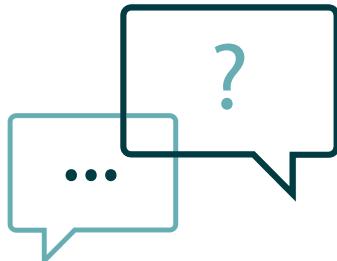


# Preferred sources and content of AOD-related information



Health professionals are the preferred source of AOD-related information among older adults.



However, alcohol-related conversations with health professionals (excluding pharmacists) appear to be uncommon, with both older adults and health practitioners raising concerns about the appropriateness of such conversations.



Many older adults appear to be dissatisfied with the length and depth of consultations regarding psychotropic medicines.



There is some evidence that older adults are most motivated to deprescribe by rationales that focus on the risk of side effects.



In contrast, knowledge of alcohol harms, alone, appears to be unlikely to dissuade older adults from drinking.



Broader qualitative literature suggests that emphasising the experience of older people to drink wisely in a positive controlled way, could be effective.



Older adults prefer AOD materials that use large text, actors of similar age, and subtitles.



We identified no studies that focused on conversations with older adults regarding illegal drug use.

## Interventions to reduce AOD-related harm



Brief interventions appear to be effective in reducing alcohol-related harms among older adults.



Interventions that *included* (but were not specific to) older adults suggest that there are three elements of effective alcohol interventions: the provision of information, personalised feedback, and being in contact with others.



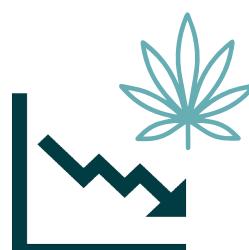
Patient-empowerment interventions, in particular EMPOWER, appear to be effective in improving sedative-hypnotic cessation among older adults.



Limited evidence suggests that educational and psychological interventions, particularly Mindfulness-Oriented Recovery Enhancement, may be effective in reducing opioid-related harms among older adults.



Community pharmacies may be a valuable resource for identifying and reducing harms from pharmaceutical opioids among older patients.



There were few interventions that were specifically aimed at reducing harms associated with cannabis or illegal drugs among older adults.