

Diagnosing and
Managing
Dementia – GP's
Perspective



- Knowledge of dementia diagnosis and management is good, but poor awareness of its epidemiology leads to an over-estimate of caseload
- 1/3 expressed limited confidence in diagnostic skills
- 2/3 lacked confidence in management of behaviour and other problems in dementia
- Difficulties identified by GPs were talking with patients about the diagnosis, responding to behaviour problems and coordinating support services
- Perceived lack of time and lack of social services support
- 1/3 believed that dementia care is within a specialist's domain
- More experienced and male GPs, and GPs with lower knowledge about dementia were more pessimistic about dementia care

(Turner S, Age and Ageing 2004; 33:461-467)

- Barriers to dementia diagnosis in primary care setting
- Failure to recognise and respond to symptoms of dementia
- Perceived lack of need to determine a specific diagnosis
- Limited time
- Negative attitudes toward the importance of assessment and diagnosis

(Boise L, The Gerontologist 1999; Vol 39, No 2, 457-464)

- 25 family physicians had a mean of 21y in practice
- 38.7% of their patients were 65y old or older
- 5.6% of these had dementia
- Physicians were comfortable caring for these patients and their family caregivers
- But thought that much of this care should come from support services offered elsewhere
- They had little knowledge of these services and had little interest in acquiring information about them
- Such services were 'black boxes' to them
- Yaffe et al, Can Fam Physicians 2008; 54: 1008-15

Role of Family
Doctors in the
management of
dementia



- Early detection
- Diagnostic workup
- Initiate treatment
- Support caregivers
- Institutional care of people with dementia
- Appropriate referral to specialist