Comments on Duran et al.'s systematic review of anticholinergic risk scales (EJCP 2DOI 10.1007/s00228-013-1499-3)

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Durán et al. [1] should be commended for their comprehensive literature review of drugs with anticholinergic properties. We have recently shown the poor agreement among three scales applied in a medium- and long-stay psychiatric hospital [2]. Thus, we strongly believe that the proposed uniform drug list represents an important step forward.

Nevertheless, as stated by the authors themselves, there are some issues to be kept in mind by investigators:

- Applying drug lists in scenarios that differ from the ones in which they were originally developed can lead to

some inaccuracies. In this sense 17 of the 47 high potency anticholinergic drugs are not available in Spain [3]. In addition, it is surprising to find out that the widely available strong anticholinergic biperiden (ATC N04AA02) is not included in any of the published lists. Thus, we believe adapting scales to local settings will remain necessary.

- Moreover, to remain valid, drug lists need to be periodically updated. Otherwise, some drugs could be overlooked in the future. Currently, we frankly believe that fesoterodine and solifenacin should be next to tolterodine and darifenacin, for example. We also miss tiotropium in the list.

Finally, we agree with the authors that additional information on dosing, route of administration and confirmation of the completeness of the list needs should be taken into account to fully estimate the anticholinergic burden in poly-medicated adults.

The present work has not been published elsewhere before.

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Conflicts of interest None declared

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