

HOW DOES A DIAGNOSIS OF DEMENTIA WITH PARKINSON'S INFLUENCE CARE SETTING IN THE FUTURE?



Aju Rafeeq (Cardiff and Vale UHB – Internal Medicine), Chris Thomas (Cardiff and Vale UHB - Medicine), Jyothi Adenwalla (Cardiff and Vale UHB - Geriatric Medicine), Sarah Page (Cardiff and Vale UHB - Geriatric Medicine), Biju Mohamed (Cardiff and Vale UHB - Medicine)

OBJECTIVE

To describe the trajectory of Parkinson's after the onset of dementia including setting of care, frailty levels and mortality rate.

BACKGROUND

The Cardiff and Vale University Hospital in South Wales, UK runs an integrated Parkinson's clinic where People with Parkinson's (PwP) developing dementia continue to be managed by the same clinical team although dementia presents its own clinical challenges including a reduction to life expectancy.

METHODOLOGY

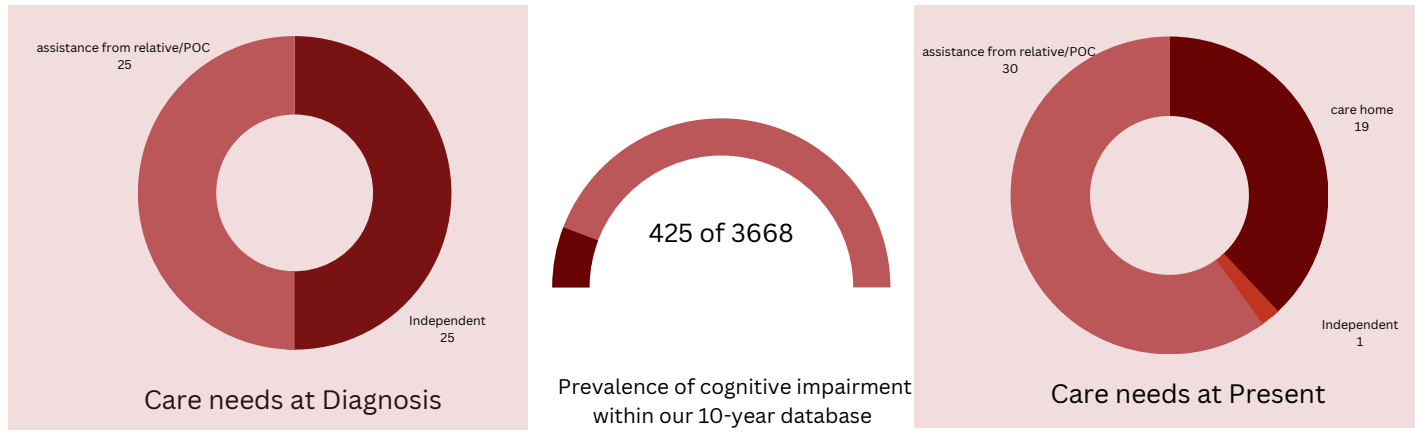
An audit of 425 patients diagnosed with dementia with a background of Parkinson's over the last 10 years (2013-2023) was identified and a random sample of 50 patients assessed for demographics, duration of Parkinson's, presentation of dementia and outcomes including place of residence and mortality data.

CONCLUSION

The onset of dementia appears to mark a significant shift in disease burden resulting in an increased rate of institutionalisation and care needs. The trend towards increasing hospital admissions in this cohort alongside increasing contact with the care team reflects increasing frailty, carer and disease burden. The onset of dementia should be a trigger for clinicians and service providers to proactively plan for future care provision. This needs further evaluation and we are analysing our wider sample currently.

RESULT

Of 50 patients, the majority were male (28) with mean age of 75 years. The mean duration of Parkinson's prior to diagnosis of dementia was 6 years and from PD Dementia (PDD) to death 3 years. The Median Clinical Frailty score on the diagnosis of dementia was 5. PwP had a median of 5 medications and 3 co-morbidities at the point of diagnosis. Pre-dementia diagnosis, there were no patients in care settings with 50% independently living at home, and the other half dependent on informal or formal care support. Following a diagnosis of dementia, only 1 patient was living independently at home, with 19/50 (38%) in care facilities and 30/50 (60%) living at home with support. There was a trend towards increasing hospital admissions and an increased need for support from the Parkinson's team following a diagnosis of dementia (pre-diagnosis 24 admissions, post-diagnosis 31 admissions) increased contact to the Parkinson's team (323 versus 360)



ACKNOWLEDGMENT

Parkinson's Disease Team, Cardiff & Vale, Dr.Biju Mohamed and Dr. Chris Thomas