

10th International Conference on

VASCULAR DEMENTIA

February 22-23, 2018 | Paris, France

The 2018 Stockport vascular neurocognitive disorder investigation, treatment and annual review guidelines (including the spectrum from mild vascular cognitive impairment to vascular dementia) supporting primary and secondary care physicians

Sally Gilmour¹, Peter Ngoma² and Rachel Price¹¹The Meadows Hospital-Stockport Pennine Care NHS Trust, UK²Stepping Hill Hospital-Stockport NHS Foundation Trust, UK

Vascular neurocognitive disorder patients may already be receiving adequate treatment for other cardiovascular disease, but we should reassess ensuring optimum secondary cardiovascular risk prevention with new location target end organ damage. A minority are not receiving secondary cardiovascular prevention as vascular neurocognitive disorder is their first diagnosis of cardiovascular system disease. Many of these newly diagnosed patients may not subsequently receive secondary cardiovascular risk prevention perhaps especially with subcortical gradual reduction in activities of daily living and change to personality. There is no research evidence to treat cerebrovascular disease which is proportional to that expected for the patient age on MRI or CT brain. The MRI Fazekas score should reflect the clinical indication of brain target organ vascular disease more so than expected age related change. Gradient echo assesses micro hemorrhage which may mean anti-platelets or anticoagulants are contra-indicated, prevalent in cerebral amyloid angiopathy and mixed vascular and Alzheimer's pathology. Patient treatment advice leaflets assist informed shared decisions; although there is no consensus from research evidence that treating blood pressure, cholesterol and using anti-platelets or anticoagulation will reduce cognitive decline in vascular neurocognitive disorder, there is evidence for secondary cardiovascular prevention once there is diagnosis of target organ damage to the brain with vascular pathological brain target damage. Risk consideration assesses patients and carers, signpost to healthy lifestyle advocated by Lancet 2017 Dementia Commission. Vascular neurocognitive disorder support healthy lifestyle published leaflets examples include '4ME'.

Biography

Sally Gilmour has worked in primary care for 18 years and in 2011 worked in Old Age Psychiatry with Dr. Katherine Hayden developing an interest in vascular dementia. She has produced a dementia podcast and a dementia review template; integrated into the Stockport primary care computer system and has lectured to the National Driving Assessors course regarding dementia. She works solely in Stockport Old Age Psychiatry since 2015.

s.gilmour@nhs.net

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