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Pills to cure all ills? We are fast becoming a medication nation. What are the alternatives? Which tablets do you really need?

Tallying up your tablets

As a nurse in a care home, it's not unusual for me to administer 200 tablets to 20 residents during a daily shift - excluding the eyedrops, eardrops, medicated creams, syrups, patches, powders, inhalers, injections and suppositories. What's your tablet tally? It's [estimated that](#) [3] 25% of us take at least three prescribed medicines per week, with the number increasing as we age.

Dr Maureen Baker, of the Royal College of General Practitioners, explains that "We have an ageing population and more patients are presenting with complex and multiple conditions including mental health issues and this is reflected in today's [prescribing] figures."

But are some tablets unnecessary? Does the centenarian really need to take a statin to lower her cholesterol? Does the man with severe Alzheimer's really need the tablet prescribed for early signs of memory loss? Do you really need to take those antibiotics?

Or should we in fact be taking more medicines? Some suggest daily vitamin D; [fish oil](#) [4] may promote heart health.

The toll it takes

When your day becomes defined by your dosette box, your life full of pills, there can be little time to forget your ills.

Overmedication increases *drug interactions* – and some can be dangerous ([warfarin](#) [5], for example, can interact

with some antibiotics and raise the risk of bleeding; mixing [tramadol](#) [6] with some antidepressants can be deadly; taking an anti-angina spray after [Viagra](#) [7] can make blood pressure plummet).

Overuse of antibiotics has created *resistant* bacteria (and we are now at risk of a “post-antibiotic apocalypse” with drug-resistant infections on the increase).

And what of the *psychological* effects? When your day becomes defined by your dosette box, your life full of pills, there can be little time to forget your ills - and some respond by ditching the drugs all together, endangering their health. It's [estimated](#) [8] that 200,000 people die each year as a result of not following their medication regime properly

Lightening the load

In the [BBC series](#) [9], “The Doctor Who Gave Up Drugs”, Dr Chris van Tulleken works with patients to replace pills with practical advice: cold water swimming was tested as an anti-depressant; walking as a way to reduce heart attack risk.

And how about [cognitive behavioural therapy](#) [10] instead of sleeping tablets for insomnia? [Rest](#) [11] instead of antibiotics for a cough? Anti-inflammatory creams instead of ibuprofen for joint pain? [Meditation](#) [12] for anxiety – and even as a way to help live with [multiple sclerosis](#) [13]?

Weight loss, meanwhile, can certainly lighten the load when it comes to taking tablets: [obesity](#) [14] has been linked to everything from diabetes to asthma.

When medicine really matters

Whether it's to control blood clotting, avert an asthma attack, stop a seizure, stabilise blood sugars, boost your blood, promote heart health, kill cancer cells or suppress Parkinson's or pain, many medicines really matter, and should be taken as prescribed.

One man, caring for his partner with HIV explains that, “With HIV, medicine compliance is absolutely critical because the virus can replicate and become resistant to treatment”.

And whilst [antidepressants](#) [15] often get a bad press, their use can in severe depression reduce suicide risk. In many others, antidepressants can restore emotional balance and improve quality of life.

Making your mind up

Discuss your drugs with your doctor. Ask whether there are alternatives to pills.

It's likely that your questions will be welcome – some GPs are being trained in ‘[lifestyle medicine](#) [16]’ – and encouraged to consider where drugs can be replaced by lifestyle changes. Dr [Rangan Chatterjee](#) [16] believes that we can “eat, sleep, relax and move” our way to better health. “What we put on our plates and how we use our bodies are the most powerful tools we have”, he says. “It is time to start using them to take back our health. Most of my patients don't need a pill, they need a lifestyle change”.

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