

## **"Dementia diagnosis in primary care: Who is undiagnosed, why are they undiagnosed, and does it matter?"**

### **Seminar Presentation**

Dementia is a complex progressive syndrome of both cognitive and non-cognitive signs and symptoms associated with need for support with day-to-day activities. It is acknowledged that, whatever criteria are used, a substantial proportion of people with dementia remain undiagnosed. This may vary according to diagnostic methods, the services available to a population and clinical and community perceptions of the value of diagnosis. Clinical Commissioning Groups across England are incentivised to achieve a diagnosis rate of 66% or more, despite continuing debates both about how to calculate this statistic at a local level and what value such a diagnosis may have for many people with dementia.

While little research enables us to examine the characteristics of people who are known to services in relation to an independent and objective assessment of dementia, such research is needed to inform policy on dementia diagnosis and active case finding programmes. Epidemiological studies including objective, validated dementia diagnoses provide a unique opportunity to estimate the extent and predictors of health service use among people with dementia irrespective of diagnosis status. George will discuss two such studies, one completed and one ongoing.

This will include presenting estimates of the rate of diagnosis among groups stratified by dementia severity, and the proportion of those with no diagnosis but with a record of help seeking or referral to secondary services. Data linkage between epidemiological studies and primary care records will be used to test theory driven hypotheses which compare the social and clinical characteristics, and past and future service use patterns of diagnosed and undiagnosed people with dementia. This will underpin a discussion of the social and clinical predictors of a person with dementia being diagnosed, and compare outcomes to estimate the effect of diagnosis.

### **Brief Biography**

Dr George Savva joined the School of Health Sciences in 2013, following nine years in ageing and public health research: as statistical lead for The Irish Longitudinal Study on Ageing (based at Trinity College Dublin) and as a statistician to the UK National Down's Syndrome Cytogenetic Register and the Medical Research Council Cognitive Function and Ageing Study. George's research has focused on applying statistics in public health, particularly in the fields of dementia, mental health and healthy ageing. His recent and ongoing work includes studies in the pharmaco-epidemiology of dementia, operationalizing frailty syndrome, links between clinical and pathological aspects of brain ageing, and studies of multimorbidity, disability and quality of life in older people.

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