

## STUDENT SPOTLIGHT

Winter 2019



## Shanna Trenaman

My name is Shanna Trenaman and I have recently joined the CAPT Board of Directors as the student representative. I trained as a hospital pharmacist and worked with the department of Geriatric Medicine at the Nova Scotia Health Authority before pursuing graduate studies. I completed a Master's degree in Applied Health Services Research at Dalhousie University, and am currently in the fourth year of my Interdisciplinary PhD, also at Dalhousie.

My research interest focuses on appropriate drug use by seniors. Topics of interest include: anticholinergic drug use, specific drug-related concerns for patients with cognitive impairment or dementia, and sex-or gender-based differences in drug use. My research is interdisciplinary, and I am involved in clinical investigations, lab-based projects, and pharmacoepidemiological research. My research has been supported by the Drug Evaluation Alliance of Nova Scotia, the Nova Scotia Health Research Foundation, the Dalhousie Pharmacy Endowment Fund, the Canadian Society of Hospital Pharmacists' Foundation, the Canadian Frailty Network, the Faculty of Graduate Studies at Dalhousie University, and the Canadian Consortium on Neurodegeneration in Aging.

I recently published a paper with CAPT member Ingrid Sketris titled; Antipsychotic Drug Dispensations in Older Adults, Including Continuation After a Fall-Related Hospitalization: Identifying Adherence to Screening Tool of Older Persons' Potentially Inappropriate Prescriptions Criteria Using the Nova Scotia Seniors' Pharmacare Program and Canadian Institute for Health's Discharge Databases (Trenaman SC, Hill-Taylor BJ, Matheson KJ, Gardner DM, Sketris IS. Current Therapeutic Research 2018;89:27-36.), which examined antipsychotic drug use by Nova Scotia Seniors' Pharmacare beneficiaries. We found that in each year from 2009 to 2014, 6% of our study population were dispensed at least one antipsychotic prescription. Despite the recommendations of quality indicators such as the STOPP criteria to avoid antipsychotics in those at high risk of falling, over 75% of the older adults who received an antipsychotic dispensation in the 100 days prior to a fall-related hospitalization, continued the drug class after discharge. There remains substantial work to determine the optimal way to support improved prescribing to older adults in Nova Scotia.