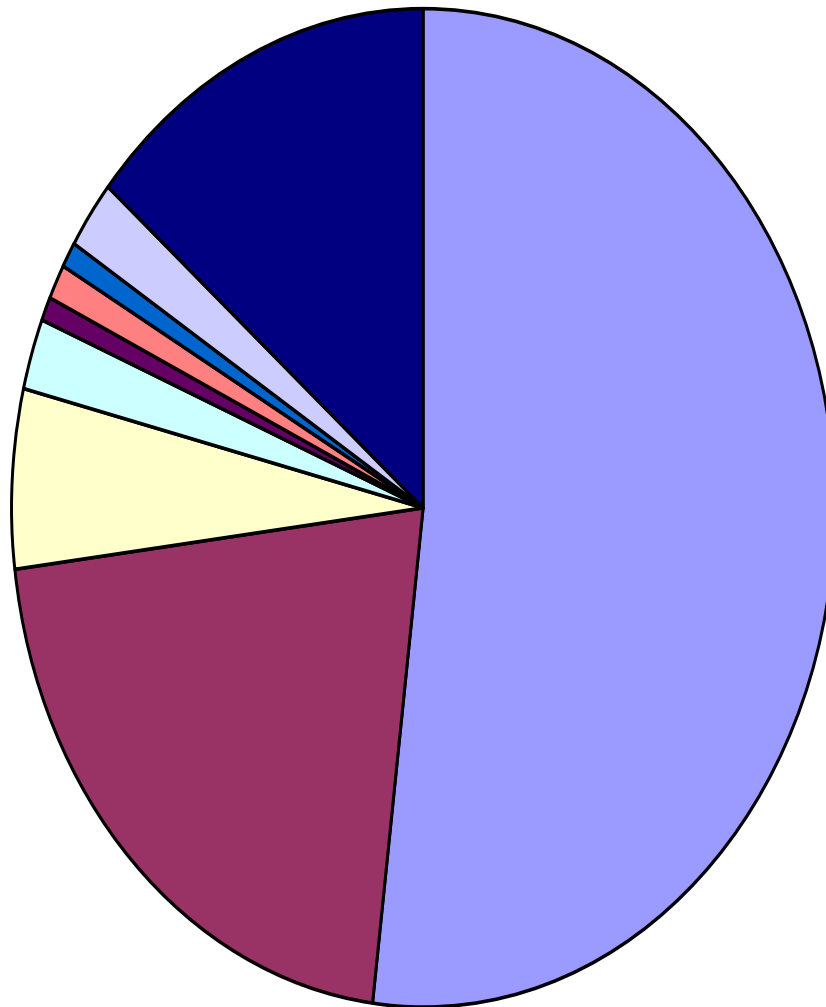

Lanarkshire Early Onset Dementia Service

SCN Karen Reid *South*
SCN Peter Bell *North*

Service is for Younger People With Dementia, under 65, and living in the community in Lanarkshire.

- Alzheimer's Disease
- Vascular Dementia
- Frontal Lobe Dementia
- Lewy Body Dementia
- Huntington's Disease, M.S. and PD.
- Creutzfeld-Jacob Disease

DIAGNOSIS BREAKDOWN



- ALZHEIMERS DISEAS
- VASCULAR
- FRONTAL LOBE
- HUNTINGTONS
- LEWY BODY
- CJD
- PARKINSONS
- MS
- OTHER

Lanarkshire wide service

- 2 CHPs - covering 9 localities
- **Population North** is 322,800 (470 sq.km) or 293 sq miles
- **Population South** is 305,400 (1,772 sq.km) or 1107 sq miles
- **Prevalence rate (30-64 age)** 67 per 100,000
- **South estimate** is 88. **Actual caseload** is 55
- **North estimate** is 93. **Actual caseload** is 64

Service Objectives

- Ongoing mental health assessment
- 1:1 Supportive Psychotherapy
- Education to both client and carer in the management of dementia
- Behavioural Family Therapy
- Support Groups for users and carers
- Monitoring of cognitive enhancing medication
- Offer Home Support and manage clinical input
- Case management

Challenges faced by service users

- Coming to terms with the diagnosis
- Changes in personal, work relationships
- Employment
- Driving
- Power of Attorney
- Mood and Perceptual disturbances

Multi Disciplinary/Agency Working

- Funded for 2 SCN and 2 CPNs
- Referral route to Old Age Psychiatrists/OT/Psychology
- Service Manager Alzheimer Scotland facilitate user and carer groups and client's activities (swimming, walking, museums) local authority provide home support in North
- Adult Social Work colleagues

Audit of Alzheimer's Scotland Home Support

- Group activities for service users ten pin bowling, walking group
- Would like more hours
- Costs of travel and outings met by service users which may limit use of service

Discharge Protocol

Follow up appointments in 6 months.

Users and Carers are made aware of re-referral criteria.

Discharged when in permanent long term care.

Service Users Group

- memory management
- share experiences, reduce isolation
- therapeutic artwork session
- acknowledge the difficulties of diagnosis
- promote healthy lifestyle
- encourage social activities

Carers Group

- Share experiences of living with someone with dementia
- Discuss coping strategies
- Speakers give talks relevant for caring role
- Latest research discussed
- Time out, and may socialise out with group

Proposed developments

improved multi disciplinary input

regular MDT reviews

equity and increase in council
funding

Best Practice Guidelines for EOD

- Single point of entry into service
- ICP for young onset dementia
- Designated old age psychiatrist
- Age appropriate services community, respite and long term care
- Support groups for users and carers
- Focus group - named person for service development in trust

Case examples Mrs C.- Alzheimers

- History of psychotic symptoms from her mid 40's as well as poor memory
- Paranoia were the first symptoms
- family thought she may have had schizophrenia initially
- Alzheimers diagnosed aged 49,LTC aged 51
- Paranoia hallucinations resurfaced throughout course although latterly have settled

Mr M- vascular dementia/FLD

- Developed an exaggeration of his usual personality aged 54
- Short term memory very good but difficulty recalling friends he had known for years
- Concrete thinking evident
- Ritualistic behaviour – routine and foods
- Lack of insight – refused to give up driving

Mrs K- CADASIL

- Presented to Psychiatry with low mood and bells palsy
- Father and sister had died of M.S
- Dysarthric speech
- Poor mobility
- Degree of physical impairment thought initially to be hypochondrical
- Low mood
- CT SCAN showed extensive cerebrovascular disease diagnosed CADASIL aged 48.

Mr P- FTD

- 55 year old man married with 2 teenage sons
- Affluent area, good job, nice house (lost house)
- Insidious onset of behaviour
- Unable to operate computer at work, argumentative at meetings, fighting.
- Carer burden – aggressive, impulsive behaviour risk for user and carer/family.

Hope for the future

- No age discrimination for dementia funding
- Quicker diagnosis for younger people
- Services properly funded
- All service users and carers access support groups
- Scottish Network of professionals for YPWD

