

Dementia Assessment and Management in Primary Care Settings: A Survey of Current Provider Practices in the United States

Background

- In the United States, patients with neurocognitive concerns often first present to primary care providers (PCPs).¹
- Accurate classification of neurocognitive disorders (NCDs) (eg, mild cognitive impairment or dementia) is a challenge in the primary care setting, but it can help determine prognosis and appropriate disease management.^{1,2}
- **Objective:** To better understand physicians' approaches to evaluation and management of patients with NCDs, the investigators conducted a survey of PCPs and neurologists across the United States.

Methods

- The survey was designed by University of California San Francisco specialists in dementia diagnosis and care.
- The survey collected input about provider perspectives and behaviors related to the assessment, diagnosis, and management of patients with NCDs.
- The survey was provided to the first 100 PCPs and 50 neurologists who responded to an invitation to participate and met the eligibility criteria: NCD evaluation of >10 patients >55 years old, per month.

Results

- PCPs and neurologists indicated similar confidence levels for managing general medical care of patients with NCDs: 46% to 64% had high confidence. They also indicated similar levels of ordering laboratory testing for reversible causes of dementia: 84% to 86%.
- Over half of PCPs indicated that they performed screening or made referrals for cognitive testing for over half of their patients with cognitive concerns.
- A lower proportion of PCPs than neurologists indicated high confidence for the following (PCPs vs neurologists):
 - Interpreting results of cognitive tests: 20% vs 68%
 - Interpreting brain image scans: 14% vs 70%
 - Recognizing NCDs in patients: 21% vs 72%
 - Diagnosing a specific NCD: 13% vs 44%
- Among all providers (PCPs and neurologists), 1 in 4 indicated that a lack of familiarity with published diagnostic criteria was a strong barrier to effective management of their patients with NCDs.

Conclusions

- The findings from this survey suggest that PCPs in the United States lack confidence in their ability to interpret cognitive test results and brain scans.
- The findings also show that a substantial proportion of providers are not familiar with diagnostic criteria.
- The insights gained from the survey may help improve the tools used by providers for assessment, diagnosis, and management of NCDs.

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Authors

Alissa Bernstein,^{1,2} Kirsten M Rogers,³ Katherine L Possin,³ Natasha Rabinowitz Steele,³ Christine S Ritchie,^{4,5} Joel H Kramer,³ Michael Geschwind,³ Joseph J Higgins,⁵ Jay Wohlgemuth,⁵ Rick Pesano,⁵ Bruce L Miller,³ Katherine P Rankin³

Affiliations

¹ Department of Neurology, University of California San Francisco, Global Brain Health Institute, San Francisco, CA

² Institute for Health Policy Studies, University of California San Francisco, San Francisco, CA

³ Department of Neurology, University of California San Francisco, San Francisco, CA

⁴ Department of Internal Medicine, University of California San Francisco, Division of Geriatrics, San Francisco, CA

⁵ Quest Diagnostics, Secaucus, NJ

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Webpage

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