

Dementia

Evidence Update



January 2018

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Training Calendar 2018

All sessions are one hour

January (13.00-14.00)

4 th (Thu)	Statistics
8 th (Mon)	Literature Searching
18 th (Thu)	Critical Appraisal
24 th (Wed)	Statistics

February (12.00-13.00)

1 st (Thu)	Literature Searching
9 th (Fri)	Critical Appraisal
12 th (Mon)	Statistics
20 th (Tue)	Literature Searching
28 th (Wed)	Critical Appraisal

March (13.00-14.00)

8 th (Thu)	Statistics
12 th (Mon)	Literature Searching
20 th (Tue)	Critical Appraisal
28 th (wed)	Statistics

Your Outreach Librarian – **Helen Pullen**

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Outreach: Your Outreach Librarian can help facilitate evidence-based practice for everyone in the team, as well as assisting with academic study and research. We also offer one-to-one or small group training in **literature searching, critical appraisal and medical statistics**. Get in touch: library@uhbristol.nhs.uk

Literature searching: We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a one-to-one session where we can guide you through the process of creating a well-focused literature research. Please email requests to library@uhbristol.nhs.uk

Departmental News

News, Research, Conferences, Training etc

Please contact us with any departmental news you wish to share with your colleagues in your Evidence Update bulletin.

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Updates

NICE National Institute for
Health and Care Excellence

[Dementia assessment and improvement framework](#)

Source: [NHS Improvement](#) - 05 December 2017

An evidence-based framework to support and enable directors of nursing and medical directors to achieve 'outstanding' care standards for those living with dementia during their stay in hospital.

Remove: [Guidance](#) filter

[NHS England Prevent Mental Health Guidance and new e-Learning package now available](#)

Source: [NHS England](#) - 02 November 2017 - Publisher: NHS England

The guidance is designed to support providers and staff to exercise their statutory and professional duties to safeguard vulnerable adults, children and young people at risk of radicalisation.



[18F PET with florbetapir for the early diagnosis of Alzheimer's disease dementia and other dementias in people with mild cognitive impairment \(MCI\)](#)

Gabriel Martínez, Robin WM Vernooij, Paulina Fuentes Padilla, Javier Zamora, Xavier Bonfill Cosp, Leon Flicker

Online Publication Date: November 2017

UpToDate®

OpenAthens login required. Register here: <https://openathens.nice.org.uk/>

DEMENTIA

Gender differences in risk of Alzheimer disease conferred by APOE e4 (November 2017)

The apolipoprotein E epsilon 4 (*APOE* e4) allele is a well-recognized risk factor for late-onset Alzheimer disease (AD), and most studies have found that its effect is greater in women than men. Now, a global meta-analysis of observational studies in more than 57,000 adults has found that the differential effect in women may be age-dependent and limited to ages 55 to 70 years for the development of mild cognitive impairment (MCI) and ages 65 to 75 years for the development of AD [8]. The mechanisms underlying this vulnerability are not well understood but could provide important insights into gender-specific strategies for AD prevention. (See "[Genetics of Alzheimer disease](#)", section on 'Strength of association'.)

Risk of cognitive impairment in adults with sleep-disordered breathing (November 2017)

Obstructive sleep apnea (OSA) and other causes of sleep-disordered breathing are increasingly recognized as a risk factor for cognitive impairment and dementia, possibly through deleterious effects of hypoxemia or shared vascular risk factors. In a pooled analysis of prospective studies in over 200,000 adults, those with sleep-disordered breathing were 26 percent more likely to develop clinically relevant cognitive decline or dementia [9]. Further studies are needed to determine whether effective treatment of OSA can reduce the risk of dementia. (See "[Risk factors for cognitive decline and dementia](#)", section on 'Obstructive sleep apnea'.)

NHS Choices: Behind the Headlines

[Diabetes drug may help with memory loss in dementia](#) Tuesday January 2 2018

[Still no evidence brain training protects us against dementia](#) Friday November 17 2017

[Could a blood test in middle age predict dementia risk?](#) Thursday November 2 2017

Database Articles on Dementia

If you would like any of the following articles in full text, or if you would like a more focused search on your own topic, then get in touch: library@uhbristol.nhs.uk

[Physical Activity Interventions in Preventing Cognitive Decline and Alzheimer-Type Dementia: A Systematic Review.](#)

Ann Intern Med

1. Dementia prevention, intervention, and care

Author(s): Livingston, Gill; Sommerlad, Andrew; Orgeta, Vasiliki; Costafreda, Sergi G; Huntley, Jonathan; Ames, David; Ballard, Clive; Banerjee, Sube; Burns, Alistair; Cohen-Mansfield, Jiska; Cooper, Claudia; Fox, Nick; Gitlin, Laura N; Howard, Robert; Kales, Helen C; Larson, Eric B; Ritchie, Karen; Rockwood, Kenneth; Sampson, Elizabeth L; Samus, Quincy; Schneider, Lon S; Selbæk, Geir; Teri, Linda; Mukadam, Naaheed

Source: The Lancet; Dec 2017; vol. 390 (no. 10113); p. 2673

Publication Date: Dec 2017

Publication Type(s): Journal Article

PubMedID: 28154

Available at [The Lancet](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: Acting now on dementia prevention, intervention, and care will vastly improve living and dying for individuals with dementia and their families, and in doing so, will transform the future for society.

Database: BNI

2. Gill Livingston: transforming dementia prevention and care

Author(s): Davies, Rachael

Source: The Lancet; Dec 2017; vol. 390 (no. 10113); p. 2619

Publication Date: Dec 2017

Publication Type(s): Journal Article

PubMedID: 28154

Available at [The Lancet](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: It was during a placement as a junior doctor in the 1980s at Friern Barnet, one of the largest psychiatric hospitals in Europe, that Gill Livingston first witnessed the real human impact of dementia. "People were living in old Victorian wards of 24 people with little privacy. It seemed a terrible way to live", she recalls. The experience sparked a lifelong interest and a passion to improve the lives of people with dementia and their carers.

Database: BNI

3. Prevention and management of dementia: a priority for public health

Author(s): Frankish, Helen; Horton, Richard

Source: The Lancet; Dec 2017; vol. 390 (no. 10113); p. 2614

Publication Date: Dec 2017

Publication Type(s): Commentary

PubMedID: 28154

Available at [The Lancet](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract:As outlined in the Lancet Commission, dementia is likely to be a clinically silent disorder that begins at midlife (about age 40-65 years) and the terminal stage manifests as symptoms of dementia. This hypothesis suggests a window of opportunity to intervene by addressing dementia risk factors in middle age.

Database: BNI

4. Dementia burden coming into focus

Author(s): The Lancet

Source: The Lancet; Dec 2017; vol. 390 (no. 10113); p. 2606

Publication Date: Dec 2017

Publication Type(s): Editorial

PubMedID: 28154

Abstract:Dementia is a problem that requires a swift worldwide response. The WHO Global Action Plan on the Public Health Response to Dementia (2017-25) lays out the framework for action, but the warning signs are growing ever stronger, with an ageing population projected to include 152 million people with dementia by 2050.

Database: BNI

5. Progress on dementia-leaving no one behind

Author(s): Prince, Martin

Source: The Lancet; Dec 2017; vol. 390 (no. 10113); p. e51

Publication Date: Dec 2017

Publication Type(s): Commentary

PubMedID: 28154

Available at [The Lancet](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract:The Lancet Commission Dementia Prevention, Intervention, and Care¹ makes a timely evidence-driven contribution to global efforts to improve the lives of people with dementia and their carers, and limit the future impact on societies.

Database: BNI

6. Dementia peer support: service delivery for the people, by the people

Author(s): Femiola, Clementine; Tilki, Mary

Source: Working With Older People; 2017; vol. 21 (no. 4); p. 243-250

Publication Date: 2017

Publication Type(s): Case Study

PubMedID: 59287

Abstract: Purpose The purpose of this paper is to describe a community-based peer support project in the London borough of Brent, led by people living with dementia for people living with dementia. Design/methodology/approach The Brent Dementia Peer Support Project is a collaboration between a social movement Community Action on Dementia Brent, Brent CCG, Brent Council, third-sector organisations and faith communities. Findings Stakeholder workshops, ethnographic research highlighted the need to support people living with dementia, especially by people who understand that experience. The findings also demonstrated the abilities and skills retained by people living with dementia, their wish to help others to contribute and to remain connected with their communities. Research limitations/implications This is an account of one pilot project in a London borough, but is broadly applicable elsewhere. Further research is needed into the values and practicalities of peer support by and for people living with dementia. Practical implications People with dementia and their carers lack accessible information and empathetic support to cope with the condition and live independently. This can be offered through dementia peer support services. Social implications There are growing numbers of people living with dementia who are motivated to share their knowledge, skills and experiences to improve the lives of other people with dementia. Originality/value This paper describes how people with dementia can be enabled to design, inform and deliver support to other people with the condition.

Database: BNI

7. Dementia cafés: recommendations from interviews with informal carers

Author(s): Akhtar, Farrukh; Greenwood, Nan; Smith, Raymond; Richardson, Angela

Source: Working With Older People; 2017; vol. 21 (no. 4); p. 236-242

Publication Date: 2017

Publication Type(s): Journal Article

PubMedID: 59287

Abstract: Purpose Dementia cafés (also known as Alzheimer's or memory cafés) have been running in the UK since 2000. The purpose of this paper is to report on the recommendations from recent research that interviewed family carers on their experiences of using the cafés. Design/methodology/approach The research was carried out in cafés in and around London, and focussed on informal, unpaid carers' experiences of using them. In total, 11 carers from five different dementia cafés were interviewed, using semi-structured questionnaires. The results were thematically analysed. Findings The findings showed that carers had an overwhelming appreciation of the cafés and what they offered, but several of the findings led to the recommendations about the recruitment and training of café co-ordinators; how cafés present themselves and their services and how they can offer dedicated support to informal carers. Originality/value These recommendations will be of use to café organisers and commissioners, especially considering the dearth of information currently available in this area.

Database: BNI

8. Implementing Nurse-Facilitated Person-Centered Care Approaches for Patients With Delirium Superimposed on Dementia in the Acute Care Setting

Author(s): Yevchak, Andrea; Fick, Donna M; Kolanowski, Ann M; McDowell, Jane; Monroe, Todd; LeViere, Anna; Mion, Lorraine

Source: Journal of Gerontological Nursing; Dec 2017; vol. 43 (no. 12); p. 21-28

Publication Date: Dec 2017

Publication Type(s): Journal Article

PubMedID: 36484

Available at [Journal of Gerontological Nursing](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: Little is understood about the use of person-centered care (PCC) for individuals with delirium superimposed on dementia (DSD), especially in the acute care setting. As part of a larger clinical trial, the purpose of the current exploratory study was to describe examples and qualitatively derived themes of nurse-facilitated PCC for hospitalized older adults with dementia and delirium. A total of 750 delirium rounds were analyzed across three diverse acute care sites. Qualitative derived themes of PCC included: (a) Knowing the Patient's Baseline ; (b) Knowing the Patient's Interests and Values ; (c) Enhancing Sensory Abilities to Communicate ; (d) Individualizing Cognitive Stimulation ; and (e) Enhancing Behavioral Approaches to Comfort and Sleep . Barriers included failure to see the patient as an individual and lack of time. Principles of PCC were effectively used, demonstrating the potential for PCC to ease the burden of DSD for all members of the health care team. [*Journal of Gerontological Nursing*, 43 (12), 21-28.]

Database: BNI

9. Association of physical activity as a distinctive feature of clustering of lifestyle behaviours with dementia risk: evidence from the English Longitudinal Study of Ageing

Author(s): Cadar, Dorina; Hackett, Ruth A; Mischie, Monica; Llewellyn, David J; Batty, G David; Steptoe, Andrew

Source: *The Lancet*; Nov 2017; vol. 390 ; p. S29

Publication Date: Nov 2017

Publication Type(s): Journal Article

PubMedID: 28154

Available at [The Lancet](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: Funding National Institute on Aging (NIA) (grant 528122), NIA (grant RO1AG7644), and a consortium of UK government departments coordinated by the Economic and Social Research Council (ESRC).

Database: BNI

10. Dementia health needs assessment for Cardiff and Vale University Health Board, Wales: a qualitative study

Author(s): Beynon, Claire

Source: *The Lancet*; Nov 2017; vol. 390 ; p. S23

Publication Date: Nov 2017

Publication Type(s): Journal Article

PubMedID: 28154

Available at [The Lancet](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: Funding None.

Database: BNI

11. Evaluation of a Pain Assessment Procedure in Long-Term Care Residents With Pain and Dementia

Author(s): van Kooten, Janine, MD, MSc; Smalbrugge, Martin, MD, PhD; van der Wouden, Johannes C, PhD; Stek, Max L, MD, PhD; Hertogh, Cees M P M, MD, PhD

Source: Journal of Pain and Symptom Management; Nov 2017; vol. 54 (no. 5); p. 727

Publication Date: Nov 2017

Publication Type(s): Journal Article

Abstract:Background: The management of pain in long-term care (LTC) residents with dementia is complex. A prospective exploratory study was conducted to describe the course of pain and pain management strategies following a guideline-based pain assessment procedure in LTC residents with pain and dementia. Measures: Pain observations with the Mobilization Observation Behaviour Intensity Dementia (MOBID-2) Pain Scale, a review of the electronic patient file and pharmacy files and physical examination of LTC residents with pain and dementia. Intervention: Communication of the assessment results to the attending physician including guideline-based treatment recommendations. Outcomes: After three months, complete follow-up data were obtained for 64 residents. Pain intensity was significantly reduced ($P < 0.001$). The proportion of residents with persistent pain was 58% and the total number of analgesic prescriptions did not change significantly. Conclusions: There is room for improvement regarding pain management in LTC residents with pain and dementia, and performance feedback seems a promising strategy to explore further.

Database: BNI

12. Can Dementia Be Prevented?

Author(s): Pfeifer, Gail, MA, RN

Source: The American Journal of Nursing; Nov 2017; vol. 117 (no. 11); p. 15

Publication Date: Nov 2017

Publication Type(s): News

PubMedID: 28566

Abstract:According to the Alzheimer's Association, more than five million US adults have Alzheimer's disease, and that figure could increase to 16 million by 2050. The situation is not unique to the US; a worldwide estimate puts the number of people living with dementia, including its most prevalent form, Alzheimer's disease, at 50 million in 2017. The Lancet Commission on Dementia Prevention, Intervention, and Care conducted a comprehensive review of potentially modifiable risk factors for the development of dementia and posits that efforts to address these risk factors could reduce the number of new cases estimated to be 9.9 million annually over time.

Database: BNI

Journal Tables of Contents

The most recent issues of the following journals:

- [Alzheimer's and Dementia](#)
- [Dementia: The International Journal of Social Research and Practice](#)
- [Age and Ageing](#)
- [Journal of the American Geriatrics Society](#)

Click on the title (+ Ctrl) for the most recent tables of contents. If you would like any of the papers in full text then please get in touch: library@uhbristol.nhs.uk

[Alzheimer's & Dementia](#)

December 2017 – Volume 13 – Issue 12

[Dementia: The International Journal of Social Research & Practice](#)

November 2017 – Volume 16 – Issue 8

[Age & Ageing](#)

January 2018 – Volume 47 – Issue 1

[Journal of the American Geriatrics Society](#)

December 2017 – Volume 65 – Issue 12



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