Would you like your own, tailored evidence updates? Click here to sign up to KnowledgeShare to receive bulletins every two weeks on the topics of your choice.
Most recent guidance published:

**Dementia: assessment, management and support for people living with dementia and their carers** NG97 June 2018

This guideline covers diagnosing and managing dementia (including Alzheimer’s disease). It aims to improve care by making recommendations on training staff and helping carers to support people living with dementia.

---

Other Guidance/Reports

Alzheimer's Society

**Dementia-friendly rural communities guide: A practical guide for rural communities to support people affected by dementia** May 2018

To help anyone who lives in a rural community get started on becoming dementia-friendly. This guide contains information about how dementia affects people’s experience of living and working in a rural community.

British Association for Psychopharmacology

**Joint BAP NAPICU evidence-based consensus guidelines for the clinical management of acute disturbance: De-escalation and rapid tranquillisation** June 2018

…There is a focus on three key interventions: de-escalation, pharmacological interventions pre-rapid tranquillisation and rapid tranquillisation (intramuscular and intravenous)…
Mirror therapy for improving motor function after stroke  
July 2018

Influenza vaccine for chronic obstructive pulmonary disease (COPD)  
June 2018

Antipsychotics for treatment of delirium in hospitalised non-ICU patients  
June 2018

---

Systematic reviews from other sources

Effectiveness and safety of dual influenza and pneumococcal vaccination versus separate administration or no vaccination in older adults: A meta-analysis  
Expert Review of Vaccines, June 2018  
Link to abstract

Continuity of care with doctors—a matter of life and death? A systematic review of continuity of care and mortality  
BMJ Open, June 2018  
Link to full text

Special issue frailty - frailty and atrial fibrillation: A systematic review  
European Journal of Internal Medicine, June 2018  
Link to abstract

A Systematic Review and Meta-Analysis of the Risk of Dementia Associated with Benzodiazepine Use, After Controlling for Protopathic Bias  
Cns Drugs, June 2018  
Link to abstract

Surgical versus non-surgical management for type II odontoid fractures in the elderly population: a systematic review.  
The Spine Journal, June 2018  
Link to abstract

---

This month’s clinical questions are...

Does randomized controlled trial evidence support the use of vaccines to prevent influenza in the elderly?  
Find out the answer here

What are the effects of using dressings for the prevention of pressure ulcers?  
Find out the answer here
Primary Research

**Title:** Dementia, delirium and distress: the triple D pathway  
**Abstract/Conclusion:** On 1 March, the non-profit Patient Experience Network (PEN) announced winners for its national healthcare awards to recognise outstanding initiatives and national good practice across the NHS. Overall winner in the Personalisation of Care category was Sandwell and West Birmingham Hospital NHS Trust, for its innovative ‘DDD’ dementia pathway. [Click to request.](#)

**Title:** Improving inpatient warfarin therapy safety using a pharmacist-managed protocol.  
**Citation:** Daniels, P. (2018) Improving inpatient warfarin therapy safety using a pharmacist-managed protocol. *BMJ Open Quality*. 7(2), Available from: doi.org/10.1136/bmjoq-2017-000290  
**Abstract/Conclusion:** A warfarin protocol (PMWP) was designed which designated warfarin dosing to inpatient pharmacists with guidance from computerised dosing algorithms. Among over 50 000 inpatient warfarin recipients, the PMWP was adopted for the majority of both surgical and non-surgical inpatients. The frequency of international normalised ratio > 5 decreased from 5.6% to 3.4% for medical patients and from 5.2% to 2.4% for surgical patients. Postoperative bleeding decreased from 13.5% to 11.1% [Click to view](#).

**Title:** Higher vitamin D intake could improve sleep and cognitive outcomes in older adults with heart failure.  
**Citation:** Li, J. (2018) Higher vitamin D intake could improve sleep and cognitive outcomes in older adults with heart failure. *Evidence-Based Nursing*. 21(3), pp. 69.  
**Abstract/Conclusion:** The findings support independent associations of higher daily intake of vitamin D and sleep quality with better cognitive function in older adults with HF. The study also found that patients with insufficient vitamin D intake have a 2.3 times higher risk for poor sleep quality than those with adequate vitamin D intake. The mediation analyses suggest that poor sleep quality mediated the relationship between vitamin D deficiency and cognitive function in older adults with HF. [Click to view](#).

**Title:** Prehospital physical function and strength can influence clinical outcomes of critically ill older adults  
**Citation:** McWilliams, D. (2018) Prehospital physical function and strength can influence clinical outcomes of critically ill older adults *Evidence-Based Nursing*. 21(3), p. 74.  
**Abstract/Conclusion:** Slower prehospital walk speed was significantly associated with a greater risk of 30-day mortality. Additionally, it was identified that those patients with a slower prehospital walk speed and weak grip strength were less likely to be discharged from hospital. The findings of this study add to the accumulating evidence on the relationship between preadmission physical function and critical care outcomes. [Click to view](#).

**Title:** Nephrologists' Views on Dialyzing Older Patients  
**Abstract/Conclusion:** To understand nephrologists’ attitudes and perceptions on “conservative” (i.e., nondialytic) management of older patients with advanced kidney disease, researchers conducted structured interviews with 35 U.S. nephrologists, most of whom did not routinely discuss conservative management with patients and families. [Click to view abstract](#).

**Title:** Frailty Score Based Entirely on ICD-10 Codes for Hospitalized Elders  
**Abstract/Conclusion:** Because the HFRS is based entirely on previous ICD-10 codes, it can be calculated immediately upon (or even prior to) emergency hospitalizations. Having this information potentially can redirect clinicians' attention to complex issues beyond patients' immediate presenting problems.

**Title:** What Is a Healthy Blood Pressure in the Oldest Old?

**Citation:** Lv, Y.B. et al. (2018) Revisiting the association of blood pressure with mortality in oldest old people in China: Community based, longitudinal prospective study. *BMJ*. 361. Available at: https://doi.org/10.1136/bmj.k2158

**Abstract/Conclusion:** A U-shaped association between systolic blood pressure and mortality risk is found in a cohort of people aged >80 in China. This study from across China reinforces the Goldilocks idea of BP: People do best with levels that are not too high or low.

---

**Vertebroplasty in osteoporotic compression fracture (June 2018)**

In a systematic review evaluating the effectiveness of vertebroplasty in reducing pain and disability associated with osteoporotic compression fractures, most sham-controlled trials did not show clinically important benefit with vertebroplasty, whereas most trials comparing vertebroplasty with usual care (pain management) did [7]. In a recent trial comparing vertebroplasty to a sham procedure in 180 individuals with pain related to osteoporotic vertebral compression fractures, both groups received local subcutaneous lidocaine and bupivacaine in each pedicle, but only the vertebroplasty group received cementation [8]. There was no difference between the two groups at any time point in pain, use of analgesics, quality of life, or disability scores. Given the uncertainty of benefit, we reserve vertebral augmentation for patients with incapacitating pain from acute and subacute vertebral compression fractures who are unable to taper parenteral opioids or transition to oral opioids within seven days of admission or have intolerable side effects from opioid therapy. (See "Osteoporotic thoracolumbar vertebral compression fractures: Clinical manifestations and treatment", section on 'Vertebroplasty'.)

**Efficacy of fosfomycin for acute simple cystitis in women (May 2018)**

Previous trials have found the efficacy of fosfomycin for acute simple cystitis in women to be comparable with other first-line agents (eg, nitrofurantoin, trimethoprim-sulfamethoxazole). However, in a subsequent open-label trial of otherwise healthy women with cystitis, a single dose of fosfomycin resulted in lower clinical and microbiologic success rates compared with nitrofurantoin given three times daily for five days [12]. It is not clear whether the open-label trial design influenced the findings. For acute simple cystitis in women, we suggest a five-day course of nitrofurantoin or a three-day course of trimethoprim-sulfamethoxazole and we generally reserve fosfomycin for settings in which other first-line agents are not appropriate (eg, allergy, intolerance, or expected resistance). (See "Acute simple cystitis in women", section on 'First-line antimicrobial options'.)

**Checkpoint inhibitor immunotherapy in older adults (May 2018)**

The use of checkpoint inhibitor immunotherapy has been a major advance in the treatment of a wide range of malignancies. Clinical trials demonstrating the benefits and side effects of this approach have been conducted in relatively young and fit patients. A meta-analysis of 5458 patients in nine randomized trials that compared nivolumab, pembrolizumab, or atezolizumab versus chemotherapy or targeted therapy in solid tumors found that checkpoint inhibitor immunotherapy appeared to have similar efficacy and toxicity in those ≥65 years versus those <65 years of age [16]. Chronologic age alone should not preclude the use of these agents.
(See "Patient selection criteria and toxicities associated with checkpoint inhibitor immunotherapy", section on 'Elderly patients'.)

---

**DynaMed Plus**

Athens is required for off-site access to DynamedPlus

**Topic: Risk factors for hip fracture**
**Summary:** QFracture and FRAX (without bone mineral density) tools each have better performance than Garvan (without bone mineral density) tool for predicting risk of hip fracture in adults ≥ 50 years old (BMJ 2017 Jan 19)

**Topic: Venous Ulcer**
**Summary:** Early endovenous ablation of superficial venous reflux reduces time to healing compared to deferred endovenous ablation in patients with open venous leg ulcer receiving compression therapy (N Engl J Med 2018 May 31)

**Topic: Colorectal surgery considerations**
**Summary:** restrictive fluid strategy increases risk of acute kidney injury and surgical site infection compared to liberal fluid regimen, and may not improve survival in high-risk patients having major abdominal surgery (N Engl J Med 2018 May 9 early online)

**Topic: Transient ischemic attack (TIA)**
**Summary:** Stroke incidence 1.5%-5.1% within 1 year after TIA and 9.5% at 5 years (N Engl J Med 2016 Apr 21)

---

**Older people’s Medicine in the News**

**Polypharmacy**
Draft guidance from the Royal Pharmaceutical Society outlines the size of the challenge of problematic polypharmacy and highlights the work being done to address it.

**Probiotics 'may help strengthen bones' in older adults**
"Elderly people should take probiotics to preserve their bones," claims the Mail Online, referring to a Swedish trial that gave supplements to a small group of women.

**Exercise 'doesn't slow' progression of dementia**
"'Surprising' study suggests exercise may make dementia worse," reports The Daily Telegraph.

---

**Online Resources**

**BestBETs** - BETs bring the evidence one step closer to the bedside, by providing answers to very specific clinical problems, using the best available evidence.
Journals & table of contents alerts

The Clinical Librarian team can help set up table of content alerts to the journal of your choice.

<table>
<thead>
<tr>
<th>Age and Ageing</th>
<th>Archives of Gerontology and Geriatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>BMC Geriatrics</td>
<td>Clinical Medicine Insights: Geriatrics</td>
</tr>
<tr>
<td>Gerontology and Geriatric Medicine</td>
<td>Journal of Nutrition in Gerontology and Geriatrics</td>
</tr>
<tr>
<td>Journal of the American Geriatrics Society</td>
<td>Nursing Older People</td>
</tr>
</tbody>
</table>

Copyright © 2018 PHT Clinical Librarian Service, All rights reserved.