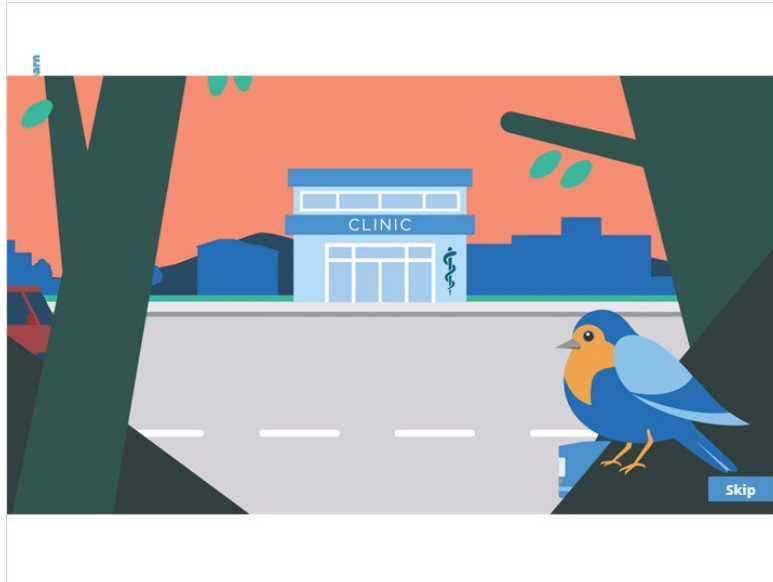


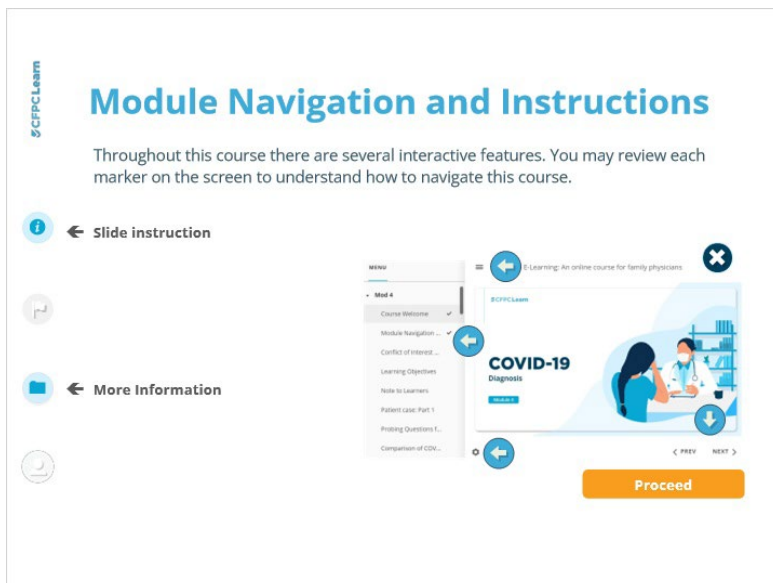
Case 52 Ticker Endo

1. Conflicts

1.1 Intro Video



1.2 Module Navigation and Instructions



1.3 Learning Objectives

CFPC Learn

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Learning Objectives

At the end of this module participants should be able to:

1. Identify key factors/findings in family medicine to help establish common clinical diagnoses.
2. Evaluate best evidence/guidance and practice tools to determine preferred treatment options for patients.
3. Synthesize patient preference, evidence and experience to formulate comprehensive plans for patient cases.

Approximately 15 minutes to complete each patient case.

Proceed

2. Ticker Endo

2.1 Ticker Endo

CFPC Learn

1

2


3

4

Ticker Endo, 81

Ticker is an 81 year-old male who made an appointment for general medication review.

PMH **Conversation** **Moving Forward**



History (Slide Layer)

SCFPCLearn

Ticker Endo, 81

PMH: MI/stent x 1, stable CAD, hiatus hernia, hypertension, BPH, osteoarthritis knees. Remote history of smoking.

Meds: atorvastatin 20 mg, ASA 81 mg, perindopril 8 mg, amlodipine 5 mg, tamsulosin 0.4 mg, dutasteride 0.5 mg, pantoprazole 40 mg, domperidone 10 mg before meals, trazodone 50 mg qhs, acetaminophen 1 g tid.

PMH

Conversation

Moving Forward



Conversation (Slide Layer)

SCFPCLearn

Ticker Endo, 81

I brought my meds in with me – there sure are a lot of them!

That is for sure – how are you feeling? Still active?

I am a bit more achy these days and my memory isn't what it used to be. Can the cholesterol medications cause this?

PMH

Conversation

Moving Forward




2.2 Multiple choice question

(Multiple Response, 10 points, 1 attempt permitted)

CFPCLearn

Which of the following statements are the most accurate?



Click all that apply.


- ☐ A. Statins prevent dementia
- ☒ B. Statins do not cause cancer.
- ☐ C. Statins may be the cause of Ticker feeling achy.

Submit

2.3 Review

CFPCLearn

Review



Answer: B. Statins do not cause cancer

Cognition

Cancer risk

Ticker

Click on the buttons to view additional information

Evidence (Slide Layer)

SCFPCLearn

Review



Answer: B. Statins do not cause cancer

1

2

3

4

Cognition

Cancer risk

Ticker

Evidence does not support a link between statin use and decreased cognition. A systematic review of RCTs has shown no difference in dementia risk.

A systematic review of observational studies compared statins vs no statins, with 1-25 yr follow up:



- All-cause dementia (16 studies) & Alzheimer's disease (14 studies): patients on statin 15-28% reduction.
- Vascular dementia (4 studies): no difference.

Notably, with observational studies, you cannot control for confounding factors. For example, it is likely that healthier people were taking statins.

Pravastatin (Slide Layer)

SCFPCLearn

Review



Answer: B. Statins do not cause cancer

1

2

3

4

Cognition


Cancer risk

Ticker


In 2015, the use of pravastatin in patients 65 years and older was not recommended owing to a potential increase in cancer incidence.

However, updated evidence including 2 large systematic reviews found no increased risk of cancer incidence or death with statins.


Complaints (Slide Layer)



Review




Answer: B. Statins do not cause cancer



Category	Percentage
Most muscle-related complaints in people taking statins are not statin-induced.	85%
For patients in their first year of statin therapy, the risk of muscle symptoms is approximately 15% compared with 14% among those taking placebo (ie about 1%)	15%

- Most muscle-related complaints in people taking statins are not statin-induced.
- For patients in their first year of statin therapy, the risk of muscle symptoms is approximately 15% compared with 14% among those taking placebo (ie about 1%)
- **After a year**, the differences in muscle symptoms between statin and placebo are not statistically significant.
- Since Ticker has been on a statin for 10 years, his aching is very likely not related to the statin.

2.4 Ticker Endo




Ticker Endo, 81

But is that statin pill still doing me any good? My wife's doctor says at her age, she doesn't need to worry about cholesterol pills.

Oh, how old is she and has she had any heart problems?

She is my age but she hasn't had any heart attack or anything. She just takes a stomach pill and something for arthritis.

Moving Forward




2.5 Multiple choice question

(Multiple Response, 10 points, 1 attempt permitted)

CFPCLearn

Statins provide no benefit after the age of 75.



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☐ True

☐ False


☒ It Depends

Submit

2.6 Review

CFPCLearn

Review



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l

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Answer: It Depends

Secondary Prevention


CV Calculators

Primary Prevention



Click on the buttons to view additional information


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Secondary Prevention (Slide Layer)



Review



**Answer:** It Depends



Secondary Prevention

CV Calculators


Primary Prevention

Secondary Prevention, MACE:



- Patients age >65-70: Relative risk 0.79 (0.73-0.86)
 - 4.3% (statin) vs 5.5% (placebo) /year
- Patients age >70-75: 0.80 (0.73-0.88)
 - 4.8% vs 5.8%/year
- Patients age >75: 0.85 (0.73-0.98)
 - 6% vs 6.8%/year


In sum, there is no evidence to support stopping statins just because they have reached 75 years of age. Patients continue to benefit if they have had a previous event.





Calculators (Slide Layer)



Review



**Answer:** It Depends



Secondary Prevention


CV Calculators

Primary Prevention


Many commonly used risk calculators (e.g., Framingham) exclude patients older than 75. The 10 year risk of cardiovascular events is already quite high with competing risks for death (eg cancer).

The diagnostic accuracy of predicting future cardiovascular events is lower for those older than 75 (C statistic ~ 0.62) than for younger adults (C statistic ~ 0.75).

Primary Prevention (Slide Layer)



Review



Answer: It Depends

Secondary Prevention

CV Calculators


Primary Prevention

Primary Prevention, Major Adverse Cardiac Events (MACE):

- Patients age >65-70: Relative risk 0.61 (0.51-0.73)
- 1.2% (statin) vs 1.8% (placebo) /year
- Patients age >70-75: 0.84 (0.70-1.01),
- 2.1% vs 2.4%/year (likely beneficial)
- Patients age >75: 0.92 (0.73-1.16).
- No difference – though some do benefit, given the range of 0.73 to 1.16.

So, routine initiation is discouraged after the age of 75. But, if they have been previously initiated and tolerated, there is no evidence to suggest they should be stopped.

2.7 Ticker Endo



Ticker Endo, 81

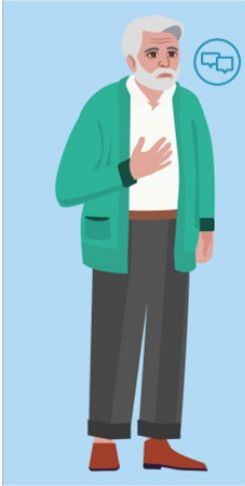
I feel like I rattle around in the morning with all the pills. Do I really need them all?

Let's have a look- How do you feel when you get up out of bed and during the day?

I feel pretty light headed when I get out of bed. And there is that achiness I was talking about.

Examination

Moving Forward



Examination (Slide Layer)

SCFPCLearn

Ticker Endo, 81

On examination, his blood pressure is 110/82 and heart rate is 72. He has mild pitting edema and a clear chest.

Examination

Moving Forward




2.8 Multiple choice question

(Multiple Response, 10 points, 1 attempt permitted)

SCFPCLearn

Choose which medications you would de-prescribe.



☐ Atorvastatin

☐ Perindopril

☐ Dutasteride

☐ Pantoprazole

☒ Acetaminophen

☐ ASA

☒ Amlodipine

☐ Tamsulosin

☐ Domperidone

☒ Trazodone

Recall, Ticker's past medical history includes:



- MI (stent x 1), stable CAD
- Hiatus hernia
- Hypertension
- BPH
- Osteoarthritis knees
- Remote history of smoking

Submit





2.9 Review

CFPCLearn

Review



Answer: Acetaminophen, Amlodipine, Trazodone



Amlodipine

Trazodone

Acetaminophen

Considerations



Click on the buttons to view additional information

Moving Forward





Amlodipine (Slide Layer)

CFPCLearn

Review



Answer: Acetaminophen, Amlodipine, Trazodone



Amlodipine

Trazodone

Acetaminophen

Considerations

Given that Ticker is feeling slightly dizzy and he has pitting edema, amlodipine would be a good choice to stop as his systolic blood pressure is below target.


X

Moving Forward

Trazodone (Slide Layer)

SCFPCLearn

Review



Answer: Acetaminophen, Amlodipine, Trazodone

Amlodipine

Trazodone

Acetaminophen

Considerations

Trazodone has a “small” effect on short-term sleep quality and perhaps 0.3 less awakenings per night, trazodone does not have consistent benefits on sleep over placebo.

- Falls – no difference compared to other sleep medications, more compared to no medication (retrospective observational data). Some of the orthostatic changes may be related to trazodone.
- Mortality (versus no antidepressant, observational) 12% versus 7%

Moving Forward

Acetaminophen (Slide Layer)

SCFPCLearn

Review



Answer: Acetaminophen, Amlodipine, Trazodone

Amlodipine

Trazodone

Acetaminophen


Considerations

From the PEER Simplified Chronic Pain Guideline (2022):
For osteoarthritis:
—No benefit: acetaminophen

Considerations (Slide Layer)

CFPC Learn

Review



Answer: Acetaminophen, Amlodipine, Trazodone

+

×

Amlodipine

Trazodone

Acetaminophen

Considerations

Consider domperidone, revisit pantoprazole and tamsulosin in another visit. These are medications that may be helping his quality of life.


Making too many changes can confuse the benefits/problems of deprescribing.

Moving Forward

2.10 Create a Plan

CFPC Learn

Let's Make a Plan



Using what you have learned write a plan for Ticker. It can include any/all of the following: lifestyle intervention(s), prescription intervention(s), lab(s)/test(s) required, follow up appointment time frame, and referral required.

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Fill in your plan for the patient here

See how your plan compares

2.11 Plan Answers

CFPC Learn

Ticker Endo



This is the proposed plan for Ticker. How does your plan compare?

Medication

Lifestyle

Follow Up

Select details on the left to see suggested recommendations



What's in a name?

Moving Forward

Medication (Slide Layer)

CFPC Learn

Ticker Endo




This is the proposed plan for Ticker. How does your plan compare?

Medication

Lifestyle

Follow Up

 You reassure Ticker that he can safely continue the atorvastatin and that it would not be a priority for deprescribing.



You stop amlodipine and trazodone and suggest that he try without acetaminophen to see if it is making a difference for him.

What's in a name?

Lifestyle (Slide Layer)

SCFPCLearn

Ticker Endo




This is the proposed plan for Ticker. How does your plan compare?

Medication

Lifestyle

Follow Up

 You print off some sleep hygiene tips for Ticker and reinforce the benefits of the exercise.



What's in a name?

Moving Forward

Follow Up (Slide Layer)

SCFPCLearn

Ticker Endo




This is the proposed plan for Ticker. How does your plan compare?

Medication

Lifestyle

Follow Up

 You plan follow-up in 2 weeks to check on blood pressure, symptoms and sleep. Suggest that you will explore the other medications for deprescribing.

What's in a name?

Moving Forward

Name (Slide Layer)

The screenshot shows a slide layer titled "Ticker Endo" with a character icon of an elderly man with a beard. On the left is a vertical navigation bar with icons for Home, Back, Forward, and a search icon. The main content area includes a text prompt: "This is the proposed plan for Ticker. How does your plan compare?". Below this are three blue buttons: "Medication", "Lifestyle", and "Follow Up". To the right of these buttons is a light blue callout box titled "Meaning Behind the Name:" with a close button (X) in the top right corner. The callout box contains the text: "Ticker... well, another name for the heart. Akira Endo discovered statins in 1976." At the bottom left is a green button labeled "What's in a name?" and at the bottom right is an orange button labeled "Moving Forward".

2.12 References

The screenshot shows a slide layer titled "References" with a character icon of the same elderly man. The slide has a blue header bar with the title and icon. On the left is a vertical navigation bar with icons for Home, Back, Forward, and a search icon. The main content area contains the text: "Thanks for visiting the clinic!" followed by "References: Available [here.](#)". Below this is the text: "This activity is eligible for up to 0.25 Mainpro+ credits.".