



Dementia is one of the most severe and devastating disorders we face. There are approximately 700,000 people with dementia in the UK. In just 30 years, the number of people with dementia is expected to double to 1.4 million.¹ Currently the level of diagnosis of people with dementia is generally low, with a 24-fold variation between highest and lowest activity by PCT.¹ For over a decade, researchers have sought ways to improve the early detection of dementia, yet many patients who meet the criteria for dementia do not receive a formal diagnosis, or receive a diagnosis in later stages of the disorder. The pressure for earlier diagnosis, and for population screening as a possible approach to improving detection of dementia, will increase as the burden of dementia increases, and as new therapies emerge.

Policy context

The aim of the National Dementia Strategy is to ensure that significant improvements are made to dementia services across three key areas: improved awareness, earlier diagnosis and intervention, and a higher quality of care. The evidence available points strongly to the value of early diagnosis and intervention to improve quality of life and to delay or prevent unnecessary admissions into care homes. All PCTs currently commission a number of services which might make the diagnosis of dementia. They include general practitioners, old age psychiatric community teams, geriatric medicine and neurology services. Current systems are almost without exception non-prescriptive and lack clarity about where and by whom diagnoses of dementia should be made.¹

The research

Currently, there is no clear view of the advantages and drawbacks of population screening for dementia. The Cambridgeshire and Peterborough CLAHRC (CLAHRC CP) is therefore undertaking 3 complementary systematic reviews of the evidence to inform this crucial debate. Key questions that we are addressing in the systematic reviews:

- What tools are available to screen people for dementia, and how good are they?
- How do patients, carers and doctors feel about screening for dementia?
- What would be the benefits and costs of a screening programme for dementia?

Contribution

Many researchers and practitioners are unclear about the benefits of population screening for dementia

and consider it neither clinically nor cost effective on the basis of current evidence. This research project will provide reliable evidence and practical information for policy makers, health professionals and the public on the validity of available screening tools. It will also shed light on the acceptability, cost, benefits and unintended consequences of population screening for dementia. This information is essential so that any gains made in terms of early detection of dementia are not lost through avoidable harm caused to the patient by screening.



Research partner

The project is a collaboration between the Public Health and Old Age themes of CLAHRC CP. It is funded by the BUPA Foundation in association with the Alzheimer's Society.

References

1. Living well with dementia: A National Dementia Strategy. Department of Health. February 2009.