and that if you then have agreed that you're willing to give them a go, you have responsibility to make sure you store them correctly
- you take them as prescribed, which means the right amount at the right time
- and that you've made yourself familiar with the side effects
- and that you also have an adequate supply of the medications.

So this has always helped if you can keep an up to date list of your current prescribed medications, maybe keeping it on your phone or in your wallet along with contact details for both your GP and pharmacist. We highly recommend this because it makes every hospital visit easier to navigate, and it's also very helpful for medical staff in the case of an accident or emergency. And I know for a lot of people listening out there, they find the list of medications bamboozling. But always ask maybe a son or a daughter or a neighbour or somebody younger that can type it up for you really quickly, input it into your phone, simple ways that you can even carry it in your purse. Some people prefer to stay with paper, but it's whatever works for you and always ask for a little bit of help. So it's so important that the HSE also have a campaign called 'Know, Check, Ask', and this promotes the importance of this. And simply put, it means know your medications, check you're using the right medication the right way, and if you're ever unsure, just ask your health care professional, be that your pharmacist or your GP. So there's a couple of resources here, like, that I would

mention, (and we can add in links to access these in the show notes afterwards), but the first one would be on the HSE website. If you look up 'Know, Check, Ask', there is a leaflet there that you can print off that makes it easier for you to keep track of the medications. Or another useful resource is the new HSE app called 'My Health'. This is where you can input your medication list, and it's listed directly back to you. The app will also have a record of any vaccinations that you've had, be it for the flu, pneumonia, COVID. Any type of vaccination that's been given to you will have a record of it on that app as well. And, not to overload you, but it's really important and it goes without saying, these medications are prescribed for you. So never ever give them to another person no matter how well intentioned it might be. They could cause an allergic reaction or even a severe interaction with medications already in the system of the person that has taken them. So it's just really important for you to be responsible for your medications and to be involved and know why you're taking them.

Fiona: Thank you, Julie. That's really useful information. It's good for people to know about new developments in terms of apps that can help people to manage their own health. So Rosie, what will I be asked about my medications at my clinic appointment?

Rosie: Yeah. Well, look, we love asking questions, but the good news is that every question is really relevant in planning your individualized care. And that's what we're all about in the pre anaesthetic assessment clinic. It's an individualized risk assessment before your anaesthetic and surgery. So we're not just being nosy for the sake of it. We will ask you for that list of medications and that you'll hopefully have that ready, written down, remembering to include your inhalers, weekly injections, any infusions you might receive, eye drops, ointments, and any other over the counter medications you might be taking. Don't worry if you find any of these hard to pronounce if you're having a telephone assessment. We can often ask patients to spell these out over the phone, and that's never an issue. You can even ask your pharmacist for a printout of these, and your pharmacist will always be very helpful with this as well. So we'll look through this list of medications with you to ensure that you're aware of which medications you're on, what they're for, how long you've been on each of these, and if there's been any recent changes to the dosages or if you've stopped any medications recently. We'll also ask if you've taken any steroids or antibiotics in the past few weeks. It's really important that you're honest with us about any recreational drugs that you might be taking in conjunction with your prescribed medications or any additional medications that you might be taking that might not have been prescribed by your GP. For example, Ozempic or that might be called semaglutide, Manjaro as well, which is another drug. The anaesthetist will plan your medications required for your general anaesthetic and surgery based on what you've disclosed to us at your appointment. Your safety is our number one priority, and no one wants you to suffer the added complication of an adverse drug reaction. So there's been a lot of debate and even shaming surrounding the use of weight loss drugs like Ozempic and Manjaro; recently with some GPs even refusing to prescribe it and some pharmacies refusing to even dispense it unless it's for use in the treatment of diabetes, for example. So we just want to reassure patients attending the pre assessment clinic that there won't be any shaming or judgment from the staff here, but it is important that you make us aware if you are taking it. The reason being that these medications can delay gastric emptying and as Pam explained earlier, fasting before your surgery is done to allow the stomach to empty its contents and avoid aspiration.

Fiona: Thank you, Rosie. And, Julie, why do my medications have two different names?

Julie: One of the most common questions we're asked, Fiona, and it causes a lot of confusion with patients when they come through. And the simple answer is every medication has two names. So there's a generic name and a brand name. And what that means is the generic name is the name of the active ingredient in the actual medication. So for example, you might be familiar with if you're taking a blood thinner, you might call it 'Apixaban'. That is the name of the medicine that's in the actual drug. And then when the company produces a drug, they have a patent or a license to sell it under their brand name. So for the likes of 'Apixaban', the brand name on the box might be 'Eliquis', but the generic name would be 'Apixaban'. So really what it means is that the drug is identical in both of the medications, but possibly the colouring or the flavouring may be different or the tablet may look different, but they will work exactly the same way. It's similar, I suppose, to buying own brand in a supermarket versus branded products, you know. It's still a teabag that's in the box, but they'll be developed and, branded by separate companies. More and more companies sell the same medications. You might find us asking you on a phone assessment to spell out the name of the medication. It's really so that we can ensure we can look up any new brand names that we may not have heard of so that we can find out the generic name, and then we will know how it will affect your care, if you need to stop it in advance, or if it's okay for you to continue on. So it's really just about good communication and it's not that we don't know what we're talking about when we are asking you to spell out the medication. Everybody pronounces things differently. And as you say, companies now, far more pharmaceutical companies are producing drugs that prior to this would only have been produced by one company. So you might have one medication that has six different names. So it's just important that we make sure that we have the right one.

Fiona: And Julie, you mentioned stopping medications earlier. Do I need to stop any medications before my surgery?

Julie: So again, the whole idea of the pre anaesthetic assessment clinic is that it's a risk assessment, that it's an individualized plan of care. And the short answer is yes. There generally are medications that you would have to stop before surgery. But, again, it depends on the reason you're on them, the type of surgery you're having done. So it will be different for everybody, but there are a certain group of medications that would kind of be red flags to us if we hear you're on them. We definitely would want to delve in and potentially would be stopping them. So the likes of a blood thinner, people might know them as anticoagulants or antiplatelet agents. They're ones that patients might be familiar with by the names of warfarin or Plavix or, again, that apixaban. They're the ones that thin your blood out to prevent you developing any clots. People are on them for different reasons. So it may be that you've had a clot in your leg at some point, maybe that you've had a stroke or a heart attack. But again, everyone's on them for slightly different reason. But generally, that's one that we would like to stop beforehand when you're having surgery because, obviously, it's going to increase your risk of bleeding. Other medications that we will talk about would be the blood pressure medications or antihypertensives. Some of them need to be stopped beforehand, not all of them, and the reason being is they all act in a slightly different way. Some of them will lower your blood pressure just a little bit more than we

would like once you have the anaesthetic drugs. So again, we might ask you to stop a blood pressure medication, but maybe your neighbour might not have to stop it. So it is different for everybody. And the other medications that we'd always have to adjust and discuss with you and give you individualized advice would be your diabetic medications. There's lots of different kinds. There's insulin, there's lots of different oral medications that have various different actions, but they definitely all would need very, very individualized instruction to avoid complications and to make sure that the surgery goes as smoothly as possible.

Fiona: And the next question, I think, is a very important one as it's a common misconception. But can I take my medications if I'm fasting?

Rosie: Yeah. So I know Pam has given us all the information that you could need with regards to fasting, and the short answer is yes. You can still take medications when fasting apart from the ones we've asked you not to take. So at your appointment with us in the pre anaesthetic assessment clinic, you would have been given instructions detailing which medications you can continue and which ones that you need to hold or stop. So we'll be very clear as to how long you need to hold or stop the medications and when to restart. So equally important is continuing certain medications, and this will also be highlighted. So for example, not forgetting to take an inhaler before your appointment. So if you're an individual whose medications are, for example, blister packed and you're not sure which medications are which, you could go and see your pharmacist. They're very helpful, and they'll be able to pinpoint for you which medications are which. Some medications you'll only need to take as needed such as painkillers. And, again, we will advise you that unless we've asked you to hold something, then it's okay to take. The contact details of the clinic will be on this form that we've given you should you need to ask any questions prior to your surgery. If something is unclear or you've forgotten anything, please don't hesitate to call us. If you start a new medication after your pre anaesthetic assessment appointment, then you can also call us, and we'll update your medical records and advise you on what to do with the new medication. When you check-in for your surgery, the admitting nurse will ask you to list down everything that you've taken that morning. This is especially important if you've taken paracetamol or any type of pain killer as we'd like to avoid exceeding the daily allowance. Don't worry if you need to take a pain killer before your surgery. Go ahead. There are different types that we can use when you get here. It is extremely important to let us know if you've taken any recreational drugs the night before, and sometimes that happens. But please trust us that we're only asking to ensure your own safety. We're not the police.

Fiona: Thank you, Rosie. So I suppose to summarize all of the information above:

- Know what you're taking and why you're taking it
- Keep a list of your medications and your pharmacy details on your phone or in your wallet
- and build a good rapport with your pharmacist. They're really, really important
- Disclose all medications to medical staff at your appointment
- Follow the written information we will give you in advance of your procedure
- Call us if you have any questions at all
- Contact us in advance of surgery if you've been prescribed any new medications

- Let us know immediately on admission if you've forgotten to stop medications we advised you to stop
And importantly, remember to restart any medications that you've held after your surgery or if your surgery date is cancelled.

So that completes this episode. Thanks everyone for listening. Join us in the next episode where we will speak about the recovery room and what we can expect there.

Julie: (Outro) You have been listening to 'Operation Preparation', the pre anaesthetic assessment clinic podcast from St. James's Hospital Dublin. Don't forget to subscribe and check out our website, links, and abbreviations in our show notes to learn more about the topics we covered today. If you have a question that you would like us to cover here, email the podcast at perioperativepodcast@stjames.ie. Thanks for listening. Until next time.