**STOP-DEM – Deprescribing for People with   
Cognitive Impairment**

Transcript for interview

**P02**

***Please refer to the key to abbreviations on the last page of this transcription***

**INT: So, my first question for you, (*participant’s name*), is you’re taking seven medications, as you’ve just indicated, how do you feel about the number of medications that you’re taking?**

P02: Most of them are necessary.

**INT: So, no positives, negatives?**

P02: I’m impartial to them really.

**INT: So, in terms of managing your medications on a day-to-day basis, your wife has kindly taken these photos, so, did you point out anything that you wanted photos to be taken of or were they your wife’s decision what to take the photos of?**

P02: My wife’s decision.

**INT: So, let’s move the pictures across so you can see them. Shall we go through them one by one, and you just tell me a little bit about the picture and how it matches to what you do on a day-to-day basis? So, what about this one here, photo number one? [pause] So, we’ve got medications on a spoon.**

P02: [Long pause] The spoon is convenient in doing it.

**INT: Do you use a spoon every time you take medications or is it just these particular two tablets?**

P02: No, every time.

**INT: Every time?**

P02: Yes.

**INT: What about photo number two then? We’ve got a little pot there with some pills in. It looks like a little pot.**

P02: [Long pause] The convenience.

**INT: Convenience. [Pause]. Is that how your wife puts your medications out for you?**

P02: Yes.

**INT: Does she put them in the pot?**

P02: Uh huh.

**INT: And give you the pot?**

P02: Yep

**INT: And then moving to photo number three, the medications being taken out of the pot and then photo number four looks like you’re about to take the pills. Is that right?**

P02: About right. Yes.

**INT: What about photo number five? We’ve got a pot with lots of strips of medication in it.**

P02: [Long pause] I don’t normally see that.

**INT: OK. So, maybe that’s one we can talk to (*name of wife*) about when we talk to her.**

P02: Yeah.

**INT: What about photo number six?**

P02: [Long pause]. Sort of in the, this pot.

**INT: [Long pause]. They look to be little pots with lids.**

P02: Yes, that’s a spring lid and this one is a screw lid. I don’t normally touch the, play with that one much [screw lid pot] and…[pause]

**INT: Do you use the pots with lids for any particular purpose?**

P02: No,

**INT: What about these last two pictures here, photo number seven and photo number eight? So, photo seven we’ve got a knife. Is there a significance to the knife?**

P02: Not particularly.

**INT: It doesn’t have any particular meaning to you?**

P02: No.

**INT: And then photo number eight looks to be you taking the tablets at the table.**

P02: Yes.

**INT: Is there a particular time of day when you take tablets from the table as in photo number eight rather than from what looks like maybe a cushion in photo number four?**

P02: [Long pause] That’s lunchtime.

**INT: So, photo number eight is lunchtime.**

P02: Or breakfast.

**INT: And photo number four?**

P02: The afternoon and the, the lounge.

**INT: So, your breakfast and your lunch in the kitchen at the table and your afternoon/evening pills in the lounge?**

P02: Yes.

**INT: So, is there anything else that you do regarding your medication yourself or is the rest of the management of the medication managed by your wife?**

P02: By (*name of wife*).

**INT: So, we can talk to (*name of wife*) about what she does to support you with the medication. So, in terms of helping you to manage your medications on a day-to-day basis, your main support is…**

P02: (*name of wife*).

**INT: (*name of wife*). So, if we then think about if a healthcare professional was to perhaps suggest that a medication might not be needed anymore. What are your thoughts about stopping medication? So, not at this particular point in time but perhaps at some point in the future.**

P02: Well, if it’s not necessary then there’s no point keeping (*undecipherable word*) on.

**INT: So, you might see that as a normal part of managing your health conditions rather than something that’s unusual?**

P02: [Long pause] Managing.

**INT: You see it as part of managing?**

P02: Yes.

**INT: So, if someone was to suggest that you stopped a medication are there any of your medications that you would be more concerned about stopping than others, for example? So, any medications for particular health conditions that you see as more important?**

P02: [Long pause] (*no verbal response, points to large tablet in photo 7*)

**INT: That one. So, the big square one? Can you remind me what that’s for (*name of wife*)?**

C02: That’s the (*clears throat*) because he’s got osteopenia.

**INT: So, you see that one as the most important one or the least important one?**

P02: [Long pause] Reasonably important.

**INT: So, perhaps one that you would be less willing to stop?**

P02: Yeah.

**INT: So, in terms of if you were to have a medication stopped, how would that impact on this whole process that we’ve got laid out in the photos from your perspective?**

P02: Very little.

**INT: So, maybe again something that is likely to impact (*name of wide*) more than you in terms of day-to-day management. Do you remember a time in the past when anybody suggested that you stop a medication?**

P02: No.

**INT: So, if we’re thinking about stopping a medication who do you think should make that decision?**

P02: The consultant.

**INT: Anybody else? Or the consultant on their own?**

P02: [Long pause] The consultant plus (*name of wife*).

**INT: Would you wish to be involved in the decision?**

P02: No.

**INT: You’d leave that to (*name of wife*)?**

P02: (*no verbal response; nods*)

**INT: Yeah, OK. Any particular reason why you think it should be the consultant?**

P02: [Long pause] The expert.

**INT: Because they’re the expert. And any particular reason why you wouldn’t want to be involved in the decision? Why you’d like (*name of wife*) to do that on your behalf?**

P02: [Pause] Expert.

**INT: OK, you see her as the expert in your medications. Marvellous. That’s good (*C02 laughs*). So, if a decision was made and it involved the consultant, it involved (*name of wife*), that a medication was to be stopped, how do you think that should be communicated to you?**

P02: [Pause] Umm, [pause] verbally, [pause] and a change in lay out of pots.

**INT: So, it would need to be done verbally before they’re laid out in the pots? Is that what you’re saying? Sorry, I’m not sure I quite understood.**

P02: Well, if you took that one away [points to photo 2], and then, there’s just those two.

**INT: So, if you took the big one away, you’d just be left with a smaller number. So, the decision is made, and you’re told it verbally, is that something that should take place at a particular time in a particular place? So, hospital appointment, GP appointment? What’s your thoughts around when and where it should?**

P02: Hospital appointment I should imagine.

**INT: So, when you’re seeing the consultant for them to tell you at that appointment?**

P02: Yes.

**INT: So, let’s say, for example, if I randomly pick this capsule here [pointing to photo 2]. I don’t know what the pills are all for but let’s take this red and yellow capsule, say you’ve had a discussion with the consultant, and they’ve agreed, and (*name of wife*)’s agreed, that should be stopped, what support might you need after you’ve stopped that medication?**

P02: [Long pause] A lot of names. I don’t know what it does so, I, I can’t really decide.

**INT: Would you like some follow-up after a medication has been stopped?**

P02: [Long pause] Yes, I think so.

**INT: And what are your thoughts about how that follow-up might look? [Pause] Would it need to be another appointment, a telephone call?**

P02: It depends really on what it does.

**INT: So, depending on what the medication does would depend on what sort of follow-up you would want?**

P02: I think so. Yes.

**INT: So, is that in relation to what might happen if you stopped the medication?**

P02: Correct.

**INT: And in terms of stopping the medication, there’s probably more we need to explore with you (*name of wife*) about what support you might need around that as well. So, if we’re having a discussion with a consultant about stopping a medication, what questions would you want answering in order to know that that decision is OK?**

P02: [Long pause]. The function of it. Function of the tablet.

**INT: Yeah, anything else?**

P02: And what happens to me.

**INT: So, what happens to you in what respect?**

P02: [Long pause] Well if it was the big one. Umm, [pause] what it does. [Points to tablets in photo 2]. That one, I’m not sure what that one does. [Pause] And those two [points to two round white tablets]. It’s one, it’s one tablet really. They’re both-together, there’s only six really.

**INT: So, it’s seven tablets but six medications?**

P02: Yes.

**INT: So, you’d want to know what it does and what might happen to you?**

P02: That’s right.

**INT: And how should that information be shared with you?**

P02: Verbally.

**INT: Would you want it in any other format or just verbally?**

P02: [Pause] A letter advising me what is happening. What, what the likely outcome of the change is likely to be. [Pause]

**INT: And would you want anyone else to hear that information?**

P02: (*name of wife*).

**INT: So, what would help you to kind of share that decision-making with the professional? Are there professionals that you would feel more comfortable with making that decision?**

P02: Yes, I guess so.

**INT: Which professionals might that be?**

P02: My doctor and the consultant at the univers, at the university.

**INT: So, your doctor being your GP?**

P02: GP.

**INT: How do you think the professionals would be able to address any worries that you might have about stopping the medications?**

P02: They have to discuss the function of it and what the effect is going to be. [Pause].

**INT: And is there anything that they could do in their discussions with you that might support you to be able to ask the questions you want to ask?**

P02: How to explain the function of the tablets and [long pause, yawns] and what’s likely to happen.

**INT: So, is there anything else about stopping medication or reducing medication that you want to tell me about? Any other thoughts?**

P02: [Pause] The cost of them I would say.

**INT: So, is that something that you think about?**

P02: [Pause] Yes, I guess it is.

**INT: So, in what way would cost come into your decision-making?**

P02: [Long pause] They’re very expensive and impact other people.

**INT: So, worry about the wider impact?**

P02: Uh huh.

**INT: And thinking about making decisions jointly with healthcare professionals, what supports you to be able to do that?**

P02: [Very long pause] (*no response, yawns*)

**INT: Have you had any experience of making decisions jointly with professionals?**

P02: (*no verbal response, shakes head*)

**INT: You’re shaking your head. Is that a: “no”?**

P02: I don’t know.

**INT:** [Interview brought to a close due to participant fatigue.] **So, they’re all the questions I had for you. Is there anything else that you’d like to add before we finish?**

P02: No.

**INT: OK. So, I’m going to stop the recording.**

**END OF INTERVIEW**

**Key to abbreviations**

**INT Interviewer**

P02 Respondent

C02 Second respondent

***Audio* file: 26.18 minutes**