

Timely diagnosis and intervention for people with dementia

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Jockey Club Centre for Positive Ageing experts highlight the importance of timely diagnosis and intervention for people with dementia

Hospital admissions are common among people with dementia. Compared to cognitively intact individuals, people with dementia are more prone to hospitalisations, and often experience longer stays. ^(1,2) The unfamiliar and confusing hospital environments, coupled with underlying physical health issues, could exacerbate the conditions of individuals with dementia, ⁽³⁾ making it challenging for care partners to address their complex needs. This situation may lead care partners to seek long-term care facilities for their loved ones eventually.

Dementia research

To explore factors influencing nursing home admissions of people with dementia, the Jockey Club Center for Positive Ageing (JCCPA) analysed 1,054 hospital admission records of people with dementia and compared their demographics and clinical data to their living status upon hospital discharge. People with dementia who were primarily admitted for falls, fractures, dementia or related disturbances, living alone and with extended hospital stays were more likely to be transferred to nursing homes upon discharge from the hospital.

The decision to admit individuals with dementia to nursing homes can have negative implications for both the individuals themselves and their care partners. Previous research has linked institutionalisation to anxiety, depression and changed behaviours in people with dementia. ⁽⁴⁻⁶⁾ Individuals may experience declining quality of life, cognitive function and physical health, particularly those newly admitted to long-term care facilities.

For care partners, the act of placing loved ones in nursing homes can evoke mixed emotions. While it may alleviate the caring burden as the responsibility shifts to others, care partners may grapple with feelings of loss and guilt over the decision to place their loved ones in institutional settings. ⁽⁶⁾ Additionally, the financial costs of institutional care can be significantly higher compared to home-based care. ⁽⁷⁾

Early diagnosis and intervention for people with dementia

To mitigate the negative consequences associated with hospital and nursing home admissions, it is imperative to implement preventive strategies at the earliest opportunity. Early diagnosis and intervention play a critical role in slowing cognitive decline, preserving functional abilities and delaying institutionalisation. ⁽⁸⁾ Studies suggest that

timely detections and interventions could yield significant medical and caring cost savings, amounting to \$5,508 in direct costs and \$6,360 in indirect costs per person with dementia over a decade. ⁽⁹⁾

Despite these potential advantages, early diagnosis and intervention for people with dementia remain uncommon. Alzheimer's Disease International estimates that the global rate of undiagnosed dementia stands as high as 75%. ⁽¹⁰⁾ Many individuals and their care partners often overlook early signs of dementia and attribute memory loss and other cognitive changes to normal ageing. Typically, diagnoses are made when individuals have already progressed to the moderate or severe stages of dementia, leading to less effective interventions compared to those who received early-stage interventions.

To facilitate timely diagnosis, screening tests could help identify individuals susceptible to dementia quickly. Electronic versions of the tests allow individuals to self-administer the assessments at their convenience, eliminating the need to visit memory clinics unless further evaluations are required for those at high risk of having dementia. Low-income elderly are frequently among those least likely to receive a diagnosis, primarily due to their limited access to specialist care. ⁽¹¹⁾ Many rely on primary care physicians, who may lack the expertise in diagnosing and managing dementia. ⁽¹²⁾ Providing time- and cost-effective dementia screening could incentivise the population to seek early diagnosis.

Dementia: Providing support after diagnosis

Support for people with dementia and their care partners timely after diagnosis is essential. Providing information, social and emotional support, and access to relevant services could uphold the psychological well-being of individuals and their care partners, enhance self-efficacy in caring for people with dementia, and reduce the burden of caring. ⁽¹³⁾ Research on post-diagnostic support underscores the value of tailored services that address individual needs rather than generic approaches. Given the diverse manifestations of dementia based on specific types, individuals and care partners prefer information and skills that cater to the particular form of dementia. This personalised approach helps alleviate the common sense of information overload experienced by those newly diagnosed. ⁽¹⁴⁾

Assigning case managers for support is highly valued by individuals with dementia and their care partners who have undergone post-diagnostic services. Individuals who have not received post-diagnostic services expressed feeling abandoned since they did not receive any support after diagnosis. ⁽¹⁴⁾ The case managers can serve as central points of contact, guiding people with dementia and their care partners through the available resources, coordinating services, and facilitating access to relevant support. This ensures that the people with dementia and their care partners know where to seek information and how to access the necessary resources. The evolution of technology enables the delivery of knowledge and skills through online platforms. This method allows individuals to learn at their own pace, revisit information as needed and enhances the accessibility and efficacy of post-diagnostic support.

With the generous support of The Hong Kong Jockey Club Charities Trust, JCCPA has initiated the territory-wide Jockey Club “Brain Health” Dementia Screening and Community Support Project to ensure timely diagnosis and post-diagnostic services for individuals suspected of cognitive impairment. The programme comprises three components: a cognitive screening test, a medical follow-up, and support services.

People suspected to have dementia could first conduct a 15-minute screening test. It is in digital format, allowing them to complete the assessment conveniently at home. Participants identified as “requiring follow-up” in the initial screening would be referred for additional cognitive and functional assessments by organisations in their local communities. Individuals assessed to be with cognitive impairment would then be referred to programme doctors for dementia diagnosis with subsidised brain scans and blood tests to encourage early diagnosis.

For individuals identified with mild cognitive impairment or mild dementia, the programme extends both in-person and online support services for them and their care partners. This includes education on dementia, cognitive and physical function management, personalised counselling, and skills in caring. Each participant and their care partners would be paired with a Case Manager to deliver holistic support and coordinate their needs throughout the programme. This approach ensures that individuals and their families have a centralised point of contact to guide them on the necessary knowledge and available resources. The participants would also receive subsidised medical follow-up for up to 18 months.

Our aim is for this approach to help ensure early identification, diagnosis, and treatment of dementia in Hong Kong. This way, individuals with dementia and their caregivers can get the required assistance, regardless of their location or financial situation, to either maintain or enhance their ability to function and their overall well-being. In the long term, we hope that the enhancement in dementia knowledge and caregiving skills, as well as the improved conditions of the participants of dementia, will facilitate their ageing so that social service utilisation can be optimised.

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