

Dementia - Management

Dementia is increasing in prevalence in Australia as the population ages. GPs are well placed to offer comprehensive management plans that honour their patient's wishes as best they can. Utilising an approach that can match care needs to the various stages of the disease will optimise quality of life for both patients and their carers. This is the second of two teaching plans on dementia – the other is on diagnosis.

<p>TEACHING AND LEARNING AREAS</p> 	<ul style="list-style-type: none"> • Stages of dementia (eight-minute video) • Calculation of the anticholinergic burden • Non-pharmacological approaches to management of dementia • Pharmacological management of dementia – cognitive decline and behavioural changes • Advance care planning • Dementia and driving • Dementia and decision-making capacity: Mini Legal Kits for GPs from Capacity Australia • Local care pathways 				
<p>PRE- SESSION ACTIVITIES</p> 	<ul style="list-style-type: none"> • Read the 2014 AFP article Managing dementia-related cognitive decline in patients and their caregivers 				
<p>TEACHING TIPS AND TRAPS</p> 	<ul style="list-style-type: none"> • There is more to dementia than cognitive decline • Develop a person-centered approach to managing dementia • Valid informed consent should always be sought from the person with dementia where able • It is critical to give adequate support to the carer of the person with dementia • Patients who have been prescribed an acetylcholinesterase inhibitor should be regularly reviewed for evaluation of adverse effects and whether there is a clinically meaningful response • People with dementia who develop behavioural and psychological symptoms should be treated using non-pharmacological approaches in the first instance 				
<p>RESOURCES</p> 	<table border="1"> <tbody> <tr> <td data-bbox="336 1597 435 1800">Read</td> <td data-bbox="435 1597 1497 1800"> <ul style="list-style-type: none"> • AFP 2010 article on Early dementia • Clinical practice guidelines and principles of care for people with dementia in Australia • AFP 2016 article Clinical Practice Guidelines And Principles of Care For People With Dementia In Australia • Dementia Australia clinical resources </td> </tr> <tr> <td data-bbox="336 1800 435 1928">Watch</td> <td data-bbox="435 1800 1497 1928"> <ul style="list-style-type: none"> • Driving and dementia • GPSA Webinars - Managing Dementia in General Practice and Teaching Dementia Care - A Structured Approach </td> </tr> </tbody> </table>	Read	<ul style="list-style-type: none"> • AFP 2010 article on Early dementia • Clinical practice guidelines and principles of care for people with dementia in Australia • AFP 2016 article Clinical Practice Guidelines And Principles of Care For People With Dementia In Australia • Dementia Australia clinical resources 	Watch	<ul style="list-style-type: none"> • Driving and dementia • GPSA Webinars - Managing Dementia in General Practice and Teaching Dementia Care - A Structured Approach
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<p>FOLLOW UP/ EXTENSION ACTIVITIES</p> 	<ul style="list-style-type: none"> • Ask the GP registrar to arrange a Home Medicine Review for a patient with dementia who is on multiple drugs, and then discuss results • Online courses through Dementia Australia • Online courses through Wicking Dementia Education and Research Centre • Undertake the role play and discuss the issues raised afterwards 				



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Role Play

INSTRUCTIONS FOR SUPERVISOR

You are Harry/Harriet, the 82-year-old husband/wife of Pat, an 84-year-old patient at the practice. Pat is not well known to you. You have come to speak to the doctor regarding your concerns about Pat's driving. You are a long-term patient of the practice, but you have not met the registrar before.

Background

You have been married to Pat for the past 51 years. Over the past couple of years, you have noticed that Pat is increasingly forgetful, but otherwise is managing well and is still very involved in social activities like bowls. You have come today because you are concerned about Pat's driving. You have noticed that Pat has lost confidence and is much more hesitant when driving. A couple of times Pat has turned down the wrong street on a very familiar route. You are particularly worried because Pat bumped into another car in the supermarket car park the previous week.

Reference

[Canadian Family Physician 2017 Driving and dementia: Efficient approach to driving safety concerns in family practice.](#)

