

Book / Publication Review – Dental Health, 2018

Signposting to excellence: treating patients with dementia.

The population of the UK is getting older and this has implications for health care including dentistry. In 2016 18% of the population was over 65 years old. This is predicted to rise and the Office of National Statistics (2017) predict that by 2036 the average percentage of people over 65 years in the UK will be more than 25%, and in some places this will be as much as 33% and above. This means that almost a quarter of the average dental practice's patient list is likely to fall into this category. Older people are more likely to be diagnosed with dementia. The Alzheimer's Society (2017) estimate that there are 850,000 people living with dementia, (40,000 of which are under 65 years old) and this is set to rise in relation to the aging population to two million by 2051.

Dementia is an umbrella term used to describe a range of progressive neurological disorders that cause loss of brain function. These conditions are usually progressive and often result in extreme symptoms such as complete memory loss, loss of speech, and severe cognitive impairment (Reiman *et al*, 2012). There are different types of dementia including; Alzheimer's disease, vascular dementia, frontotemporal dementia, dementia with Lewy bodies and dementia from Parkinson's disease (National Institute of Aging, 2017). Some people may have a combination of types of dementia and each individual will experience their dementia unlike any other. For dental care professionals this means that even simple treatment can become complex with each patient exhibiting their own set of unique behaviours and clinical issues to overcome. The people management and clinical skills of dental hygienist and therapists are of paramount importance if these vulnerable patients are not to face the added complication of poor oral health too. Particular dental problems that patients may present with in addition to those faced by other patients include bruxism, issues with chewing and swallowing and tolerance to wear dentures.

In order to help clinicians when working with patients showing signs of dementia the Faculty of General Dental Practice (FGDP) has a new publication; 'Dementia Friendly Dentistry. Good Practice Guidelines', edited by Paul Batchelor (2017). This small ring bound book has been developed with input from dementia support organisations, including the Alzheimer's Society, Healthwatch England, and the London Dementia Clinical Network. This type of collaboration with those outside of dentistry has led to the production of a comprehensive guide that looks at this life limiting illness from a broad perspective that can sometime be missed in dental only publications. As such, this set of guidelines will be useful to

new and experienced dental professionals alike and joins the other four similar publications from the FGDP.

The guide is split into four distinct sections that take the reader steadily through the details of general health and social considerations to dental specific information and on to targeted education and resources that are available. The information provided covers the many types of dementia, and perhaps more importantly for dental professionals treating patients with dementia, the different stages and related symptoms are comprehensively discussed. This guide aims to set out the standards to which dental professionals should reach in these circumstances. These have been cleverly graded using an ABC system. A=aspirational, B=basic, and C=conditional (dependent on the patients and circumstances). However, although this may appear somewhat prescriptive at first glance, the guide clearly states that the clinician's judgement takes priority because of the complexity of care needed when treating individuals with dementia. At the end of each section there is a short summary of key points. This is an example of the practical approach taken in the production and content of this publication, where even experienced professionals are likely to find useful information, for example, small points such as, specific font styles for practice forms that are dementia friendly, or something more substantial such as, how to raise the issue of dementia with a patient without the knowledge of a previous diagnoses. In short, this is a useful addition to a dental hygienists or therapists continued professional development. It is available free online from www.fgdp.org.uk or in hardcopy also via the website for £25.



References

Alzheimer's Society. (2017). Who is affected? Available from: https://www.alzheimers.org.uk/info/20027/news_and_media/541/facts_for_the_media Accessed: 11th December 2017

Faculty of General Dental Practice (UK). (2017). Dementia Friendly Dentistry. Available from; <https://www.fgdp.org.uk/publication/dementia-friendly-dentistry> Accessed; 11th December 2017

National Institute of Aging (2017) Types of dementia. Available from: <https://www.nia.nih.gov/health/types-dementia> Accessed; 11th December 2017

Office of National Statistics. (2017) Overview of the population in the UK: July 2017. Available from; <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/july2017#the-uks-population-is-getting-older-but-its-not-the-same-in-all-areas-of-the-uk> Accessed; 11th December 2017

Reiman, E., Quiroz, Y., Fleisher, A., Chen, K., Velez-Pardo, C., Jimenez-Del-Rio, M., Fagan, A., Shah, R., Alvarez, S., Arbelaez, A., Giraldo, M., Acosta-Baena, N., Sperling, R., Dickerson, B., Stern, C., Tirado, V., Munoz, C., Reiman, R., Lopera, F. (2012) Brain imaging and fluid biomarker analysis in young adults at genetic risk for autosomal dominant Alzheimer's disease in the presenilin 1 E280A kindred: a case-control study. *The Lancet Neurology*. 11(12) 1048-1056