

About programme updates

The Centre for Pharmacy Postgraduate Education (CPPE) has a quality assurance process called programme guardians. A programme guardian is a recognised expert in an area relevant to the content of a learning programme who reviews the programme every six to eight months. Following the regular programme guardian review we have developed this update to inform you of any necessary corrections, additions, deletions or further supporting materials. We recommend that you check you have the most recent update if you are using a programme more than six months after its initial publication date.

This update has been prepared by Terri Turner and should be read in conjunction with the *Dementia* focal point programme. We have indicated the relevant section and page number of the original document wherever we provide updated information.

A note about web links

Where we think it will be helpful we have provided web links to take you directly to an article or specific part of a website. However, we are aware that web links can change. If you have difficulty accessing any web links we provide, please go to the organisation's home page or your preferred internet search engine and use appropriate key words to search for the relevant item.

All web links were accessed on 1 August 2016.

Access to the BNF online

You can access the *BNF* online through MedicinesComplete. If you are not already registered, you will need to do so. UK-based individuals working for or on behalf of the NHS can register for free and access the *BNF* and *BNF* for children. To register, go to: www.medicinescomplete.com/about/subscribe.htm

Assessment

As part of your learning for this programme, you may wish to undertake the associated e-assessment. To access the assessment, go to: www.cppe.ac.uk/assessment

References in the programme to competency frameworks

In this programme we may map our learning objectives against the Royal Pharmaceutical Society of Great Britain's competency framework, the *General level framework* or the *Knowledge and skills framework*. You can easily map the learning objectives against a competency framework that is relevant to your practice.







Book 1

Useful resources

(page 9 - additional text)

Add the following text to the bottom of this section:

The National Institute for Health and Care Excellence (NICE) has published guidance, *Dementia*, *disability* and frailty in later life – mid-life approaches to delay or prevent onset, which covers mid-life approaches to delay or prevent the onset of dementia, disability and frailty in later life. The guideline aims to increase the amount of time that people can be independent, healthy and active in later life.

You can read this publication at: www.nice.org.uk/guidance/ng16

e-learning (page 10 – amendments)

Replace the web link for the Social Care Institute for Excellence (SCIE) - *Open dementia e-learning programme* with: **www.scie.org.uk/dementia/e-learning/index.asp**

Replace the web link for the Medicines and Healthcare products Regulatory Agency (MHRA) *Antipsychotics learning module* with: **www.mhra.gov.uk/antipsychotics-learning-module/index.htm**

Replace the web link for the CPPE *Antipsychotic reviews in dementia* e-learning programme with: www.cppe.ac.uk/programmes/l/antipsych-e-01

Replace the web link for the CPPE *Quality counts - from NICE quality standards to high quality outcomes* elearning programme with: **www.cppe.ac.uk/programmes/l/cpoptall-e-01**

Section 1 Dementia

1.1 Epidemiology (page 16 – amendments)

Replace the first and second sentences of the second paragraph with:

According to the Alzheimer's Society there are 850,000 people in the UK with dementia. This number is projected to rise to over one million by 2025 and over two million by 2051 due to the UK's ageing population.¹

Replace the third paragraph with:

The prevalence of dementia increases with age. 1 in 14 people over 65 years of age has dementia, rising to 1 in 6 people over 80 years. It is more common in women than men.² It is estimated there are at least 42,000 aged under 65 years with dementia in the UK, accounting for around five percent of people with dementia. People with dementia whose symptoms started before they were 65 years old are referred to as those with *young-onset dementia* as this is the term preferred by many people with the condition.³







(page 17 - amendment)

Replace the final paragraph with:

From Alzheimer's Society Dementia 2014 infographic:

www.alzheimers.org.uk/site/scripts/documents_info.php?documentID=2761

Section 2 Diagnosing dementia

2.1 Assessment tools in dementia (page 27 – amendment)

Replace the final paragraph with:

Further information about diagnosing dementia can be found at:

www.alzheimers.org.uk/site/scripts/documents.php?categoryID=200346

Section 3 Background and policy documents

3.3 *Prime minister's challenge on dementia: delivering major improvements in dementia care and research by 2015* (page 29 – additional text)

Add the following text to the bottom of this section:

The *Prime minister's challenge on dementia 2020* was published in February 2015 and describes:

- why dementia remains a priority
- progress on improving dementia care, support and research
- transforming dementia care, support and research by 2020
- promoting awareness and understanding
- building social action by actions of individuals, communities and businesses.

You can read this publication at: www.gov.uk/government/publications/prime-ministers-challenge-on-dementia-2020

Practice point 2 (page 31 – amendment)

Replace the web address for NICE quality standards for dementia with:

QS1: www.nice.org.uk/guidance/qs1 QS30: www.nice.org.uk/guidance/qs30

Section 4 Management of dementia

4.2.1 Acetylcholinesterase (AChE) inhibitors

Rivastigmine (page 35 – amendment)

Replace the web link for the *BNF* with: www.medicinescomplete.com







Section 5 Living with dementia

5.2 Management of the behavioural and psychological symptoms of dementia (BPSD) Advice and support for healthcare and social-care professionals (page 45 – amendment)

Replace this paragraph with:

The National Institute for Health and Care Excellence (NICE) published a key therapeutic topic, *Low-dose antipsychotics in people with dementia* in January 2015 which summarises the evidence based on low-dose antipsychotics in people with dementia to support medicines optimisation. The Alzheimer's Society's *Optimising treatment and care for people with behavioural and psychological symptoms of dementia: a best practice guide* is no longer available.

You can read this publication at: www.nice.org.uk/advice/ktt7

(Page 46 – deletion)

Delete the final paragraph on this page.

Practice point 4 (page 46 – deletion)

Delete this practice point. The NHS England dementia map is no longer available.

(Page 47 – additional text)

Add the following text to the bottom of this section:

The National Institute for Health and Care Excellence (NICE) published advice, *Management of aggression, agitation and behavioural disturbances in dementia: valproate preparations* in March 2015 which reviews the available evidence for the off-label use of valproate preparations for treating agitation or behavioural disturbances in people with dementia. NICE advises that evidence from randomised controlled trials (RCTs) suggests that valproate preparations are no more effective than placebo for treating agitation or behavioural disturbances in people with dementia and that adverse effects such as falls, sedation, gait disturbances, tremor, muscular weakness, thrombocytopenia, gastrointestinal disorders and urinary tract infections are more common in people taking valproate preparations than placebo.

You can read this publication at: www.nice.org.uk/advice/esuom41/chapter/Key-points-from-the-evidence

The National Institute for Health and Care Excellence (NICE) published advice, *Management of aggression, agitation and behavioural disturbances in dementia: carbamazepine* in March 2015 which reviews the available evidence for the off-label use of carbamazepine for managing aggression, agitation and behavioural disturbances in people with dementia. NICE advise that four very small short-term randomised placebo-controlled trials (RCTs: total n=97) with many limitations give conflicting results about the efficacy of carbamazepine for managing aggression, agitation and behavioural disturbances in people with dementia. Larger, longer-term RCTs are required to confirm its efficacy and safety for this indication. You can read this publication at: www.nice.org.uk/advice/esuom40/chapter/Key-points-from-the-evidence







References (pages 53-57 – amendments)

Replace the web link for reference 1 with: www.nice.org.uk/guidance/cg42

Replace the web link for reference 2 with: www.nice.org.uk/guidance/ta217

Replace the web link for reference 3 with: www.nice.org.uk/guidance/qs1

Replace the web link for reference 4 with: www.nice.org.uk/guidance/qs30

Replace the web link for reference 6 with: www.alzheimersresearchuk.org/wp-content/uploads/2015/01/Dementia2010Full.pdf

Replace the web link for reference 19 with: www.alzheimers.org.uk/site/scripts/download_info.php?fileID=2532

Replace the web link for reference 23 with: www.nice.org.uk/guidance/qs50

Replace the web link for reference 54 with: www.hospitaldr.co.uk/Dementia%20care_EN_1.pdf

Delete the web link for reference 56 as it is no longer available online.

Reference 60 is no longer available.

Reference 62 is no longer available and has been replaced with National Institute for Health and Care Excellence. *Low-dose antipsychotics in people with dementia*, 2015 **www.nice.org.uk/advice/ktt7**

Book 2

Case study 1 – Neil (pages 6 and 26 – amendments)

In the table of Neil's current medicines, replace 'Bendroflumathazide' with 'Bendroflumethiazide'.

Replace the second sentence of the third paragraph with:

She has also noticed that he often searches the house for things he has misplaced and has accused her of hiding or losing items.







Suggested answers

Practice points and talking points

Talking point A (page 21 – amendment)

Replace the final paragraph with:

NICE has published a key therapeutic topic, *Low-dose antipsychotics in people with dementia*, which summarises the evidence base on low-dose antipsychotics in people with dementia to support medicines optimisation.³ The Alzheimer's Society's *Optimising treatment and care for people with behavioural and psychological symptoms of dementia: a best practice guide* is no longer available.

Practice point 2 (page 22 – amendment)

Replace the web address for NICE quality standards for dementia with:

QS1: www.nice.org.uk/guidance/qs1 QS30: www.nice.org.uk/guidance/qs30

Practice point 4 (page 25 – deletion)

Delete the suggested answer to practice point 4.

Case study 1 – Neil

Question 3 (page 29 – deletion)

Delete the discussion points after the suggested answer for question 3.

References (page 41 – amendment)

Replace the web link for reference 1 with: www.nice.org.uk/guidance/ta217

Replace the web link for reference 2 with: www.nice.org.uk/guidance/cg42

Reference 3 is no longer available.

Replace the web link for reference 4 with: www.nice.org.uk/guidance/qs1

Replace the web link for reference 5 with: www.nice.org.uk/guidance/qs30







References for this update

- Alzheimer's Society web page. Facts for the media. www.alzheimers.org.uk/site/scripts/documents_info.php?documentID=535&pageNumber=2rs.org.uk/dementia2012
- 2. Alzheimer's Society web page and infographic. *Dementia 2014 infographic.* www.alzheimers.org.uk/site/scripts/documents_info.php?documentID=2761
- 3. Alzheimer's Society web page. What is young-onset dementia? www.alzheimers.org.uk/site/scripts/documents_info.php?documentID=164

Feedback

We hope you find this learning programme useful for your practice. Please help us to assess its value and effectiveness by visiting your learning record in the *My CPPE* section on our website: www.cppe.ac.uk/mycppe/record

Alternatively, please email us at: feedback@cppe.ac.uk

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