Caring for an individual with mild cognitive impairment

Little is known regarding the effect that caring for an individual with Mild Cognitive Impairment (MCI) has on health-related quality of life (HRQOL) | Aging & Mental Health

**Objectives:** We sought to identify the most important aspects of HRQOL related to caring for an individual with MCI.

**Results:** Findings indicated that caregivers most frequently discussed social health, including changes in social roles and an increased need for social support (51.2% of the total discussion). This was followed by mental health concerns (37.9%) centering on anger/frustration, and a need for patience in the caregiving role, as well as caregiver-specific anxiety. Other topics included physical health (10.0%; including the impact that stress and burden have on medical health), and caregivers’ cognitive health (0.9%; including memory problems in relation to caregiver strain, sleep disruption, and cognitive fatigue).

**Conclusions:** Findings illustrate the multiple domains of HRQOL that are affected in individuals providing care for someone with MCI. Moreover, the findings highlight the need for extending support services to MCI caregivers, a group that is typically not offered support services due to the ‘less severe’ nature of an MCI diagnosis.

**Full reference:** Carlozzi, N.E. et al. (2017) Caring for an individual with mild cognitive impairment: a qualitative perspective of health-related quality of life from caregivers. Aging & Mental Health. Published online: 12 Jul 2017

How people with dementia and carers understand and react to social functioning changes

This study aims to analyse people with dementia and their family carers’ attribution of social changes in dementia and the consequences of these attributions | BMJ Open

**Design:** Qualitative study, using a semi-structured interview guide. Individual interviews continued to theoretical saturation. Two researchers independently analysed interview transcripts.

**Results:** We interviewed nine people with dementia and nine carers, encompassing a range of age, ethnicity and educational backgrounds. Both groups reported that the person with dementia had changed socially. People with dementia tended to give one or two explanations for social change, but carers usually suggested several. People with dementia were often socially embarrassed or less interested in going out, and they or their relatives’ physical illness or fear of falls led to reduced social activity. Carers often attributed not going out to a choice or premorbid personality. Carers found that their relative needed more support to go out than they could give and carers needed time to themselves because of carer stress or other problems from which they shielded the person with dementia. Additionally, there was decreased opportunity to socialise, as people were bereaved of friends and family. Participants acknowledged the direct impact of dementia symptoms on their ability to socially engage but sometimes decided to give up socialising when they knew they had dementia. There were negative consequences from social changes being attributed to factors such as choice, rather than dementia.

**Conclusion:** Clinicians should ask about social changes in people with dementia. Explaining that these may be due to dementia and considering strategies to overcome them may be beneficial.

**Full reference:** Singleton, D. et al (2017) How people with dementia...
The effect of music therapy on cognitive functions in patients with dementia.

Jul 13, 2017 03:07PM

**Study investigates Music Therapy as a complementary treatment for older adults with dementia**

**Abstract**

**Objectives:** The aim of the present study was to meta-analyze the effect of music therapy (MT) on cognitive functions in patients with dementia.

**Method:** A systematic literature search was performed in Medline, PsycINFO, Embase, CINAHL and RILM up to 8 September 2016. We included all randomized controlled trials that compared MT with standard care, or other non-musical types of intervention, evaluating cognitive outcomes in patients with dementia. Outcomes included global cognition, complex attention, executive function, learning and memory, language, and perceptual-motor skills.

**Results:** From 1089 potentially relevant records, 110 studies were assessed for eligibility, and 7 met the inclusion criteria, of which 6 contained appropriate data for meta-analysis (330 participants, mean age range 78.8–86.3). Overall, random-effects meta-analyses suggested no significant effects of MT on all outcomes. Subgroup analysis found evidence of a beneficial effect of active MT on global cognition (SMD = 0.29, 95% CI 0.02 to 0.57, \(p = 0.04\)).

**Conclusion:** Despite the limited evidence of the present review, it is important to continue supporting MT as a complementary treatment for older adults with dementia. RCTs with larger sample sizes are needed to better elucidate the impact of MT on cognitive functions.

Full reference: Laura Fusar-Poli, et al. The effect of music therapy on cognitive functions in patients with dementia: a systematic review and meta-analysis | Aging & Mental Health | Published online: 10 Jul 2017

Delayed-onset post-traumatic stress disorder symptoms in dementia

Jul 10, 2017 01:29PM

**In this review, Tarun Kuruvilla et al. consider three examples of delayed-onset PTSD and its frequent association, or misdiagnosis, as one of the numerous manifestations of the behavioural and psychological symptoms of dementia** | Progress in Neurology and Psychiatry

Dementia sufferers commonly experience non-cognitive symptoms as their disease progresses. These symptoms are often labelled as behavioural and psychological symptoms of dementia (BPSD) and encompass a broad range of symptoms relating to mood changes such as depression and anxiety, psychosis, and inappropriate behaviours like wandering, shouting and agitation. Post-traumatic stress disorder (PTSD) is a common diagnosis amongst working-age adults but it is infrequently diagnosed in the elderly, particularly those with dementia. Previous case reports have published examples of dementia sufferers experiencing post-traumatic stress disorder symptoms long after the original traumatic event. Despite these examples, little is known about the manifestation of traumatic exposure in the older adult population. We consider whether delayed-onset post-traumatic symptoms in the elderly are being misdiagnosed, instead falling under the umbrella of BPSD. In this article, we attempt to expand on previous work by describing three cases of delayed-onset PTSD associated with the development of dementia. We explore potential biological and psychosocial theories to explain the aetiology of these symptoms with reference to the literature. We end by considering the clinical implications for future practice, including suggestions for improved diagnosis and management.

**Computerized game-based training method in people with dementia**

Jul 7, 2017 01:07PM

*This study aims to examine the effects of a computerized, game-based training on motor-cognitive performances, the transfer of training effects on untrained tasks, and the sustainability of training gains in people with dementia* | Aging & Mental Health

**Method:** Ninety-nine individuals with a mean age of 82.9 (5.8) and dementia participated in a 10-week randomized controlled trial with three-month follow-up. The intervention group (IG) received a motor-cognitive training on (Physiomat®) including concurrent dual-tasks of balance control with cognitive demands (Physiomat®-Trail Making Tasks (PTMTs)). The control group (CG) performed non-specific, low-intensity exercises. Duration and accuracy at different complexity levels of trained and untrained PTMTs and the number of successfully performed tasks (PTMT score) were assessed.

**Results:** Physiomat® training significantly improved the duration and accuracy at almost all complexity levels of trained ($P \leq 0.001-0.047$, $\eta_p^2 = 0.065-0.589$) and untrained PTMTs ($P \leq 0.021-0.047$, $\eta_p^2 = 0.072-0.542$) and the number of successfully performed tasks (PTMT score) were assessed.

**Conclusion:** Physiomat® is feasible and has the potential to sustainably improve motor-cognitive performances in people with dementia.

**Full reference:** Wiloth, S. et al. (2017) Motor-cognitive effects of a computerized game-based training method in people with dementia: a randomized controlled trial. Aging & Mental Health. Published online: 6th July 2017

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**Dementia numbers set to rise to 1.2 million by 2040 in England & Wales**

Jul 6, 2017 03:01PM

*Experts are predicting that there will be 1.2 million people in England and Wales living with dementia by 2040 - a rise of 57% from 2016 - due to increased life expectancy.*

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**‘Brain training’ app found to improve memory in people with mild cognitive impairment**

Jul 6, 2017 09:37AM

*A ‘brain training’ game could help improve the memory of patients in the very earliest stages of dementia, suggests a new study.* | International Journal of Neuropsychopharmacology. | via ScienceDaily

Researchers from the University of Cambridge have developed a memory game app, ‘Game Show’, and have tested its effects on cognition and motivation in patients with amnestic mild cognitive impairment (aMCI).

The researchers randomly assigned forty-two patients with amnestic MCI to either the cognitive training or control group. Participants in the cognitive training group played the memory game for a total of eight one-hour sessions over a four-week period; participants in the control group continued their clinic visits as usual.

The results showed that patients who played the game made
around a third fewer errors, needed fewer trials and improved their memory score by around 40%, showing that they had correctly remembered the locations of more information at the first attempt on a test of episodic memory.

In addition, participants in the cognitive training group indicated that they enjoyed playing the game and were motivated to continue playing across the eight hours of cognitive training. Their confidence and subjective memory also increased with gameplay. The researchers say that this demonstrates that games can help maximise engagement with cognitive training.

The findings of the study were published this month in The International Journal of Neuropsychopharmacology suggests.

Full reference:
Savulich, G et al. Cognitive Training Using a Novel Memory Game on an iPad in Patients with Amnestic Mild Cognitive Impairment (aMCI). International Journal of Neuropsychopharmacology, published online July 2nd 2017

Dementia Caregiver Grief and Bereavement

Jun 28, 2017 02:10PM

Alzheimer’s disease and related dementias make up the fifth leading cause of death for individuals of 65 years of age and older in the United States. Seventy percent of these individuals will die in long-term care settings | Western Journal of Nursing Research

The aim of this integrative review was to examine and synthesize the evidence on grief and bereavement in Alzheimer’s disease and related dementias caregivers. This review identified five critical gaps in the existing evidence:

(a) a lack of ethnic and gender diversity among caregivers studied,
(b) limited use of valid instruments to study dementia caregiver grief and bereavement,
(c) no substantive research examining dementia caregiver grief and bereavement for caregivers whose family members die in long-term care,
(d) a lack of evidence examining the effect of hospice services on dementia caregiver grief and bereavement
(e) a lack of grief and bereavement interventions for dementia caregivers whose family members die in long-term care.


Management of long-term conditions and dementia: The role of the Admiral Nurse

Jun 28, 2017 02:05PM

As life expectancy increases so people often develop a range of conditions and disabilities in the years before death | British Journal of Community Nursing

Multimorbidity represents the most common ‘disease pattern’ found among the elderly and is characterised by complex interactions of co-existing diseases where a medical approach focused on a single disease does not suffice. People with dementia who also have other comorbidities do not always have their comorbid conditions managed as those without dementia which often lead to a high number of hospital admissions with longer lengths of stay and greater treatment costs. This case study presents the case management approach taken by Admiral Nursing in managing the complexities where there is comorbidity of a long-term condition and a diagnosis of dementia. By empowering the person and their carer with information and choices and through good case management and communication, people can be supported to live well and avoid inappropriate hospital admissions.


Dementia training programmes for staff working in general hospital settings

Jun 28, 2017 01:11PM

Although literature describing and evaluating training programmes in hospital settings increased in recent years, there are no reviews that summarise these programmes | Aging & Mental Health
Objectives: This review sought to address this, by collecting the current evidence on dementia training programmes directed to staff working in general hospitals.

Results: Fourteen peer-reviewed studies were identified with the majority being pre-test post-test investigations. No randomised controlled trials were found. Methodological quality was variable with selection bias being the major limitation. There was a great variability in the development and mode of delivery although, interdisciplinary ward based, tailor-made, short sessions using experiential and active learning were the most utilised. The majority of the studies mainly evaluated learning, with few studies evaluating changes in staff behaviour/practices and patients’ outcomes.

Conclusion: This review indicates that high quality studies are needed that especially evaluate staff behaviours and patient outcomes and their sustainability over time. It also highlights measures that could be used to develop and deliver training programmes in hospital settings.