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Clinical and Ethical Indications for Cognitive Impairment Screening in Primary Care

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Featured Speaker

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Learning Objectives

- Describe the benefits of early cognitive screening
- Describe cognitive screening tools shown to be both sensitive and specific
- Identify ethical justifications for cognitive screening and early diagnosis
- Discuss the Medicare Annual Wellness visit as a vehicle for changing dementia diagnostic practices at a population level

Cognitive Screening & Dementia

- Alzheimer's disease
- Vascular dementia
- Frontotemporal dementia
- Dementia with Lewy bodies

Detection

- Detection of cognitive impairment
 - Subjective assessments
 - Objective assessments

Diagnosis

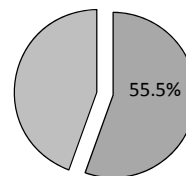
- Diagnostic Evaluation
 - Clinical exam
 - Medical history
 - Assessment of multiple cognitive domains
 - Lab tests
 - MRI and/or CT scan, in some cases
- 2011 New Diagnostic Criteria; update soon

Challenges in Detection & Diagnosis

- Physicians unaware of cognitive impairment in more than 40% of people
- More than half of patients with dementia did not receive clinical evaluation
- Only half of people with Alzheimer's and other dementias are diagnosed

Patient Disclosure of Symptoms

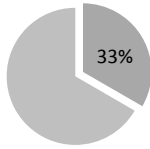
2015 BRFSS



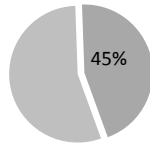
Of those aged 45 and older with subjective cognitive decline, 55.5% have NOT talked to a health care provider

Physician Disclosure of Diagnosis

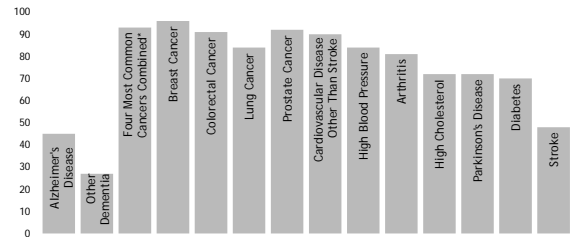
Among people with a diagnosis, only 33% are aware of their diagnosis



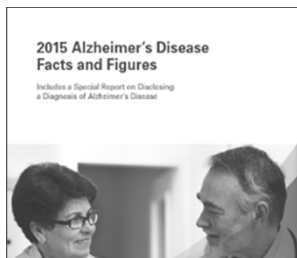
Only 45% of caregivers report being told of the diagnosis



Disclosure Rates Among Medicare Current Beneficiary Survey Respondents



2015 Alzheimer's Disease Data



Why Don't Physicians Disclose?

- No cure
- Insufficient time to discuss
- Difficulty talking about dementia
- Failure to recognize signs of cognitive change

4 Key Ethical Principles

- Autonomy
- Beneficence
- Non-maleficence
- Justice

Autonomy

- Respect a person's right to make their own decisions
- Teach people to be able to make their own choices
- Support people in their individual choices
- Do not force or coerce people to do things
- 'Informed Consent' is an important outcome of this principle

Beneficence (To Do Good)

- Actions aim to 'benefit' people – health, welfare, comfort, well-being, potential, improve quality of life
- 'Benefit' should be defined by the person themselves
- It is not what providers think that is important
- Act on behalf of 'vulnerable' people to protect their rights
- Prevent harm
- Create a safe and supportive environment
- Help people in crises

Non-maleficence (To Do No Harm)

- Do not to inflict harm on people
- Do not cause pain or suffering
- Do not incapacitate
- Do not cause offence
- Do not deprive people
- Do not kill
- Balance this with other principles

Evidence for Early Screening

Benefits of Early Detection & Diagnosis

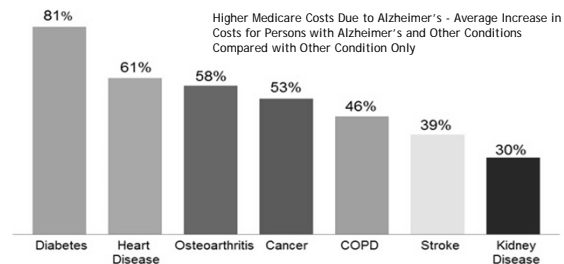
- Access to effective treatment options
- Treatment for reversible causes
- Managing comorbid conditions more effectively
- Family and caregiver support and health interventions
- Advanced planning (legal, financial, care)
- Opportunity to participate in decisions about care

Why Co-morbidity Counts

- A person with Alzheimer's/dementia is **5.5 times** as likely to have **6 or more other chronic conditions** as someone without Alzheimer's/dementia

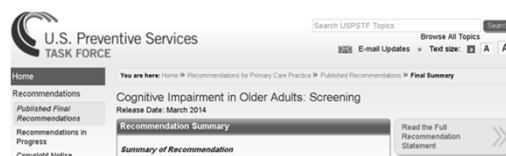
Implication - Alzheimer's complicates the management of coexisting conditions, and, as a consequence, increases costs

Costs of Co-Morbidity



Evidence for Early Screening

U.S. Preventive Services Task Force 2014 Recommendations



Screening Tools

Patient Assessments

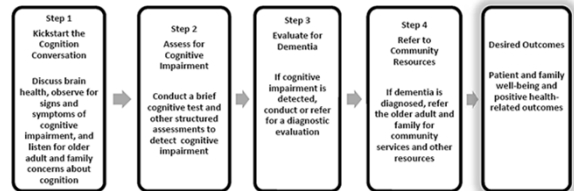
- Memory Impairment Screen (MIS)
- General Practitioner's Assessment of Cognition (GPCOG)
- Mini-Cog

Informant Assessments

- Ascertain Dementia 8 (AD8)
- Informant Questionnaire on Cognitive Decline in the Elderly (Short IQCODE)

KAER Model

Kickstart, Assess, Evaluate & Refer



New York State – Major Investment

- Regional Caregiver Support Project
- Caregiver Support for Underserved Communities
- Centers of Excellence for Alzheimers Disease
- Alzheimer's Disease Community Assistance Program

Annual Wellness Visit

- Patient Protection and Affordable Care Act
 - Medicare benefit
- Emphasizes preventive care
 - Includes assessments for vision, hearing, cognition, and other important indicators of health

Medicare Reimbursement

- Effective January 1, 2017
- Medicare reimbursement for care planning

Reducing the Risk

- Exercise/physical activity
- Sleep
- Diet
- Keep moving
- Manage stress

Conclusion

- We know what works
- Patients and caregivers benefit
- Clinically and ethically the right thing to do



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