

ALCOVE

ALzheimer COoperation Valuation in Europe

Sharing knowledge to advance healthcare policies in Europe for people living with dementia and their carers

Background:

ALCOVE was launched in 2011 in an effort to increase cooperation and support across European Member States in order to improve dementia prevention, diagnosis, treatment and care.

It addressed four key areas:

1. How to improve data for better knowledge about dementia prevalence;
2. How to improve access to dementia diagnosis as early as possible;
3. How to improve care for people living with dementia and particularly those with behavioural disorders;
4. How to improve the rights of people with dementia, particularly with respect to advance declarations of will.

About the Association for Dementia Studies:

The Association for Dementia Studies is an active research and education centre. Our multi-professional team are experts in the field of person-centred dementia care and support.

Through research, education, consultancy and scholarship, we make a cutting-edge contribution to building evidence-based practical ways of working with people living with dementia and their families that enables them to live well.



ADS led one of the project work packages around early diagnosis and interventions with two aims in mind:

- Comparing national recommendations for the diagnosis of dementia, in order to access a common definition;
- Assessing different approaches of healthcare systems to develop recommendations to improve early diagnosis.



In particular, the work focused on:

- Comparing mechanisms to provide for the early diagnosis of dementias e.g. Memory Clinics;
- Exploring the role of general practitioners in ensuring early diagnosis;
- Conducting an assessment of recommendations and strategies for systematic screening.

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Data collection:

A questionnaire was developed to capture relevant information from the 27 EU member states.

The countries were grouped into five broad geographical areas:

- Northern – Denmark, Finland, Germany, Netherlands, Norway and Sweden
- Eastern – Estonia, Latvia, Lithuania, Poland, Romania
- Central – Austria, Bulgaria, Czech Republic, Hungary, Slovakia, Slovenia,
- Southern – Cyprus, Greece, Italy, Malta, Portugal, Spain
- Western – Belgium, France, Ireland, Luxembourg & United Kingdom

The diagnosis of dementia should be person-centred. This is a fundamental principle underpinning all further recommendations.

Case finding can be an effective process to identify people to increase diagnosis in circumstances where there are services available that will benefit the person and their family.

The diagnostic process should support positive adjustment, provide an evidence-based assessment and enable care planning to take place following diagnosis.

Diagnosis of complex presentation of dementia is made in as timely a fashion as for simple cases.

A consensus is required on how early cognitive changes are to be responded to in clinical practice.

Workforce development is required across all levels to facilitate timely detection, evidence-based assessment and diagnosis, and to facilitate good adjustment.

Recommendations:

Timely diagnosis needs to be based within a context that:

- Decreases fear and stigma about dementia;
- Respects the centrality of the rights and wishes of the person with suspected dementia;
- Recognises that the diagnosis of dementia is a key intervention;
- Recognises that the needs of the person and their family/significant others are central to assessment, diagnosis and post-diagnostic interventions.

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