



**Working Better Together**

**Conference Booklet**

# Programme

<b>Welcome</b> – Dr Mani Krishnan, Chair, Faculty of Old Age Psychiatry, RCPsych	
<b>Session chairs</b> – Dr Emma Vardy and Dr Joanne Rodda	
<b>Dementia updates</b>	
09:30	<b>Antipsychotics in dementia: An Update</b> Professor Clive Ballard, Pro-Vice Chancellor and Executive Dean, Professor of Age Related Diseases at the University of Exeter College of Medicine and Health
09:40	<b>Vascular dementia</b> Professor Peter Passmore, Professor, School of Medicine, Dentistry and Biomedical Sciences, Centre for Public Health, Queens University, Belfast
09:50	<b>Rational use of neuroimaging in dementia</b> Professor John O'Brien, Professor of Old Age Psychiatry, University of Cambridge and Honorary Consultant Old Age Psychiatrist, Cambridgeshire and Peterborough NHS Trust and Cambridge University Hospitals NHS Trust
10:00	<b>Q and A panel</b>
<b>Frailty and delirium</b>	
10:20	<b>Using frailty indices</b> Dr Eileen Burns, Consultant in Care of the Elderly, Leeds Teaching Hospitals NHS Trust
10:30	<b>What has COVID taught us about assessing delirium?</b> Dr Thomas Jackson, Clinician Scientist in Geriatric Medicine, University of Birmingham
10:40	<b>Avoiding hospital admissions from care homes</b> Dr Shelagh O'Riordan, Community Geriatrician and KCHFT Frailty Director in East Kent
10:50	<b>Q and A panel</b>
11:00	<b>Coffee Break</b>
<b>Depression and loneliness</b>	
11:30	<b>Impact of loneliness on physical and mental health during COVID</b> Professor Tahir Masud, Consultant Physician, Nottingham University Hospitals NHS Trust (NUH), and President of the British Geriatrics Society
11:40	<b>Preventing and managing hyponatraemia due to antidepressants</b> Dr Dan Harwood, South London and Maudsley NHS Trust

11:50	<b>Depression and anxiety in frail older people</b> Professor Kate Walters, Professor of Primary Care & Epidemiology, University College London
12:00	<b>Q and A panel</b>
<b>Parkinson's disease and DLB</b>	
12:20	<b>Neuropsychiatric symptoms in DLB and PDD</b> Professor John-Paul Taylor, Professor of Translational Dementia Research, Institute of Neuroscience, and Honorary Consultant in Old Age Psychiatry, Northumberland, Tyne and Wear NHS Trust
12:30	<b>Setting up a clozapine service for Parkinson's psychosis</b> Dr Christine Taylor, Consultant in Old Age Psychiatry, Derbyshire Healthcare NHS Foundation Trust
12:40	<b>Pit falls and management of cognitive impairment in Parkinson's disease</b> Dr Alison Yarnall, Clinical Research Fellow & Honorary Consultant Geriatrician, Clinical Ageing Research Unit, University of Newcastle
12:50	<b>Q and A panel</b>
1:15	<b>Close of conference</b>

## Speaker abstracts and biographies

### Antipsychotics in dementia: An Update

Professor Clive Ballard

**Clive** has led or co-authored well over 600 research papers. He received the prestigious Weston Brain Institute International Outstanding Achievement Award 2019. His main research specialisms are drug discovery, dementia prevention, improving care for people with dementia in residential homes. He is also an expert in Lewy Body Dementia and Parkinson's Disease Dementia, and is an advocate of better prescribing and treatment pathways to improve outcomes for individuals. Before joining Exeter, Clive held directorship roles at King's College London Institute of Psychiatry and at the Alzheimer's Society. He was pivotal in the successful campaign to overturn a NICE decision and make anti-dementia drugs available for people with dementia. Clive is part of a growing team of outstanding researchers at the College of Medicine and Health, which is recruiting high-calibre academics and significantly expanding educational programmes and student numbers. In the last year, the College has reached the Leiden ranking's world top 20 for the quality of its Health and Biomedical Science research, attracted a £10

million donation from the Dennis and Mireille Gillings Foundation, launched a new Academy of Nursing and received permission to expand Medicine student numbers.

## **Vascular Dementia**

Professor Peter Passmore

Vascular dementia (VaD) is the second most common type of dementia. VaD refers to all forms of dementia associated with cerebrovascular diseases, regardless of underlying mechanism. The vascular pathologies include the following: Infarction: can be due to embolisation, thrombosis, lacunar infarction, hypoxia, hypoglycaemia, or ischaemia. Micro-infarcts identified on MRI are increasingly recognised. Mixed Alzheimers disease (AD) and cerebrovascular disease is very common. Key requirements for diagnosis are demonstration of a cognitive deficit by neuropsychological testing and presence of cerebrovascular disease. The diagnosis is further classified as probable or possible depending on whether there is conclusive evidence of a causal relationship between the vascular disease and the cognitive syndrome. Established risk factors include older age, education, physical activity, obesity, midlife hypertension, diabetes, inflammation, frailty, concomitant clinical vascular disease and depression. Cognitive assessment should include attention and executive function as well as other cognitive domains. MRI is the preferred neuroimaging modality. Identification of risk factors is important and should lead to effective management of those but that has only been shown to reduce vascular events and not dementia. In particular control of blood pressure after stroke to prevent further stroke will reduce cognitive impairment and dementia. Symptomatic treatments with acetylcholinesterase inhibitors and memantine are only indicated where there is AD with cerebrovascular disease. It is very important that people with VaD are offered the same post diagnostic support and services as those with AD.

**Professor Peter Passmore** is Professor of Ageing and Geriatric Medicine at Queens University Belfast. Longstanding interest in cardiovascular disease and its relevance in dementia syndromes. Author in BAP Guidelines in Dementia where my subject was vascular dementia. I also edit the BMJ vascular dementia Update. Co-author on several Cochrane reviews related to vascular factors in dementia.

## **Rational use of neuroimaging in dementia**

Professor John O'Brien

The role of neuroimaging has radically changed over the last decade, from that of simply ruling out intra-cerebral pathologies that may cause cognitive impairment, to providing important information to assist with the differential diagnosis of dementia subtypes, especially at the early stages when subjects increasingly present to services. Imaging changes are also increasingly becoming incorporated into new diagnostic criteria for Alzheimer's disease, Lewy body dementia, fronto-temporal dementia and vascular dementia. NICE Guidelines, published in June 2018, highlight the importance of imaging, advocating the use of structural imaging to exclude other causes of dementia and the use of specific imaging biomarkers when diagnosis remains in doubt, specifically MRI for suspected vascular dementia; glucose

(FDG) PET for suspected Alzheimer's disease or fronto-temporal dementia; and dopaminergic SPECT or MIBG cardiac scintigraphy for suspected Lewy body dementia. From a research perspective, we are learning much more about imaging changes that appear at the very early stages of the disease process, in some cases many years before. While not yet of clinical use, such changes may help stratify people for clinical trials, and be useful in very early stage studies, including those of prevention.

**Professor John T O'Brien** is Professor of Old Age Psychiatry in the Department of Psychiatry at the University of Cambridge and Honorary Consultant Old Age Psychiatrist within Cambridgeshire and Peterborough NHS Trust and Cambridge University Hospitals NHS Trust. He is also a National Institute for Health Research Emeritus Senior Investigator, a Fellow of the UK Academy of Medical Sciences and the NIHR National Specialty Lead for Dementia. His research interests include: neuroimaging, dementia with Lewy bodies; the role of vascular factors in dementia and depression and clinical trials. He has been a member of the National Institute for Health and Clinical Excellence (NICE), British Association of Psychopharmacology, European Federation of Neurological Sciences (EFNS) and European Stroke Association Dementia Guideline groups. He is a recipient of the Royal College of Psychiatrists Lifetime Achievement award in Older People's Mental Health.

### **Prevention and management of hyponatraemia in older adults taking antidepressants**

Dr Daniel Harwood

- Causes of hyponatraemia in older people
- Risk of hyponatraemia with antidepressants
- How to prevent and manage hyponatraemia in people taking antidepressants

**Dr Harwood** is a Consultant Old Age Psychiatrist, Croydon Memory Service, South London and Maudsley NHS Foundation Trust. Previously Clinical Director for London Clinical Network (Dementia). I have completed research on suicide in older adults and more recently on cognitive side effects of physical health medication in older people.

### **Depression and anxiety in frail older people**

Professor Kate Walters

Frailer older adults have a four-fold increase in the risk of clinically significant anxiety or depression. This is in turn associated with increased risk of cognitive and functional decline and use of healthcare services. Despite this, the evidence on the best treatment approaches for frail older people with depression or anxiety is unclear. This presentation will consider the evidence for why older people with depression and anxiety symptoms are often reluctant to seek help and how this can be overcome. It will discuss what we know about the effectiveness of well-established treatments for depression and anxiety in frailer population groups, and what some alternative options might be.

**Prof. Kate Walters** is Director of the Centre for Ageing Population Studies (CAPS), Research Department of Primary Care & Population Health, UCL and has worked as a GP in North London for more than 20 years. She leads a multi-disciplinary research group whose work focusses on health and

well-being for older people in primary care and community settings. This works spans both epidemiology of age-related diseases, and the development and testing of complex interventions to improve care and promote well-being for older people in primary care and the community. Topics include frailty, health promotion, neurodegenerative disease and mental well-being in later life.

### **Neuropsychiatric symptoms in Lewy body dementia**

Professor John-Paul Taylor

Neuropsychiatric symptoms are common in Lewy body dementia and include complex visual hallucinations and delusions. Other common symptoms are apathy, depression and anxiety. In this brief presentation I will discuss the aetiology of some of these major neuropsychiatric symptoms and how best to assess them and manage them.

**John-Paul Taylor** is Professor of Translational Dementia Research at Newcastle University. His primary interests are in Lewy body dementia and he runs a specialist Lewy body disease clinic at Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust.

### **Setting up a clozapine service for Parkinson's psychosis**

Dr Christine Taylor

I will discuss Parkinson's psychosis, including an approach to assessment and management. I will present the evidence base for available treatments. I will discuss my own experiences of setting up a clozapine service within the Parkinson's clinic.

I am an Old Age Psychiatrist working in the community. I have had a special interest in the mental health aspects of Parkinson's disease for many years after completing special interest time with the Parkinson's team as part of my specialist registrar training and I offer ongoing input to the local Parkinson's service where we have recently set up a clozapine clinic for Parkinson's psychosis.

### **Pit falls and management of cognitive impairment in Parkinson's disease**

Dr Alison Yarnall

**Dr Alison Yarnall** completed her PhD in 2013 at Newcastle University looking at biomarkers of cognitive impairment in Parkinson's disease. She is now an NIHR BRC Intermediate Clinical Fellow at the Translational and Clinical Research Institute, Newcastle University; Deputy Director of the Clinical Ageing Research Unit; and Honorary Consultant in Older People's Medicine at Newcastle upon Tyne Hospitals (NuTH) NHS Foundation Trust. She has a particular interest in cognitive decline, gait and falls in people with Parkinson's and other neurodegenerative diseases and has published more than 60 articles in this topic area. She runs a specialist clinic for older adults with Parkinson's and complex health needs in NuTH, in addition to a general medical memory clinic.