

Improving emergency care for people living with dementia

August 9 2022, by Kristin Samuelson



Credit: Pixabay/CC0 Public Domain

A new collection of research papers from Northwestern University and collaborating institutions sets out priority areas to provide better emergency care for people living with dementia in the United States.

Some areas include discharging patients with cognitive impairment to their homes earlier and creating quieter, calmer spaces within the [emergency department](#) to evaluate patients with dementia.

"The emergency department is a difficult environment for persons living with dementia," said Dr. Scott Dresden, associate professor of emergency medicine at Northwestern University Feinberg School of Medicine and a corresponding author on one of the papers in the newly published collection. "It is loud, bright and fast paced, and communication with patients and their families, friends or caregivers is not always as good as it should be."

The new collection of research papers and an accompanying editorial were recently published in the *Journal of the American Medical Directors Association*.

Although dementia significantly impacts people's health and their [health care](#) needs, it often goes unrecognized and unaddressed in the emergency department, Dresden said. As the number of individuals with dementia in the U.S. rapidly increases due to an [aging population](#), [emergency care](#) for people with dementia will be even more important to fully understand.

"Older adults—particularly those living with dementia—are at risk of having poor outcomes such as developing delirium while in the emergency department," Dresden said. "This review is important because it demonstrates that there is little research on how to best provide emergency care for these vulnerable patients."

Dresden and his co-authors said they are encouraged by results of small studies that suggest that emergency department programs that create a quieter, calmer space, perform specific evaluations or even provide [hospital care](#) at home all improve outcomes for people living with

dementia.

The collection of newly published papers is the culmination of work from research collaboration Geriatric Emergency Care Applied Research (GEAR) Network 2.0—Advancing Dementia Care.

The GEAR Network is led by a team from Northwestern, the University of Wisconsin School of Medicine and Public Health, Yale University School of Medicine and the School of Medicine at Washington University in St. Louis.

The researchers identified specific focus areas for future studies including better recognition of dementia-related cognitive impairment by emergency care providers, improved discharge of patients with [cognitive impairment](#) to their homes, improving communication strategies between emergency care providers and patients with dementia and improving the care provided to this population while in the emergency department.

"Unrecognized dementia can lead to substandard care, safety risks and worse outcomes for patients," said Dr. Manish Shah, a professor of emergency medicine at UW School of Medicine and Public Health, and an emergency physician at UW Health, who co-led the research team that developed the recommendations. "The goal of this work is to identify the areas of emergency care for people living with dementia that most critically need to be studied, and then address those problems."

The team is committed to addressing and facilitating progress in each focus area identified in the research, said Dr. Ula Hwang, professor of emergency medicine at Yale University, who co-led the research team.

Using its NIH funding, the GEAR team will issue grants to [health systems](#) and [academic medical centers](#) across the nation to perform

research studies that will lead to better emergency care models for people living with dementia, she said.

"In the end, our goal is to build a system that makes our emergency departments just as safe and effective for our patients living with [dementia](#) as they are for anyone else," Hwang said. "We are at the start line, and this work will help get us to the finish line."

More information: Armin Nowroozpoor et al, Detecting Cognitive Impairment and Dementia in the Emergency Department: A Scoping Review, *Journal of the American Medical Directors Association* (2022). [DOI: 10.1016/j.jamda.2022.03.019](https://doi.org/10.1016/j.jamda.2022.03.019)

Scott M. Dresden et al, Optimal Emergency Department Care Practices for Persons Living With Dementia: A Scoping Review, *Journal of the American Medical Directors Association* (2022). [DOI: 10.1016/j.jamda.2022.05.024](https://doi.org/10.1016/j.jamda.2022.05.024)

Christopher R. Carpenter et al, Emergency Department Communication in Persons Living With Dementia and Care Partners: A Scoping Review, *Journal of the American Medical Directors Association* (2022). [DOI: 10.1016/j.jamda.2022.02.024](https://doi.org/10.1016/j.jamda.2022.02.024)

Cameron J. Gettel et al, Emergency Department Care Transitions for Patients With Cognitive Impairment: A Scoping Review, *Journal of the American Medical Directors Association* (2022). [DOI: 10.1016/j.jamda.2022.01.076](https://doi.org/10.1016/j.jamda.2022.01.076)

Christopher R. Carpenter et al, Adapting Emergency Care for Persons Living With Dementia: Results of the Geriatric Emergency Care Applied Research Network Scoping Review and Consensus Conference, *Journal of the American Medical Directors Association* (2022). [DOI: 10.1016/j.jamda.2022.05.016](https://doi.org/10.1016/j.jamda.2022.05.016)

Provided by Northwestern University

Citation: Improving emergency care for people living with dementia (2022, August 9) retrieved 2 April 2023 from <https://medicalxpress.com/news/2022-08-emergency-people-dementia.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.