



# COMMUNICATION

The prescription for better clinical outcomes

## Review Finds Poor Public Understanding of Dementia

Findings from a new review indicate that the general public possesses only a fair to moderate knowledge and understanding of Alzheimer's disease and dementia. Evaluating the current literature over a 20-year period, researchers also found that the most common misconception about dementia was that it is a normal part of aging. Moreover, there was a lack of clarity about at which point normal

age-related memory loss problems become severe enough to indicate dementia. The authors also noted that knowledge of dementia was found to be particularly poor among racial and ethnic minority groups where several myths about causes of dementia were found. They concluded that there is a strong need for more educational and advocacy programs on dementia to be developed particularly in low-income to middle-income countries.

—*Alzheimer Dis Assoc Disord.* 2015 Jul-Sep; 29(3): 255-75.

## Virtual Reality Experience Puts Physicians in the Shoes of Patients with Epilepsy

At the American Academy of Neurology (AAN) Annual Meeting in Vancouver last month, UCB featured a virtual reality experience demonstrating a first-person experience of epilepsy. Entitled "In My Shoes: Dancing with Myself," the 360 degree immersive experience tells the story of Jane Gauntlett, an adult living with epilepsy. Ms. Gauntlett, founder of Sublime & Ridiculous, a company focused on bringing together performance and technology to build empathy, was on hand to guide individuals through the experience.

According to Chris Benecchi, Global Marketing Director for UCB, the project reflect the company's mission to assist patients and improve physicians' understanding of what it's like to live with epilepsy. The virtual experience, he explained, "has the ability of this to really touch home and change the way physicians think and the way they care for their patients." The project is a reflection of what Mr. Benecchi said is UCB's "commitment to making a meaningful difference in helping patients on their journey."



### Advance Care Planning in Motor Neuron Disease is Helpful If Timed Appropriately

While advance care planning can assist patients to achieve a sense of control and facilitates important family discussion, the timing and style of its introduction may need to be approached sensitively. In a qualitative cross-sectional study, investigators analyzed interviews with 18 former caregivers of deceased patients with motor neuron disease: 10 patients had created a disease-specific advanced directive, "Letter of Future Care," and eight had not. The authors noted four global themes in their analysis: Readiness for death, Empowerment, Connections, and Clarifying decisions and choices. "Many felt the letter of future care was or would be beneficial, engendering autonomy and respect for patients, easing difficult decision-making and enhancing communication within families," the authors wrote. "However, individuals' 'readiness' to accept encroaching death would influence uptake." Thus, they observed that appropriate timing to begin advance care planning may depend on case-based clinical and personal characteristics.

—*Palliat Med.* 2016 Feb 4.

### Cognitive-Behavioral Screening Reveals Prevalent Impairment in ALS Patients within 18 Months

A new investigation has revealed high levels of cognitive and behavioral impairment in patients with ALS within 18 months of symptom onset. For the study, 274 patients with ALS completed two validated cognitive screening tests and two validated behavioral interviews with accompanying caregivers. The researchers then examined the associations between cognitive and behavioral performance, demographic and clinical data, and C9orf72 mutation data. They found that 6.5 percent of the sample scored below the cutoff score for frontotemporal lobar dementia, 54.2 percent scored in a range consistent with ALS with mild cognitive impairment, and 39.2 percent scored in the normal range. The same subscale identified 16.5 percent of the sample scoring below the dementia cutoff score, with an additional 14.1 percent scoring in the ALS behavioral impairment range, and 69.4 percent scoring in the normal range. "This investigation illustrates the successful use and scientific value of adding a cognitive-behavioral screening tool in studies of motor neuron diseases, to provide neurologists with an efficient method to measure these common deficits and to understand how they relate to key clinical variables, when extensive neuropsychological examinations are unavailable," the authors wrote.

—*Neurology.* 2016 Mar 1; 86(9): 813-20.

## Pill Organizer Aims to Improve Adherence

For patients struggling to keep up with their therapeutic regimens, the MedCenter Organizer, a product that helps users organize, alert, and carry a full month's worth of medication to reduce non-compliance, now offers larger XL Pill Boxes with individual dose compartments. The larger XL Pill Boxes measure roughly 1 3/8" wide x 1" long x 3/4" deep on the inside. Each of the new XL Pill Boxes contains four of these dose compartments, according to the company. The system also features easy to open lids and red and green color coding to show users when daily doses are complete. For more information, visit [MedCenterSystems.com](http://MedCenterSystems.com).



### Conversational Assessment May Help Differentiate Dementia from Functional Memory Disorders

Conversational profiling may support the differential diagnosis of functional and neurodegenerative memory disorders.

Seeking to improve the screening and diagnostic process, researchers analyzed communication between clinicians and patients during initial specialist clinic visits. The study was based on video and audio recordings of 25 initial consultations between neurologists and patients referred to a UK memory clinic. Conversation analysis was used to explore recurrent communicative practices associated with each diagnostic group.

Investigators found that conversational profiles can help differentiate between patients with dementia and functional memory complaints, based on whether the patient is able to answer questions about personal information; whether they can display working memory in interaction; whether they are able to respond to compound questions; the time taken to respond to questions; and the level of detail they offer when providing an account of their memory failure experiences. ■

—*Aging Ment Health.* 2016 May; 20(5): 500-9.