



Latest News

[G8 summit on dementia](#)

Wednesday 11 December 2013 saw leaders from the G8 nations gathered in London to discuss the growing impact of the condition worldwide and to develop an international plan to tackle dementia.

The [summit](#) was opened by Peter Dunlop ([watch video](#)), a former medical consultant who now lives with dementia. His moving description of what it is like to live with the condition received a standing ovation and set the tone for the discussions that followed.

After Dr Margaret Chan from the WHO and Yves Leterme from the OECD presented on the global health and economic challenges presented by dementia, the delegates were led through three discussion sessions, followed by a keynote address by Prime Minister David Cameron.

The discussion sessions covered three topics:

1. [Improving life](#) and care for [people affected by dementia](#), and their [carers](#)
2. [Preventing](#) and delaying dementia
3. Social adaptation to global ageing and dementia

What was agreed?

The summit ended with the publication of a signed declaration and communiqué that outlines the agreements made by the G8 nations. They have agreed to:

- set an ambition to identify a cure, or a significant disease-modifying therapy, for dementia by 2025
- significantly increase the amount spent on dementia research
- increase the number of people involved in clinical trials and studies on dementia
- establish a new global envoy for dementia innovation, following in the footsteps of global envoys on HIV and Aids and on Climate Change
- develop an international action plan for research



- share information and data from dementia research studies across the G8 countries to work together and get the best return on investment in research
- encourage open access to all publicly-funded dementia research to make data and results available for further research as quickly as possible.

Perhaps the most important of the announcements is the commitment to identify a cure or a disease-modifying therapy for dementia by 2025. Finding treatments that can ultimately stop the death of brain cells is the Holy Grail for dementia research. For this to be achieved by 2025, there needs to be significant increases in the funding for dementia research but also changes in the way research is conducted, pushing international collaboration and the global sharing of data.

To ensure the momentum of the summit is not lost, the declaration sets out plans for three legacy events, including one in the UK to explore alternative funding sources for dementia research.

More detail at: http://www.alzheimers.org.uk/site/scripts/documents_info.php?documentID=2363&pageNumber=4

[New global partnership aims to accelerate dementia drug discovery](#)

Alzheimer's Society and Alzheimer's Drug Discovery Foundation (ADDF) are offering up to \$1.5 million for new research projects with potential to speed up the development of treatments for dementia.

The international collaboration could help make the hope of finding effective dementia treatments within the next 10 years a reality.

Focusing on drug repurposing and repositioning, the new call for proposals aims to take drugs that already exist for other conditions and develop them as dementia treatments. Currently it can take up to 20 years and around a billion dollars to develop a new drug from scratch, but by using existing drugs, the partners hope to deliver treatments far sooner and at a fraction of the cost.

Together, the organisations are offering up to \$1.5 million for each project that either tests promising drugs in people in clinical trials or in preclinical animal models, advancing them towards testing in humans. The call is open for research looking at all forms of dementia including Alzheimer's disease.

This international call for research proposals comes just weeks after the G8 Dementia Summit in London called for more global collaboration in dementia research in order to develop effective treatments by 2025.

The announcement is also part of [Alzheimer's Society's Drug Discovery Programme](#), which hopes to deliver a new dementia treatment within the next five to 10 years. The programme, and process of drug repurposing is explained [a new video](#) by Alzheimer's Society.



[Guide to improve dementia care launches in Parliament](#)

20th January saw the Parliamentary launch of the Triangle of Care - a guide to improving dementia care developed by the RCN and the Carers Trust and funded by the RCN Foundation.

Hosted by Hazel Blears MP, the vice chair of the All Party Parliamentary Group on Dementia, attendees at the event heard how six key standards can help bring about better collaboration between the patient, the carer, and the health professionals working with them.

Ms Blears, whose mother Dorothy has dementia, said: "Carers are usually family members or close friends of people with dementia, so they understand them better than anyone.

"Doctors and nurses should therefore work closely with both carers and dementia patients to ensure they have all the information they need to provide the best possible care and treatment."

Commenting on the event, Dr Peter Carter, Chief Executive and General Secretary of the RCN, said: "We are very pleased to see this excellent piece of work officially launched in Parliament. When people with dementia go into hospital, it is essential that their carers not only feel included and involved in their care, but play an integral role in it."

Thea Stein, Chief Executive of Carers Trust said: "The partnership between Carers Trust and the Royal College of Nursing has been incredibly positive and we hope that this can be replicated across health services with nurses and carers working as partners."

[Download the Triangle of Care guide](#)

[£3m Dementia Consortium launched to boost dementia drug discovery](#)

A new £3 million [Dementia Consortium](#) bringing together research experts from the charitable, academic and private sectors has launched to expedite development of new drugs for dementia. The Dementia Consortium unites the charity [Alzheimer's Research UK](#) with life science technology transfer experts MRC Technology and two pharmaceutical companies; Eisai and Lilly.

The Consortium will seek to end the long wait since the last dementia treatment by closing the gap between fundamental academic research and the pharmaceutical industry's drug discovery programmes. The Dementia Consortium will provide funding, resources and expertise to both increase the number of, and capitalise upon, new drug targets emerging from across the academic sector that hold promise of bringing patient benefit.



Latest Research

Study suggests link between pesticide, DDT and Alzheimer's disease

Exposure to the pesticide DDT could be linked to an increased risk of Alzheimer's disease, according to a study published in the journal, JAMA Neurology today (27 January 2014).

Researchers at Rutgers Medical School in the United States examined the association between Alzheimer's disease and blood levels of DDE (dichlorodiphenyldichloroethylene). DDE is a by-product of the pesticide DDT (dichlorodiphenyltrichloroethane), which was banned in the UK in 1984.

By comparing blood samples from 86 people with Alzheimer's disease to 79 controls without the condition, the researchers found that the group with Alzheimer's disease had on average 3.8 times more DDE in their blood. The participants had an average age of 85.7. Those with the highest levels of blood DDE also performed worse on tests of cognitive function. The study concluded that testing for DDE in the blood could help identify those at greater risk of Alzheimer's

Research reference: Elevated serum pesticide levels and risk for Alzheimer's Disease, Jason R Richardson PHD et al. JAMA Neurology, January 27, 2014.

Research findings show exercise plays significant role in reducing risk of dementia

A study which monitored the health habits of 2,235 men over a 35-year period has found that exercise significantly reduces the risk of dementia.

Published today in PLOS One journal by researchers from Cardiff University, the study is the longest of its kind to probe the influence of environmental factors in chronic disease.

The study, funded by the Medical Research Council, Alzheimer's Society and the British Heart Foundation, identifies **five healthy behaviours** as being integral to having the best chance of leading a disease-free lifestyle: taking regular exercise, non-smoking, a low bodyweight, a healthy diet and a low alcohol intake.

The people who consistently followed four or five of these behaviours experienced a 60 per cent decline in dementia and cognitive decline - with exercise being the strongest mitigating factor - as well as 70 per cent fewer instances of diabetes, heart disease and stroke, compared with people who followed none.



Oestrogen and diabetes linked to increased dementia risk

Research in France has suggested older women who have high levels of a specific type of oestrogen in their blood may be more likely to develop dementia. The study, which suggests women with high oestrogen and diabetes may have an even greater risk of the disease, is published online in the journal [Neurology](#).

Designing a complex intervention for dementia case management in primary care

Community-based support will become increasingly important for people with dementia, but currently services are fragmented and the quality of care is variable. Case management is a popular approach to care co-ordination, but evidence to date on its effectiveness in dementia has been equivocal. [Case management interventions](#) need to be designed to overcome obstacles to care co-ordination and maximise benefit. A successful case management methodology was adapted from the United States (US) version for use in English primary care, with a view to a definitive trial. Medical Research Council guidance on the development of complex interventions was implemented in the adaptation process, to capture the skill sets, person characteristics and learning needs of primary care based case managers.

The generic skills and personal attributes were described for practice nurses taking up the case manager role in their workplaces, and for social workers seconded to general practice teams, together with a method of assessing their learning needs. A manual of information material for people with dementia and their family carers was also created using the US intervention as its source.

Co-design produces rich products that have face validity and map onto the complexities of dementia and of health and care services. The feasibility of the case manager role, as described and defined by this process, needs evaluation in 'real life' settings.

Early-onset dementia: the impact on family care-givers

British Journal of Community Nursing, Dec 2013, vol. 18, no. 12, p. 598-606,

People with early-onset dementia (EOD) and their family carers remain an overlooked population within the policy and practice priorities of community health care. No standard provision of care or support currently exists for those with EOD and the family carer. Yet family members provide the majority of the full-time care required for this progressive, irreversible illness. The aim of this



research was to explore the impact of care-giving on family members caring for a relative with EOD. The care-giving experiences identified in this study emphasise the need for improvement in the provision of community and specialised services for people with EOD and family carers. The key themes of this qualitative study were diagnostic problems, impact of care-giving, relationship change and lack of resources. These findings provide key directives for improving community practice, services and support for people with EOD and their family carers.

Dementia care advisors transforming care

Journal of Dementia Care, Nov 2013, vol. 21, no. 6, p. 16-17

Report on progress of the first team of dementia care advisors to be based within the NHS.

Nurse-led dementia care

Australian Nursing and Midwifery Journal, Oct 2013, vol. 21, no. 4, p. 44-45,

Community nurses who visit older people in their own homes could hold the key to identifying people predisposed to dementia.

Health care experiences of people with dementia and their caregivers: a meta-ethnographic analysis of qualitative studies

Canadian Medical Association. Journal, Oct 2013, vol. 185, no. 14

Understanding the health care experience of people with dementia and their caregivers is becoming increasingly important given the growing number of affected individuals. We conducted a systematic review of qualitative studies that examined aspects of the health care experience of people with dementia and their caregivers to better understand ways to improve care for this population. In total, 46 studies met our inclusion criteria; these involved 1866 people with dementia and their caregivers. We identified 5 major themes: seeking a diagnosis ; accessing supports and services; addressing information needs; disease management; and communication and attitudes of health care providers. The health care experience of people with dementia and their caregivers is a complex and dynamic process, which could be improved for many people. Understanding these experiences provides insight into potential gaps in existing health services.



Modifying existing services or implementing new models of care to address these gaps may lead to improved outcomes for people with dementia and their caregivers.

Dementia case management and risk of long-term care placement: a systematic review and meta-analysis

International Journal of Geriatric Psychiatry, Sep 2013, vol. 28, no. 9, p. 889-902

The objective of this study is to evaluate the effectiveness of dementia case management compared with usual care on reducing long-term care placement, hospitalization, and emergency department visits for adult patients with dementia. We also sought to evaluate the effectiveness of this intervention on delaying time to long-term care placement and hospitalization.

Dementia case management demonstrated a short-term positive effect on reducing the risk of long-term care placement among older people with dementia residing in the community. However, other sources of resource utilization and more extended effects of dementia case management on risk of long-term care placement warrant further investigation.

World Alzheimer Report

The World Alzheimer Report 2013 *'Journey of Caring: An analysis of long-term care for dementia'*, reveals that, as the world population ages, the traditional system of "informal" care by family, friends, and community will require much greater support. Globally, 13% of people aged 60 or over require long-term care. Between 2010 and 2050, the total number of older people with care needs will nearly treble from 101 to 277 million.

The [Executive Summary](#) provides a synopsis of the findings of detailed evidence-based reviews presented in the full report. The full report contains tabulated data and references, as well as a more detailed exposition and discussion of results.



Dementia pathways.

NICE

The following NICE pathways are available open access at the following urls. Clicking on a section within the pathway will bring up explanatory notes and additional material such as 'implementation tools' and 'source guidance'

Dementia overview

<http://pathways.nice.org.uk/pathways/dementia>

Dementia diagnosis and assessment

<http://pathways.nice.org.uk/pathways/dementia/dementia-diagnosis-and-assessment>

Dementia interventions

<http://pathways.nice.org.uk/pathways/dementia/dementia-interventions>

Map of Medicine

The Map of Medicine is a collection of evidence-based, practice-informed care maps which connect all the knowledge and services around a clinical condition.

The Map of Medicine 'Dementia' care map has recently been updated to include the latest guidance from NICE, WHO, and the European Federation of Neurological Societies (EFNS). It provides succinct, accessible information on the diagnosis, assessment, and management of people with dementia, as well as advice on dealing with co-morbid emotional disorders and supportive information for carers.

An NHS Athens username/password is required to view this resource

<http://directaccess.mapofmedicine.com/evidence/terms.htm?next=/map/dementia1.html>

TRFT Library & Knowledge Service

The Rotherham 
NHS Foundation Trust

A library & knowledge service for all NHS staff in Rotherham



Latest Guidance

There have been no further updates to the below guidelines since the last Dementia bulletin

Dementia: Supporting people with dementia and their carers in health and social care.

Issued: November 2006 last modified: October 2012 Next review date: April 2014

<http://www.nice.org.uk/nicemedia/live/10998/30318/30318.pdf>

Clinical Knowledge Summaries: <http://cks.nice.org.uk/dementia#!topicsummary>

Department of Health: Living Well With Dementia: a national dementia strategy

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/168220/dh_094051.pdf

Useful links

NHS Evidence dementia:

<https://www.evidence.nhs.uk/topic/dementias?q=dementia>

NHS Choices – Dementia Choices:

<http://www.nhs.uk/conditions/dementia-guide/Pages/dementia-choices.aspx>

Supporting people to live well with dementia: information for the public:

<http://www.nice.org.uk/nicemedia/live/14141/63423/63423.pdf>

Copies of the articles listed in this bulletin are available on request:

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