

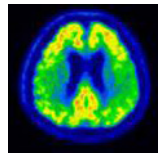
Early detection of dementia and the “Initial-phase intensive support team” for preventing BPSD.



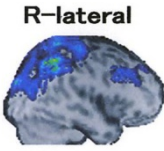
Haruyasu Yamaguchi, MD
Gunma University
Graduate School of Health Sciences

Japanese cat is now doing weight training.
To prevent dementia ??
Exercise is the best way.
But exercise prolongs one's life, enhancing occurrence of dementia.
Prevention is to postpone.

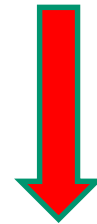
I found it at a souvenir shop in Takayama.



Early detection by
Amyloid imaging
PIB-PET etc.



Early detection by
CSF tau
SPECT



Early detection of
Dementia by
Questionnaire

Asymptomatic stage

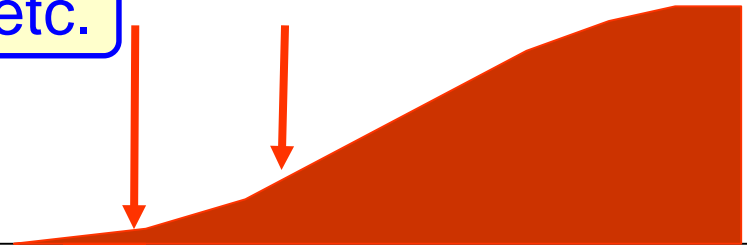
aMCI

AD Dementia



Exercise, diet, etc.

Cognitive impairment



Cerebral association cortex

Neurofibrillary tangles

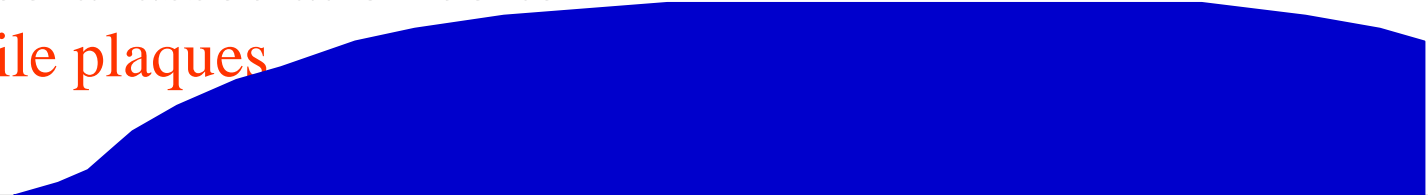
Phospho-tau



Cerebral association cortex

Senile plaques

A β



-30 -20 -10 0 +10 Y

Advantages and Disadvantages of early detection of dementia

| | Advantages | Disadvantages |
|-------------------------|--|--|
| Patients | <p>Receiving pharmacological and non-pharmacological therapies</p> <p>Access to appropriate agencies and support networks</p> <p>Prevention of BPSD</p> | <p>Psychological damages of anxiety and depression</p> <p>Risk of withdrawal, isolation, stigma and social exclusion</p> <p>Risk of false positive diagnosis</p> |
| Families and caregivers | <p>Mental preparation for disease progression</p> <p>Access to appropriate agencies and support networks</p> | <p>Stigma and exclusion</p> <p>Care burden from early stages</p> |
| Social services | <p>Net cost reduction effects including delay of institutionalized care</p> | <p>Shortage of social resources, including human resources</p> |

Early detection of dementia by SED-11Q, and assessment of anosognosia

日本語版の質問票は山口晴保研究室HPよりダウンロード可能

Symptoms of Early Dementia-11 Questionnaire (SED-11Q)

Date(MM/DD/YYYY) / /

Patient Name : _____

Respondent Name : _____

Respondent-completed / Interview by Name: _____

Caregiver answers
Cut-off 2/3

How has the patient's daily life been for the last month?

Please answer the following questions by circling the appropriate response (YES, NO, or N/A). (Exclude any difficulties caused by physical issues, e.g., pain). Please ask for any help if needed.

7 by caregiver

| | | | |
|---|--------------------------------------|--------------------------|---------------------------|
| He/she talks and asks about the same things repeatedly. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become unable to understand the context of facts. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become indifferent about clothing and other personal concerns. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has begun to forget to turn off the faucet and/or close the door, and/or has become unable to clean up properly. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| When doing two things at the same time, he/she forgets one of them. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become unable to take medication under proper management. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has begun to forget to turn off the faucet and/or close the door, and/or has become unable to clean up properly. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become unable to make a plan. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she cannot understand complex topics. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become less interested and willing, and stopped hobbies, etc. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become more irritable and suspicious than before. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| TOTAL SED-11Q SCORE | | | |

2 more Qs: Delusion and illusion for medicine

| | | | |
|--|---------------------------|--------------------------|---------------------------|
| He/she has delusions, e.g., claims to have had valuables stolen. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has illusions, e.g., sees something that isn't there. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |

Patient answers

How do you feel?

Date(MM/DD/YYYY) / /

Name : _____

ID : _____

Respondent-completed / Interview by Name: _____

How have your daily life been for the last month?

Please answer the following questions by circling the appropriate responses (YES, NO, or N/A). (Exclude any difficulties caused by physical issues, e.g., pain). Please ask for any help if needed.

Only 2 by patients

| | | | |
|---|--------------------------------------|--------------------------|---------------------------|
| He/she talks and asks about the same things repeatedly. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become unable to understand the context of facts. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| He/she has become indifferent about clothing and other personal concerns. | <input checked="" type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
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| He/she has become more irritable and suspicious than before. | <input type="radio"/> YES | <input type="radio"/> NO | <input type="radio"/> N/A |
| TOTAL SED-11Q SCORE | | | |

Same 11 Qs

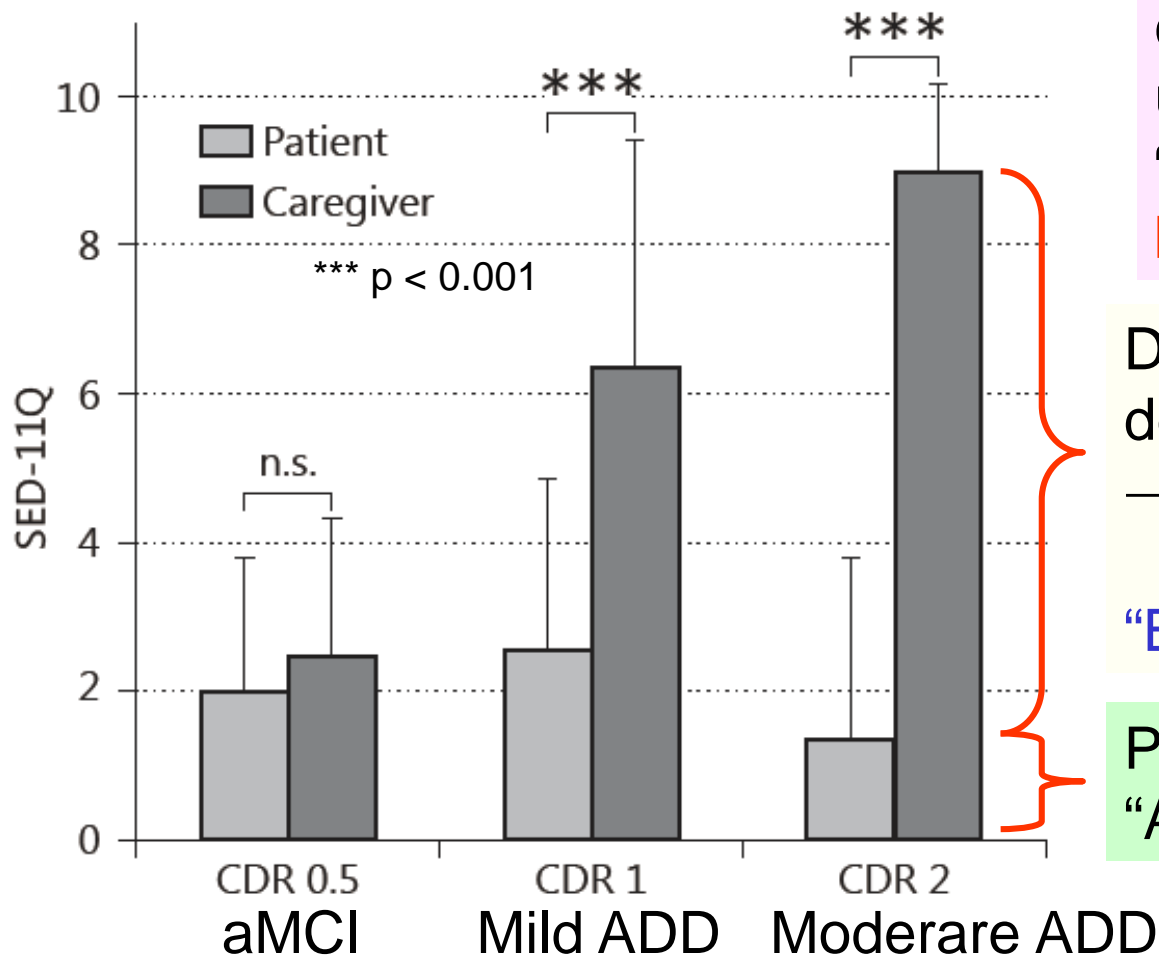
Free PCM article

Maki Y et al: Dement Geriatr Cogn Disord Extra 3:131-142, 2013
Maki Y et al: Geriatr Gerontol Int 14(Supple 2):2-10, 2014

Anosognosia evaluated by SED-11Q

Symptoms of Early Dementia-11 Questionnaire

Subjects: 13 in aMCI (CDR 0.5); 73 in Mild ADD (CDR 1); 21 in Moderate ADD (CDR 2)



To prevent BPSD, caregiver should understand the “Anosognosia”, and **be careful not to warn**

Discrepancy shows the degree of “Anosognosia”
→ Caregiver tend to give attention & warning
“Be careful not to fail!”

Patients score shows “Awareness of illness”

Easy, quick detection of dementia by the Yamaguchi fox-pigeon imitation test



Normal

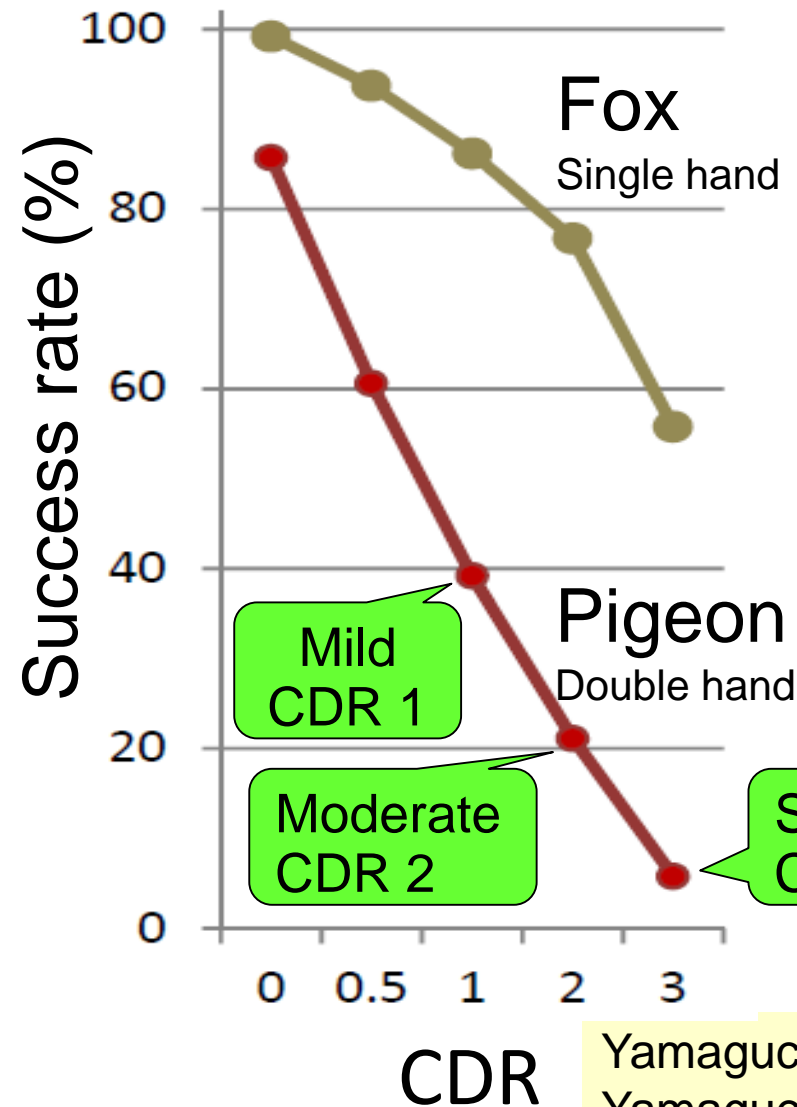
ADD

DLB



Yamaguchi fox-pigeon imitation test (YFPIT); 20 secs.

Subjects: 1,219 aged people; 387 normal; 497 ADD; 98 DLB; etc.



About 70% of demented subjects failed the imitation of pigeon.



Palms Outside

ADD patients showed difficulty in taking the 3rd person's viewpoint.

(Perspective taking)

→ Self-monitoring ↓
Anosognosia

Yamaguchi H : Dement Geriatr Cogn Disord 2:254-258, 2010

Yamaguchi H : Psychogeriatrics 11:221-226, 2011

視線を落とす→落ち目

Looking down causes being out of luck.

うつむく→うつの気分

Neck flexion causes depressive feeling.

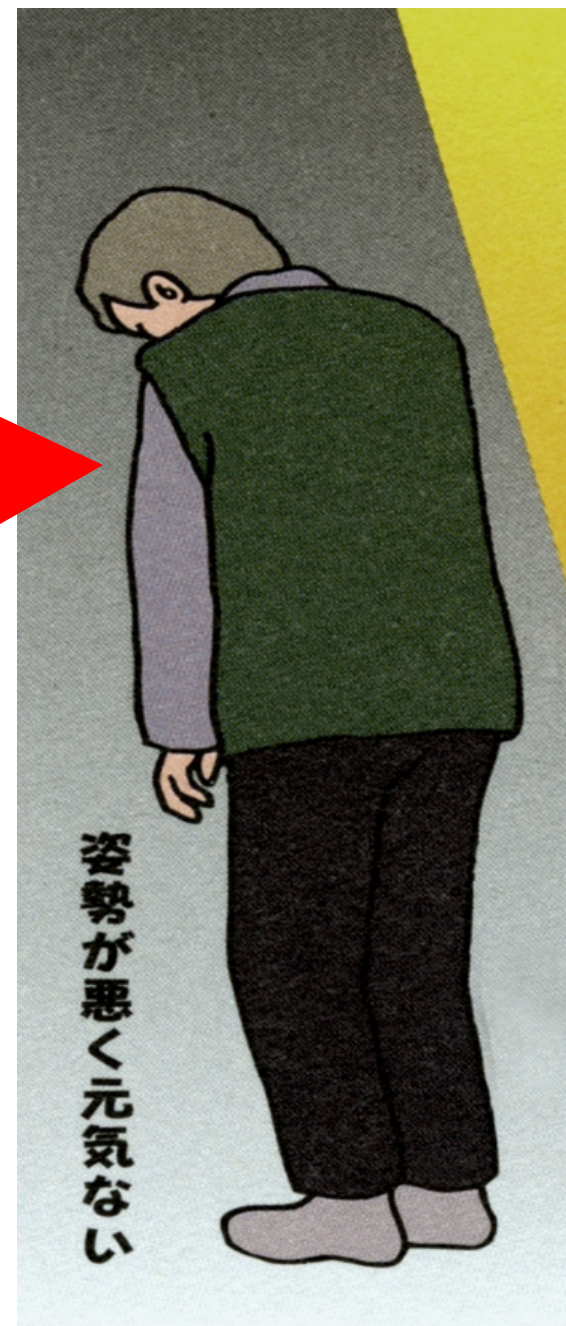
He was given a diagnosis of dementia just now.

He said,

“Early diagnosis” thrown me into “Early despair”.

早期診断＝早期絶望

Early diagnosis should be associated with early support to reduce psychological damages of anxiety and depression.



Initial-phase Intensive Support Team(IPIST)

【purpose】 to organize **supporting system** for **early detection** and **early diagnosis**. To enable elderly people to live in their **community** in a **pleasant and familiar** environment **throughout their life**, even if they come to require advanced-level care.

【What is IPIST?】

IPIST visit people with dementia (and their households).

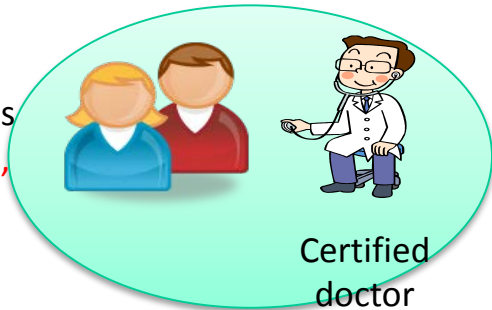
IPIST support includes:

assessments of patient's state,
supports for family
in **initial-phase (<6-months)** etc.

Community general support center

Members of IPIST

Medical and Care specialists
(**public health nurse, nurse,**
occupational therapist,
social worker,
LTC public aid worker)



Certified
doctor

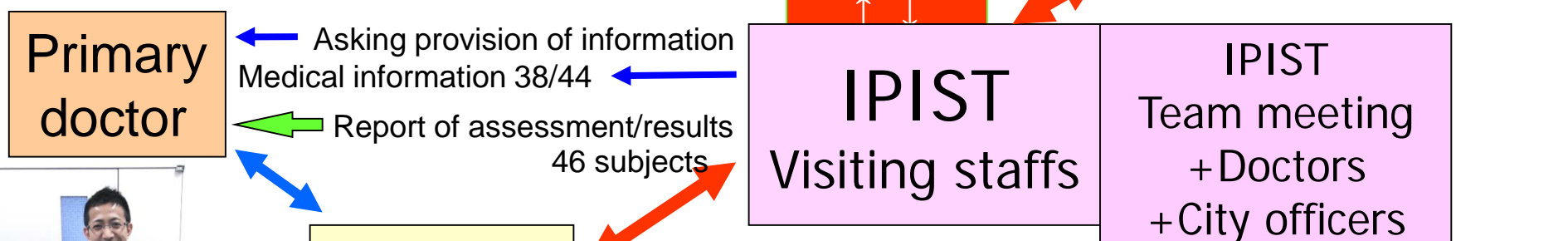
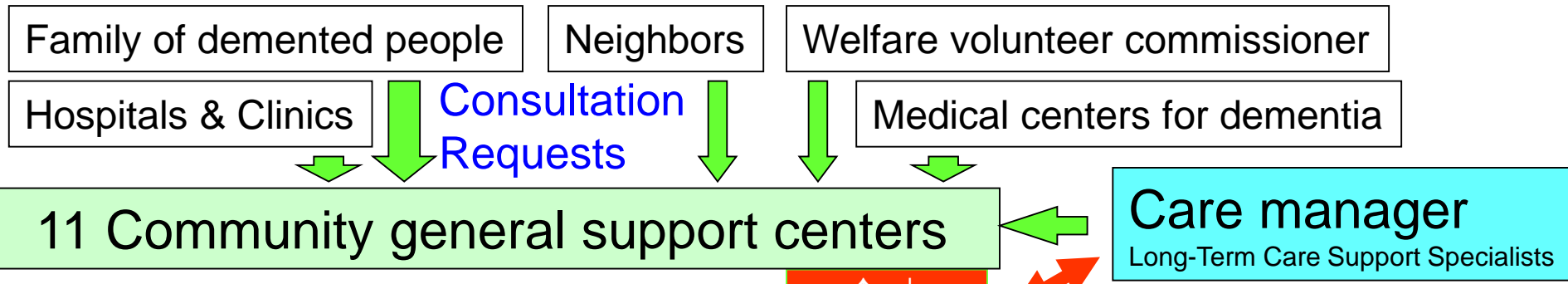
【People supported by IPIST】

- ◆ People **with or suspected to be with dementia** (40 years old and over)
- ◆ People live in **home**
- ◆ Person with one of (a) to (d)
 - (a) without **proper diagnosis**.
 - (b) without **continual medical services**.
 - (c) without **proper welfare services**
 - (d) with proper diagnosis and **discontinuous services**
- ◆ Person with severe **BPSD**

Five-year Plan for Promotion of Dementia Measures (2013-2017)
“Earlier diagnosis and Intervention” < Orange Plan >

Stream of the task

Meeting → Assessment → Meeting → Support → Connecting → Monitoring



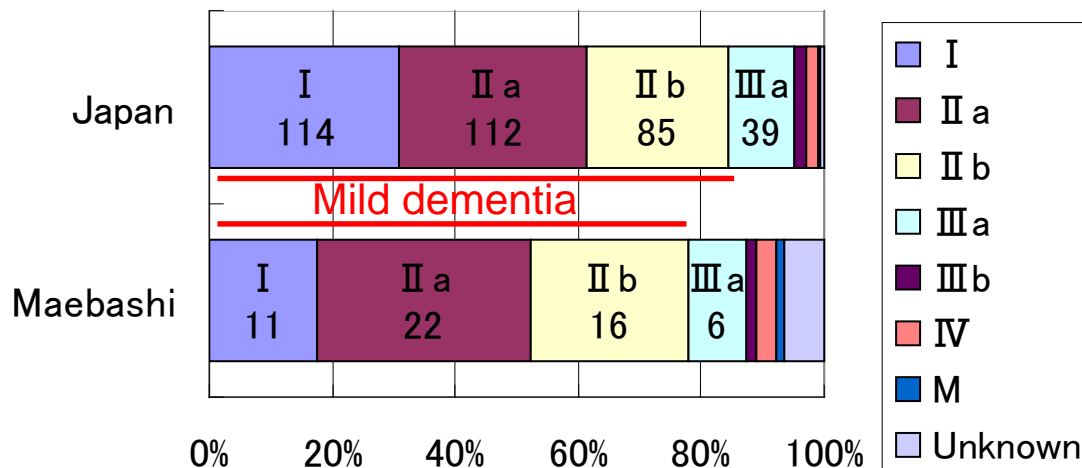
Maebashi city
3 hundred thousand people

Orange Plan
Family care Guidebook

IPIST in Maebashi city

Orange
Plan

- Subjects: 63 persons
(Visited : 58 persons; Not visited 5 persons)
- Number of visit : 2.5 ± 1.9 times First visit 101min.
- Disease : Dementia? 51; Psychiatric? 3; Alcoholic 5
- Problem in caregiver rather than in subjects 8
- Family doctor (GP) : Having 46; Not having 17
→ Response form GP : 38/44 informed
- Diagnosis of dementia : Already 11; Not yet 31



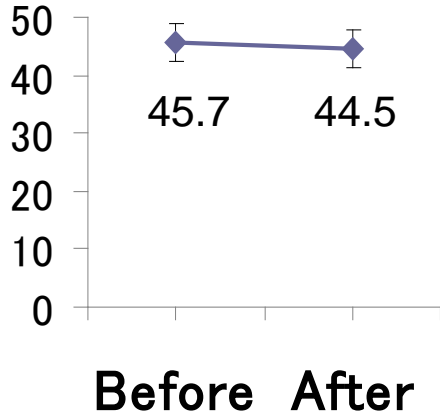
Independence degree
of daily living for the
demented elderly

Initial-phase intensive support team in **Maebashi city**: **1 year achievement** from Sep 2013 to Sep 2014

Dementia severity

DASC 21 n=22

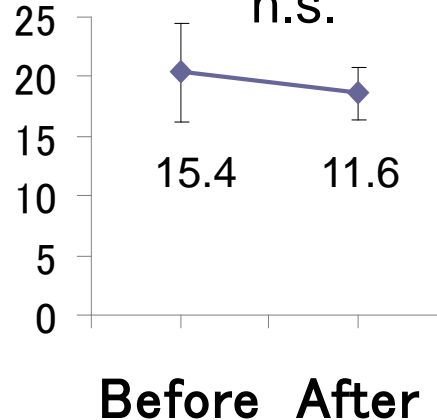
n.s.



BPSD

DBD 13 n=20

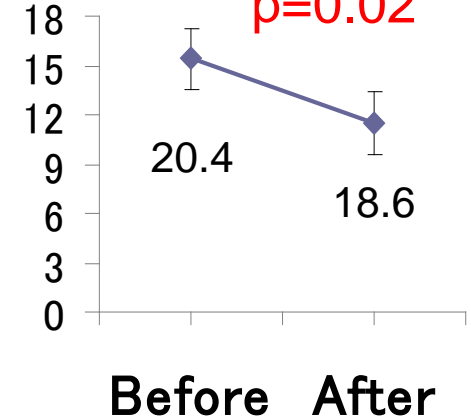
n.s.



Care burden

J-ZBI_8 n=20

p=0.02



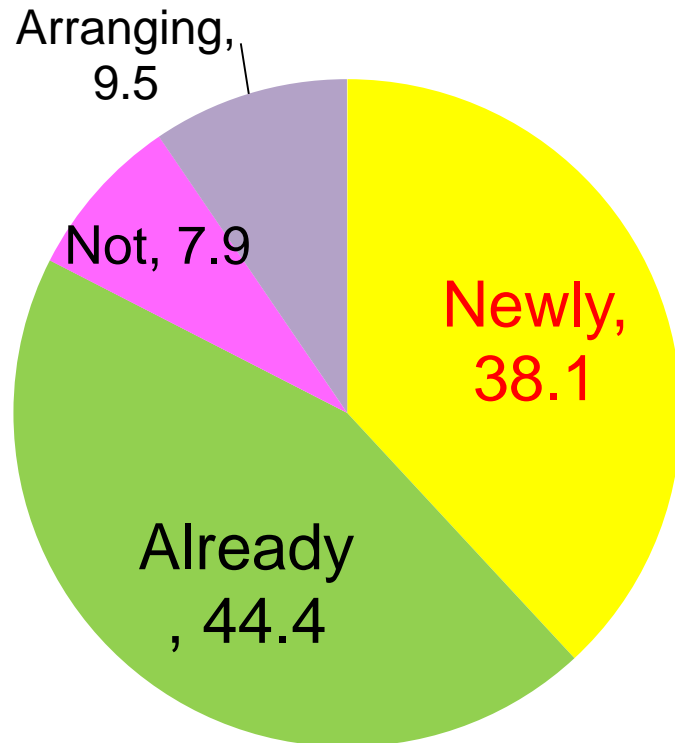
- # Dementia severity, assessed by DASC21, did not change.
- # **Behavioral disturbance**, assessed by DBD13, tended to improve.
- # **Care burden**, assessed by Zarit 8, improved significantly.

DASC21 is a Dementia Assessment Sheet in Community-based Integrated Care System, which consisted of 21-items questionnaire asking living functions

Initial-phase intensive support team in **Maebashi city**: **1 year achievement** from Sep 2013 to Sep 2014

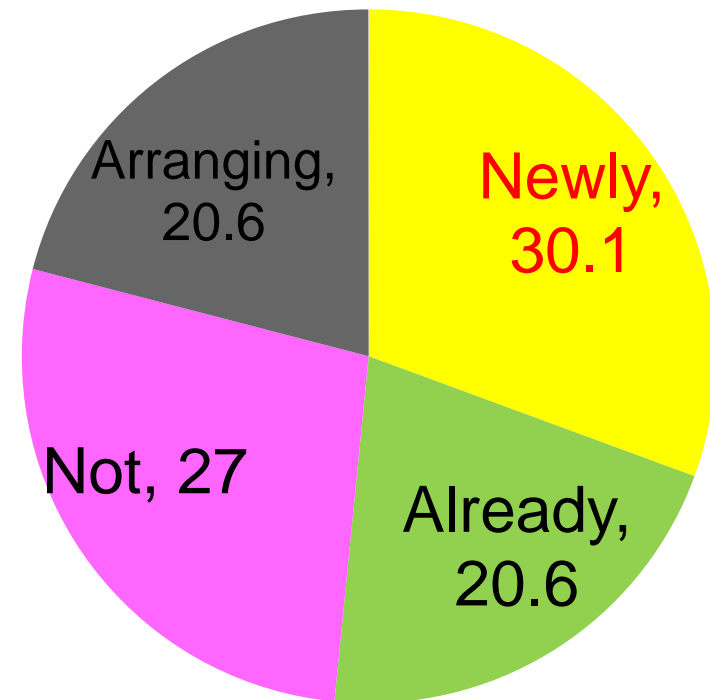
Total 63 Subjects ; Visits 2.5 +/- 1.9 times (n=46)

Connected to
Medical treatment



Most were connected to
medical treatment

Connected to
Welfare service



More than half were
connected to welfare service

Initial-phase intensive support team for dementia in 2013 in Japan <Orange plan>

Model project Half year: 2013.9 to 2014.3

Orange
Plan

14 areas (city, town, village, ward)

Cases: **Total 636 cases**, 45.4 cases/area (mean)
50% of cases have difficulty in support
<anosognosia (refusal), neglect, alcohol, etc>

Visits: Total 2,106 visits, **3.14 visits/case** (mean)
First visit 77 min. (mean); Third visit 55 min.

Team staff meeting: Total 316 times, 22.6/area (=1/w)
Taking 89 min. ; 20 min./case (mean)

Now going on in 108 areas (2014.9)

Take Home Message

Early detection & Initial-phase intensive support team (IPIST)

Questionnaire (SED-11Q) and the Yamaguchi fox-pigeon **imitation test** (taking 30 sec.) contribute to early detection of dementia as a **screening**.



Furthermore, SED-11Q evaluates “**anosognosia**” that is difficulty in self-awareness, and is useful to **prevent BPSD through caregiver education**. **Tool**

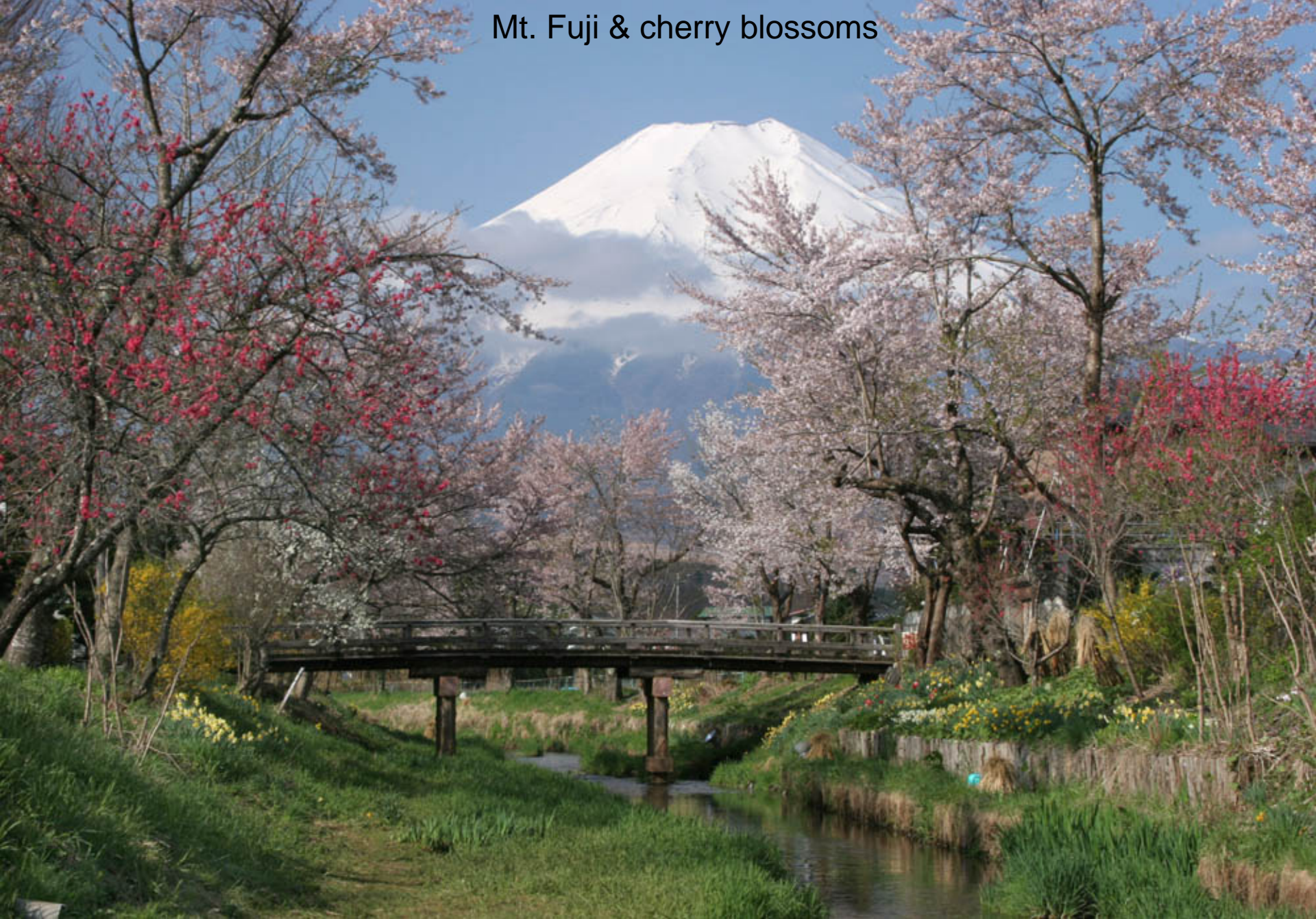


As an **early support system**, IPIST in the orange plan **connects demented subjects to medical and social supports** to reduce care burden, and to prevent BPSD. **Family care Guidebook**

We hope the subjects continue to **live at-home with dignity**.

Five-year Plan for Promotion of Dementia Measures (2013-2017)
“Earlier diagnosis and Intervention” < Orange Plan >

Mt. Fuji & cherry blossoms



Thank you for your attention.



Oshino-Hakkai 忍野八海 2006.5.4