Would you like your own, tailored evidence updates? Email the Clinical Librarian team to receive bulletins every two weeks on the topics of your choice.

To access resources click on the blue hyperlinks, if you are unable to read the full text of any item please contact the Clinical Librarian team or make an article request using this form.
No updates.

Other Guidance/Reports

Path Finder for freezing of gait in people with Parkinson's disease MIB170

Comprehensive Geriatric Assessment Toolkit for Primary Care Practitioners, British Geriatrics Society
1. Introduction
2. The elements of the CGA process
3. Physical Assessment
4. Functional and social assessment
5. Psychological components
6. Medication review
7. Creating a problem list
8. Care and planning support
9. Involving social services
10. Patients presenting with mobility and balance issues
11. Bone health
12. Patients at risk of falls and fractures
13. Patients presenting with depression
14. Patients presenting with confusion and delirium
15. Mental capacity issues
16. Patients presenting with urinary incontinence
17. Weight loss and nutritional issues
18. End of life care issues
No updates.

---

**Systematic reviews from other sources**

Accuracy of Transcranial Sonography of the Substantia Nigra for Detection of Parkinson's Disease: A Systematic Review and Meta-analysis.  
[Link to full text](#)

Anesthesia for endovascular treatment in anterior circulation stroke: A systematic review and meta-analysis.  
[Link to full text](#)

[Link to full text](#)

[Link to full text](#)

Mobile phone applications in Parkinson's disease: A systematic review.  
[Link to full text](#)

Podiatry interventions to prevent falls in older people: a systematic review and meta-analysis.  
[Link to full text](#)

A systematic review investigating the relationship of electroencephalography and magnetoencephalography measurements with sensorimotor upper limb impairments after stroke.  
[Link to full text](#)

---

**This month's clinical questions are...**

No updates.
Primary Research

Title: Association Between Antidepressant Drug Use and Hip Fracture in Older People Before and After Treatment Initiation
Citation: JAMA Psychiatry. Published online January 02, 2019. doi:10.1001/jamapsychiatry.2018.3679
Abstract/Conclusion: The present study found an association between antidepressant drug use and hip fracture before and after the initiation of therapy. This finding raises questions about the association that should be further investigated in treatment studies.
Click to view

Title: Medicines-related harm in the elderly post-hospital discharge
Citation: The Prescriber, January 30, https://www.prescriber.co.uk/article/medicines-related-harm-in-the-elderly-post-hospital-discharge/
Abstract/Conclusion: MRH is prevalent in older people, especially in the primary care and transition settings, leading to poor patient outcomes and increased economic burden. There is scope for primary care clinicians to identify high-risk patients and monitor them closely in the 7- to 30-day post-discharge period. Better quality discharge communication and liaison with secondary care colleagues is vital to reduce MRH, alongside reinforcement of patient education after discharge.
Click to view

Title: Effect of Intensive vs Standard Blood Pressure Control on Probable Dementia
A Randomized Clinical Trial
Citation: JAMA. Published online January 28, 2019. doi:10.1001/jama.2018.21442
Abstract/Conclusion: Among ambulatory adults with hypertension, treating to a systolic blood pressure goal of less than 120 mm Hg compared with a goal of less than 140 mm Hg did not result in a significant reduction in the risk of probable dementia. Because of early study termination and fewer than expected cases of dementia, the study may have been underpowered for this end point.
Click to view

Title: Impact and sustainability of centralising acute stroke services in English metropolitan areas: retrospective analysis of hospital episode statistics and stroke national audit data
Citation: BMJ, 2019; 364 :l1
Abstract/Conclusion: Centralised models of acute stroke care, in which all stroke patients receive hyperacute care, can reduce mortality and length of acute hospital stay and improve provision of evidence based clinical interventions. Effects can be sustained over time.
Click to view

Title: Safety and efficacy of CVT-301 (levodopa inhalation powder) on motor function during off periods in patients with Parkinson's disease: a randomised, double-blind, placebo-controlled phase 3 trial
Citation: The Lancet Neurology, Volume 18, ISSUE 2, P145-154, February 01, 2019
Abstract/Conclusion: CVT-301 can improve UPDRS motor scores of patients with Parkinson's disease during in-clinic off periods, with few severe or serious adverse events. The long-term safety and efficacy of CVT-301 need to be investigated in future studies.
Click to view
General Geriatrics

2018 United States Physical Activity Guidelines
Sedentary behavior is associated with a variety of negative health consequences. As noted in the 2018 Physical Activity Guidelines for Americans released by the United States (US) Department of Health and Human Services, only 26 percent of adult men and 19 percent of adult women in the US are sufficiently physically active [1]. The updated guidelines note that even a very short duration of moderate- to vigorous-intensity exercise (less than the previously identified 10-minute minimum) is beneficial, and emphasize the importance of sitting less and moving more. Health benefits include the prevention of falls in older adults, improved outcomes for pregnant women and those with chronic health conditions, and improved cognitive function, mood, and sleep. (See "The benefits and risks of aerobic exercise", section on 'Physical inactivity and health'.)

Geriatric Hematology

Ibrutinib in previously untreated older adults with CLL
Two recent randomized trials have compared the use of ibrutinib versus chemoimmunotherapy regimens in the initial treatment of older adults with chronic lymphocytic leukemia (CLL):
● In a three-arm, multicenter phase III trial of over 540 older adults with previously untreated CLL (Alliance A041202), single-agent ibrutinib improved progression-free survival (PFS) over that seen with a standard six cycles of bendamustine plus rituximab [12]. Adding rituximab dampened the lymphocytosis seen with ibrutinib and increased complete response rates, but not PFS. The PFS benefit did not reach statistical significance in IGHV mutated CLL.
● In a second trial of over 220 mostly older adults with previously untreated CLL (iLLUMINATE), ibrutinib plus obinutuzumab improved PFS over that seen with chlorambucil plus obinutuzumab [13].
These studies provide further support for the use of single agent ibrutinib in older adults with CLL, especially those with unmutated IGHV. Chemoimmunotherapy remains an acceptable alternative for patients with mutated IGHV who are willing to undergo a more intensive therapy with the potential for prolonged treatment-free remissions. (See "Selection of initial therapy for symptomatic or advanced chronic lymphocytic leukemia", section on 'Ibrutinib'.)

Geriatric Endocrinology And Diabetes

Zoledronic acid for fracture prevention in postmenopausal women with low bone density
Although bisphosphonates prevent fracture in postmenopausal women with osteoporosis, their preventive efficacy in postmenopausal women with low bone density (osteopenia) is less certain. In a six-year trial in 2000 postmenopausal women with total hip or femoral neck bone density T-scores of -1.0 to -2.5, zoledronic acid (5 mg intravenously every 18 months), compared with normal saline, reduced the risk of fragility fractures [9]. Approximately 40 percent of the women were at high risk for fracture based on Fracture Risk Assessment (FRAX) criteria or baseline bone density T-score. We continue to suggest pharmacologic therapy for the treatment of high-risk postmenopausal women with T-scores between -1.0 and -2.5. We calculate fracture risk using FRAX. (See "Prevention of osteoporosis", section on 'Zoledronic acid'.)
**Topic:** Bisphosphonates for treatment and prevention of osteoporosis  
**Summary:** zoledronic acid reduces risk of vertebral and nonvertebral fragility fractures in postmenopausal women ≥ 65 years old with osteopenia (N Engl J Med 2018 Dec 20)

---

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

[www.networks.nhs.uk](http://www.networks.nhs.uk)

---

**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.
- **British National Formulary (BNF)**
- **The Royal Marsden Manual of Clinical Procedures** – available via your Athens login
- **NHS Choices** - Behind the Headlines – the latest newspaper headlines debunked.

---

**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>