

Dementia and COVID 19ⁱ

This short paper attempts to summarise some of the key issues around people with dementia and their carers in relation to COVID 19 (Coronavirus). While there is ample general advice about COVID-19 and its management (www.england.nhs.uk/coronavirus/), the following ten key points have been devised which reflect clinical advice and specific information about dementia. It may be helpful to clinicians and planners.

There are an estimated 675,000 people with dementia in England, the majority of whom are over 65 and have comorbid health conditions, making them particularly vulnerable to develop severe symptoms and develop complications. They are supported by a similar number of carers, most of whom are older people themselves. A quarter of people in acute hospitals and three quarters of residents of care homes have dementia.

Key factors -

- People with dementia are much more prone to develop **delirium** (a confusional state) if they develop an infection – being aware that a person may have dementia will alert staff to this increased risk.
- Going into **hospital** is frightening enough and particularly so for someone with dementia – staff involved in screening and treatment should be aware if a person has dementia and be prepared to take extra time while assessing and treating them. Avoiding unnecessary hospital admissions is important.
- Some people with dementia may have difficulty understanding **complex instructions** about self-isolation or handwashing – keeping information accessible and repeatable is key.
- People with dementia may lack awareness of and be less able to report symptoms because of **communication difficulties** – people should be alert to the presence of signs as well as symptoms of the virus (“look beyond words”).
- People with dementia may have **swallowing difficulties** which could put them at increased risk of developing chest infections and dehydration – a swallowing assessment may be helpful.

Specific support -

- Volunteer community groups, with appropriate expertise, could be positively encouraged to **provide support** for carers and people with dementia, particularly those living alone.
- People with dementia in their own homes may already feel isolated and if they need to further self-isolate, additional assistance and support may be needed to mitigate the practical and **emotional impact of separation** – care plans reflecting this are important, including updated **Lasting Power of Attorney** documentation and advance directives.
- **Support in the community** is key – Dementia Connect. (<https://www.alzheimers.org.uk/dementiaconnect>) and Dementia UK (<https://www.dementiauk.org/>) are examples of where bespoke advice is available.
- There will be an **additional burden on carers**, many of whom are in high risk group themselves and may become ill and unable to care - if services can help plan so that friends/relatives/volunteers keep daily phone or other contact this should reduce the need for emergency calls on the NHS and social care.
- Relatives and friends not being allowed to see a person in a care home could have a detrimental effect on residents with dementia – use of **technology** may help improve communication between families both at home and in care homes.

ⁱ This guidance is equally applicable to anyone with cognitive impairment resulting from conditions which affect the brain.