

Dementia: from presentation to management

Dr Luke Solomons offers an overview

Remember
Find
Assess
Investigate
Refer

Person with cognitive problems

Self-report/collateral history from carer

- Memory impairment
- Personality change
- Functional limitations



Presentation and assessment by GP

Acute onset: consider delirium

- Think toxic, head injury, substance use?
- Check mental state (hallucinations/ fluctuating alertness)
- Investigate and treat infection/ electrolyte imbalance

Cognitive impairment persists despite treatment

Investigate to rule out reversible causes

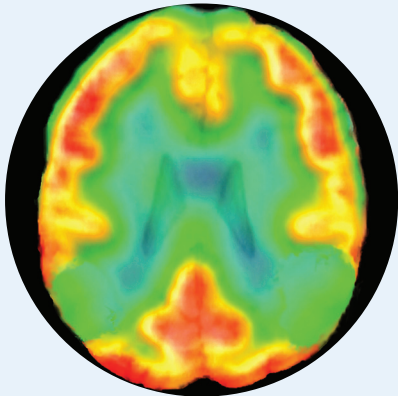
- Routine haematology
- Biochemistry (electrolytes, calcium, glucose, and renal and liver function)
- Thyroid function tests
- Serum vitamin B12 and folate levels
- Chest X-ray and ECG if indicated

Early referral to memory assessment service as per local protocol or pathway

Gradual onset: consider dementia

- Check mental state to exclude anxiety or depression
- Brief cognitive exam (MMSE/ GPCOG/6-CIT/7-min screen)
- Physical examination (blood pressure, pulse)
- Review medication. Stop anticholinergics if appropriate

Diagnosis by memory clinic



Mild cognitive impairment

Monitor cognition annually and re-refer if decline in function

Dementia diagnosis confirmed

Alzheimer's/ vascular/mixed/ Lewy body/ Parkinson's/ frontotemporal dementia

Depression/ anxiety

Monitor treatment response (eg geriatric depression scale)

Community-based management

Biological

- Antidementia medication if appropriate (donepezil/ rivastigmine/galantamine/ memantine)
- Six-month reviews of cognition and functioning
- Annual dementia checks
- Management of pain and long-term conditions

Psychological

- Cognitive rehabilitation (reduce impact of poor memory) and cognitive stimulation (activities and exercises to improve memory and communication)
- Life story work, art, music or aromatherapy
- Behavioural approaches in advanced dementia

Social/information/support

- Dementia care advisers
- Social worker input as required. Care package. Activities. Support group.
- Information: Alzheimer's society dementia guide: alzheimers.org.uk/dementiaguide

Advance care planning and end-of-life care planning

Jointly with person, carer, GP and secondary care

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Conflicts: none declared