

Dementia in Long-Term Care

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A majority of residents in long-term care facilities (LTCF) are cognitively impaired. Dementia is either the reason they are in such facilities in the first place, or it develops as they “age in place.” Whereas only 5% to 10% of all seniors are demented, at least two-thirds of nursing home residents in the United States have dementia,^{1,2} a figure that is true for the United Kingdom as well.³ Residents of assisted-living and residential care facilities are generally less impaired than residents of skilled nursing facilities, but 24% had at least mild dementia in one study,⁴ and 21% at least moderate dementia in another.⁵ These figures are for LTCF that do not even specialize in dementia care. Facilities specializing in dementia care are increasingly popular and account for a large but unknown percentage of the LTC dementia population. It is clear that large numbers of seniors with dementia are in some type of institutional care. A Canadian study indicates that over a 4-year period, there is a 50.9% chance of a person with dementia living at home to be institutionalized, with a median time to placement of 41 months from the time of diagnosis.⁶ Given that over half of patients with dementia will need institutional care, it is no wonder that such care constitutes the major portion of added costs of care for people with dementia.^{7,8} This is arguably the single most common disabling and costly geriatric syndrome in long-term care.

In this supplement to the *Journal of the American Medical Directors Association*, we review important aspects of dementia in long-term care. The opening article by Singer and Luxenberg provides an overview of the diagnosis and treatment of dementia in LTCF, with a focus on Alzheimer’s disease (AD).

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After this, a series of articles covers the diagnosis and treatment of the common non-AD dementias. Jennifer Merrilees and Bruce Miller review frontotemporal dementia, Joseph Quinn discusses vascular dementia, and Andrew Gustavson and Jeffrey Cummings summarize the evidence for use of acetylcholinesterase inhibitors in other neuropsychiatric disorders. The treatment of psychiatric symptoms associated with dementia is covered by Donna Masterman, and depression in dementia is reviewed by Elaine Peskind. Our hope is that this supplement will provide you with a broad, practical, and detailed overview of dementia in the long-term care setting, adding the latest clinical science to decisions you make everyday on behalf of your patients.

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REFERENCES

1. Rovner B, Kafonek S, Filipp L, et al. Prevalence of mental illness in a community nursing home. *Am J Psychiatry* 1986;143:1446–1449.
2. Tariot P, Podgorski CA, Blazina L, Leibovici A. Mental disorders in the nursing home: Another perspective. *Am J Psychiatry* 1993;150:1063–1069.
3. Mathews F, Denning T. Prevalence of dementia in institutional care. *Lancet* 2002;360:225–226.
4. Osterweil D, Mulford P, Syndulko K, Martin M. Cognitive function in old and very old residents of a residential facility: Relationship to age, education, and dementia. *J Am Geriatr Soc* 1994;42:766–773.
5. Singer C, McDaniel C, Villeneuve M, Smith T. Functional status of a large sample of residents in Oregon assisted-living facilities. Poster presented at the Annual Meeting of the American Medical Directors’ Association; Orlando, Florida; March 7, 2003.
6. Herbert R, Dubois MF, Wolfson C, et al. Factors associated with long-term care institutionalization of older people with dementia: Data from the Canadian Study of Health and Aging. *J Gerontol A Biol Sci Med Sci* 2001;56:M693–M699.
7. Ostbye T, Crosse E. Net economic costs of dementia in Canada. *CMAJ* 1994;151:1457–1464.
8. Martin B, Ricci JF, Kotzan JA, et al. The net cost of Alzheimer disease and related dementia: A population-based study of Georgia Medicaid recipients. *Alzheimer Dis Assoc Disord* 1996;14:151–159.