

Memory Assessment

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We are inclusive

Age related cognitive impairment

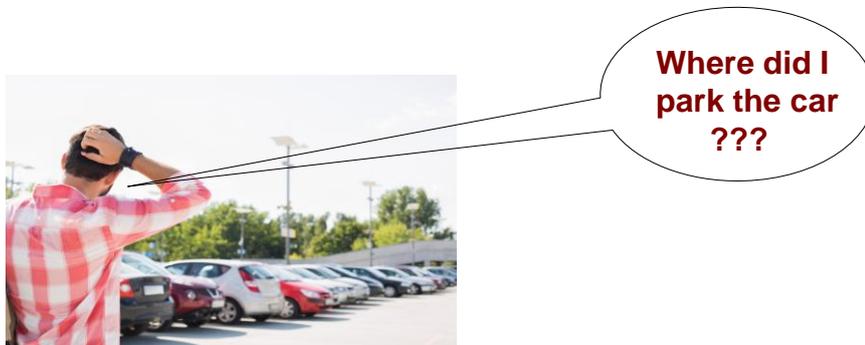


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Age related cognitive impairment



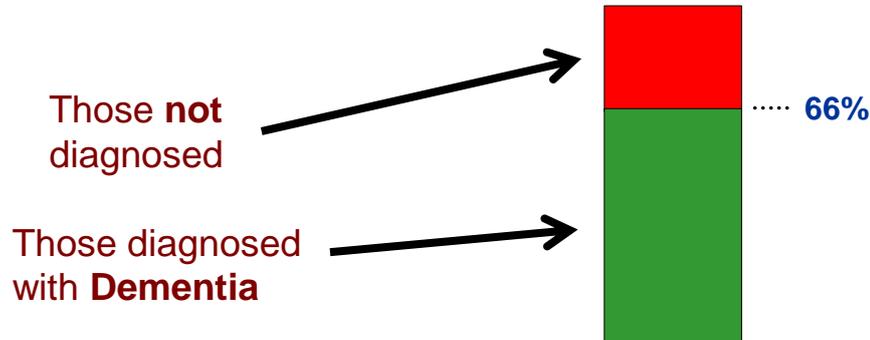
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Our Memory Clinic aim.....

Not to diagnose Age Related Cognitive Impairment
Rather increase the Dementia diagnosis rate



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How we do it...

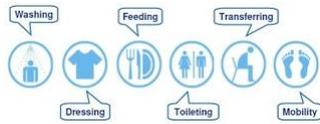
- Encourage **referrals** for persons >65 years
- Listen to **story of forgetfulness**
- **Consider factors** such as:
 - medical problems
 - mental health difficulties
 - family history of dementia
 - education and employment

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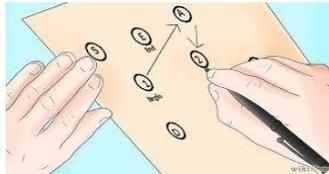
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Assessment



How is the person managing?



What is the person's brain function like?

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After the Assessment

- **Prescribe** - Cognitive Enhancing Drug
- **Refer** - support to those affected
- **Discuss** – continued driving
- **Recommend** – Lasting Power of Attorney
- **Recommend** – spouse/carer/family education
- **Recommend** – healthy living
- **Strongly recommend** – brain stimulation

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Diagnosis



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When in doubt

- Consider more closely:
 - **CT Scan** of head
 - Occupational Therapy **Home Assessment**
 - **Neuropsychological Assessment**

I now hand over to Dr Fuller our Clinical Psychologist

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Neuropsychological Assessment

- Specialised assessment:
 - Looks at different cognitive functions in more depth than screening tools
 - Not offered to everyone routinely

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Referrals

May be useful when:

- There is a discrepancy between reports of memory / daily functioning and screening scores
- Someone has had higher educational or occupational attainment
- Someone experiences mood difficulties
- Language issues – English not as a first language or language difficulties
- Someone experiences dyslexia
- Someone has a learning disability
- There are other complexities – sometimes we see people with unusual presentations, physical complications

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Process

- What does it involve?
- Difference in reports
- Feedback

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Thank you!

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