Alameda County Behavioral Health Care Services
Practice Guideline: Polypharmacy

Definition

Alameda County BHCS defines polypharmacy as:
- The use of more than one psychotropic medication within the same class at the same time, other than for cross-tapering purposes.

The “class” of psychotropic medications is considered as all antidepressants, all antipsychotics, all mood stabilizers, and anxiolytics/sleepers.

The prescribing clinician must clearly document:
1. The rationale justifying the use of the particular combination of medications based upon the identified symptoms of the disorder(s) and
2. Any additional likely/potential side effects to be experienced based on the particular medication combination.

Documentation of Target Symptoms

For each medication prescribed, the prescribing clinician must provide written documentation of the specific target symptoms for the use of the medication.

Some examples:
- Citalopram is being prescribed for treatment of Major Depressive Disorder. Target symptoms include: marked depressed mood, frequent suicidal ideation, and marked loss of energy.
- Ziprasidone is being prescribed for treatment of Schizophrenia, Paranoid Type. Target symptoms include: derogatory auditory hallucinations, delusions of having an electronic device in the brain, and tangential thought processes.

Rationale for Combination Use

Specific Rationales for the combined use of regularly prescribed psychotropic medications must clearly describe the reasons why the particular combination of medications is being prescribed. Rationales for polypharmacy and medication changes may include lack of full response (need to augment), patient preference, intolerable side effects of one of the medications, diagnosis changes, evidence-based practice, adverse effect, prior response, etc.

Some examples:
- Auditory hallucinations have not fully responded to risperidone alone. Haloperidol is added to target residual AH.
- Add venlafaxine to sertraline due to incomplete resolution of depressive symptoms.

References

1. Developed by The Arizona Department of Health Services Division of Behavioral Health Services. Practice Protocol; Polypharmacy Use: Assessment of Appropriateness and Importance of Documentation.

8.09 CER