Background STOPP/START Criteria are an explicit European physiological-system-based tool to detect potentially inappropriate medications. However, the application of this instrument may not be feasible at all practice settings because they require additional clinical information.

Purpose 1 - To identify the patients' clinical information requirements to correctly apply the STOPP/START Criteria; 2 - To quantitatively assess the applicability of the STOPP/START Criteria in a nursing home population using only patients' current medication profile.

Method 1 - Theoretical analysis of the information requirements of STOPP/START version 2 Criteria according to the following categories: a) patient's current medication regime, b) patient's medication history (including current regime initiation date and previous treatments), c) patient's medical records (including current and past medical conditions), and d) clinical examination results (including laboratory tests and other physiological exams). 2 - Evaluation of the effects of missing patients' information identified in by means of a cross-sectional study in the 4 nursing homes of University of Coimbra practice-based research network. Socio-demographic data and current medication profile (international nonproprietary names, dosages, pharmaceutical forms of each medicine) were obtained from patients' medical records (chronic use and PRN medicines were considered). STOPP/START Criteria were applied to the study population. Ethical approval: 105-CE-2015.

Findings 1 - For 29 of the 81 STOPP criteria and 1 of the 34 START criteria a judgement can be done when having only the current patient's medication profile. Of these, 14 require estimating patient's medical conditions based on the common use of some of the medicines in the medication list. However, 51 STOPP and 33 START criteria cannot be evaluated because they require additional information to the current medication list. 2 - The 4 nursing homes comprised 208 institutionalized older people (median age of 87 years (IQR=10), and 68.75% female), that used 1770 medicines. Of these, 989 medicines (55.9%) could be involved in a total of 1629 START/STOPP Criteria. Using only patients' current medication profile, we could judge 529 situations (32.5%), resulting in 397 positively identified START/STOPP Criteria. In the remaining 1100 situations (67.5%), additional information to the current medication list is needed to judge the occurrence of the START/STOPP Criteria.

Conclusion Two out of three situations where a medicine could be part of a START/STOPP Criteria cannot be judged when having access only to patient's current medication profile. Funding: Marta Lavrador was supported by SF RH/BD/123678/2016.