

## Dementia: Creating a Knowledge-Based Healthcare Profession

The changing demographics favouring the progressive increase in the elderly population worldwide will invariably lead to an increase in the number of individuals with dementia with the consequence of putting greater demands on healthcare professionals who are at the forefront in providing the necessary formal care to these individuals. Moreover, there are concerns on whether such a workforce possess the necessary skills and knowledge to offer the required advice and care that individuals with dementia need in order to enhance their quality of life. Growing literature suggest that lack of an appropriate level of knowledge on risk factors among the general public and healthcare professionals alike in the various forms of dementia may negatively impact on prevention promotion strategies aimed at reducing current and future dementia incidence rates.

In the majority of countries, primary care physicians act as a first point of contact for individuals suspecting memory loss. However, in a number of cases, they fail to detect dementia in the early stages thus depriving their patients from a timely diagnosis. Lack of training in recognising the early signs, both during their undergraduate medical preparation and throughout their professional careers, is one of the underlying factors. Others include time constraints, unwillingness to diagnose and disclose dementia, therapeutic nihilism and inadequacy of current screening tools. Lack of training in physicians working in primary care was not only found to be conducive to dementia underdiagnoses but may also contribute to its under-management (1, 2). Interestingly, the number of years working in general practice was an important determinant in correctly recognising the early symptoms of dementia and the recommended course of pharmacotherapeutic intervention with the younger physicians reporting better scores (2). This may indicate that the recent increased emphasis on strengthening the dementia curriculum during undergraduate training is creating a new generation of medical professionals who are in a better position to diagnose and manage dementia. It also points towards the necessity of having continuing medical programmes targeting physicians with extended work experience in general practice.

Besides physicians, other healthcare professionals come into direct contact with individuals with dementia and their caregivers. Clinical and community pharmacists can play an active role in dementia management and care by offering their skills to individuals with dementia and their caregivers in better understanding the disease, providing ongoing support and offering

information about treatment, polypharmacy and drug reactions (3). Moreover, pharmacists can act as a key resource in educating the general public about risk and protective factors and encourage early intervention. This is especially important in geographically close-knit communities where pharmacists are regarded as an important point of contact for information-seeking. Notwithstanding this unique position in making a significant contribution towards bettering the level of care and the quality of life of individuals with dementia, a potential barrier exists from their lack of knowledge in the dementia field. In a recent study, community pharmacists were found to have limited knowledge on Alzheimer's disease, particularly in the pharmacological management of the cognitive and behavioural symptoms (4). The low recognition of the inappropriate use of antipsychotics in managing the behavioural and psychological symptoms of dementia is disconcerting on considering the cerebrovascular risks associated with this class of drugs. As with primary care physicians, increased working experience was consistently associated with lower knowledge and that learning from experience cannot be relied as an effective educational tool. Unfamiliarity with risk factors in dementia was also observed in both final year medical and pharmacy students with a possible consequence of not being able to provide the required advice in terms of dementia prevention upon graduation (5). This, together with lack of understanding in other domains including the social aspects of dementia care, calls for an urgent need to develop and implement pre-registration training modules designed to improve the skills and better prepare the next generation of healthcare professionals.

Studies of training effectiveness in enhancing dementia management and care mostly focus on the nursing healthcare profession primarily due to their close and constant contact with individuals with dementia in acute and long-term settings. Nursing students define their experiences of caring for persons with dementia as challenging and lack of guidance by hospital staff stemming from limited knowledge during their clinical placement being a factor impacting on their willingness to engage such patients (6, 7). An investigation looking at knowledge and attitudes of undergraduate nursing students towards people with dementia reported a lack of understanding on risk factors and caregiving issues even though their attitude towards caring was found to be generally positive, the latter being mostly associated with duration of clinical experience and age (8). Among a suggested list of educational and training needs, nursing students mentioned dealing with challenging behaviour

as being the most important. With regards to the nursing healthcare professional workforce, in particular where long-term care settings are concerned, evidence is available on the effectiveness of training programmes in enhancing knowledge and perceived ability to manage challenging behaviour, decrease stress and reduce staff turnover (9). However, there is a lack of clarity on how such programmes should be delivered in order to achieve the desired outcomes. One innovative approach is to explore positive care experiences by nursing healthcare professionals using appreciative inquiry methodology. By discovering what works well it is possible to develop strategies aimed at improving the care offered to patients with dementia in hospitals (10, 11). Most often than not, healthcare staff show a high degree of motivation in bringing about change but lack the skills and experience to deliver high-quality dementia care (12). Furthermore, enabling staff to consider different psychosocial needs and how to provide for those in a ward environment might not only lead to improved wellbeing for patients but also improve job satisfaction for those providing the care.

In conclusion, the provision of an adequately trained healthcare workforce to face the ever growing number of individuals with dementia remains a challenge. Possible interventions may include:

- Strengthening the undergraduate and postgraduate curriculum in the various healthcare professions with special emphasis on dementia early diagnosis, risk and preventive factors
- Supporting continuing education programmes for healthcare professionals in order to improve their skills in dementia care and management
- Encouraging experience sharing and inter-professional development and collaboration where different healthcare professionals work together to achieve common goals
- Providing clinical placements where students are mentored by highly-trained dementia professionals

- Supporting research programmes that seek to identify innovative ways by which healthcare professional training can be delivered and validated.

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