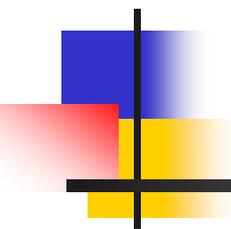
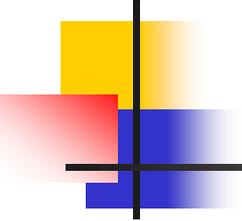


From Detection to Diagnosis and Care: Roles for Family Caregivers



Katie Maslow
Visiting Scholar
Gerontological Society of America
Washington, DC
March 21, 2016



Three Main Points

- Detection of possible cognitive impairment is a necessary first step to diagnosis
- Although necessary, detection is not sufficient for diagnosis; they are related but not the same
- Detection and diagnosis are critical in health care for people with dementia



Detection of possible cognitive impairment as a first step

- Diagnostic evaluations are very unlikely to happen if possible cognitive impairment has not been detected
- Possible cognitive impairment can be detected through recognition of signs and symptoms
- Signs and symptoms can be noticed by the person, a family caregiver, doctor, nurse, social worker, or other person who knows the person

Signs and Symptoms

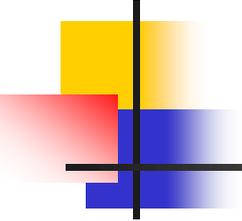
e.g: the AD 8 asks the family caregiver about changes in various cognitive areas

1. Problems with judgment (e.g. falls for scams, bad financial decisions, buys gifts inappropriate for recipients)
2. Reduced interest in hobbies/activities
3. Repeats questions, stories or statements
4. Trouble learning how to use a tool, appliance or gadget (e.g. VCR, computer, microwave, remote control)
5. Forgets correct month or year
6. Difficulty handling complicated financial affairs (e.g. balancing checkbook, income taxes, paying bills)
7. Difficulty remembering appointments
8. Consistent problems with thinking and/or memory



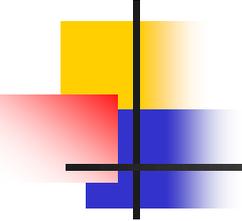
Other Approaches to Detection and Family Caregiver Roles

- Single question: Have you noticed a change in your (the person's) memory or thinking?
- Other tools like the AD8
- Brief test of the person's cognition: e.g., the Mini-Cog
- Family caregivers are uniquely able to notice and let the doctor know about changes in memory and thinking
- Family caregivers can encourage the person to see a doctor and take a brief cognitive test if it is offered
- Source for further information: *GSA Workgroup on Cognitive Impairment Detection and Earlier Diagnosis* accessible at:
<https://www.geron.org/images/gsa/documents/gsaciworkgroup2015report.pdf>



Detection is not Diagnosis

- Frequent but false assumption that signs and symptoms of possible cognitive impairment or a low score on a brief cognitive test means the person has dementia
- Other factors that can cause possible cognitive impairment
- Essential family caregiver role: Ensure that detection of possible cognitive impairment and/or low score on a brief cognitive test is not assumed to be a diagnosis: it is only a trigger for a diagnostic evaluation



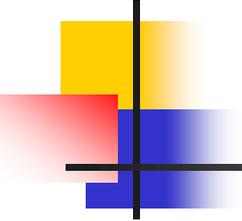
Importance of Diagnostic Evaluation for Medical Care

- Diagnostic evaluation can:
 - Identify reversible causes of cognitive impairment
 - Identify treatable conditions that worsen the person's ability to think and function
 - Alert the person's doctor(s) to problems the person may have in understanding, remembering and following treatment recommendations



Importance of Diagnosis in Medical Care for Co-existing Conditions

- Most people with dementia have other serious medical conditions
- Dementia is highly relevant for decisions about medications and treatments for the person's other medical conditions
- Essential role of family caregivers: Ensure that all doctors, nurses, and others who provide medical care for the person are aware of the diagnosis and its implications



Thank you

Kmaslow@geron.org

Questions?

Comments?