

Under-detection of Dementia in Primary Care: Secondary Data Analysis Study

Natalia Loskutova MD PhD¹, Emily Bullard MPH¹, Craig Smail MS MA¹, and William Venable MBA¹

¹American Academy of Family Physicians National Research Network

AAFP national research
network

INTRODUCTION

- Despite the national efforts, policy and financial incentives, dementia recognition and management remain particularly challenging in primary care where the majority of dementia patients go undiagnosed until later stages.
- We aimed to characterize the detection rates of dementia and related health services utilization in primary care, including the Affordable Care Act Annual Wellness Visit (AWV).

METHODS

- We performed trend (interrupted time series) data analysis of the DARTNet Institute Practice Performance Registry datasets (N=3).
- The datasets includes de-identified electronic health records and administrative data for individuals 18 and older from health care organizations including ambulatory primary care practices.
- We defined data elements related to dementia services such as data related to “diagnostic work-up”
- Analyses are ongoing for health services utilizations on Dataset #3

Acknowledgements

Data for this analysis provided by the DARTNet Institute - www.DARTNet.info

Funding Statement

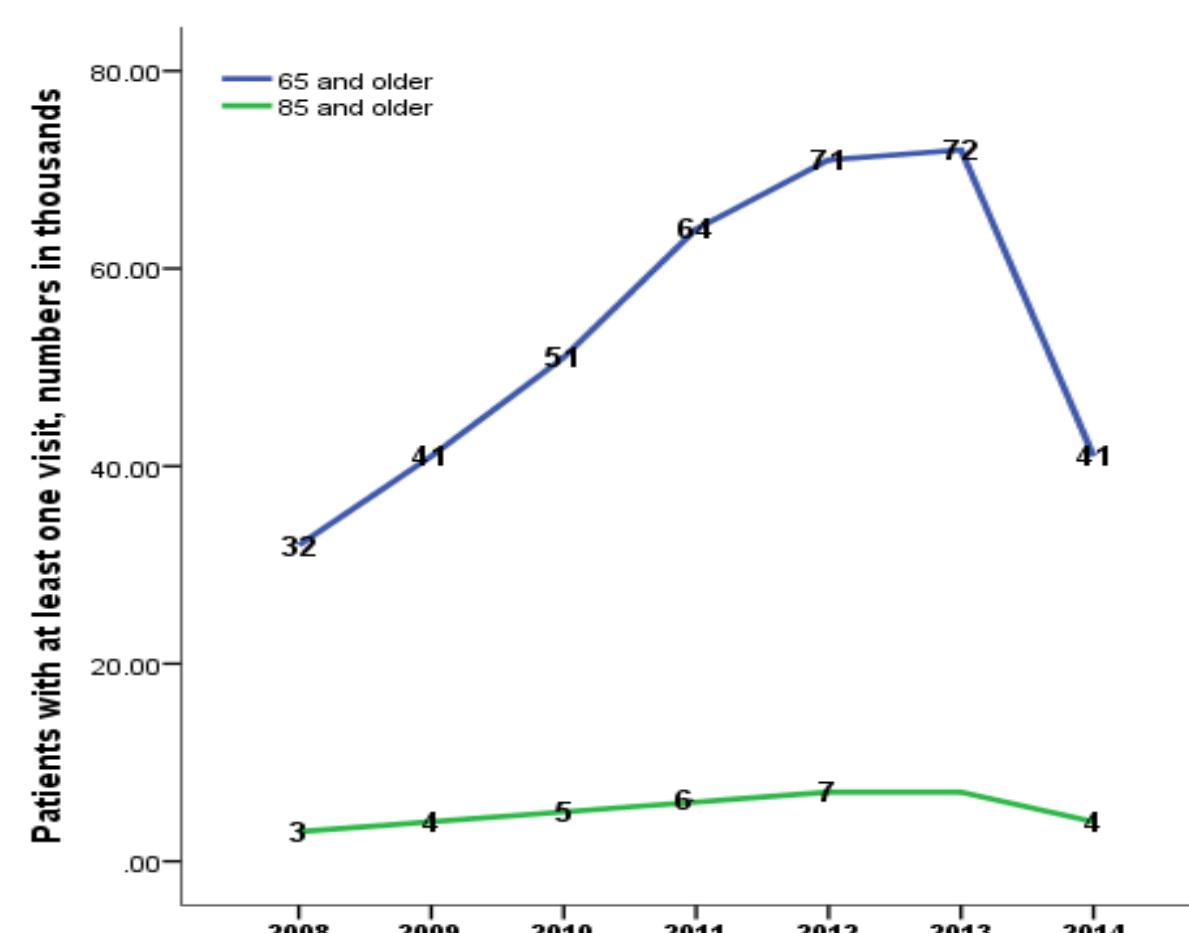
American Academy of Family Physicians in collaboration with Eli Lilly and Company supported this secondary data analysis.

RESULTS

Table 1. Overview of samples and prevalence (Datasets 1 and 2)*

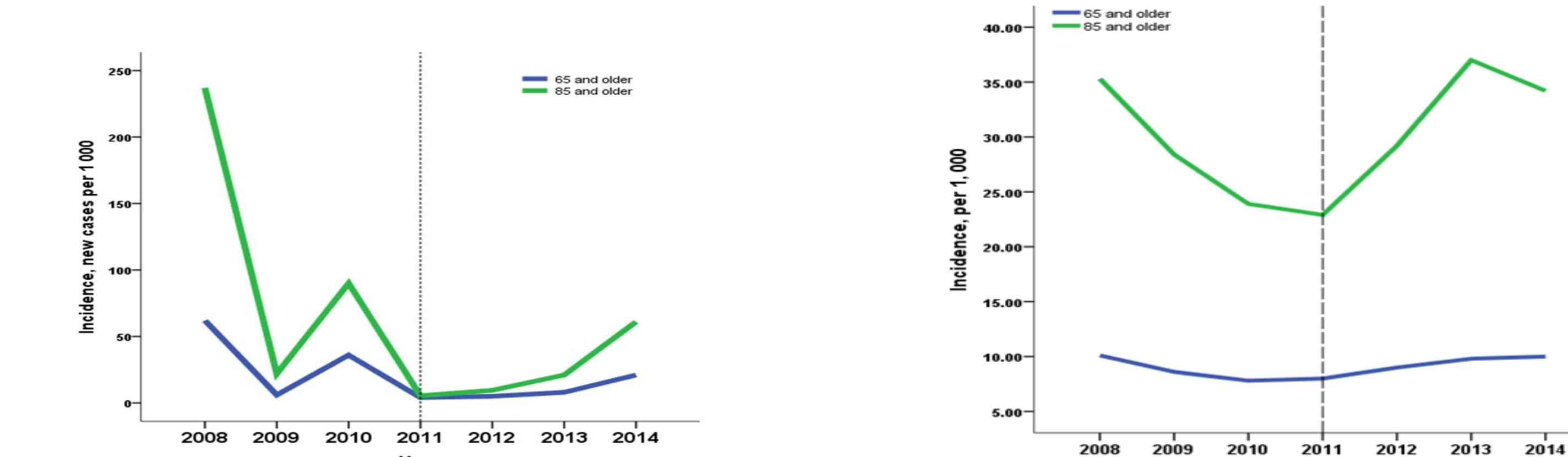
	Data Set 1	Data Set 2
All Clinics	1230	243
All People	3138958	534525
All People > 65	831961 (26.50%)	130855 (24.50%)
All dementias among 65 and older	10578 (1.30%)	4044 (3.10%)
MCI among 65 and older (381.83)	1037 (0.10%)	305 (0.20%)
All People > 85	212971 (6.80%)	18315 (3.40%)
All dementias among 85 and older	4955 (2.30%)	1961 (10.70%)

Figure A. Primary Care Office visits (Data Set 2)



- Includes Jan-Aug 2014
- Gradual increase in the number of patients 65 and older¹ visiting primary care
- Similar trends in all settings (Data Set 1, not shown)

Figures B. and C. (Dementia Incidence trends: Data Sets 1 (all settings) and 2 (Primary Care) respectively



Average dementia detection rates in primary care:
2008-2010 - for all 65 and older is 8.8 cases per 1,000
2011-2014 - for all 65 and older is 8.9 cases per 1,000

Dataset 3* Overview:

All people: 1,778,389

All People >65: 774,027

All dementias among 65 and older: 17,991

Dx detection rate: 2.3% [0.14-50.4%]

CHALLENGES

Data elements related to dementia diagnostic work-up are not well defined: laboratory work; brain imaging (SPECT, MRI, Brain CT, PET, FDG-PET (Fluorodeoxyglucose) and Amyvid PET); Psychological Testing and Neuropsychological batteries.

DISCUSSION

Analysis to data indicates a minimal impact of the ACA policies on improved dementia detection. Our results are consistent with current international literature on suboptimal dementia detection and management in general practice. The data analyses are underway to fully describe the utilization of other health services such as AWV, diagnostic brain scans, laboratory work and other services related to dementia assessment, diagnosis and care.

Several methodological challenges have been identified that need to be resolved for improved comparability of secondary data analysis studies in dementia.

CONCLUSION

- Current national policies may need to be supplemented by effective practice-based interventions to improve dementia detection, referral and management.

*Dataset 1 and 2 includes all people 18+; Dataset 3 includes all people 40+