

Focus on...

Dementia

March 2013

The term dementia describes a collection of symptoms. These include memory loss, problems with reasoning and communication skills, and a reduction in a person's abilities to carry out daily activities such as washing, dressing, cooking and caring for one's self. It is a progressive condition, which means the symptoms will gradually get worse. Dementia has a severe impact not only on the person living with dementia, but also on their family and carers, many of whom are often old and may be frail as well. The costs of supporting people with dementia are high and are estimated nationally to exceed the combined costs associated with cardiovascular disease and cancer.

There are a number of different types of dementia, with the most common being Alzheimer's disease, vascular dementia, frontotemporal dementia, dementia with Lewy bodies, and mixed dementia.

Most people living with dementia are aged 65 and over (94% in Islington). However, early dementia (dementia in people under 65) is under-recognised with 17,000 people estimated nationally.

Key facts and figures

787

people in Islington recorded as having dementia ^{2010/11}

160

new diagnoses of dementia at GP practices across Islington last year ^{2010/11}

94%

of people with dementia in Islington are aged 65 years and over ²⁰¹¹

72%

of the number of people expected to have dementia in Islington are diagnosed ²⁰¹¹

67%

of people with dementia (aged 65 and over) in Islington are women ²⁰¹¹

Key issues for Islington

- Dementia affects a greater proportion of women compared to men in Islington (4.4% vs. 2.7%)
- Around 4% of adults aged 65 and over in Islington have a dementia diagnosis
- The number of people over 85 with dementia is expected to increase by 15% over the next 10 years

Key programmes and services

- Memory Assessment Service
- Islington Carers Hub
- Mental Health Liaison Service
- Dementia Advisor Service
- Dementia Café

Key measures for reducing inequalities

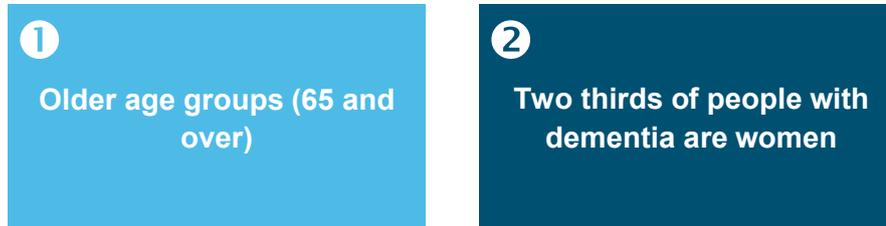
The following factors should help guide services in reducing inequalities and increasing access to appropriate treatment and support for people with dementia, and their carers, in Islington:

- Areas with a higher density of social housing have a significantly higher prevalence of dementia in those aged 65 and over. This may be because older people make up a significant proportion of social housing households.
- Dementia prevalence does not differ by ethnicity in Islington.
- People with dementia are more likely than those of the same age without dementia to have long term conditions, particularly high blood pressure.

Key population groups

Dementia primarily affects older people - those aged 65 years and over. The average age of people 65 and over living with dementia is 82 years. In Islington, women are more affected than men (4.4% vs. 2.7%).

At risk groups



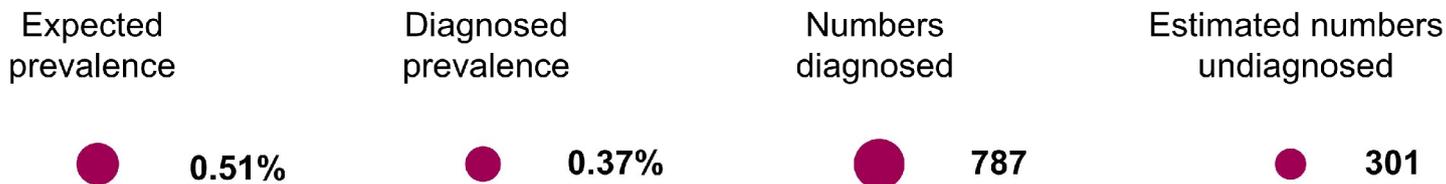
What influences dementia?

At present, it is not clear what can be done to prevent dementia itself, but the evidence indicates that a healthy diet and lifestyle may help protect against it.

Age	<ul style="list-style-type: none">Age is the biggest risk factor for developing dementia. The older a person gets, the higher their chance of developing a disease that could lead to dementia.
Lifestyle Factors	<ul style="list-style-type: none">Exercising regularly, avoiding fatty foods, not smoking, and drinking alcohol in moderation may reduce the risk of developing vascular dementia and Alzheimer's disease.
Gender	<ul style="list-style-type: none">Dementia prevalence is higher among women than men, and women are slightly more likely to develop Alzheimer's disease. It is currently unclear what contributes to this pattern.
Family history	<ul style="list-style-type: none">Research suggests that genes may play a role in the development of some of the diseases that lead to dementia, particularly Alzheimer's disease. There is a higher chance of developing Alzheimer's if a close relative (parent or sibling) has the disease.
Social and mental activity	<ul style="list-style-type: none">Research suggests that people who are more socially active have a slightly reduced risk of developing dementia, but little is known about why this may impact on the risk of dementia.People who take part in mental activities such as reading, learning, and doing puzzles are less likely to develop dementia.

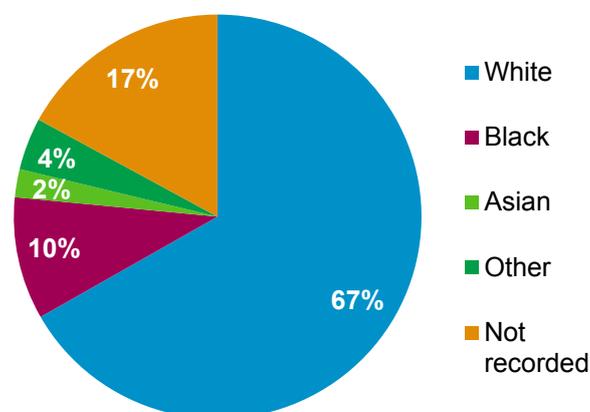
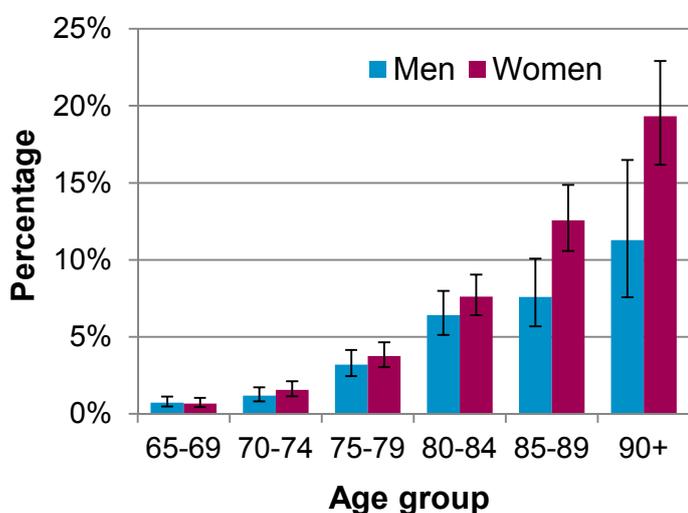
THE ISLINGTON PICTURE

The public health team gathers information about people with dementia from GP practices. This is important for service planning and provision, helping us get the right services to the right people. Modelling of the expected number of dementia cases indicates that in Islington over **70%** of the expected number of cases of dementia have been diagnosed. This is the highest proportion in the country, well above London and England averages (**44%**).



Who has dementia?

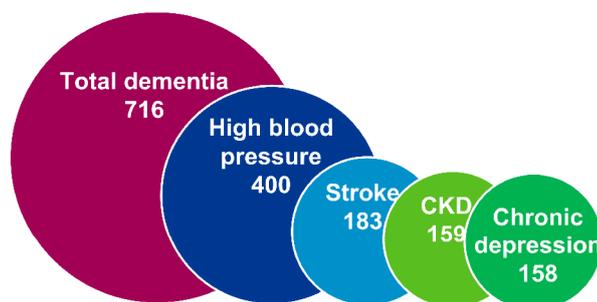
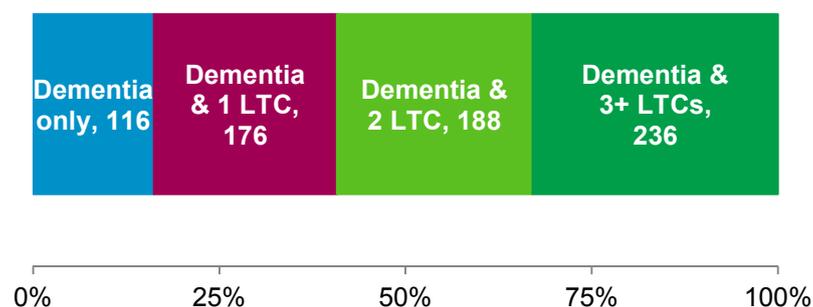
Diagnosed dementia prevalence by age and gender, and ethnicity, Islington ²⁰¹¹



80%

of people diagnosed with dementia aged 65 and over who have their ethnicity recorded are White ²⁰¹¹

What other long term conditions (LTC) do people with dementia have?



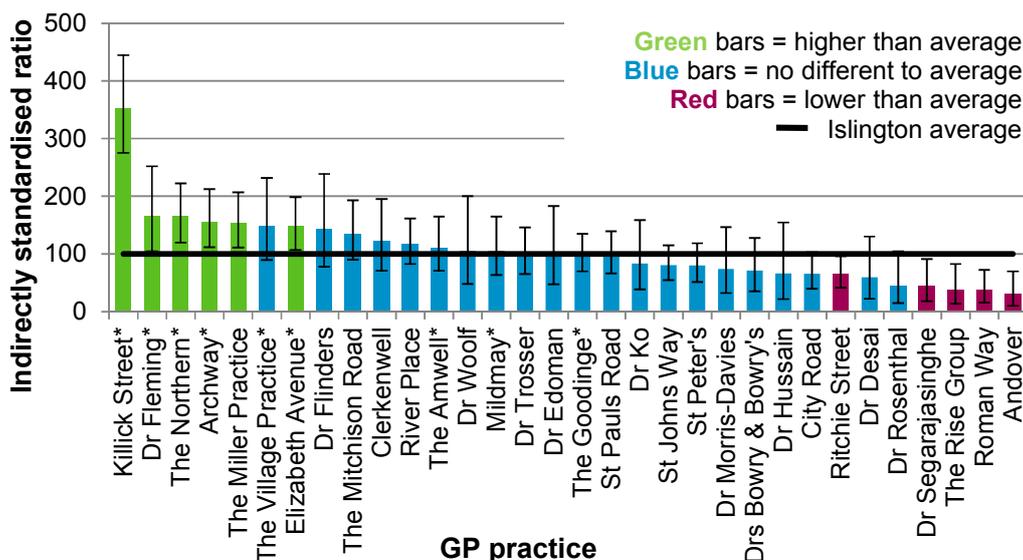
84% of people aged 65 and over who have dementia have another long term condition (LTC). In people with an LTC who don't have dementia, co-morbidity is significantly higher (**60%**) ²⁰¹¹

Of people aged 65 and over who are diagnosed with dementia, **56%** also have high blood pressure, **26%** have had a stroke, **22%** have chronic kidney disease (CKD), and **22%** have chronic depression ²⁰¹¹

Source: Islington's GP PH dataset, 2011 unless stated otherwise.

Case finding

Indirectly standardised ratio of people diagnosed with dementia, by GP practice, Islington registered population, aged 65 and over March 2011



Adjusted for the age structure of the population, prevalence of dementia varies by GP practice.

Killick Street Health Centre has a prevalence ratio three and a half times greater than the Islington average. Five practices have significantly lower prevalence.

It is important to note that practices with above average prevalence also have a number of patients in care homes, some of which specialise in dementia.

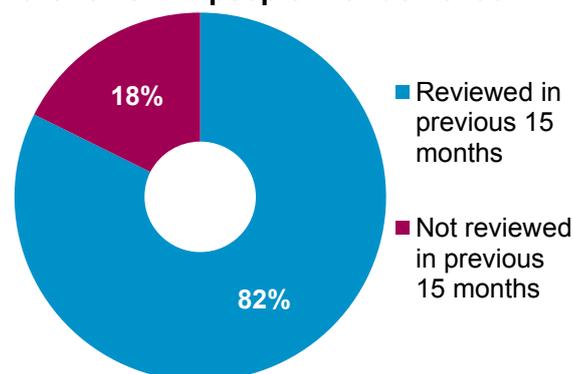
Notes: * Practice is associated with one or more care homes.
6 practices with <5 dementia diagnoses have been excluded to protect patient identity.

Management

People with dementia should have their care reviewed regularly. Out of an eligible 721 people with dementia in Islington, **127 (18%)** had not had their care reviewed in the previous 15 months. The average for Islington is not significantly different to London.

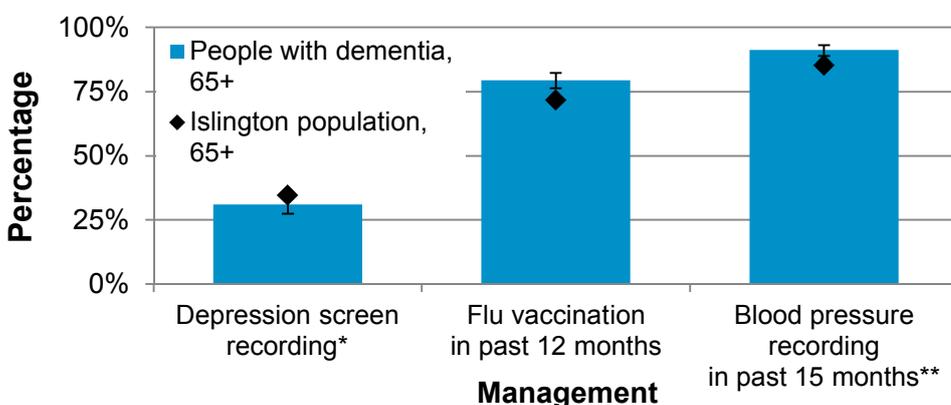
Nationally, there is widespread concern at the overuse of anti-psychotic drugs for people with dementia. Of people diagnosed with dementia in Islington, with no psychotic disorder recorded, **18%** were prescribed anti-psychotic medication.

Care review in people with dementia



Integrated care

Management of long term conditions in people with dementia in Islington's registered population aged 65 years and over March 2011



Flu vaccination and blood pressure recording are higher for people with dementia than people in the general population aged 65 and over.

Screening for depression is carried out for a lower percentage of people with dementia compared to the general population aged 65 and over.

* on or after date of dementia diagnosis.
** data not available for four practices.

Source: Islington's GP PH dataset, 2011, unless stated otherwise.

WHAT DO PEOPLE THINK ABOUT DEMENTIA?

The development of 'Living well with dementia: A national dementia strategy' (2009) by the Department of Health provided an opportunity for people to respond with their thoughts and opinions on dementia.

People wanted dementia to be diagnosed early and well so that following diagnosis, people with dementia and their family carers can receive the treatment, care and support that will enable them to live as well as possible.

The local Memory Assessment Service has recently been evaluated. Most service users who responded felt they were treated with dignity and respect, felt their concerns were heard and felt the information was presented in a way they could understand.

People with Alzheimer's felt there was a stigma and lack of empathy in society's attitude which was hurtful. "You are just as likely of getting dementia as you are getting a haematoma or lung cancer. If there was that sort of attitude by society, then this would make the whole process of actually getting the diagnosis a lot easier. So you know it is all part of the stigma, isn't it?" (person with dementia).

Many respondents want reliable trained help and care to be provided in the home, thus enabling people with dementia to remain at home and independent for as long as possible. People were anxious about the quality of care in long term residential care homes and were worried about the over-use of medication.

WHAT WORKS?

Although there is currently no cure for the diseases that lead to dementia, there are a number of effective treatments that can help people and their carers to cope better with their symptoms, improve their quality of life, and reduce the need for residential care.

Referral to memory assessment services

- Early referral to a specialist memory assessment clinic for diagnosis. Sufferers and their carers can be given written and verbal information about the condition with local support options, and a personalised care plan with a named care coordinator, for systematic follow up and review

Strategies to promote independence and cope with disability due to dementia

- Modifying the physical environment, such as providing aids such as grab bars and handrails; labelling, rearranging, or removing objects; and placing clothing or other frequently needed items where they can be easily found without having to remember where they are kept
- Simplifying the tasks of daily living; for example, by using short verbal or written instructions, planning and writing out a daily routine, and assistive technologies
- Providing a supportive social environment, including helping carers involve their social network in caring responsibilities, and helping them communicate with healthcare and social care professionals

Pharmaceutical intervention

- The National Institute for Health and Clinical Excellence (NICE) recommends using acetylcholinesterase inhibitors (donepezil, galantamine, or rivastigmine) for people with Alzheimer's disease of moderate severity
- Rivastigmine is licensed for the symptomatic treatment of mild-to-moderately severe dementia in people with idiopathic Parkinson's disease
- For other causes of dementia, there are no specific drug treatments for cognitive symptoms

FUTURE NEED

Dementia is one of the main disability-causing diseases likely to impact on the future health of the older population. Data suggest that although there will be only a small overall increase in the prevalence of dementia in Islington between 2008 and 2018, the number of people with dementia aged 85 and over is expected to increase by roughly 15% over the next ten years, and 28% over the next 20 years. This group has additional needs and requires increased support due to their frailty and that of their carers.

PRIORITY AREAS

While specific targets are yet to be finalised, a number of national and local priorities have been identified from key strategies focusing on improving dementia diagnosis and care.

Priority	Related strategy	Deadline
Develop Dementia Advisor Service to support dementia-friendly communities	Prime Minister's challenge on dementia (national)	October 2013
Ensure early identification and diagnosis for over 75s	Acute Care Strategy (local)	April 2014
Improve support to residents in Care Homes to reduce 0-day admissions (admissions of less than one day that may be avoided)	Integrated Care Strategy (local)	April 2014
Implement an Older Adults Integrated Care group to provide leadership across pathway	Integrated Care Strategy (local)	April 2014
Sustain and expand investment in Memory Service to continue lead on diagnosis and treatment	Care Closer to Home Strategy (local)	April 2013

NATIONAL AND LOCAL STRATEGIES

Improving dementia diagnosis and care are national and local priorities. Islington is already doing well on dementia diagnosis, with 72% of the expected number of cases diagnosed. This means people suffering from dementia in Islington are more likely to receive the care and support they require sooner rather than later. National strategies tend to focus on caring for people with dementia and improving lifestyle factors associated with the development of the diseases that cause dementia.

NATIONAL STRATEGIES

Living well with dementia: A national dementia strategy (2009)

This strategy set out a vision for transforming dementia services with the aim of achieving better awareness of dementia, increasing early diagnosis and achieving high quality treatment at whatever stage of the illness and in whatever setting.

Quality outcomes for people with dementia: Building on the work of the national dementia strategy (2010)

This report followed the National dementia strategy and presents the Department's revised, outcomes-focused implementation plan.

Prime Minister's Challenge on Dementia (2012)

The Challenge on Dementia is a challenge to the whole of society as well as government and focuses on three key areas:

- Improving health and care
- Creating dementia-friendly communities that understand how to help
- Better research

LOCAL STRATEGIES

Islington Council and NHS Islington Strategy for Older People's Mental Health

This strategy describes the goals for improving services for older people with mental health needs and their carers, with an emphasis on dementia.

Islington Adult Joint Commissioning Strategy 2012-2017

This strategy describes the way in which the Council and the Clinical Commissioning Group (CCG) will develop services, including dementia services, for vulnerable and disabled adults.

Islington's Joint Health and Wellbeing Strategy 2013-2016

One of the priorities in this strategy is to improve mental health and wellbeing and includes a focus on improving dementia care pathways. More detail on how this will be measured and who will lead this work will be available once the strategy is finalised.

Care Closer to Home Strategy 2012-2014

This strategy focuses on improving access to more services and delivering care closer to patients' homes. It details planned improvements to service areas including supporting the provision of more suitable alternatives (such as respite care or home care) for patients with dementia.

WHAT IS BEING DONE LOCALLY?

There are a number of services and initiatives available in Islington to diagnose, manage symptoms, and support carers of people with dementia, delivered by both the NHS and its partners such as the Alzheimer's Society and Carers UK.

Memory Assessment Service

NICE guidance for dementia advises that memory assessment services should be the single point of referral for all people with a possible diagnosis of dementia.

Memory Assessment Services are made up of specialist consultants, nurses and psychologists. A consultant or nurse will visit the person with suspected dementia and conduct an assessment including a Mini Mental State Examination (MMSE). If diagnosed, the person and their family will be provided with information about dementia and local services. They will also be referred to their local dementia adviser who will support and accompany them through their journey with dementia.

The Memory Assessment Service in Islington received 442 referrals in 2011/12.

Dementia Advisor Service

The Dementia Adviser Service (run by the Alzheimer's Society) is primarily for people with dementia who have recently received their diagnosis, as well as their supporters and carers. There are currently two dementia advisors for Islington.

- The service provides relevant, accessible and quality information that includes signposting to other relevant local services for additional support
- Referrals to the service may come from GPs, services for ageing and mental health, other health and social care professionals, community and voluntary organisations or through self-referral
- In Q1 2012-13, there were 65 referrals with 158 clients contacted (an increase from 35 referrals in Q3 2011-12)

Mental Health Liaison Service

This service provides support for people with dementia in Islington care homes and at Whittington, University College London (UCL) and St Pancras hospitals. It assists with assessments and care planning. In 2011/12, this service had 415 referrals and completed 275 assessments.

Cecilia's cafe

Cecilia's Cafe is held every other Saturday at a community centre in Canonbury and provides a free, drop-in service for people with dementia and their carers. Lunch is provided, and the focus of the sessions vary, and have included reminisces, talks and music. Information provision is also part of the service. Attendance is increasing, with almost 100 people taking part in June 2012.

Islington Carers Hub

The Carers Hub is a newly developed service for people who are looking after someone who lives in Islington. The Carers Hub provides advice and information sessions, support groups for carers to meet and share ideas, newsletters, events and assistance with extra resources for carers.

FURTHER INFORMATION

Further information on this topic can be found at the following locations:

- Living well with dementia: A national dementia strategy (2009). Department of Health: <http://www.dh.gov.uk/health/category/policy-areas/social-care/dementia/>
- NICE guidance for dementia: Supporting people with dementia and their carers in health and social care: <http://publications.nice.org.uk/dementia-cg42>
- Alzheimer's Society: <http://www.alzheimers.org.uk>
- The Dementia Challenge: Fighting back against dementia (2012): <http://dementiachallenge.dh.gov.uk/category/progress>
- Dementia services guide (2009). Healthcare for London: <http://www.londonhp.nhs.uk/services/dementia/>
- Dementia Needs Assessment (2011). Healthcare for London: <http://www.london.nhs.uk/better-quality-services/improving-dementia-care-and-prescribing>

About the Evidence Hub

The Evidence Hub is a partnership between the local NHS and Islington Council that brings together information held across different organisations into one accessible place. It provides access to evidence, intelligence and data on the current and anticipated needs of the Islington population and is designed to be used by a broad range of audiences including practitioners, researchers, commissioners, policy makers, Councillors, students and the general public.

This profile has been produced by Baljinder Heer and Carly Woodham and signed off by Jonathan O'Sullivan, Assistant Director of Public Health.

For more information contact Baljinder.heer@islington.gov.uk or call 020 7527 1233.

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