

Women with dementia receive less medical attention

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Women with dementia have fewer visits to the GP, receive less health monitoring and take more potentially harmful medication than men with dementia, new UCL (University College London) research reveals.

The study, published in *Age and Ageing*, also found that only half of all [dementia patients](#) had a documented annual review even though GP surgeries are offered [financial incentives](#) to carry these out. Women were found to be at particular risk of staying on antipsychotic or sedative medication for longer. This might be because they have fewer appointments where their treatment can be reviewed.

"As [women](#) tend to live longer than men, they are more likely to live alone without a family carer to help them access healthcare," says Dr Claudia Cooper (UCL Psychiatry) who led the research. "Perhaps because of this, they are more at risk of missing out on medical help that might help them stay well for longer. We found that women were more likely to be on psychotropic drugs - sedatives or anti-psychotics -which can be harmful in the long term and may not be appropriate. Women tended to stay on such drugs for longer, perhaps because they have fewer check-ups to see if the drugs were still needed.

"Women with dementia who live on their own may need additional support accessing healthcare services. We should ensure GPs have the resources to proactively engage with these patients and review their condition regularly to make sure their treatment plan, including any drugs, are appropriate. Improving access to healthcare and reducing psychotropic drug use in people with dementia, especially women, could help them to live well with dementia for longer."

The researchers analysed the records of 68,000 dementia patients and 259,000 people without dementia to compare their access to healthcare services, using The Health Improvement Network (THIN) database. Overall, people with dementia received less medical care than those without even though they are more vulnerable to physical and mental illnesses.

"Dementia can cause a wide range of physical complications, including

difficulties swallowing and mobility problems," says Dr Cooper. "People with dementia are particularly susceptible to malnutrition, as they may have difficulties eating, preparing food or remembering to eat. Previous research has shown that up to 45% of dementia patients experience clinically significant weight loss, which can lead to further physical problems and frailty. However, despite this high risk, less than half of dementia patients are currently receiving an annual weight check-up. The good news is that things seem to be improving: only 24% of patients had their weight monitored in 2002 compared with 43% in 2013."

Improvements may be linked to the government's National Dementia Strategy which launched in 2009. Around the time this was launched, GP surgeries were offered additional financial incentives through the NHS Quality and Outcomes Framework to review dementia patients annually. However, the latest study suggests that there is still more work to be done to ensure that people with [dementia](#), particularly women, are able to access the services they need.

More information: Claudia Cooper et al, Inequalities in receipt of mental and physical healthcare in people with dementia in the UK, *Age and Ageing* (2016). [DOI: 10.1093/ageing/afw208](https://doi.org/10.1093/ageing/afw208)

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