CLINICAL PRACTICE GUIDELINES AND PRINCIPLES OF CARE FOR PEOPLE WITH DEMENTIA

Technical Report Volume 2

/Search strategies, ADAPTE Appraisal/
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The main guideline is an adaptation of 'Dementia: Supporting people with dementia and their carers in health and social care', published by the NCC-MH in 2006. The original publication is available from www.nice.org.uk/guidance/cg42/evidence. The adaptation has been reproduced with permission of the NCC-MH. The NCC-MH, however, has not checked the adaptation to confirm that it accurately reflects the original NCC-MH publication and no guarantees are given by the NCC-MH in regard to the accuracy of the adaptation. The NCC-MH guideline that this adaptation is based upon was prepared for the National Institute for Health and Care Excellence (NICE) for use by the National Health Service in England and Wales. NICE guidance does not apply to Australia and NICE has not been involved in the development or adaptation of this guidance for use in Australia. Throughout this document the NCC-MH publication will be referred to as the NICE Guideline.
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Search strategies

Search filters used in multiple searches

Dementia search strings for intervention questions:
The search strings used were developed by the Cochrane Dementia and Cognitive Improvement Group and have been used without modification. Thus they are broader than the scope of this guideline and include some conditions considered out of scope (e.g. Huntington’s Chorea).

MEDLINE
1. exp Dementia/
2. exp Wernicke Encephalopathy/
3. exp Delirium, Dementia, Amnestic, Cognitive Disorders/
4. dement*.mp.
5. alzheimer*.mp.
6. (lewy* adj2 bod*).mp.
7. (chronic adj2 cerebrovascular).mp.
8. (“organic brain disease” or “organic brain syndrome”).mp.
9. (“normal pressure hydrocephalus” and “shunt*”).mp.
11. (cerebr* adj2 deteriorat*).mp.
12. (cerebral* adj2 insufficient*).mp.
14. (creutzfeldt or jcd or cjd).mp.
15. huntington*.mp.
16. binswanger*.mp.
17. korsako*.mp.
18. or/1-17
Limits: human and English language and exclude medline journals

EMBASE
1. exp dementia/
2. exp Wernicke Encephalopathy/
3. exp Delirium, Dementia, Amnestic, Cognitive Disorders/
4. dement*.mp.
5. alzheimer*.mp.
6. (chronic adj2 cerebrovascular).mp.
7. (“organic brain disease” or “organic brain syndrome”).mp.
9. (cerebr* adj2 deteriorat*).mp.
10. (cerebral* adj2 insufficient*).mp.
11. (creutzfeldt or jcd or cjd).mp.
12. huntington*.mp.
13. korsako*.mp.
14. or/1-17
Limits: human and English language

PsycINFO
1. exp dementia/
2. exp Wernicke Encephalopathy/
3. exp Delirium, Dementia, Amnestic, Cognitive Disorders/
4. dement*.mp.
5. alzheimer*.mp.
8. (cerebr* adj2 deteriorat*).mp.
9. (cerebral* adj2 insufficient*).mp.
10. (creutzfeldt or jcd or cjd).mp.
11. huntington*.mp.
12. korsako*.mp.
13. or/1-17
Limits: human and English language

Dementia search strings for diagnostic test questions:

MEDLINE
1. dement*.ti.
2. alzheimer*.ti.
3. (AD or VaD or lewy or frontotemporal).ti.
4. exp Dementia/di [Diagnosis]
5. exp Dementia/ep [Epidemiology]
6. (“conversion to” adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
7. ((endpoint* or “end point*” or outcome*) adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
8. (predict* adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
9. (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.
10. or/1-9
Limits: human and English language

EMBASE
1. dement*.ti.
2. alzheimer*.ti.
3. (AD or VaD or lewy or frontotemporal).ti.
4. exp Dementia/di [Diagnosis]
5. exp Dementia/ep [Epidemiology]
6. (“conversion to” adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
7. ((endpoint* or “end point*” or outcome*) adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
8. (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
9. (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.
10. or/1-9
Limits: human and English language and exclude medline journals

PsycINFO
1. dement*.ti.
2. alzheimer*.ti.
3. (AD or VaD or lewy or frontotemporal).ti.
4. exp Dementia/di [Diagnosis]
5. exp Dementia/ep [Epidemiology]
6. (“conversion to” adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
7. ((endpoint* or “end point*” or outcome*) adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
8. (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
9. (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.
10. or/1-9
Limits: human and English language
### HTA and systematic review search strings

#### MEDLINE Systematic review filter:
1. (review or review, tutorial or review, academic).pt.
2. (medline or medlars or embase or pubmed or cochrane).tw,sh.
3. (scisearch or psychinfo or psycinfo).tw,sh.
4. (psychlit or psyclit).tw,sh.
5. cinahl.tw,sh.
6. (hand adj2 search$) or (manual$ adj2 search$).tw,sh.
7. (electronic database$ or bibliographic database$ or computer$ed database$ or online database$).tw,sh.
8. (pooling or pooled or mantel haenszel).tw,sh.
9. (peto or dersimonian or der simonian or fixed effect).tw,sh.
10. (retraction of publication or retracted publication).pt.
11. or/2-10
12. 1 and 11
13. meta-analysis.pt.
14. meta-analysis.sh.
15. (meta-analysis$ or meta analy$ or metaanalys$).tw,sh.
16. (systematic$ adj5 review$).tw,sh.
17. (systematic$ adj5 overview$).tw,sh.
18. (quantitative$ adj5 review$).tw,sh.
19. (quantitative$ adj5 overview$).tw,sh.
20. (methodologic$ adj5 review$).tw,sh.
21. (methodologic$ adj5 overview$).tw,sh.
22. (integrative research review$ or research integration).tw.
23. or/13-23
24. 12 or 24

#### EMBASE Systematic review filter:
1. exp review/
2. (literature adj3 review$).ti,ab.
3. exp meta analysis/
4. exp "Systematic Review"/
5. or/1-4
6. (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
7. RETRACTED ARTICLE/
8. 6 or 7
9. 5 and 8
10. (systematic$ adj2 (review$ or overview$)).ti,ab.
11. (meta?anal$ or meta anal$ or metaanal$ or metaanal$ or metanal$).ti,ab.
12. 9 or 10 or 11

#### PsycINFO Systematic review filter:
Limit to “reviews (maximizes sensitivity)” via Clinical Queries
OR
1. meta-analysis.mp. or exp Meta Analysis/
2. ”systematic review”.ti,ab.
3. (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
4. (systematic$ adj2 (review$ or overview$)).ti,ab.
5. (meta?anal$ or meta anal$ or metaanal$ or metaanal$ or metanal$).ti,ab.
6. 4 or 5
7. 3 and 6
8. or/1-2,7

### Randomised controlled trials search strings

#### MEDLINE
1. "randomized controlled trial".pt.
2. (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
3. (retraction of publication or retracted publication).pt.
4. 1 or 2 or 3
5. (animals not humans).sh.
6. (comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial".pt.
7. (random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
8. 4 or 5 or 6 or 7

#### EMBASE
1. (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
2. RETRACTED ARTICLE/
3. or/1-2
5. (book or conference paper or editorial or letter or review).pt. not exp randomized controlled trial/
6. (random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not exp randomized controlled trial/
7. 3 not (4 or 5 or 6)

#### PsycINFO
1. double-blind.tw.
2. randomised.mp. or randomized.tw.
3. randomly assigned.tw.
4. 1 or 2 or 3
Search for existing guidelines

Database: Ovid MEDLINE(R) <1946 to January Week 5 2014>

1 Dementia/
2 Alzheimer Disease/
3 2 or 1 (93296)
4 limit 3 to (yr="2005 - Current" and (guideline or practice guideline))
5 "recommendation".m_titl.
6 "standard".m_titl.
7 "guideline".m_titl.
8 5 or 6 or 7
9 3 and 8
10 limit 9 to yr="2005 - Current"
SRQ 1: Are there barriers to people with dementia getting optimal care?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psyclit or psychlit).tw,sh.
23 cinahl.tw,sh.
24 ((hand adj2 search$) or (manual$ adj2 search$)).tw,sh.
25 (electronic database$ or bibliographic database$ or computeri?d database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analysis$ or metaanalys$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitative$ adj5 review$).tw,sh.
37 (quantitative$ adj5 overview$).tw,sh.
38 (quantitative$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Health Services Accessibility/ or Healthcare Disparities/
46 barrier* or access* or equit*).ti.
47 45 or 46
48 44 and 47

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
binswanger*.mp.
korsak*.mp.
or/1-17
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
"Systematic Review"/
or/19-22
(meMline or medlars or embase or pubmed or cinahl or amed or psyclit or psycinfo or psycinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
exp "Systematic Review"/
or/19-22
(Medline or medlars or embase or pubmed or cinahl or amed or psyclit or psycinfo or psycinfo or scisearch or cochrane).ti,ab.
18 and 30
health care access/
(bARRIER* or access* or equit*).ti.
32 or 33
31 and 34
limit 35 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO
1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernicke Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 ("organic brain disease" or "organic brain syndrome").mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson" disease dementia" or PDD or "parkinson" dementia".mp.
22 or/1-21
limit 22 to "reviews (maximizes specificity)"
23 (barrier* or access* or equit*).ti.
24 23 and 24
25 limit 25 to (human and english language and yr="2005 -Current")

Database: PubMed
(((Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb]))) AND ((barrier or access or equit*)) Filters: Review

Searches for primary studies:
The searches above were repeated but without the systematic review filter to ensure that all study designs were captured.

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 Health Services Accessibility/ or Healthcare Disparities/
20 (barrier* or access* or equit*).ti.
21 19 or 20
22 18 and 21

Database: PsycINFO
1 exp Dementia/
2 exp Huntingtones Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson" disease dementia" or PDD or "parkinson" dementia").mp.
22 or/1-21
23 (barrier* or access* or equit*).ti.
24 22 and 23
25 limit 22 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PubMed
(((Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficient* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[aJ] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb]))) AND ((barrier or access or equit*)

6
SRQ 2: Are there any advantages/disadvantages to early identification?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)

1. exp Dementia/
2. Wernicke Encephalopathy/
3. Delirium, Dementia, Amnestic, Cognitive Disorders/
4. dement*.mp.
5. alzheimer*.mp.
6. (lewy* adj2 bod*).mp.
7. (chronic adj2 cerebrovascular).mp.
8. (organic brain disease* or "organic brain syndrome").mp.
9. ("normal pressure hydrocephalus" and "shunt").mp.
10. "benign senescent forgetfulness".mp.
11. (cerebr adj2 deteriorat*).mp.
12. (cerebral* adj2 insufficient*).mp.
14. (creutzfeldt or jcd or cjd).mp.
15. huntington*.mp.
16. binswanger*.mp.
17. korsako*.mp.
18. or/1-17
19. (review or review,tutorial or review, academic).pt.
20. (medline or medlars or embase or pubmed or cochrane).tw,sh.
21. (scisearch or psychinfo or psycinfo).tw,sh.
22. (psychlit or psyclit).tw,sh.
23. cinahl.tw,sh.
24. ((hand adj2 search$) or (manual$ adj2 search$)).tw,sh.
25. (electronic database$ or bibliographic database$ or computeri?ed database$ or online database$).tw,sh.
26. (pooling or pooled or mantel haenszel).tw,sh.
27. (peto or dersimonian or der simonian or fixed effect).tw,sh.
28. (retraction of publication or retracted publication).pt.
29. or/20-28
30. 19 and 29
31. meta-analysis.pt.
32. meta-analysis.sh.
33. (meta-analysis$ or meta analys$ or metaanalys$).tw,sh.
34. (systematic$ adj5 review$).tw,sh.
35. (systematic$ adj5 overview$).tw,sh.
36. (quantitative$ adj5 review$).tw,sh.
37. (quantitative$ adj5 overview$).tw,sh.
38. (quantitative$ adj5 synthesis$).tw,sh.
39. (methodologic$ adj5 review$).tw,sh.
40. (methodologic$ adj5 overview$).tw,sh.
41. (integrative research review$ or research integration).tw.
42. or/31-41
43. 30 or 42
44. 18 and 43
45. Early Diagnosis'
46. (earl* or timing or time) adj2 (detect* or diagnos* or distinguish* or identif* or recogni* or assess*).mp.
47. 45 or 46
48. 44 and 47
49. limit 48 to (english language and humans and yr="2005 - 2014")

Database: Embase Classic+Embase

1. exp dementia/
2. Lewy body/
3. Wernicke encephalopathy/
4. cognitive defect/
5. dement*.mp.
6. (chronic adj2 cerebrovascular).mp.
7. (organic brain disease* or "organic brain syndrome").mp.
8. "supranuclear palsy".mp.
9. ("normal pressure hydrocephalus" and "shunt").mp.
10. "benign senescent forgetfulness".mp.
11. (cerebr adj2 deteriorat*).mp.
12. (cerebral* adj2 insufficient*).mp.
14. (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 exp review/
20 (literature adj3 review$).ti,ab.
21 exp meta analysis/
22 exp "Systematic Review"/
23 or/19-22
24 (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
25 RETRACTED ARTICLE/
26 24 or 25
27 23 and 26
28 (systematic$ adj2 (review$ or overview$)).ti,ab.
29 (meta?anal$ or meta anal$ or meta-anal$ or meta-analysis$ or metaanal$ or metanal$).ti,ab.
30 27 or 28 or 29
31 early diagnosis.mp. or early diagnosis/
32 ((earl* or timing or time) adj2 (detect* or diagnos* or distinguish* or identif* or recogni* or assess*)).mp.
33 31 or 32
34 18 and 30 and 33
35 limit 34 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO
1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernicke Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp. (l)
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson* disease dementia" or PDD or "parkinson* dementia").mp.
22 or/1-21
23 limit 22 to "reviews (maximizes specificity)"
24 ((earl* or timing or time) adj2 (detect* or diagnos* or distinguish* or identif* or recogni* or assess*)).mp.
25 23 and 24
26 limit 25 to (peer reviewed journal and human and english language and yr="2005 -Current")

Database: PubMed
Search ((early diagnosis dementia) OR early diagnosis alzheimer) AND ((Dement* OR Wernicke encephalopathy* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficient* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb]) Filters: Review

Searches for primary studies:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficien*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-17
exp cohort studies/
cohort$.tw.
controlled clinical trial.pt.
epidemiologic methods/
limit 22 to yr=1971-1988
or/19-21,23
18 and 24
limit 25 to (english language and humans and yr="2005 - 2014")

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
cognitive defect/
dement*.mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
or/1-17
exp cohort studies/
cohort$.tw.
controlled clinical trial.pt.
epidemiologic methods/
limit 22 to yr=1971-1988
or/19-21,23
18 and 24
limit 25 to (human and english language and exclude medline journals and yr="2005 - Current")

Database: PsycINFO
1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluever Bucy Syndrome/
4 exp Wernicke Syndrome/
cognitive impairment/
dement*.mp.
alzheimer*.mp.
(rocky* adj2 body*).mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-21
(exp earl* or timing or time) adj2 (detect* or diagnos* or distinguish* or identif* or recogni* or assess*).mp.
limit 24 to (peer reviewed journal and human and english language and yr="2005 - Current")
The databases were then searched for any studies that compared outcomes due to timing of diagnosis – early diagnosis versus diagnosis later in the course of the condition, as follows:

**Database: Ovid MEDLINE(R)**

1. exp Dementia/
2. Wernicke Encephalopathy/
3. Delirium, Dementia, Amnestic, Cognitive Disorders/
4. dement*.mp.
5. alzheimer*.mp.
6. (lewy* adj2 bod*).mp.
7. (chronic adj2 cerebrovascular).mp.
8. ("organic brain disease" or "organic brain syndrome").mp.
9. ("normal pressure hydrocephalus" and "shunt").mp.
10. "benign senescent forgetfulness".mp.
11. (cerebr* adj2 deteriorat*).mp.
12. (cerebr* adj2 insufficient*).mp.
14. (creutzfeldt or jcd or cjd).mp.
15. huntington*.mp.
16. binswanger*.mp.
17. korsako*.mp.
18. or/1-17
19. Early Diagnosis/
20. Delayed Diagnosis/
21. ((early diagnosis) or (delayed diagnosis)).ti,ab.
22. 19 or 20 or 21
23. 18 and 22
24. limit 23 to (English language and humans and yr="2005-Current")

**Database: Embase Classic+Embase**

1. exp dementia/
2. Lewy body/
3. Wernicke encephalopathy/
4. cognitive defect/
5. dement*.mp.
6. (chronic adj2 cerebrovascular).mp.
7. ("organic brain disease" or "organic brain syndrome").mp.
8. supranuclear palsy.mp.
9. ("normal pressure hydrocephalus" and "shunt").mp.
10. "benign senescent forgetfulness".mp.
11. (cerebr* adj2 deteriorat*).mp.
12. (cerebr* adj2 insufficient*).mp.
14. (creutzfeldt or jcd or cjd).mp.
15. huntington*.mp.
16. binswanger*.mp.
17. korsako*.mp.
18. or/1-17
19. Early Diagnosis/
20. Delayed Diagnosis/
21. ((early diagnosis) or (delayed diagnosis)).ti,ab.
22. 19 or 20 or 21
23. 18 and 22
24. limit 23 to (human and english language and exclude medline journals and yr="2005 -Current")

**Database: PsycINFO**

1. exp Dementia/
2. exp Huntington's Disease/
3. exp Kluver Bucy Syndrome/
4. exp Wernicke Syndrome/
5. exp Cognitive Impairment/
6. dement*.mp.
7. alzheimer*.mp.
8. (lewy* adj2 bod*).mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebral adj2 deteriorat*).mp.
(cerebral adj2 insufficient*).mp.
pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
("parkinson" disease dementia" or PDD or "parkinson" dementia").mp.
or/1-21
((earl* or delay*) adj diagnos*).mp.
22 22 and 23
25 limit 24 to (human and English language and yr="2005 – 2014")

Database: PubMed

(((Early Diagnosis OR Delayed Diagnosis)) AND (((Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeld OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb])))) AND study
SRQ 3: For people with symptoms of dementia, does assessment from a memory assessment specialist or service provide benefits in comparison to attendance at another service?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)

1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (levy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 ((hand adj2 search$) or (manual$ adj2 search$)).tw,sh.
25 (electronic database$ or bibliographic database$ or computeri?ed database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta anal$ or metaanaly$.).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitative adj5 review$).tw,sh.
37 (quantitative adj5 overview$).tw,sh.
38 (quantitative adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 (memory adj2 (clinic or service*)).mp.
46 44 and 45

Database: Embase Classic+Embase

1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
Database: PsycINFO
1 exp Dementia/
2 exp Huntingtons Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson" disease dementia" or PDD or "parkinson" dementia").mp.
22 or/1-21
23 limit 22 to "reviews (maximizes specificity)"
24 (memory adj2 (clinic or service*)).mp.
25 23 and 24
26 limit 25 to yr=2005 -Current

Database: PubMed
Search ("memory clinic"[Title/Abstract]) OR "memory service"[Title/Abstract] AND ("Dement" OR "Wernicke encephalopath" OR "Alzheimer" OR "Lewy bod" OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt)) OR "benign senescent forgetfulness" OR "cerebral deteriorat" OR "cerebral insufficient" OR "Pick" disease OR "creutzfeldt" OR "JCD" OR "CJD" OR "Huntington" OR "Binswanger" OR "Korsak") AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb]) Filters: Review

Searches for primary studies:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 exp Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
(random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
(retraction of publication or retracted publication).pt.
or/19-21
(animals not humans).sh.
(not "randomized controlled trial").pt.
(random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial").pt.
22 not (23 or 24 or 25)
18 and 26
(memory adj2 (clinic or service*)).mp.
27 and 28
limit 29 to (english language and humans)

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 "organic brain disease" or "organic brain syndrome".mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr adj2 deteriorat*).mp.
12 (cerebral adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
RETRACTED ARTICLE/
or/19-20
21 (animal$ not human$).sh,hw.
22 (book or conference paper or editorial or letter or review).pt. not exp randomized controlled trial/
23 (random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not exp randomized controlled trial/
24 21 not (22 or 23 or 24)
25 18 and 25
26 (memory adj2 (clinic or service*)).mp.
27 26 and 28
29 limit 29 to (human and english language and exclude medline journals)

Database: PsycINFO
1 exp Dementia/
2 exp Huntingtons Disease/
3 exp Kluer Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 "organic brain disease" or "organic brain syndrome".mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr adj2 deteriorat*).mp.
15 (cerebral adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson" disease dementia* or PDD or "parkinson" dementia).mp.
22 or/1-21
23 (memory adj2 (clinic or service*)).mp.
24 22 and 23
25 double-blind.tw.
26 randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
27 randomly assigned.tw.
28 25 or 26 or 27
29 24 and 28
30 limit 29 to (human and english language)

Database: PubMed
Search (((memory clinic[Title/Abstract]) OR memory service[Title/Abstract])) AND ((Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR “organic brain disease” OR “organic brain syndrome” OR (“normal pressure hydrocephalus” AND shunt*) OR “benign senescent forgetfulness” OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeld OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[a] AND (“2005/01/01”[PDat] : “2014/12/31”[PDat]) NOT Medline[ab]) Schema: all Filters: Randomized Controlled Trial
SRQ 4: How frequently should memory assessment services review people with mild cognitive impairment (MCI) for progression to dementia?

HTA/systematic review searches:

Database: Ovid MEDLINE(R) <1946 to October Week 4 2014>

1. Mild cognitive impairment/
2. Memory disorders/
3. 
4. ((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
5. (cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
7. "questionable dementia".ti,ab.
8. 1 or 2 or 3 or 4 or 5 or 6 or 7
9. (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy$)).ti,ab.
10. ("conver$4 to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ti,ab.
11. (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ti,ab.
12. ((endpoint* or "end point*" or outcome*) adj6 (dement* or alzheimer* or AD or VaD or lewy)).ti,ab.
13. 9 or 10 or 11 or 12
14. (review or review,tutorial or review, academic).pt.
15. (medline or medlars or embase or pubmed or cochrane).tw,sh.
16. (scisearch or psychinfo or psycinfo).tw,sh.
17. (psychlit or psychlit).tw,sh.
18. cinahl.tw,sh.
19. ((hand adj2 search$) or (manual$ adj2 search$)).tw,sh.
20. (electronic database$ or bibliographic database$ or computer?ed database$ or online database$).tw,sh.
21. (pooling or pooled or mantel haenszel).tw,sh.
22. (peto or dersimonian or der simonian or fixed effect).tw,sh.
23. (retraction of publication or retracted publication).pt.
24. or/15-23
25. 14 and 24
26. meta-analysis.pt.
27. meta-analysis.sh.
28. (meta-analysis$ or meta analys$ or metaanaly$).tw,sh.
29. (systematic$ adj5 review$).tw,sh.
30. (systematic$ adj5 overview$).tw,sh.
31. (quantitati$ adj5 review$).tw,sh.
32. (quantitati$ adj5 overview$).tw,sh.
33. (quantitati$ adj5 synthesis$).tw,sh.
34. (methodologic$ adj5 review$).tw,sh.
35. (methodologic$ adj5 overview$).tw,sh.
36. (integrative review$ or research integration).tw.
37. or/26-36
38. 25 or 37
39. 8 and 13 and 38
40. limit 39 to (english language and humans and yr="2005 -Current")
41. from 40 keep 1-143

Database: Embase Classic+Embase <1947 to 2014 November 04>

1. mild cognitive impairment/
2. cognitive defect/
3. (*"mild cognitive impairment" or mci$1 or cind$1).ti,ab.
4. ((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
5. (cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
7. "questionable dementia".ti,ab.
8. 1 or 2 or 3 or 4 or 5 or 6 or 7
9. (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy$)).ti,ab.
10. ("conver$4 to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ti,ab.
11. (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ti,ab.
12. ((endpoint* or "end point*" or outcome*) adj6 (dement* or alzheimer* or AD or VaD or lewy)).ti,ab.
13. 9 or 10 or 11 or 12
14. exp review/
15. (literature adj3 review$).ti,ab.
16. exp meta analysis/
17. exp "Systematic Review"/
18. or/14-17
(medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or psycinfo or scisearch or cochrane).ti,ab.

RETRACTED ARTICLE/

19 or 20

18 and 21

(systematic$ adj2 (review$ or overview)).ti,ab.

(meta?anal$ or meta anal$ or meta anal$ or metaanal$ or metanal$).ti,ab.

22 or 23 or 24

8 and 13 and 25

limit 26 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO <1806 to October Week 5 2014>

exp cognitive impairment/
exp memory disorders/
("mild cognitive impairment" or mci$1 or cind$1).ti,ab.
((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
(cognit$ adj2 (abnormal$ or defec$t or disorder$)).ti,ab.
"benign senescent forgetfulness".ti,ab.
"questionable dementia".ti,ab.
1 or 2 or 3 or 4 or 5 or 6 or 7
(progres$ adj5 (dement$ or alzheimer$ or AD or VaD or lewy)).ti,ab.
("convrer$4 to" adj6 (dement$ or alzheimer$ or AD or lewy or VaD)).ti,ab.
(predict$ adj6 (dement$ or alzheimer$ or AD or VaD or lewy)).ti,ab.
((endpoint$ or "end point" or outcome$) adj6 (dement$ or alzheimer$ or AD or VaD or lewy)).ti,ab.
9 or 10 or 11 or 12
meta-analysis.mp. or exp Meta Analysis/
"systematic review".ti,ab.
(medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or psycinfo or scisearch or cochrane).ti,ab.
(systematic$ adj2 (review$ or overview)).ti,ab.
(meta?anal$ or meta anal$ or meta anal$ or metaanal$ or metanal$).ti,ab.
17 or 18
16 and 19
or/14-15,20
8 and 13 and 21

Database: PubMed 6 Nov 2014

"mild cognitive impairment" AND (progress* OR conver* OR monitor*) AND AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[ab]. Filter: systematic reviews

Searches for primary studies:

Database: Ovid MEDLINE(R) <1946 to October Week 4 2014>
Mild cognitive impairment/
Memory disorders/
("mild cognitive impairment" or mci$1 or cind$1).ti,ab.
((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
(cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
"benign senescent forgetfulness".mp.
"questionable dementia".ti,ab.
1 or 2 or 3 or 4 or 5 or 6 or 7
"randomized controlled trial".pt.
(random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
(retraction of publication or retracted publication).pt.
9 or 10 or 11
(animals not humans).sh.
((comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial").pt.
(random sampl$ or random digit$ or random effect$ or random survey or random regression).ti,ab.

15 not (13 or 14 or 15)
Comparative study.pt.
controlled clinical trial.pt.
multicenter study.pt.
pragmatic clinical trial.pt.
17 or 18 or 19 or 20
16 or 21
progress$,ti,ab.
24 conver$,ti,ab.
25 ((frequency or timing) adj2 (follow-up or followup)).ti,ab.
26 monitor*.ti,ab.
27 23 or 24 or 25 or 26
28 "memory assessment",ti,ab.
29 (memory adj2 (clinic or service*)).ti,ab.
30 28 or 29
31 8 and 22 and 27 and 30
32 limit 31 to (english language and humans)

Database: Embase Classic+Embase <1947 to 2014 November 04>
1 mild cognitive impairment/
2 cognitive defect/
3 ("mild cognitive impairment" or mci$.1 or cind$.1).ti,ab.
4 ((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
5 (cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
6 "benign senescent forgetfulness",mp.
7 "questionable dementia",ti,ab.
8 1 or 2 or 3 or 4 or 5 or 6 or 7
9 progress$.ti,ab.
10 conver$,ti,ab.
11 ((frequency or timing) adj2 (follow-up or followup)).ti,ab.
12 monitor*.ti,ab.
13 9 or 10 or 11 or 12
14 8 and 13
15 "memory assessment",ti,ab.
16 (memory adj2 (clinic or service*)).mp.
17 15 or 16
18 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
19 randomised controlled trial/
20 RETRACTED ARTICLE/
21 18 or 19 or 20
22 (animal$. not human$).sh,hw.
23 (book or conference paper or editorial or letter or review).pt. not exp randomized controlled trial/
24 (random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not exp randomized controlled trial/
25 21 not (22 or 23 or 24)
26 comparative effectiveness/
27 intermethod comparison/
28 clinical trial/ or controlled clinical trial/
29 multicenter study/
30 25 or 26 or 27 or 28 or 29
31 14 and 17 and 30

Database: PsycINFO <1806 to October Week 5 2014>
1 exp cognitive impairment/
2 exp memory disorders/
3 ("mild cognitive impairment" or mci$.1 or cind$.1).ti,ab.
4 ((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
5 (cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
6 "benign senescent forgetfulness",ti,ab.
7 "questionable dementia",ti,ab.
8 1 or 2 or 3 or 4 or 5 or 6 or 7
9 progress$.ti,ab.
10 conver$,ti,ab.
11 ((frequency or timing) adj2 (follow-up or followup)).ti,ab.
12 monitor*.ti,ab.
13 9 or 10 or 11 or 12
14 double-blind.tw.
15 randomized.tw.
16 randomly assigned.tw.
17 comparison.mp. or comparative.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
18 14 or 15 or 16 or 17
19 (memory adj2 (clinic or service*)).mp.
20 "memory assessment",tw.
21 19 or 20
22 8 and 13 and 18 and 21
Database: PubMed 6 Nov 2014
"mild cognitive impairment" AND (progress* OR conv* OR monitor*) AND (memory clinic OR memory service) AND English[a] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[ab]
SRQ 5: What is the evidence for the validity of the Kimberley Indigenous Cognitive Assessment (KICA) in Indigenous Australian populations and the Rowland Universal Dementia Assessment Scale (RUDAS) in Culturally and Linguistically Diverse (CALD) populations?

Searches for HTAs/systematic reviews/primary studies:

DARE, HTA & NHSEED:
(RUDAS OR Rowland Universal) OR (KICA OR Kimberley Indigenous)
Limits: 2000 to 2014

Cochrane library:
RUDAS OR "Rowland Universal" OR KICA OR "Kimberley Indigenous" search in Ab,Ti,Kw

Database: Ovid MEDLINE(R) <1946 to June Week 3 2014>
1 RUDAS.ti,ab,kw.
2 "Rowland Universal".ti,ab,kw.
3 KICA.ti,ab,kw.
4 "Kimberley Indigenous".ti,ab,kw.
5 or/1-4
6 limit 5 to (english language and humans and yr="2004 -Current")

Database: Embase Classic+Embase <1947 to 2014 July 02>
1 RUDAS.ti,ab,kw.
2 "Rowland Universal".ti,ab,kw.
3 KICA.ti,ab,kw.
4 "Kimberley Indigenous".ti,ab,kw.
5 or/1-4
6 limit 1 to (human and english language and yr="2004 -Current")
7 limit 2 to (human and english language and yr="2004 -Current")
8 limit 3 to (human and english language and yr="2004 -Current")
9 limit 4 to (human and english language and yr="2004 -Current")
10 6 or 7 or 8 or 9

Database: PsycINFO <1806 to June Week 4 2014>
1 RUDAS.ti,ab.
2 "Rowland Universal".ti,ab.
3 KICA.ti,ab.
4 "Kimberley Indigenous".ti,ab.
5 limit 1 to (human and english language and yr="2004 -Current")
6 limit 2 to (human and english language and yr="2004 -Current")
7 limit 3 to (human and english language and yr="2004 -Current")
8 limit 4 to (human and english language and yr="2004 -Current")
9 5 or 6 or 7 or 8

((RUDAS[Title/Abstract] OR "Rowland Universal" OR KICA OR "Kimberley Indigenous") AND English[la] AND ("2004/01/01"[Date - Entrez] : "2014/07/03"[Date - Entrez]) NOT Medline[sb])
SRQ 6: Does every patient with dementia need structural imaging (with CT or MRI) of the brain?

HTA/systematic review searches for neuroimaging:

Database: Ovid MEDLINE(R) <1946 to May Week 2 2014>

1  dement*.ti.
2  alzheimer*.ti.
3  (AD or VaD or lewy or frontotemporal).ti.
4  exp Dementia/d [Diagnosis]
5  exp Dementia/sp [Epidemiology]
6  ("conversion to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
7  ((endpoint* or "end point** or outcome") adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
8  (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
9  (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.
10  or/1-9
11  Positron-Emission Tomography/
12  "PET scan**.ti,ab
13  "Positron Emission Tomography".ti,ab.
14  PIB.ti,ab.
15  "Pittsburgh Compound B".ti,ab.
16  FDG-PET.ti,ab.
17  FDDNP.ti,ab.
18  SPECT.ti,ab.
19  Tomography, Emission-Computed, Single-Photon/
20  "Diagnostic Imaging/
21  "Tomography/"
22  "Magnetic Resonance Imaging/
23  "Diffusion Magnetic Resonance Imaging/
24  ("magnetic resonance imaging" or MRI*).ti,ab.
25  exp Tomography, X-Ray Computed/
26  (compute* adj3 tomograph*).ti,ab.
27  (C?T adj2 scan).ti,ab.
28  or/11-27
29  10 and 28
30  limit 29 to (english language and humans and yr="2005 - 2014")
31  (review or review,tutorial or review, academic).pt.
32  (medline or medlars or embase or pubmed or cochrane).tw,sh.
33  (sciabstract or psychinfo or psycinfo).tw,sh.
34  cinahl.tw,sh.
35  (thand adj2 search$) or (manual$ adj2 search$).tw,sh.
36  (electronic database$ or bibliographic database$ or computer?ed database$ or online database$).tw,sh.
37  (pooling or pooled or mantel haenszel).tw,sh.
38  (peto or dersimonian or der simonian or fixed effect).tw,sh.
39  (retraction of publication or retracted publication).pt.
40  or/32-40
41  31 and 41
42  meta-analysis.pt.
43  meta-analysis.sh.
44  (meta-analysis$ or meta analys$ or metaanaly$).tw,sh.
45  (systematic$ adj5 review$).tw,sh.
46  (systematic$ adj5 overview$).tw,sh.
47  (quantitativ$ adj5 review$).tw,sh.
48  (quantitativ$ adj5 overview$).tw,sh.
49  (quantitativ$ adj5 synthesis$).tw,sh.
50  (methodologic$ adj5 review$).tw,sh.
51  (methodologic$ adj5 overview$).tw,sh.
52  (integrative research review$ or research integration).tw.
53  or/43-53
54  42 or 54
55  29 and 55
56  limit 56 to (english language and humans and yr="2005 - 2014")

Database: Embase Classic+Embase <1947 to 2014 May 27>

1  dement*.ti.
2  alzheimer*.ti.
3  (AD or VaD or lewy or frontotemporal).ti.
exp Dementia/di [Diagnosis]
exp Dementia/ep [Epidemiology]
("conversion to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
((endpoint* or "end point"* or outcome") adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
(pregenerated adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
or/1-9
*Magnetic Resonance Imaging/
"Diffusion Magnetic Resonance Imaging/
"magnetic resonance imaging" or MRI*).ti,ab.
exp computer assisted tomography/
(computer* adj3 tomograph*).ti,ab.
(C?T adj2 scan).ti,ab.
Positron-Emission Tomography/
"PET scan"*.ti,ab.
"Positron Emission Tomography".ti,ab.
PIB.ti,ab.
"Pittsburgh Compound B".ti,ab.
FDG-PET.ti,ab.
FDNCP.ti,ab.
SPECT.ti,ab.
Tomography, Emission-Computed, Single-Photon/
or/11-25
10 and 26
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
exp "Systematic Review"/
or/28-31
33 (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
34 RETRACTED ARTICLE/
35 33 or 34
36 32 and 35
37 (systematic$ adj2 (review$ or overview)).ti,ab.
38 (meta?anal$ or meta anal$ or meta-anal$ or metaanaly$ or metaanal$).ti,ab.
39 36 or 37 or 38
40 27 and 39
41 limit 40 to (abstracts and cochrane library)
42 40 not 41
43 limit 42 to (human and english language and yr="2005 -Current")
44 limit 43 to exclude medline journals

Database: PsycINFO <1806 to May Week 4 2014>
dement*.ti,ab.
alzheimer*.ti,ab.
(AD or VaD or lewy or frontotemporal).ti,ab.
exp Dementia/
exp Positron-Emission Tomography/
"PET scan"*.ti,ab.
"Positron Emission Tomography".ti,ab.
PIB.ti,ab.
"Pittsburgh Compound B".ti,ab.
FDG-PET.ti,ab.
FDNCP.ti,ab.
SPECT.ti,ab.
Single Photon Emission Computed Tomography/
Magnetic Resonance Imaging/
"magnetic resonance imaging" or MRI*).ti,ab.
"Tomography/
(computer* adj3 tomograph*).ti,ab.
(C?T adj2 scan).ti,ab.
or/5-18
20 limit 19 to (english language and yr="2005 -2014")
limit 20 to human
meta-analysis.mp. or exp Meta Analysis/
"systematic review".ti,ab.
24 (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
25 (systematic$ adj2 (review$ or overview)).ti,ab.
26 (meta?anal$ or meta anal$ or meta-anal$ or metaanaly$ or metaanal$).ti,ab.
27 25 or 26
28 24 and 27
Database: PubMed 16 Sept 2014

(Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/05/29"[PDat]) NOT Medline[sb] AND ("PET scan" OR "positron emission tomography" OR FDG-PET OR SPECT OR "single photon emission" OR "diagnostic imaging" OR neuroimaging OR "magnetic resonance imaging" OR MRI OR compute* tomograph* OR "CT scan" OR "CAT scan")

Filter: systematic reviews

Searches for primary studies:

None performed
SRQ 7: Does the routine use of functional imaging (with SPECT) improve the diagnostic differentiation of dementia from MCI over and above that of standard comprehensive assessment?

HTA/systematic review searches:
Results from the search strategy for HTAs and systematic reviews for neuroimaging as shown above under SRQ 6 were screened for included publications for SPECT.

Searches for primary studies:
The following searches were conducted to identify diagnostic accuracy, management and comparative studies of SPECT:

Database: Ovid MEDLINE(R) In-Process & Other Non-Indexed Citations and Ovid MEDLINE(R) <1946 to Present> 27 Aug 2014
1 dement*.ti.  
2 alzheimer*.ti.  
3 (AD or VaD or lewy or frontotemporal).ti.  
4 exp Dementia/di [Diagnosis ]  
5 exp Dementia/ep [Epidemiology]  
6 ("conversion to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.  
7 ((endpoint* or "end point*" or outcome*) adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.  
8 (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.  
9 (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.  
10 or/1-9  
11 SPECT.ti,ab.  
12 Tomography, Emission-Computed, Single-Photon/  
13 11 or 12  
14 exp decision making/  
15 disease management/  
16 (impact adj5 management).ti,ab.  
17 management plan$.1.ti,ab.  
18 ((management or diagnosis) adj3 (change$1 or alter$)).ti,ab.  
19 14 or 15 or 16 or 17 or 18  
20 "sensitivity and specificity"/  
21 ROC curve/  
22 sensitivity.ti,ab.  
23 specificity.ti,ab.  
24 accuracy.ti,ab.  
25 "ROC curve".ti,ab.  
26 "Predictive Value of Tests"/  
27 "likelihood ratio".ti,ab.  
28 "predictive value".ti,ab.  
29 20 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28  
30 19 or 29  
31 10 and 13 and 30  
32 limit 31 to (english language and humans and yr="2004 -Current")  
33 10 and 13  
34 limit 33 to (english language and humans and yr="2004 -Current" and comparative study)  
35 32 or 34

Database: Embase Classic+Embase <1947 to 2014 August 25>  
1 dement*.ti.  
2 alzheimer*.ti.  
3 (AD or VaD or lewy or frontotemporal).ti.  
4 exp Dementia/di [Diagnosis]  
5 exp Dementia/ep [Epidemiology]  
6 ("conversion to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.  
7 ((endpoint* or "end point*" or outcome*) adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.  
8 (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.  
9 (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.  
10 or/1-9  
11 SPECT.ti,ab.  
12 Tomography, Emission-Computed, Single-Photon/  
13 11 or 12  
14 medical decision making/
Database: PsycINFO <1806 to August Week 3 2014>

1. dement*.ti.
2. alzheimer*.ti.
3. (AD or VaD or lewy or frontotemporal).ti.
4. (("conversion to" adj6 (dement* or alzheimer* or AD or lewy or VaD)).ab.
5. ((endpoint* or "end point*" or outcome*) adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
6. (predict* adj6 (dement* or alzheimer* or AD or VaD or lewy)).ab.
7. (progress* adj5 (dement* or alzheimer* or AD or VaD or lewy)).ab.
8. exp Dementia/
9. or/1-8
10. SPECT.ti,ab.
11. Single Photon Emission Computed Tomography/
12. 10 or 11
13. exp decision making/
14. exp disease management/
15. (impact adj5 management).ti,ab.
16. management plan$1.ti,ab.
17. ((management or diagnosis) adj3 (change$1 or alter$)).ti,ab.
18. exp sensation and specificity/
19. sensitivity.ti,ab.
20. specificity.ti,ab.
21. exp receiver operating characteristic/
22. "ROC curve".ti,ab.
23. "receiver operating characteristic".ti,ab.
24. exp predictive value/
25. "predictive value".ti,ab.
26. "likelihood ratio".ti,ab.
27. "predictive value".ti,ab.
28. "ROC curve".ti,ab.
29. "ROC curve".ti,ab.
30. 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28 or 29
31. 10 and 13 and 30
32. limit 31 to (human and english language and exclude medline journals and yr="2004 -Current")
33. 10 and 13
34. limit 33 to (human and english language and exclude medline journals and "diagnosis (maximizes sensitivity)" and yr="2004 -Current")
35. 32 or 34

Database: PubMed

26 Aug 2014:

(((Dement OR Wernicke encephalopathy OR Alzheimer OR Lewy body OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt) OR "benign senescent forgetfulness" OR cerebral deteriorat OR cerebral insufficien OR Pick disease OR creutzfeldt OR JCD OR CJD OR Huntington OR Binswanger OR Korsako) AND (SPECT OR "single photon emission") AND ("sensitivity and specificity" OR sensitivity[Title/Abstract] OR specificity[Title/Abstract] OR "ROC curve" OR accuracy OR "predictive value" OR "likelihood ratio") AND English[la] AND ("2004/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb])) 28 hits

27 Aug 2014:

(((Dement OR Wernicke encephalopathy OR Alzheimer OR Lewy body OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt) OR "benign senescent forgetfulness" OR cerebral deteriorat OR cerebral insufficien OR Pick disease OR creutzfeldt OR JCD OR CJD OR Huntington OR Binswanger OR Korsako) AND (SPECT OR "single photon emission") AND English[la] AND ("2004/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb])) Filter: Comparative study =  0 hits
SRQ 8: For people with dementia, what type of information and support is beneficial?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 (organic brain disease* or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 (hand adj2 search$. or (manual$ adj2 search$)).tw,sh.
25 (electronic database$ or bibliographic database$ or computeried database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analy$ or metaanalys$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitative$ adj5 review$).tw,sh.
37 (quantitative$ adj5 overview$).tw,sh.
38 (quantitative$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Patient education/
46 (Patient$ or inpatient$ or care$ or care?giver$ or family) adj5 (Educat$ or information or support or knowledge or counsel$)).ti,ab.
47 45 or 46
48 44 and 47
49 limit 48 to (english language and humans and yr="2005 -Current")

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 (organic brain disease* or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-17
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
exp "Systematic Review"/
or/19-22
(medline or medlars or embase or pubmed or cinahl or amed or psychlit or psycit or psychinfo or psycinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
23 or 26
23 and 26
24 or 25
23 and 26
27 or 28
29 or 30
30 or 27 or 28 or 29
31 Patient education/
32 ((Patient$ or inpatient$ or care$ or care?giver$ or family) adj5 (Educat$ or information or support or knowledge or counsel$)).ti,ab.
33 31 or 32
34 18 and 30 and 33
35 limit 34 to (human and english language and exclude medline journals and yr="2005 - 2014")

Database: PsycINFO
1 exp Dementia/
2 exp Huntingtons Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 (organic brain disease* or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 (normal pressure hydrocephalus and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 (parkinson* disease dementia or PDD or "parkinson* dementia").mp.
or/1-21
22 limit 22 to "reviews (maximizes specificity)"
23 limit 22 to "reviews (maximizes specificity)"
24 Patient education/
25 ((Patient$ or inpatient$ or care$ or care?giver$ or family) adj5 (Educat$ or information or support or knowledge or counsel$)).ti,ab.
26 24 or 25
27 23 and 26
28 limit 27 to (human and english language and yr="2005 - 2014")

Database: PubMed
(((Dementia OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficient* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[st]) AND ((information OR education)) Filters: Review

Searches for primary studies:
The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycINFO were replaced first with a RCT filter.)
SRQ 9: For people with dementia, what is the best way of organising services in terms of integration of care, consumer directed care, multidisciplinary assessment and case management?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)

1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 (organic brain disease* or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 (ihand adj2 search$) or (manual$ adj2 search$).tw,sh.
25 (electronic database$ or bibliographic database$ or computer?ed database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analys$ or metaanaly$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitativ$ adj5 review$).tw,sh.
37 (quantitativ$ adj5 overview$).tw,sh.
38 (quantitativ$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Patient Care Team/
46 (multidisciplin* or interdisciplin*).ti,ab.
47 Delivery of Health Care, Integrated/
48 ((seamless or integr$ or contin$) adj (care or rehab$ or therap$ or intervention)).mp.
49 Patient-Centered Care/
50 Care coordination.mp.
51 Clinical Protocols/
52 "care pathway".ti,ab.
53 ((model* or organi*) adj (care or service*))_.ti,ab.
54 consumer directed.ti,ab.
55 45 or 46 or 47 or 48 or 49 or 50 or 51 or 52 or 53 or 54
56 44 and 55
57 limit 56 to (english language and humans and yr="2005 -Current")

Database: Embase Classic+Embase

1 exp dementia/
2 Lewy body/
Wernicke encephalopathy/
cognitive defect/
dement*.mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-17
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
"Systematic Review"/
or/19-22
(medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
exp Dementia/
ex Huntington Disease/
ex Kluver Bucy Syndrome/
ex Wernicke Syndrome/
dexp Cognitive Impairment/
dement*.mp.
alzheimer*.mp.
(lewy* adj2 bod*).mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-21
limit 22 to "reviews (maximizes specificity)"
(multidisciplin* or interdisciplin*).ti,ab.
exp Integrated Services/
((seamless or integr$ or contin$) adj (care or rehab$ or therap$ or intervention)).mp. (18034)
Patient-Centered Care/
Care coordination.mp.
Clinical Protocols/
"care pathway".ti,ab.
consumer directed.ti,ab.
or/32-41
31 and 42
limit 43 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO
exp Dementia/
ex Huntington Disease/
ex Kluver Bucy Syndrome/
ex Wernicke Syndrome/
ex Cognitive Impairment/
dement*.mp.
alzheimer*.mp.
(lewy* adj2 bod*).mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
("parkinson" disease dementia" or PDD or "parkinson" dementia").mp.
or/1-21
limit 22 to "reviews (maximizes specificity)"
(multidisciplin* or interdisciplin*).ti,ab.
ex Integrated Services/
((seamless or integr$ or contin$) adj (care or rehab$ or therap$ or intervention)).mp.
ex Client Centered Therapy/
Care coordination.mp.
"care pathway".ti,ab.
((model* or organi*) adj (care or service*)).ti,ab.
Database: PubMed

Search ((((((Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[a] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb])))))) AND ((integrat* OR multidisciplin* OR "consumer directed" OR "care pathway" OR "care plan"[Title/Abstract])) Filters: Review

Searches for primary studies:

The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycInfo was replaced with a RCT filter (see page 2).
SRQ 10: What models of training for health and aged care staff have positive outcomes for people with dementia?

HTA/systematic review searches:

**Database: Ovid MEDLINE(R)**

1. exp Dementia/
2. Wernicke Encephalopathy/
3. Delirium, Dementia, Amnestic, Cognitive Disorders/
4. dement*.mp.
5. alzheimer*.mp.
6. (lewy* adj2 bod*).mp.
7. (chronic adj2 cerebrovascular).mp.
8. ("organic brain disease" or "organic brain syndrome").mp.
9. ("normal pressure hydrocephalus" and "shunt").mp.
10. "benign senescent forgetfulness".mp.
11. (cerebr* adj2 deteriorat*).mp.
12. (cerebral* adj2 insufficient*).mp.
14. (creutzfeldt or jcd or cjd).mp.
15. huntington*.mp.
16. binswanger*.mp.
17. korsako*.mp.
18. or/1-17
19. (review or review,tutorial or review, academic).pt.
20. (medline or medlars or embase or pubmed or cochrane).tw,sh.
21. (sci search or psychinfo or psycinfo).tw,sh.
22. (psychlit or psyclit).tw,sh.
23. cinahl.tw,sh.
24. ((hand adj2 search$) or (manual$ adj2 search$)).tw,sh.
25. (electronic database$ or bibliographic database$ or comput*ed database$ or online database$).tw,sh.
26. (pooling or pooled or mantel haenszel).tw,sh.
27. (peto or dersimonian or der simonian or fixed effect).tw,sh.
28. (retraction of publication or retracted publication).pt.
29. or/20-28
30. 19 and 29
31. meta-analysis.pt.
32. meta-analysis.sh.
33. (meta-analysis$ or meta analys$ or metaanalys$).tw,sh.
34. (systematic$ adj5 review$).tw,sh.
35. (systematic$ adj5 overview$).tw,sh.
36. (quantitative$ adj5 review$).tw,sh.
37. (quantitative$ adj5 overview$).tw,sh.
38. (quantitative$ adj5 synthesis$).tw,sh.
39. (methodologic$ adj5 review$).tw,sh.
40. (methodologic$ adj5 overview$).tw,sh.
41. (integrative research review$ or research integration).tw.
42. or/31-41
43. 30 or 42
44. 18 and 43
45. exp inservice training/ or staff training/ or training/
46. continuing education/ or exp education, professional/ or models, educational/ or exp nursing education/ or exp vocational education/
47. (educat$ or train$).ti,ab.
48. 45 or 46 or 47
49. 44 and 48
50. limit 49 to (english language and humans and yr="2005 -Current")

**Database: Embase Classic+Embase**

1. exp dementia/
2. Lewy body/
3. Wernicke encephalopathy/
4. cognitive defect/
5. dement*.mp.
6. (chronic adj2 cerebrovascular).mp.
7. ("organic brain disease" or "organic brain syndrome").mp.
8. "supranuclear palsy".mp.
9. ("normal pressure hydrocephalus" and "shunt").mp.
10. "benign senescent forgetfulness".mp.
11. (cerebr* adj2 deteriorat*).mp.
12. (cerebrat* adj2 insufficient*).mp.
Searches for primary studies:

The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycInfo was replaced with a RCT filter (see page 2).
SRQ 11: For people with dementia, are there strategies for promoting independence that produce benefits?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (sciresearch or psychinfo or psychinfo).tw,sh.
22 (psyclit or psychlit).tw,sh.
23 cinahl.tw.sh.
24 ((hand adj2 search$) or (manual$ adj2 search$)).tw.sh.
25 (electronic database$ or bibliographic database$ or computerized database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw.sh.
27 (peto or dersimonian or der simonian or fixed effect).tw.sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analysis$ or metaanalysis$).tw.sh.
34 (systematic$ adj5 review$).tw.sh.
35 (systematic$ adj5 overview$).tw.sh.
36 (quantitative$ adj5 review$).tw.sh.
37 (quantitative$ adj5 overview$).tw.sh.
38 (quantitative$ adj5 synthesis$).tw.sh.
39 (methodologic$ adj5 review$).tw.sh.
40 (methodologic$ adj5 overview$).tw.sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Exercise Therapy/ or Physical Therapy Modalities/
46 Accidental Falls:pc [Prevention & Control]
47 Occupational Therapy/
48 Technology/
49 exp Self-Help Devices/
50 (exercise or falls or "occupational therapy").mp.
51 (technology or "information communications technology" or telecare or electronic).mp.
52 45 or 46 or 47 or 48 or 49 or 50 or 51
53 44 and 52
54 limit 53 to (english language and humans and yr="2005 -Current")

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr adj2 deteriorat*).mp.
(cerebral adj2 insufficient*).mp.
(pick adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-17
exp review/
(literature adj3 review$.ti,ab.
exp meta analysis/
exp "Systematic Review"/
exp systematic$ adj2 (review$ or overview).ti,ab.
27 or 28 or 29
22 and 30
23 and 30
Exercise Therapy/ or Physical Therapy Modalities/
Accidental Falls/
Occupational Therapy/
Technology/
(exercise or falls or "occupational therap*").mp.
(limit 40 to (human and english language and exclude medline journals and yr="2005-Current")

Database: PsycINFO

exp Dementia/
exp Huntington Disease/
exp Kluer Bucy Syndrome/
exp Wernickes Syndrome/
exp Cognitive Impairment/
dement*.mp.
alzheimer*.mp.
(leyw* adj2 bod*).mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
"benign senescent forgetfulness".mp.
"normal pressure hydrocephalus" and "shunt").mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
"parkinson" disease dementia" or PDD or "parkinson" dementia).mp.
or/1-21
23 to 30
limit 22 to "reviews (maximizes specificity)"
exp Physical Activity/ or exp Rehabilitation/ or exp Exercise/
exp Physical Therapy/
exp Falls/
exp Occupational Therapy/
exp Technology/ or exp Assistive Technology/
(exercise or falls or "occupational therap*").mp.
(limit 32 to (human and english language and yr="2005-Current")

34
**Database: PubMed**

Search (((((((Dement* OR Wernicke encephalopathy* OR Alzheimer* OR Lewy bod* OR “organic brain disease” OR “organic brain syndrome” OR (“normal pressure hydrocephalus” AND shunt*) OR “benign senescent forgetfulness” OR cerebral deterioration* OR cerebral insufficiency* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND (“2005/01/01”[PDat] : “2014/12/31”[PDat]) NOT Medline[sb])))))) AND ((exercise OR physical OR falls OR occupational therapy OR technology OR computer OR independence [Title/Abstract]))) filtered by Review

**Searches for primary studies:**

The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycInfo was replaced with a RCT filter (see page 2).
SRQ 12 For people with dementia, do non-pharmacological interventions aimed at improving cognitive function produce benefits?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)

1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 (ihand adj2 search$) or (manual$ adj2 search$).tw,sh.
25 (electronic database$ or bibliographic database$ or computer$ed database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analy$ or metaanaly$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitativ$ adj5 review$).tw,sh.
37 (quantitativ$ adj5 overview$).tw,sh.
38 (quantitativ$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Cognitive Therapy/
46 (cognit* adj (stimulation or rehabilitation or training or retrain* or support)).ti,ab.
47 (memory adj (function* or rehabilitation or therap* or aid* or group* or training or retraining or re-training* or support or stimulation or strateg* or management)).ti,ab.
48 45 or 46 or 47
49 44 and 48
50 limit 49 to (english language and humans and yr="2005 -Current")

Database: Embase Classic+Embase <1947 to 2014 May 27>

1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(stevendubnoff or jcd or cjd).mp.
(huntington*.mp.
binswanger*.mp.
ors1-17
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
exp "Systematic Review"/
or19-22
medline or medlars or embase or
pubmed or cinahl or amed or psychlit or psycinfo or scisearch or
cochrane).ti,ab.
RETRACTED ARTICLE/
23 and 26
24 or 25
27 or 28 or 29
18 and 30
21
23 and 35
29 to 28 or 29
31
32 and 33
28 (systematic$ adj2 (review$ or overview)).ti,ab.
29 (meta anal$ or meta ana$ or metaanal$ or metanal$).ti,ab.
22 or 17
34
23 and 27
33 (memory adj (function* or rehabilitation or therap* or aid* or group* or training or retraining or re-training* or support or
stimulation or strategy* or management)).ti,ab.
35 or 33 or 34
36
31 and 35
37 limit 36 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO <1806 to May Week 4 2014>
1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernicke's Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (stevendubnoff or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson" disease dementia* or PDD or "parkinson" dementia*).mp.
or1-21
22 limit 22 to "reviews (maximizes specificity)"
23 exp Cognitive Therapy/
24 exp Cognitive Therapy/
25 (cognit* adj (stimulation or rehabilitation or training or retrain* or support)).ti,ab.
26 (memory adj (function* or rehabilitation or therap* or aid* or group* or training or retraining or re-training* or support or
stimulation or strategy* or management)).ti,ab.
27 or 26
28 or 25 or 26
29 limit 28 to (human and english language and yr="2005 -Current")

Database: PubMed 16 Sept 2014
Search ((((((Dement* OR Wernicke encephalopath* OR Alzheim* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt*)) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR JCD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat] NOT Medline[ab])))) AND (("cognit* rehabilitat*" OR "cognit* retrain*") OR "cognitive stimulat*" OR "cognit* train*" OR "memory rehabilitat*" OR "memory retrain*") [Title/Abstract]))
Filters: Review
**Searches for primary studies:**
The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycInfo was replaced with a RCT filter (see page 2).
SRQ 13: For people with dementia, do acetylcholinesterase inhibiting drugs/memantine produce benefits/harms?

HTA/systematic review searches:
The searches were run first with the systematic review filter (see page 2) using the dementia and intervention terms listed below.

The HTA/systematic review search was updated to July 2015 to review evidence for combination therapy in response to public consultation comments.

The HTA/systematic review search for people with mild cognitive impairment was combined with the search for primary studies, as described below (see page 41).

 Searches for primary studies in people with dementia:

Database: Ovid MEDLINE(R) <1946 to May Week 2 2014>
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 "randomized controlled trial".pt.
20 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
21 (retraction of publication or retracted publication).pt.
22 or/19-21
23 (animals not humans).sh.
24 ((comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial").pt.
25 (random sampl$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
26 22 not (23 or 24 or 25)
27 18 and 26
28 Memantine/
29 (Memantine or ebixa or axura or namenda).mp.
30 Galantamine/
31 (galantamin* or galanthamine or Epigalanthamin or Jilkon* or Lycoremin or Nivalin* or Razadyne* or Reminyt*).mp.
32 (donepezil or donezepil).mp.
33 (aricept* or Memac* or Memori* or Eranz*).mp.
34 (Rivastigmin* or exelon* or prometax*).mp.
35 28 or 29 or 30 or 31 or 32 or 33 or 34
36 27 and 35
37 limit 36 to (english language and humans and yr="2010 -Current")

Database: Embase Classic+Embase <1947 to 2014 May 27>
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebral* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-17
(random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab. (1034048)
RETRACTED ARTICLE/
or/19-20
(animal$ not human$).sh,hw.
(book or conference paper or editorial or letter or review).pt. not exp randomized controlled trial/
(random sampl$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not exp randomized controlled trial/
21 not (22 or 23 or 24)
18 and 25
Memantine/
(Memantine or ebixa or axura or namenda).mp.
Galantamine/
(galantamin* or galanthamine or Epigalanthamin or Jilkon* or Lycoremin or Nivalin* or Razadyne* or Reminyt*).mp.
(donepezil or donezepil).mp.
(aricept* or Memac* or Memorit* or Eranz*).mp.
(Rivastigmin* or exelon* or prometax*).mp.
27 or 28 or 29 or 30 or 31 or 32 or 33
26 and 34
limit 35 to (human and english language and exclude medline journals and yr="2010 -Current")

Database: PsycINFO <1806 to May Week 4 2014>
1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernicke Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 ("normal pressure hydrocephalus" and "shunt").mp.
12 "benign senescent forgetfulness".mp.
13 (cerebral* adj2 deteriorat*).mp.
14 (cerebral* adj2 insufficient*).mp.
15 (pick* adj2 disease).mp.
16 (creutzfeldt or jcd or cjd).mp.
17 huntington*.mp.
18 binswanger*.mp.
19 korsako*.mp.
20 ("parkinson* disease dementia" or PDD or "parkinson* dementia").mp.
or/1-21
23 double-blind.tw.
24 randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
25 randomly assigned.tw.
26 23 or 24 or 25
27 22 and 26
28 (Memantine or ebixa or axura or namenda).mp.
29 (galantamin* or galanthamine or Epigalanthamin or Jilikon* or Lycoremin or Nivalin* or Razadyne* or Reminyt*).mp.
30 (donepezil or donezepil).mp.
31 (aricept* or Memac* or Memorit* or Eranz*).mp.
32 (Rivastigmin* or exelon* or prometax*).mp.
33 28 or 29 or 30 or 31 or 32
34 27 and 33
35 limit 34 to (human and english language and yr="2010 -Current")

Database: PubMed
Search (((((((Dement* OR wernicke encephalopath* OR Alzheimer* OR lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*))

40
Searches for HTAs/systematic reviews and primary studies in people with mild cognitive impairment:

Database: Ovid MEDLINE(R) <1946 to July Week 1 2015>

1 "randomized controlled trial".pt.
2 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
3 (retraction of publication or retracted publication).pt.
4 or/1-3
5 (animals not humans).sh.
6 ((comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial").pt.
7 (random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
8 4 not (5 or 6 or 7)
9 (review or review,tutorial or review, academic).pt.
10 (medline or mediars or embase or pubmed or cochrane).tw,sh.
11 (scisearch or psychinfo or psycinfo).tw,sh.
12 (psychlit or psychlit).tw,sh.
13 cinahl.tw,sh.
14 ((hand adj2 search$) or (manual$ adj2 search$)).tw,sh.
15 (electronic database$ or bibliographic database$ or computer?ed database$ or online database$).tw,sh.
16 (pooling or pooled or mantel haenszel).tw,sh.
17 (peto or dersimonian or der simonian or fixed effect).tw,sh.
18 (retraction of publication or retracted publication).pt.
19 or/10-18
20 9 and 19
21 meta-analysis.pt.
22 meta-analysis.sh.
23 (meta-analysis$ or meta analys$ or metaanalys$).tw,sh.
24 (systematic$ adj5 review$).tw,sh.
25 (systematic$ adj5 overview$).tw,sh.
26 (quantitative$ adj5 review$).tw,sh.
27 (quantitative$ adj5 overview$).tw,sh.
28 (quantitative$ adj5 synthesis$).tw,sh.
29 (methodologic$ adj5 review$).tw,sh.
30 (methodologic$ adj5 overview$).tw,sh.
31 (integrative research review$ or research integration).tw.
32 or/21-31
33 20 or 32
34 8 or 33
35 Mild cognitive impairment /
36 Memory disorders/
37 ("mild cognitive impairment" or mc$i$1 or cind$1).ti,ab.
38 ((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
39 (cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
40 "benign senescent forgetfulness".mp.
41 "questionable dementia".ab.
42 35 or 36 or 37 or 38 or 39 or 40 or 41
43 Memantine/
44 (Memantine or ebixa or axura or namenda).mp.
45 Galantamine/
46 (galantamin$ or galanthamine or Epigalanthamin or Jilkon$ or Lycoremin or Nivalin$ or Razadyne$ or Reminyl$).mp.
47 (donepezil or donezepil).mp. (2608)
48 (aricept$ or Memac$ or Memonit$ or Eranz$ or Rivastigmin$ or exelon$ or prometax$).mp.
49 (Rivastigmin$ or exelon$ or prometax$).mp.
50 43 or 44 or 45 or 46 or 47 or 48
51 43 or 44 or 45 or 46 or 47 or 48 or 49
52 34 and 42 and 50
53 34 and 42 and 51
54 limit 52 to (english language and humans and yr="2005 - 2014")

Database: Embase Classic+Embase <1947 to 2015 July 14>

1 exp review/
2 (literature adj3 review$).ti,ab.
3 exp meta analysis/
4 exp "Systematic Review"/
or/1-4
(medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
6 or 7
5 and 8
(systematic$ adj2 (review$ or overview)).ti,ab.
(meta?anal$ or meta anal$ or meta-anal$ or metaanaly$a$ or metana$l).ti,ab.
9 or 10 or 11
(random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
RETRACTED ARTICLE/
or/13-14
(animal$ not human$).sh,hw.
(book or conference paper or editorial or letter or review).pt. not exp randomized controlled trial/
(random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not exp randomized controlled trial/
15 not (16 or 17 or 18)
12 or 19
mild cognitive impairment/
cognitive defect/
("mild cognitive impairment" or mci$1 or cind$1).ti,ab.
((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
(cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
"benign senescent forgetfulness".mp.
"questionable dementia".ti,ab.
21 or 22 or 23 or 24 or 25 or 26 or 27
29 Memantine/
30 Galantamine/
(Memantine or ebixa or axura or namenda).mp.
(galantamin* or galanthamine or Epigalanthamin or Jilkon* or Lycoremin or Nivalin* or Razadyne* or Reminyl*).mp.
(donepezil or donezepil).mp.
(aricept* or Memac* or Memorit* or Eranz*).mp.
(Rivastigmin* or exelon* or prometax*).mp.
29 or 30 or 31 or 32 or 33 or 34 or 35
20 and 28 and 36
limit 37 to (human and english language and exclude medline journals and yr="2005 - 2014")

Database: PsycINFO <1806 to July Week 1 2015>
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
1 or 2 or 3
exp cognitive impairment/
exp memory disorders/
("mild cognitive impairment" or mci$1 or cind$1).ti,ab.
((cognit$ or memory$ or mental$) adj5 (declin$ or impair$ or los$ or deteriorat$)).ti,ab.
(cognit$ adj2 (abnormal$ or defect$ or disorder$)).ti,ab.
"benign senescent forgetfulness".ti,ab.
"questionable dementia".ti,ab.
5 or 6 or 7 or 8 or 9 or 10 or 11
(Memantine or ebixa or axura or namenda).mp.
(galantamin* or galanthamine or Epigalanthamin or Jilkon* or Lycoremin or Nivalin* or Razadyne* or Reminyl*).mp.
(donepezil or donezepil).mp.
(aricept* or Memac* or Memorit* or Eranz*).mp.
(Rivastigmin* or exelon* or prometax*).mp.
13 or 14 or 15 or 16 or 17
12 and 18
4 and 19
limit 19 to "reviews (maximizes specificity)"
20 or 21
limit 22 to (human and english language and yr="2005 - 2014")

PubMed 16/7/2015
(MC[All Fields] OR "cognitive impairment"[All Fields] OR "questionable dementia"[All Fields] OR "benign senescent forgetfulness"[All Fields] AND ("acetylcholinesterase"[MeSH Terms] OR "acetylcholinesterase"[All Fields]) OR ("memantine"[MeSH Terms] OR "memantine"[All Fields]) OR ("donepezil"[Supplementary Concept] OR "donepezil"[All Fields]) OR ("rivastigmine"[Supplementary Concept] OR "rivastigmine"[All Fields]) OR ("galantamine"[MeSH Terms] OR "galantamine"[All Fields]) NOT Medline[sb] AND ((Randomized Controlled Trial[ptyp] OR systematic[sb]) AND ("2005/01/01"[PDAT] : "2015/12/31"[PDAT]) AND "humans"[MeSH Terms] AND English[lang])
SRQ 14: For people with dementia, does Souvenaid produce benefits/harms?

Searches for HTA/systematic review searches and primary studies:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 (“organic brain disease” or “organic brain syndrome”).mp.
9 (“normal pressure hydrocephalus” and “shunt*”).mp.
10 “benign senescent forgetfulness”.mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 (hand adj2 search$) or (manual$ adj2 search$).tw,sh.
25 (electronic database$ or bibliographic database$ or computer$ed database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analys$ or metaanalys$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitativ$ adj5 review$).tw,sh.
37 (quantitativ$ adj5 overview$).tw,sh.
38 (quantitativ$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 “randomized controlled trial”.pt.
45 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
46 (retraction of publication or retracted publication).pt.
47 or/44-46
48 (animals not humans).sh.
49 ((comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial").pt.
50 (random sample$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
51 47 not (48 or 49 or 50)
52 18 and 43 or 51
53 souvenaid.mp.
54 52 and 53

Database: Embase Classic+Embase <1947 to 2014 May 27>
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebr* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
"benign senescent forgetfulness".mp.
("normal pressure hydrocephalus" and "shunt").mp.
(binswanger*).mp.
korsako*.mp.
or/1-17
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
exp "Systematic Review"
(or/19-22
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
randomised.mp. or randomized.tw. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
randomly assigned.tw.
medline or medlars or embase or pubmed or cinahl or amed or psychnet or psychinfo or scisearch or cochrane).ti,ab.
RETRACTED ARTICLE/
double-blind.tw.
Database: PubMed

(Dement* OR Wernicke encephalopath* OR Alzheimer* OR Lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR ("normal pressure hydrocephalus" AND shunt") OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDat] : "2014/12/31"[PDat]) NOT Medline[sb] AND souvenaid
SRQ 15: For people with behavioural and psychological symptoms of dementia, do non-pharmacological interventions produce benefits?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 (hand adj2 search$) or (manual$ adj2 search$).tw,sh.
25 (electronic database$ or bibliographic database$ or computerized database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analy$ or metaanalys$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitative$ adj5 review$).tw,sh.
37 (quantitative$ adj5 overview$).tw,sh.
38 (quantitative$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Behavioral Symptoms/
46 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
47 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
48 45 or 46 or 47
49 44 and 48
50 limit 49 to (english language and humans and yr="2005 -Current")

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 exp review/
20 (literature adj3 review$).ti,ab.
21 exp meta analysis/
22 exp "Systematic Review"/
23 or/19-22
24 (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
25 RETRACTED ARTICLE/
26 24 or 25
27 23 and 26
28 (systematic$ adj2 (review$ or overview$)).ti,ab.
29 (meta-anal$ or meta anal$ or meta-analysis$).ti,ab.
30 27 or 28 or 29
31 18 and 30
32 behavioral symptoms/
33 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
34 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
35 32 or 33 or 34
36 31 and 35
37 limit 36 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO
1 exp Dementia/
2 exp Huntingtons Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lew* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 (organic brain disease* or "organic brain syndrome").mp.
11 supranuclear palsy*.mp.
12 (normal pressure hydrocephalus and "shunt").mp.
13 "benign senescent forgetfulness").mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 (parkinson* disease dementia* or PDD or "parkinson* dementia").mp.
22 or/1-21
23 limit 22 to "reviews (maximizes specificity)"
24 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
25 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
26 exp Behavior Problems/ or exp Psychiatric Symptoms/
27 24 or 25 or 26
28 23 and 27
29 limit 28 to (human and english language and yr="2008 -Current")

Database: PubMed
Search (((((((Dement* OR wernicke encephalopath* OR Alzheimer* OR lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* ORBinswanger* OR Korsako*) AND English[a]) AND (2005/01/01[PDAT] : "2014/12/31"[PDAT]) NOT Medline[sb]))) AND (((behaviour OR behavior OR neuropsychiat* OR psycholog* OR depress*) Filters: Review

11 (cerebr* adj2 deteriorat*).mp.
12 (cerebr* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 exp review/
20 (literature adj3 review$).ti,ab.
21 exp meta analysis/
22 exp "Systematic Review"/
23 or/19-22
24 (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
25 RETRACTED ARTICLE/
26 24 or 25
27 23 and 26
28 (systematic$ adj2 (review$ or overview$)).ti,ab.
29 (meta-anal$ or meta anal$ or meta-analysis$).ti,ab.
30 27 or 28 or 29
31 18 and 30
32 behavioral symptoms/
33 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
34 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
35 32 or 33 or 34
36 31 and 35
37 limit 36 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO
1 exp Dementia/
2 exp Huntingtons Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lew* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 (organic brain disease* or "organic brain syndrome").mp.
11 supranuclear palsy*.mp.
12 (normal pressure hydrocephalus and "shunt").mp.
13 "benign senescent forgetfulness").mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 (parkinson* disease dementia* or PDD or "parkinson* dementia").mp.
22 or/1-21
23 limit 22 to "reviews (maximizes specificity)"
24 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
25 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
26 exp Behavior Problems/ or exp Psychiatric Symptoms/
27 24 or 25 or 26
28 23 and 27
29 limit 28 to (human and english language and yr="2008 -Current")

Database: PubMed
Search (((((((Dement* OR wernicke encephalopath* OR Alzheimer* OR lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficien* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* ORBinswanger* OR Korsako*) AND English[a]) AND (2005/01/01[PDAT] : "2014/12/31"[PDAT]) NOT Medline[sb]))) AND (((behaviour OR behavior OR neuropsychiat* OR psycholog* OR depress*) Filters: Review

48
Searches for primary studies:
The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycInfo was replaced with a RCT filter (see page 2).
SRQ 16: For people with behavioural and psychological symptoms of dementia, does appropriate drug treatment when compared to placebo produce benefits/harm?

HTA/systematic review searches:

Algesics:

Database: Ovid MEDLINE(R) <1946 to September Week 1 2014>

1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lew*y adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 ("organic brain disease" or "organic brain syndrome").mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psyclit).tw,sh.
23 cinahl.tw,sh.
24 (inhand adj2 search$) or (manual$ adj2 search$).tw,sh.
25 (electronic database$ or bibliographic database$ or computeri?ed database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction of publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analy$ or meta analy$ or metaanaly$.).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitativ$ adj5 review$).tw,sh.
37 (quantitativ$ adj5 overview$).tw,sh.
38 (quantitativ$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Analgesia/
46 Analgesics, Non-Narcotic or Analgesics/ or Analgesics, Short-Acting/ or Analgesics, Opioid/
47 Anti-inflammatory Agents/
48 (paracetamol or acetaminophen).tw.
49 (pain or analges*).ti,ab.
50 45 or 46 or 47 or 48 or 49
51 44 and 50
52 limit 51 to (english language and humans and yr="2005 -Current")

Database: Embase Classic+Embase <1947 to 2014 September 12>

1 exp Dementia/
2 Lewicke encephalopathy/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp. (chronic adj2 cerebrovascular).mp.
9 ("organic brain disease" or "organic brain syndrome").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebral adj2 deteriorat*).mp.
12 (cerebral adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 exp review/
20 (literature adj3 review$).ti,ab.
21 exp meta analysis/
22 exp "Systematic Review"/
23 or/19-22
24 (medline or medlars or embase or pubmed or cinahl or amed or psychlit or psyclit or psychinfo or scisearch or cochrane).ti,ab.
25 RETRACTED ARTICLE/
26 24 or 25
27 23 and 26
28 (systematic$ adj2 (review$ or overview)).ti,ab.
29 (meta?anal$ or meta anal$ or meta -anal$ or metaanal$ or metanal$).ti,ab.
30 27 or 28 or 29
31 18 and 30
32 analgesia/
33 analgesic agent/
34 (pain or analges*).ti,ab.
35 (paracetamol or acetaminophen).tw.
36 32 or 33 or 34 or 35
37 31 and 36
38 limit 37 to (human and english language and exclude medline journals and yr="2005 -Current")

Database: PsycINFO <1806 to September Week 1 2014>

1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluyver Bucy Syndrome/
4 exp Wernicke's Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson* disease dementia" or PDD or "parkinson* dementia").mp.
22 or/1-21
23 limit 22 to "reviews (maximizes specificity)"
24 exp Analgesia/
25 exp Pain Management/ or exp Analgesic Drugs/ or exp Pain/
26 (analges* or pain$).ti,ab.
27 (paracetamol or acetaminophen).tw.
28 24 or 25 or 26 or 27
29 23 and 28
30 limit 29 to (human and english language and yr="2005 -Current")

Other drugs treatments:

Database: Ovid MEDLINE(R) <1946 to November Week 1 2014>

1 exp Dementia/
Wernicke Encephalopathy/
Delirium, Dementia, Amnestic, Cognitive Disorders/
dement*.mp.
'alzheimer*.mp.
(ley* adj2 bod*).mp
(chronic adj2 cerebrovascular).mp.
"organic brain disease" or "organic brain syndrome".mp.
"normal pressure hydrocephalus" and "shunt*".mp.
"benign senescent forgetfulness".mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
"benign senescent forgetfulness".mp.
(crebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
pick*.mp.
(huntington*.mp
binswanger*.mp.
korsako*.mp.
1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17
18 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17
19 serotonin uptake inhibitors/
20 exp antidepressive agents, second-generation/
21 exp tranquilizing agents/
22 exp Hypnotics/ and Sedatives/
23 exp narcotics/
24 22 not 23
25 (antipsychotic* or anxiolytic* or benzodiazepine* or anti?manic or SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*) or antipsychotic* or anxiolytic* or benzodiazepine* or anti?manic or SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*) or antipsychotic* or anxiolytic* or benzodiazepine* or anti?manic or SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*)))).mp.
26 (olanzapine or quetiapine or risperidone or diazepam or lorazepam or oxazepam or clonazepam or carbamazepine or valproate or citalopram or es-citalopram or escitalopram or excitalopram or oxazepam or oxazepam or clonazepam or carbamazepine or valproate or citalopram or es-citalopram or escitalopram or excitalopram or oxazepam or oxazepam or clonazepam or carbamazepine or valproate or citalopram or es-citalopram or escitalopram or excitalopram or oxazepam or oxazepam or clonazepam or carbamazepine or valproate or citalopram or es-citalopram or escitalopram or excitalopram or oxazepam or oxazepam or clonazepam or carbamazepine or valproate).mp.
27 19 or 20 or 21 or 24 or 25 or 26
28 18 and 27
29 (review or review,tutorial or review, academic).pt.
30 (medline or medlars or embase or pubmed or cochrane).tw,sh.
31 (science or psychinfo or psycinfo).tw,sh.
32 (psychlit or psyclit).tw,sh.
33 cinahl.tw,sh.
34 (hand adj2 search$) or (manual$ adj2 search$).tw,sh.
35 (electronic database$ or bibliographic database$ or computeri?ed database$ or online database$).tw,sh.
36 (pooling or pooled or mantel haenszel).tw,sh.
37 (peto or dersimonian or der simonia
 fixed effect).tw,sh.
38 (retraction of publication or retracted publication).pt.
39 or/30-38
40 29 and 39
41 meta-analysis.pt.
42 meta-analysis.sh.
43 (meta-analysis or meta analysis or metaanalys$ or metaanalysis).tw,sh.
44 (systematic$ adj5 review$).tw,sh.
45 (systematic$ adj5 overview$).tw,sh.
46 (quantitative$ adj5 review$).tw,sh.
47 (quantitative$ adj5 overview$).tw,sh.
48 (quantitative$ adj5 synthesis$).tw,sh.
49 (methodologic$ adj5 review$).tw,sh.
50 (methodologic$ adj5 overview$).tw,sh.
51 (integrative research review$ or research integration).tw.
52 or/41-51
53 40 or 52
54 28 and 53
55 limit 54 to (english language and humans and yr="2005 -Current")
56 Behavioral Symptoms/
57 "behaviour* or behaviour* or BPSD or psychologic*".ti,ab.
58 ("aberrant motor behaviour* or "abberant motor behaviour* or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irriabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown*).ti,ab.
59 56 or 57 or 58
60 55 and 59

Database: Embase Classic+Embase <1947 to 2014 November 14>
1 exp antidepressant agent/
2 exp tricyclic antidepressant agent/
3 (#1 not #2).mp. [mp=title, abstract, subject headings, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword]
4 1 not 2
5 exp atypical antipsychotic agent/
6 exp anxiolytic agent/
7 exp hypnotic sedative agent/
carbamazepine/
4 or 5 or 6 or 7 or 8
(antipsychotic* or anxiolytic* or benzodiazepine* or anti?manic or SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*))).mp.
(clonazepam or quetiapine or risperidone or diazepam or lorazepam or oxazepam or clonazepam or carbamazepine or valproate or citalopram or es-citalopram or fluoxetine or fluvoxamine or paroxetine or sertraline or venlafaxine or duloxetine or desvenlafaxine or mirtazapine or melatonin).mp.
9 or 10 or 11
exp dementia/
Lewy body/
Wernicke encephalopathy/
cognitive defect/
dement*.mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
"normal pressure hydrocephalus" and "shunt*").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
"creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
30 or/13-29
exp review/
(literature adj3 review$).ti,ab.
exp meta analysis/
exp "Systematic Review"/
31-34
35 and 36
37 RETRACTED ARTICLE/
38 or/36-37
39 and 38
(systematic$ adj2 (review$ or overview)).ti,ab.
(meta?anal$ or meta anal$ or metaanal$ or metanal$).ti,ab.
39 or 40 or 41
32 and 30 and 42
limit 43 to (human and english language and yr="2005 -Current")
behavior disorder/ or abnormal behavior/ or disruptive behavior/ or psychomotor disorder/ or psychosocial disorder/ or exp behavior/
behavior* or behaviour* or BPSD or psychologic*).ti,ab.
("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
45 or 46 or 47
49 and 48
limit 49 to (human and english language and yr="2005 -Current")
51 limit 50 to exclude medline journals

Database: PsycINFO <1806 to November Week 2 2014>
1 exp Dementia/
2 exp Huntingtons Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernickes Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 bod*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt*").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19  binswanger*.mp.
20  korsako*.mp.
21  ("parkinson* disease dementia" or PDD or "parkinson* dementia").mp.
22  or/1-21
23  exp antidepressant drugs/
24  exp tricylic antidepressant drugs/
25  23 not 24
26  exp neuroleptic drugs/ or exp minor tranquilizers/ or benzodiazepines/
27  carbamazepine/ or valproic acid.
28  exp serotonin reuptake inhibitors/
29  (antipsychotic* or anxiolytic* or benzodiazepine* or anti?manic or SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*)))).mp.
30  (olanzapine or quetiapine or risperidone or diazepam or lorazepam or oxazepam or clonazepam or carbamazepine or valproate or citalopram or es-citalopram or fluoxetine or fluvoxamine or paroxetine or sertraline or venlafaxine or duloxetine or desvenlafaxine or mirtazapine or melatonin).mp.
31  25 or 26 or 27 or 28 or 29 or 30
32  22 and 31
33  behaviour problems/ or aggressive behaviour/ or psychiatric symptoms/ or mental disorders/ or sleep disorders/ or wandering behavior/ or antisocial behavior/
34  (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
35  (aberrant motor behaviour* or abberant motor behaviour or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown*).ti,ab.
36  33 or 34 or 35
37  32 and 36
38  limit 37 to (human and english language and "reviews (maximizes specificity)" and yr="2005 -Current")

Searches for primary studies:

Database: Ovid MEDLINE(R) <1946 to November Week 3 2014>
1  exp Dementia/
2  Wernicke Encephalopathy/
3  Delirium, Dementia, Amnestic, Cognitive Disorders/
4  dement*.mp.
5  alzheimer*.mp.
6  (lewy* adj2 bod*).mp.
7  (chronic adj2 cerebrovascular).mp.
8  ("organic brain disease" or "organic brain syndrome").mp.
9  ("normal pressure hydrocephalus" and "shunt").mp.
10  (benign senescent forgetfulness").mp.
11  (cerebr* adj2 deteriorat*).mp.
12  (cerebral* adj2 insufficient*).mp.
13  (pick* adj2 disease).mp.
14  (creutzfeldt or jcd or cjd).mp.
15  huntington*.mp.
16  binswanger*.mp.
17  korsako*.mp.
18  1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17
19  exp antipsychotic agents/
20  antipsychotic*.mp.
21  (aripiprazole or olanzapine or quetiapine or risperidone).mp.
22  or/19-21
23  limit 22 to yr="2011 -Current"
24  haloperidol/ or haloperidol.mp.
25  limit 24 to yr="2005 -Current"
26  exp antidepressive agents/
27  exp antidepressive agents, tricyclic/
28  26 not 27
29  (SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*))).mp.
30  (citalopram or es-citalopram or fluoxetine or fluvoxamine or paroxetine or sertraline or venlafaxine or duloxetine or desvenlafaxine or mirtazapine).mp.
31  28 or 29 or 30
32  limit 31 to yr="2009 -Current"
33  antimanic agents/
34  anti?manic.mp.
35  (carbamazepine or valpro$3).mp.
36  33 or 34 or 35
37  limit 36 to yr="2011 -Current"
38  exp anti-anxiety agents/
39  exp benzodiazepines/ or benzodiazep*.mp.
40  (diazepam or lorazepam or oxazepam or clonazepam).mp.
38 or 39 or 40
39 limit 41 to yr="2005 -Current"
40 melatonin/ or melatonin.mp.
41 limit 43 to yr="2009 -Current"
42 23 or 25 or 32 or 37 or 42 or 44
43 randomized controlled trial).pt.
44 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
45 (retraction of publication or retracted publication).pt.
46 46 or 47 or 48
47 (animals not humans).sh.
48 ((comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial").pt.
49 (random sample$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
50 49 not (50 or 51 or 52)
51 exp Behavioral Symptoms/
52 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
53 54 or 55 or 56
54 18 and 45 and 53 and 57
55 (animals not humans).sh.
56 Database: Ovid MEDLINE(R) <1946 to November Week 3 2014>
57 exp Dementia/
58 Wernicke Encephalopathy/
59 Delirium, Dementia, Amnestic, Cognitive Disorders/
60 dement*.mp.
61 alzheimer*.mp.
62 (lewy* adj2 bod*).mp.
63 (chronic adj2 cerebrovascular).mp.
64 ("organic brain disease" or "organic brain syndrome").mp.
65 ("normal pressure hydrocephalus" and "shunt").mp.
66 "benign senescent forgetfulness".mp.
67 (cerebr* adj2 deteriorat*).mp.
68 (cerebral* adj2 insufficient*).mp.
69 (pick* adj2 disease).mp.
70 huntington*.mp.
71 binswanger*.mp.
72 korsako*.mp.
73 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17
74 (mirtazapine or mianserin or mocllobemide or agomelatine or reboxetine).mp.
75 exp antidepressive agents/
76 exp antidepressive agents, tricyclic/
77 serotomin uptake inhibitors/
78 20 not 21 not 22
79 19 or 23
80 "randomized controlled trial").pt.
81 (random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
82 (retraction of publication or retracted publication).pt.
83 25 or 26 or 27
84 (animals not humans).sh.
85 ((comment or editorial or meta-analysis or practice-guideline or review or letter or journal correspondence) not "randomized controlled trial").pt.
86 (random sample$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
87 28 not (29 or 30 or 31)
88 exp Behavioral Symptoms/
89 (behaviour* or behaviour* or BPSD or psychologic*).ti,ab.
90 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
91 33 or 34 or 35
92 18 and 24 and 32 and 36
93 limit 37 to (english language and humans and yr="2005 -2008")
Database: Embase Classic+Embase <1947 to 2014 November 26>
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 ("organic brain disease" or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 ("normal pressure hydrocephalus" and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or jcd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 or/1-17
18 exp atypical antipsychotic agent/
19 antipsychotic*.mp.
20 (aripiprazole or olanzapine or quetiapine or risperidone).mp.
21 19 or 20 or 21
22 limit 22 to yr="2011 -Current"
23 haloperidol/ or hapoleridol.mp.
24 limit 24 to yr="2005 -Current"
25 exp antidepressant agent/
26 exp tricyclic antidepressant agent/
27 26 not 27
28 (SSRI* or SNRI* or (serotonin adj3 (reuptake adj3 inhibitor*)).mp.
29 (citalopram or escitalopram or fluoxetine or fluvoxamine or paroxetine or sertraline or venlafaxine or duloxetine or desvenlafaxine or mirtazapine).mp.
30 28 or 29 or 30
31 limit 31 to yr="2009 -Current"
32 exp anticonvulsive agent/
33 (anti?manic or "mood stabil?er").mp.
34 (carbamazepine or valpro$3).mp.
35 33 or 34 or 35
36 limit 36 to yr="2011 -Current"
37 exp anxiolytic agent/
38 exp benzodiazepine derivative/ or benzodiazep*.mp.
39 (diazepam or lorazepam or oxazepam or clonazepam).mp.
40 38 or 39 or 40
41 limit 41 to yr="2009 -Current"
42 melatonin/ or melatonin.mp.
43 limit 43 to yr="2009 -Current"
44 23 or 25 or 32 or 37 or 42 or 44
45 18 and 45
46 (random$ or placebo$ or single blind$ or double blind$ or random effect$).ti,ab.
47 46 RETRACTED ARTICLE/
48 or/47-48
49 (animal$ not human$).sh,hw.
50 (book or conference paper or editorial or letter or review).pt. not exp randomized controlled trial/
51 (random samp$ or random digit$ or random effect$ or random survey or random regression).ti,ab. not exp randomized controlled trial/
52 49 not (50 or 51 or 52)
53 18 and 45 and 53
54 49 not (50 or 51 or 52)
55 behavior disorder/ or abnormal behavior/ or disruptive behavior/ or psychomotor disorder/ or psychosocial disorder/ or exp behavior/
56 (behavior* or behavior* or BPSD or psychologic*).ti,ab.
57 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritab* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown).ti,ab.
58 55 or 56 or 57
59 54 and 58
60 limit 59 to (human and english language and exclude medline journals)

Database: Embase Classic+Embase <1947 to 2015 January 09>
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
dement*.mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
or/1-17
(mirtazapine or mianserin or moclobemide or agomelatine or reboxetine).mp.
exp antidepressant agent/
exp tricyclic antidepressant agent/
exp serotonin uptake inhibitor/
20 not 21 not 22
19 or 23
(random$ or placebo$ or single blind$ or double blind$ or triple blind$).ti,ab.
retracted article/
or/25-26
27 not (28 or 29 or 30)
(behavior disorder/ or abnormal behavior/ or disruptive behavior/ or psychomotor disorder/ or psychosocial disorder/ or exp behavior/)
(behaviour* or behavior* or BPSD or psychologic*).ti,ab.
23 and 24 and 25 and 31 and 35
limit 36 to (human and english language and exclude medline journals and yr="2005 - 2008")

Database: PsycINFO <1806 to November Week 4 2014>
exp Dementia/
exp Huntingtons Disease/
exp Kluver Bucy Syndrome/
exp Wernickes Syndrome/
exp Cognitive Impairment/
dement*.mp.
alzheimer*.mp.
(leyw* adj2 bod*).mp.
(chronic adj2 cerebrovascular).mp.
("organic brain disease" or "organic brain syndrome").mp.
"supranuclear palsy".mp.
("normal pressure hydrocephalus" and "shunt").mp.
"benign senescent forgetfulness".mp.
(cerebr* adj2 deteriorat*).mp.
(cerebral* adj2 insufficient*).mp.
(pick* adj2 disease).mp.
(creutzfeldt or jcd or cjd).mp.
huntington*.mp.
binswanger*.mp.
korsako*.mp.
("parkinson* disease dementia" or PDD or "parkinson* dementia").mp.
or/1-21
exp neuroleptic drugs/
exp antipsychotic*.mp.
(anipiprazole or olanzapine or quetiapine or risperidone).mp.
22 or 23 or 24 or 25
limit 26 to yr="2011 -Current"
haloperidol/ or hapoleridol.mp.
28 or 29 to yr="2005 -Current"
exp antidepressant drugs/
exp tricyclic antidepressant drugs/
30 not 31
(SSRI* or SNRI* or (serotonin adj3 (reuptake adj inhibitor*)).mp.
(citalopram or escitalopram or fluoxetine or fluvoxamine or paroxetine or sertraline or venlafaxine or duloxetine or desvenlafaxine or mirtazapine).mp.
35 32 or 33 or 34
36 limit 35 to yr="2009 -Current"
37 mood stabilizers/ or carbamazepine/ or valproic acid/
38 (anti?manic or "mood stabil?er").mp.
39 (carbamazepine or valproS3).mp.
40 37 or 38 or 39
41 limit 40 to yr="2011 -Current"
42 exp minor tranquilizers/
43 exp benzodiazepines/ or benzodiazip*.mp.
44 (diazepam or lorazepam or oxazepam or clonazepam).mp.
45 42 or 43 or 44
46 limit 45 to yr="2005 -Current"
47 melatonin/ or melatonin.mp.
48 limit 47 to yr="2009 -Current"
49 27 or 29 or 36 or 41 or 46 or 48
50 22 and 49
51 double-blind.tw.
52 randomised.mp. or randomized.tw.
53 randomly assigned.tw.
54 51 or 52 or 53
55 50 and 54
56 behaviour problems/ or aggressive behaviour/ or psychiatric symptoms/ or mental disorders/ or sleep disorders/ or wandering behavior/ or antisocial behavior/
57 ("aberrant motor behaviour" or "abberant motor behaviour" or agitat* or aggress* or anxiety or apathy or delusion* or depression or depressive or disruptive or euphoria or hallucination* or irritabil* or labil* or mood or defiant or psychosis or restlessness or sociopathy or sleep or "verbal hostility" or violence or wandering or hoarding or screaming or vocalisation or vocalization or disinhibition or sundown").ti,ab.
59 56 or 57 or 58
60 55 and 59
61 limit 60 to (human and english language)
SRQ 17: Does assessment or intervention for carers produce benefits?

HTA/systematic review searches:

Database: Ovid MEDLINE(R)
1 exp Dementia/
2 Wernicke Encephalopathy/
3 Delirium, Dementia, Amnestic, Cognitive Disorders/
4 dement*.mp.
5 alzheimer*.mp.
6 (lewy* adj2 bod*).mp.
7 (chronic adj2 cerebrovascular).mp.
8 (*organic brain disease* or "organic brain syndrome").mp.
9 (*normal pressure hydrocephalus* and "shunt*").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
12 (cerebral* adj2 insufficient*).mp.
13 (pick* adj2 disease).mp.
14 (creutzfeldt or cjd or cjd).mp.
15 huntington*.mp.
16 binswanger*.mp.
17 korsako*.mp.
18 or/1-17
19 (review or review,tutorial or review, academic).pt.
20 (medline or medlars or embase or pubmed or cochrane).tw,sh.
21 (scisearch or psychinfo or psycinfo).tw,sh.
22 (psychlit or psycit).tw,sh.
23 cinahl.tw,sh.
24 [(hand adj2 search$) or (manual$ adj2 search$)].tw,sh.
25 (electronic database$ or bibliographic database$ or computer?ed database$ or online database$).tw,sh.
26 (pooling or pooled or mantel haenszel).tw,sh.
27 (peto or dersimonian or der simonian or fixed effect).tw,sh.
28 (retraction or publication or retracted publication).pt.
29 or/20-28
30 19 and 29
31 meta-analysis.pt.
32 meta-analysis.sh.
33 (meta-analysis$ or meta analy$ or metaanalys$).tw,sh.
34 (systematic$ adj5 review$).tw,sh.
35 (systematic$ adj5 overview$).tw,sh.
36 (quantitative$ adj5 review$).tw,sh.
37 (quantitative$ adj5 overview$).tw,sh.
38 (quantitative$ adj5 synthesis$).tw,sh.
39 (methodologic$ adj5 review$).tw,sh.
40 (methodologic$ adj5 overview$).tw,sh.
41 (integrative research review$ or research integration).tw.
42 or/31-41
43 30 or 42
44 18 and 43
45 Caregivers/
46 (family or caregiver* or carer*).ti,ab.
47 (assess* or treatment* or therap* or counsel* or intervention* or support or support group* or psychosocial* or nonpharmacologic* or relax* or educat* or psychoeducat* or advice).ti,ab.
48 46 and 47
49 45 or 48
50 44 and 49
51 limit 50 to (english language and humans and yr="2005 - 2014")

Database: Embase Classic+Embase
1 exp dementia/
2 Lewy body/
3 Wernicke encephalopathy/
4 cognitive defect/
5 dement*.mp.
6 (chronic adj2 cerebrovascular).mp.
7 (*organic brain disease* or "organic brain syndrome").mp.
8 "supranuclear palsy".mp.
9 (*normal pressure hydrocephalus* and "shunt").mp.
10 "benign senescent forgetfulness".mp.
11 (cerebr* adj2 deteriorat*).mp.
Database: PsycINFO
1 exp Dementia/
2 exp Huntington's Disease/
3 exp Kluver Bucy Syndrome/
4 exp Wernicke Syndrome/
5 exp Cognitive Impairment/
6 dement*.mp.
7 alzheimer*.mp.
8 (lewy* adj2 body*).mp.
9 (chronic adj2 cerebrovascular).mp.
10 ("organic brain disease" or "organic brain syndrome").mp.
11 "supranuclear palsy".mp.
12 ("normal pressure hydrocephalus" and "shunt").mp.
13 "benign senescent forgetfulness".mp.
14 (cerebr* adj2 deteriorat*).mp.
15 (cerebral* adj2 insufficient*).mp.
16 (pick* adj2 disease).mp.
17 (creutzfeldt or jcd or cjd).mp.
18 huntington*.mp.
19 binswanger*.mp.
20 korsako*.mp.
21 ("parkinson" disease dementia* or PDD or "parkinson" dementia*).mp.
22 or/1-21
23 limit 22 to "reviews (maximizes specificity)"
24 exp Caregivers/
25 (family or caregiver* or carer*).ti,ab.
26 (assess* or treatment* or therap* or counsel* or intervention* or support or support group* or psychosocial* or nonpharmacologic* or relax* or educat* or psychoeducat* or advice).ti,ab.
27 25 and 26
28 24 or 27
29 23 and 28

Database: PubMed
Search (((((family OR caregiver OR carer)[Title/Abstract])) AND (assess OR treat OR therapy OR counsel OR intervention OR support OR support group OR psychosocial OR nonpharmacologic OR relax OR educate OR psychoeduc OR advice)[Title/Abstract]))) AND (((Dement* OR wernicke encephalopath* OR Alzheimer* OR lewy bod* OR "organic brain disease" OR "organic brain syndrome" OR "normal pressure hydrocephalus" AND shunt*) OR "benign senescent forgetfulness" OR cerebral deteriorat* OR cerebral insufficient* OR Pick* disease OR creutzfeldt OR JCD OR CJD OR Huntington* OR Binswanger* OR Korsako*) AND English[la] AND ("2005/01/01"[PDAT] : "2014/12/31"[PDAT]) NOT Medline[sb])) Filters: Review
Searches for primary studies:
The searches were re-run but the systematic review filter (i.e. lines 19-43 Medline, 19-30 EMBASE and line 23 in PsycInfo was replaced with a RCT filter (see page 2).
ADAPTE Appraisal of NICE Guideline

The NICE Guideline was published in 2006 and lists 29 “key questions”. Each of the questions was addressed in a different way in terms of the search for associated evidence. Details of each of the questions, the methods used to answer the questions and the validity, applicability and acceptability of the related recommendations were rated by the project officer and systematic reviewer using the tools within the ADAPTE toolkit [1]. These appraisals are reported below.

NICE QUESTION: FOR PEOPLE WITH DEMENTIA, WHAT TYPE OF INFORMATION AND SUPPORT IS HELPFUL/UNHELPFUL?

Details: NICE searched a large number of databases (listed within the guideline) from inception to March 2006 for RCTs (quantitative and qualitative research). The search terms do not appear to be reported.

<table>
<thead>
<tr>
<th>P</th>
<th>People with all forms of dementia</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Educational interventions – 1. Any programme involving interaction between information provider and person with dementia or family. 2. People with dementia and/or families are provided with support, information and management strategies. 3. To be considered as well defined, the educational strategy should be tailored to the need of individuals or families</td>
</tr>
<tr>
<td>C</td>
<td>not stated</td>
</tr>
<tr>
<td>O</td>
<td>perceived benefit, reduced distress, greater knowledge, better ability to access services</td>
</tr>
</tbody>
</table>

Findings: Two trials (Clark2004 RCT, Eloniemi2001 RCT) detailed in Appendix 15i which included information and support as one aspect of their multifactorial intervention. The qualitative review did not identify evidence on experiences of people with dementia and their carers of educational interventions for people with dementia.

No specific recommendations made in response to this question and the lack of evidence available is highlighted. See section 9.2

Scientific validity of guidelines

<table>
<thead>
<tr>
<th>Overall, the evidence was valid</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given the search strategy, the risk that relevant evidence has been missed is low</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria for selecting the evidence is explicit</td>
<td>No</td>
</tr>
<tr>
<td>Settings and protocols of selected studies fit with the health question</td>
<td>No</td>
</tr>
<tr>
<td>Outcomes were clinically sound</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria used for assessing the quality and validity of the selected studies are adequately reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The risk that biased evidence has been reported is low</td>
<td>Yes</td>
</tr>
<tr>
<td>When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed</td>
<td>NA</td>
</tr>
<tr>
<td>Coherence between the evidence and recommendations</td>
<td>No</td>
</tr>
<tr>
<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
<td>No</td>
</tr>
<tr>
<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
<td>No</td>
</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>Yes</td>
</tr>
</tbody>
</table>
The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly | No
---|---
There is some justification to recommend/not recommend the intervention even though the evidence is weak | No
The hierarchy of strength of evidence is adequately described | No
Overall, the scientific quality of this recommendation does not present risks of bias | No
The strength of evidence attributed to the recommendation is adequately described and justified | No
Risks and benefits have been weighed | No

**Acceptability/Applicability**

| Overall, the recommendation is acceptable | Yes |
| The strength of evidence and the magnitude of effect adequately support the grade of the recommendation | No |
| There is sufficient benefit of the intervention, compared with other available management | Yes |
| The recommendation is compatible with the culture and values in the setting where it is to be used | Yes |
| Overall, the recommendation is applicable | Yes |
| The intervention is applicable to the patients in the context of use | Yes |
| The intervention/equipment is available in the context of use | Yes |
| The necessary expertise is available in the context of use | Yes |
| There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation | Yes |

**NICE QUESTION: FOR PEOPLE WITH DEMENTIA, DO INTERVENTIONS FOR CARERS WHEN COMPARED TO ‘STANDARD CARE’/NO SUPPORT PRODUCE BENEFITS/HARM IN THE SPECIFIED OUTCOMES?**

Details: Search of multiple databases until 2006 for RCTs and other quantitative and qualitative research

| P | People with all forms of dementia. Carers of people with all forms of dementia |
| I | Assessment, family.carer support, education interventions, psychoeducational interventions, CBT, Counselling, Multicomponent interventions, Employment/financial/welfare/benefits advice, legal advice, carer equal opportunities (employment, education, leisure) |
| C | ‘standard care’, no support/intervention |
| O | For the person with dementia: psychological well being, quality of life, maintenance of independent living activities, delayed admission, neuropsychiatric symptoms. For the carer: psychological well being, carer burden, social outcomes, physiological measures, carer knowledge, carer equal opportunities (employment, education, leisure) |

Details: Two SRs and 25 new trials met the eligibility criteria. An additional 11 studies were excluded from the analysis (all included and excluded studies reported in Appendix 15j). Trials were categorised as per those used by Sorensen and colleagues (2002). Meta-analyses within the 2 SRs
were supplemented by the additional data within the new studies. Five studies were found that related to health economics however it was not possible to generalise to the UK setting.

### Scientific validity of guidelines

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, the evidence was valid</td>
<td>Yes</td>
</tr>
<tr>
<td>Given the search strategy, the risk that relevant evidence has been missed is low</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria for selecting the evidence is explicit</td>
<td>No</td>
</tr>
<tr>
<td>Settings and protocols of selected studies fit with the health question</td>
<td>Yes</td>
</tr>
<tr>
<td>Outcomes were clinically sound</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria used for assessing the quality and validity of the selected studies are adequately reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The risk that biased evidence has been reported is low</td>
<td>Yes</td>
</tr>
<tr>
<td>When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed</td>
<td>Unsure</td>
</tr>
<tr>
<td>Coherence between the evidence and recommendations</td>
<td>Yes</td>
</tr>
<tr>
<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
<td>Yes</td>
</tr>
<tr>
<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>Yes</td>
</tr>
<tr>
<td>The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly</td>
<td>No</td>
</tr>
<tr>
<td>There is some justification to recommend/not recommend the intervention even though the evidence is weak</td>
<td>Yes</td>
</tr>
<tr>
<td>The hierarchy of strength of evidence is adequately described</td>
<td>Yes</td>
</tr>
<tr>
<td>Overall, the scientific quality of this recommendation does not present risks of bias</td>
<td>Yes</td>
</tr>
<tr>
<td>The strength of evidence attributed to the recommendation is adequately described and justified</td>
<td>Yes</td>
</tr>
<tr>
<td>Risks and benefits have been weighed</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Acceptability/Applicability

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, the recommendation is acceptable</td>
<td>Yes</td>
</tr>
<tr>
<td>The strength of evidence and the magnitude of effect adequately support the grade of the recommendation</td>
<td>Yes</td>
</tr>
<tr>
<td>There is sufficient benefit of the intervention, compared with other available management</td>
<td>Yes</td>
</tr>
<tr>
<td>The recommendation is compatible with the culture and values in the setting where it is to be used</td>
<td>Yes</td>
</tr>
<tr>
<td>Overall, the recommendation is applicable</td>
<td>Yes</td>
</tr>
<tr>
<td>The intervention is applicable to the patients in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>The intervention/equipment is available in the context of use</td>
<td>Unsure – varies</td>
</tr>
<tr>
<td>The necessary expertise is available in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation</td>
<td>Unsure - varies</td>
</tr>
</tbody>
</table>
**NICE QUESTION: ARE THERE ADVANTAGES/DISADVANTAGES TO EARLY IDENTIFICATION?**

Details: Searched multiple databases to 2006 for quantitative and qualitative research including cohort study. Full search strategy detailed in appendix 13a.

<table>
<thead>
<tr>
<th>P</th>
<th>Asymptomatic population, people with learning disabilities, people with MCI, people with other neurological problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Early diagnosis vs later diagnosis. Include key symptoms that trigger identification (and are they consistent across all types of dementia), screening instruments</td>
</tr>
<tr>
<td>C</td>
<td>No diagnosis or “standard care (ie clinical judgement)”</td>
</tr>
<tr>
<td>O</td>
<td>Advantages/disadvantages such as: early interventions (eg treating causes to prevent further/rapid deterioration), improving quality of life, better planned care, improved support for carers, less illness amongst carers. Include disadvantages such as loss of driving license, social impact etc. Identification (sensitivity/specificity of the symptoms).</td>
</tr>
</tbody>
</table>

The guidelines provide a narrative summary of information (See section 6.3.1) and reported that they were unable to identify any studies related to health economics. Recommendations are made in section 6.6.3

**Scientific validity of guidelines**

<table>
<thead>
<tr>
<th>Overall, the evidence was valid</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given the search strategy, the risk that relevant evidence has been missed is low</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria for selecting the evidence is explicit</td>
<td>Yes</td>
</tr>
<tr>
<td>Settings and protocols of selected studies fit with the health question</td>
<td>Yes</td>
</tr>
<tr>
<td>Outcomes were clinically sound</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria used for assessing the quality and validity of the selected studies are adequately reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The risk that biased evidence has been reported is low</td>
<td>Yes</td>
</tr>
<tr>
<td>When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed</td>
<td>NA</td>
</tr>
<tr>
<td>Coherence between the evidence and recommendations</td>
<td>Unsure</td>
</tr>
<tr>
<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
<td>Unsure (MCI recommendation unclear)</td>
</tr>
<tr>
<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
<td>Unsure</td>
</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>Unsure</td>
</tr>
<tr>
<td>The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly</td>
<td>Unsure</td>
</tr>
<tr>
<td>There is some justification to recommend/not recommend the intervention even though the evidence is weak</td>
<td>Yes</td>
</tr>
<tr>
<td>The hierarchy of strength of evidence is adequately described</td>
<td>No</td>
</tr>
<tr>
<td>Overall, the scientific quality of this recommendation does not present risks of bias</td>
<td>Yes</td>
</tr>
<tr>
<td>The strength of evidence attributed to the recommendation is adequately described and justified</td>
<td>Yes</td>
</tr>
<tr>
<td>Risks and benefits have been weighed</td>
<td>Unsure</td>
</tr>
</tbody>
</table>
### Acceptability/Applicability

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, the recommendation is acceptable</td>
<td></td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>The strength of evidence and the magnitude of effect adequately support the grade of the recommendation</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is sufficient benefit of the intervention, compared with other available management</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The recommendation is compatible with the culture and values in the setting where it is to be used</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall, the recommendation is applicable</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The intervention is applicable to the patients in the context of use</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The intervention/equipment is available in the context of use</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The necessary expertise is available in the context of use</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### NICE QUESTION: WHAT SHOULD THE ASSESSMENT PROCESS TO DIAGNOSE DEMENTIA CONSIST OF (FOR EXAMPLE, MRI, PET, CT AND SPECT, BLOOD BATTERY, PROTOCOL, INFORMANT HISTORY, PHYSICAL EXAMINATION, EEG AND COMPREHENSIVE COGNITIVE TESTING)?

Details: Multiple databases were searched for RCTs, descriptive studies, case series and cohort studies.

<table>
<thead>
<tr>
<th>P</th>
<th>Symptomatic people – people with suspected diagnosis of dementia</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>MRIs, PET, CT and SPECT, blood battery, protocol, informant history, physical examination, EEG, comprehensive cognitive testing, biopsy, spinal fluid analysis (CSF analysis). Referral to specialist service for assessment and diagnosis (includes memory clinics). Assessment for non-cognitive symptoms (eg depression, psychosis)</td>
</tr>
<tr>
<td>C</td>
<td>Not assessing, or omitting a part of the assessment. No referral to specialist service for assessment and diagnosis. No assessment for non-cognitive symptoms (eg depression, psychosis)</td>
</tr>
<tr>
<td>O</td>
<td>Advantages/ disadvantages, such as: early interventions (such as treating causes to prevent further/rapid deterioration), improving quality of life, better planned care, improved support for carers, less illness amongst carers (etc). Include disadvantages such as loss of driving license, social impact etc. Identification (sensitivity/specificity). Diagnostic accuracy/differential diagnostic power</td>
</tr>
</tbody>
</table>

Studies relevant to the question were summarised as a narrative review. Multiple recommendations were made as below. It is unclear how the evidence was transformed into the recommendations.

### Scientific validity of guidelines

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, the evidence was valid</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Given the search strategy, the risk that relevant evidence has been missed is low</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The criteria for selecting the evidence is explicit</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Settings and protocols of selected studies fit with the health question</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outcomes were clinically sound</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The criteria used for assessing the quality and validity of the selected studies are</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>adequacy reported</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The risk that biased evidence has been reported is low</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coherence between the evidence and recommendations</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensitivity analysis and test of heterogeneity was performed</td>
<td>NA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is some justification to recommend/not recommend the intervention even though the evidence is weak</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The hierarchy of strength of evidence is adequately described</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall, the scientific quality of this recommendation does not present risks of bias</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The strength of evidence attributed to the recommendation is adequately described and justified</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Risks and benefits have been weighed</td>
<td>Unsure</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Acceptability/Applicability**

<table>
<thead>
<tr>
<th>Overall, the recommendation is acceptable</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>The strength of evidence and the magnitude of effect adequately support the grade of the recommendation</td>
<td>Unsure</td>
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<tr>
<td>There is sufficient benefit of the intervention, compared with other available management</td>
<td>Unsure</td>
</tr>
<tr>
<td>The recommendation is compatible with the culture and values in the setting where it is to be used</td>
<td>Unsure</td>
</tr>
<tr>
<td>Overall, the recommendation is applicable</td>
<td>Yes</td>
</tr>
<tr>
<td>The intervention is applicable to the patients in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>The intervention/equipment is available in the context of use</td>
<td>Yesa</td>
</tr>
<tr>
<td>The necessary expertise is available in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation</td>
<td>Yes</td>
</tr>
</tbody>
</table>
NICE QUESTION: WHAT ARE THE CHARACTERISTICS OF THE PROCESS OF ASSESSMENT AND DIAGNOSIS ASSOCIATED WITH A POSITIVE OR NEGATIVE EXPERIENCE OF THE ASSESSMENT PROCESSES?

Details: Search of multiple databases up to 2006 for qualitative research and other RCTs

<table>
<thead>
<tr>
<th>P</th>
<th>People with dementia and suspected dementia. People with dementia and their carers who are undergoing assessment and diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Questions is about characteristics of the assessment and diagnosis process. Counselling for patients and carers during the assessment process and in the early post-diagnostic period</td>
</tr>
<tr>
<td>C</td>
<td>“standard care”, no counselling</td>
</tr>
<tr>
<td>O</td>
<td>Negative experiences, Positive experiences. Characteristics of good information and effective support for people with dementia and their carers. Advantages/disadvantages, such as: improving quality of life, better planned care, improved support for carers, less illness/depression amongst carers etc. Include disadvantages such as loss of driving license, social impact.</td>
</tr>
</tbody>
</table>

Findings are summarised in a narrative review.

**Scientific validity of guidelines**

<table>
<thead>
<tr>
<th>Overall, the evidence was valid</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given the search strategy, the risk that relevant evidence has been missed is low</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria for selecting the evidence is explicit</td>
<td>Yes</td>
</tr>
<tr>
<td>Settings and protocols of selected studies fit with the health question</td>
<td>NA</td>
</tr>
<tr>
<td>Outcomes were clinically sound</td>
<td>NA</td>
</tr>
<tr>
<td>The criteria used for assessing the quality and validity of the selected studies are adequately reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The risk that biased evidence has been reported is low</td>
<td>Yes</td>
</tr>
<tr>
<td>When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed</td>
<td>NA</td>
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<td>Coherence between the evidence and recommendations</td>
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</tr>
<tr>
<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
<td>NA</td>
</tr>
<tr>
<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
<td>NA</td>
</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>NA</td>
</tr>
<tr>
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<td>There is some justification to recommend/not recommend the intervention even though the evidence is weak</td>
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</tr>
<tr>
<td>The hierarchy of strength of evidence is adequately described</td>
<td>No</td>
</tr>
<tr>
<td>Overall, the scientific quality of this recommendation does not present risks of bias</td>
<td>NA</td>
</tr>
<tr>
<td>The strength of evidence attributed to the recommendation is adequately described and justified</td>
<td>NA</td>
</tr>
<tr>
<td>Risks and benefits have been weighed</td>
<td>Unsure</td>
</tr>
</tbody>
</table>
Acceptability/Applicability

| Overall, the recommendation is acceptable | NA |
| The strength of evidence and the magnitude of effect adequately support the grade of the recommendation | NA |
| There is sufficient benefit of the intervention, compared with other available management | NA |
| The recommendation is compatible with the culture and values in the setting where it is to be used | NA |
| Overall, the recommendation is applicable | NA |
| The intervention is applicable to the patients in the context of use | NA |
| The intervention/equipment is available in the context of use | NA |
| The necessary expertise is available in the context of use | NA |
| There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation | NA |

NICE QUESTION: FOR PEOPLE WITH DEMENTIA, DO ACETYLCHOLINESTERASE INHIBITING DRUGS/MEMANTINE WHEN COMPARED TO [AN APPROPRIATE COMPARATOR] PRODUCE BENEFITS/HARM IN THE SPECIFIED OUTCOMES?

Details: The NICE Guideline based their recommendation on the 2012 NICE HTA report and subsequently updated their recommendations in 2012.

| P | Vascular dementia/ dementia with Lewy bodies/ Parkinson’s Disease plus dementia/ Frontotemporal dementia/ other dementias (subcortical, mixed dementias)/MCI/Down’s syndrome and other learning disabilities plus dementia |
| I | Placebo; active comparator (e.g. aspirin or a hypertensive drug); another cholinesterase inhibitor; management without cholinesterase inhibitors |
| C | Donepezil, galantamine, rivastigmine, memantine |
| O | Improvement on a score of a cognitive function test (e.g. MMSE, ADAS-Cog) |
| | Improvement on ADL test score (e.g. ADL, IADL, BGP, NOSGER) |
| | Reduction in carer stress (e.g. Carer Burden Scale) |
| | Delay in time to 24 hour care |
| | Subjective improvement in quality of life |
| | Global rating scale (e.g. CIBC-Plus, CGIC, SCAG, GDS) |
| | Side effects (e.g. Extrapyramidal symptom rating scale, treatment emergent symptom scale, targeting abnormal kinetic effects) |
| | Leaving the study early |

Scientific validity of guidelines

| Overall, the evidence was valid | Yes |
| Given the search strategy, the risk that relevant evidence has been missed is low | Yes |
| The criteria for selecting the evidence is explicit | Yes |
| Settings and protocols of selected studies fit with the health question | Yes |
| Outcomes were clinically sound | Yes |
| The criteria used for assessing the quality and validity of the selected studies are adequately reported | Yes |
| The risk that biased evidence has been reported is low | Yes |
When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed | Yes
---|---
**Coherence between the evidence and recommendations** | Yes
The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation | Yes
Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported | Yes
The conclusions are clinically relevant | Yes
The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly | Yes
There is some justification to recommend/not recommend the intervention even though the evidence is weak | Yes
The hierarchy of strength of evidence is adequately described | Yes
Overall, the scientific quality of this recommendation does not present risks of bias | Yes
The strength of evidence attributed to the recommendation is adequately described and justified | Yes
Risks and benefits have been weighed | Yes

**Acceptability/Applicability**

| Overall, the recommendation is acceptable | Yes |
| The strength of evidence and the magnitude of effect adequately support the grade of the recommendation | Yes |
| There is sufficient benefit of the intervention, compared with other available management | Yes |
| The recommendation is compatible with the culture and values in the setting where it is to be used | Yes |
| Overall, the recommendation is applicable | Yes |
| The intervention is applicable to the patients in the context of use | Yes |
| The intervention/equipment is available in the context of use | Yes |
| The necessary expertise is available in the context of use | Yes |
| There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation | Yes |
NICE QUESTION: FOR PEOPLE WITH DEMENTIA AND NON-COGNITIVE
SYMPTOMS OF DEMENTIA, DOES APPROPRIATE DRUG TREATMENT WHEN
COMPADED TO PLACEBO/A COMPARATOR PRODUCE BENEFITS/HARM IN
THE SPECIFIED OUTCOMES?

Details: Searched a number of databases for SRs, RCTs (efficacy, acceptability, tolerability, side
effects) and observational studies (for adverse events).

| P | People with dementia and depression/ psychosis/ apathy/ wandering/ sleep
disturbance/ challenging behaviour (including those associated with restlessness or
over-activity; disordered communications [especially repetitive noisiness]; disturbed
behaviour [for example aggression, sexual disinhibition, eating disorders, hoarding]). |
|---|---|
| I | - Antipsychotics
- Anxiolytics (Benzodiazepines [sustained action: diazepam, alprazolam,
chloridiazepoxide, clobazam, clorazepate; shorter-acting compounds: lorazepam and
oxazepam]; Buspirone; beta-blockers [e.g. propranolol, oxprenolol]; Meprobamate
- Hypnotics (Benzodiazepines (sustained action: nitrazepam and flurazepam; shorter-
acting compounds: loprazolam, lormetazepam, and temazepam); Non-benzodiazepines
[Zaleplon, zolpidem and zopiclone]; Choral and derivatives [limited role as hypnotics];
Clomethiazole [chlorimethiazole]; Some antihistamines [such as diphenhydramine and
promethazine]
- Selegeline
- Antimanic drugs [e.g. carbamazepine, valproate, lithium, quetiapine]
- Cholinesterase inhibitors (donepezil, galantamine, rivastigmine) + memantine
- Antidepressants [Tricyclic and related antidepressants, e.g. trazodone; SSRIs and
atypical antidepressants]
| C | Placebo. Management without pharmacological treatment |
| O | Reduction in depression (e.g. Cornell Scale for Depression in Dementia, Hamilton
Depression Scale)
- Reduction in Agitation (e.g. BEHAVED-AD, ABID, BSSD, MOSES)
- Reduction in psychotic symptoms (e.g. NPI-Q, Schedule for Affective Disorders and
Schizophrenia)
- Other appropriate scales (Cognitive symptoms)
- Subjective improvement in quality of life
- Global Ratings (e.g. CIBC-Plus, CGIC, SCAG, GDS)

Findings: See Tables 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36. A large number of studies were
identified. See Appendix 16 and 20. Recommendations in 8.6.2, 8.6.3, 8.6.4

Scientific validity of guidelines

| Overall, the evidence was valid | Yes |
| Given the search strategy, the risk that relevant evidence has been missed is low | Yes |
| The criteria for selecting the evidence is explicit | Yes |
| Settings and protocols of selected studies fit with the health question | Yes |
| Outcomes were clinically sound | Yes |
| The criteria used for assessing the quality and validity of the selected studies are
adequately reported | Yes |
<p>| The risk that biased evidence has been reported is low | Yes |
| The outcomes were considered clinically sound | Yes |
| When a meta-analysis was performed, statistical analyses were appropriate. |
| Sensitivity analysis and test of heterogeneity was performed | Yes |</p>
<table>
<thead>
<tr>
<th>Category</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coherence between the evidence and recommendations</td>
<td>Yes</td>
</tr>
<tr>
<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
<td>Yes</td>
</tr>
<tr>
<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>Yes</td>
</tr>
<tr>
<td>The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly</td>
<td>Yes</td>
</tr>
<tr>
<td>There is some justification to recommend/not recommend the intervention even though the evidence is weak</td>
<td>Yes</td>
</tr>
<tr>
<td>The hierarchy of strength of evidence is adequately described</td>
<td>Yes</td>
</tr>
<tr>
<td>Overall, the scientific quality of this recommendation does not present risks of bias</td>
<td>Yes</td>
</tr>
<tr>
<td>The strength of evidence attributed to the recommendation is adequately described and justified</td>
<td>Yes</td>
</tr>
<tr>
<td>Acceptability/Applicability</td>
<td></td>
</tr>
<tr>
<td>Overall, the recommendation is acceptable</td>
<td>Yes</td>
</tr>
<tr>
<td>The strength of evidence and the magnitude of effect adequately support the grade of the recommendation</td>
<td>Yes</td>
</tr>
<tr>
<td>There is sufficient benefit of the intervention, compared with other available management</td>
<td>Yes</td>
</tr>
<tr>
<td>The recommendation is compatible with the culture and values in the setting where it is to be used</td>
<td>Yes</td>
</tr>
<tr>
<td>Overall, the recommendation is applicable</td>
<td>Yes</td>
</tr>
<tr>
<td>The intervention is applicable to the patients in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>The intervention/equipment is available in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>The necessary expertise is available in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation</td>
<td>Unsure</td>
</tr>
</tbody>
</table>
NICE QUESTION: FOR PEOPLE WITH DEMENTIA, ARE THERE STRATEGIES FOR PROMOTING INDEPENDENCE THAT PRODUCE BENEFITS/HARM IN THE SPECIFIED OUTCOMES?

Searched multiple databases for RCTs

<table>
<thead>
<tr>
<th>P</th>
<th>People with Alzheimer’s Disease/Vascular dementia/ dementia with Lewy bodies/ Parkinson’s Disease plus dementia/ Frontotemporal dementia/ other dementias (subcortical, mixed dementias)</th>
</tr>
</thead>
</table>
| I | Strategies for promoting independence, including:  
  • Promotion and maintenance of independent functioning (including mobility)  
  • Occupational therapy – comprehensive OT (combination of the 5 specific interventions below) or specific OT interventions(one of interventions below):  
    i) training of sensory-motor functions  
    ii) training of cognitive functions  
    iii) training of skills  
    iv) advice and instruction regarding the use of assistive devices  
    v) counselling the caregiver  
  (Steultjens et al, 2004)  
  • Falls prevention  
  • Physical exercise  
  Specific technological devices |
| C | ‘standard care’  
  active control  
  social contact  
  wait list control |
| O | - ADL (e.g. COPM)  
  - Number of falls  
  - Admission and readmission rates  
  - Mood  
  - Agitation  
  - Perceived benefits  
  - Well being  
  - Quality of life  
  - Carer impact |

Findings: little evidence found (see Appendix 15b) therefore a summary of ‘good practice’ was provided. See Recommendation 7.9.1

Scientific validity of guidelines

| Overall, the evidence was valid | Yes |
| Given the search strategy, the risk that relevant evidence has been missed is low | Yes |
| The criteria for selecting the evidence is explicit | Yes |
| Settings and protocols of selected studies fit with the health question | Yes |
| Outcomes were clinically sound | Yes |
| The criteria used for assessing the quality and validity of the selected studies are adequately reported | Yes |
| The risk that biased evidence has been reported is low | Yes |
| When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed | NA |
Coherence between the evidence and recommendations | Yes  
---|---  
The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation | Yes  
Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported | Yes  
The conclusions are clinically relevant | Yes  
The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly | Yes  
There is some justification to recommend/not recommend the intervention even though the evidence is weak | Yes  
The hierarchy of strength of evidence is adequately described | Yes  
Overall, the scientific quality of this recommendation does not present risks of bias | Yes  
The strength of evidence attributed to the recommendation is adequately described and justified | Yes  
Risks and benefits have been weighed | Yes  

**Acceptability/Applicability**  
Overall, the recommendation is acceptable | Yes  
The strength of evidence and the magnitude of effect adequately support the grade of the recommendation | Yes  
There is sufficient benefit of the intervention, compared with other available management | Yes  
The recommendation is compatible with the culture and values in the setting where it is to be used | Yes  
Overall, the recommendation is applicable | Yes  
The intervention is applicable to the patients in the context of use | Yes  
The intervention/equipment is available in the context of use | Yes  
The necessary expertise is available in the context of use | Yes  
There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation | Yes
NICE QUESTION: FOR PEOPLE WITH DEMENTIA, DO COGNITIVE REHABILITATION AND BEHAVIOURAL INTERVENTIONS WHEN COMPARED TO [AN APPROPRIATE COMPARATOR] PRODUCE BENEFITS/HARM IN THE SPECIFIED OUTCOMES?


<table>
<thead>
<tr>
<th>P</th>
<th>People with Alzheimer’s Disease/ vascular dementia/ dementia with Lewy bodies/ Parkinson’s Disease plus dementia/ Frontotemporal dementia/ other dementias (subcortical, mixed dementias)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Memory retraining (e.g. procedural memory stimulation) - typically involves guided practice on a set of standard tasks designed to reflect particular cognitive functions, such as memory, attention, or problem solving ('executive function'). The underlying assumption is that practice has the potential to improve or at least maintain functioning in the given domain, and that any effects of practice will generalise beyond the immediate training context. Cognitive training may be offered through individual or group sessions or facilitated by family members with therapist support. Tasks may be presented in paper-and-pencil or computerised form or may involve analogues of activities of daily living (Clare et al, 2003).</td>
</tr>
<tr>
<td>I</td>
<td>• Cognitive rehabilitation - aims to tackle directly those difficulties considered most relevant by the person with dementia and his or her family members or supporters, and target everyday situations in the real life context, since there is no implicit assumption that changes instituted in one setting would necessarily generalise to another...This approach is likely to be accompanied by provision of information aimed at facilitating an understanding of cognitive strengths and difficulties and by supportive discussion relating to individual emotional reactions or other needs, and where appropriate links are made with other possible sources of support (Clare et al, 2003).</td>
</tr>
<tr>
<td>I</td>
<td>• Life review - a naturally occurring process where the person looks back on his/her life and reflects on past experiences, including unresolved difficulties and conflicts. This concept was incorporated in a psychotherapy for older people, which emphasizes that life review can be helpful in promoting a sense of integrity and adjustment Life review therapy has its roots in psychotherapy, involving evaluation of personal (sometimes painful) memories with a therapeutic listener, usually in a one-to-one setting. (Woods et al, in press).</td>
</tr>
<tr>
<td>I</td>
<td>• Reminiscence - involves the discussion of past activities, events and experiences, usually with the aid of tangible prompts (e.g. photographs, household and other familiar items from the past, music and archive sound recordings). Reminiscence therapy in a group context has the aim of enhancing interaction in an enjoyable, engaging fashion (Woods et al, in press).</td>
</tr>
<tr>
<td>I</td>
<td>• Validation therapy - based on the general principle of validation, the acceptance of the reality and personal truth of another’s experience, and incorporates a range of specific techniques. Validation, in this general sense, can be considered as a kind of philosophy of care. Validation is identified as providing a high degree of empathy and an attempt to understand a person’s entire frame of reference, however disturbed that might be. Important features of validation therapy are said to include: a means of classifying behaviours; provision of simple, practical techniques that help restore dignity; prevention of deterioration into a vegetative state; provision of an emphatic listener; respect and empathy for older adults with Alzheimer’s type dementia, who are struggling to resolve unfinished business before they die; and acceptance of the person’s reality. These features are not, however, unique to validation (Neal &amp; Briggs, 2003).</td>
</tr>
</tbody>
</table>
• Snoezelen (multi-sensory stimulation, e.g. aromatherapy & massage) – provides sensory stimuli to stimulate the primary senses of sight, hearing, touch, taste and smell through the use of lighting effects, tactile surfaces, meditative music, and the odour of relaxing essential oils (Chung & Lai, 2002).
• Creative arts therapy (e.g. dance, music)
• Cognitive stimulation (reality orientation) - a technique to improve the quality of life of confused elderly people. It operates through the presentation of orientation information (e.g. time, place and person-related) which is thought to provide the person with a greater understanding of their surroundings, possibly resulting in an improved sense of control and self-esteem. Reality orientation can be of a continuous 24 hour type, whereby staff orientate the patients to reality at all times, or of a ‘classroom’ type, where groups of elderly people meet on a regular basis to engage in orientation-related activities. A prominent focus of classroom RO is often the ‘RO board’, which typically displays information such as the day, date, weather, name of next meal and location (Spector et al, 2000).
• Animal-assisted therapy – the use of trained animals in facilitating patients progress toward therapeutic goals (Barker & Dawson, 1998)

C Standard care’, active control, social contact, wait list control
O For the person with dementia:
- Cognitive functioning (e.g. MMSE, ADAS-Cog)
- ADL test score (e.g. ADL, IADL, BGP, NOSGER)
- Admission to hospital/care home
- Subjective improvement in quality of life
- Global rating scale (e.g. CIBC-Plus, CGIC, SCAG, GDS)
- Side effects (e.g. Extrapyramidal symptom rating scale, treatment emergent symptom scale, targeting abnormal kinetic effects)

For the carer of the person with dementia:
- Carer stress (e.g. Carer Burden Scale)

Details: See Appendix 15c for list of included and excluded studies and Appendix 16 and 20 for evidence profiles and forest plots. Nineteen trials were found. Recommendation made – see 7.9.2.1

Scientific validity of guidelines

<table>
<thead>
<tr>
<th>Overall, the evidence was valid</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given the search strategy, the risk that relevant evidence has been missed is low</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria for selecting the evidence is explicit</td>
<td>Yes</td>
</tr>
<tr>
<td>Settings and protocols of selected studies fit with the health question</td>
<td>Yes</td>
</tr>
<tr>
<td>Outcomes were clinically sound</td>
<td>Yes</td>
</tr>
<tr>
<td>The criteria used for assessing the quality and validity of the selected studies are adequately reported</td>
<td>Yes</td>
</tr>
<tr>
<td>The risk that biased evidence has been reported is low</td>
<td>Yes</td>
</tr>
<tr>
<td>When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed</td>
<td>Yes</td>
</tr>
<tr>
<td>Coherence between the evidence and recommendations</td>
<td>Yes</td>
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<td>The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation</td>
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<td>Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported</td>
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</tr>
<tr>
<td>The conclusions are clinically relevant</td>
<td>Yes</td>
</tr>
<tr>
<td>The conclusions derived from data point to effectiveness/ineffectiveness of the</td>
<td>Yes</td>
</tr>
</tbody>
</table>

76
<table>
<thead>
<tr>
<th>Requirement</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>intervention and the recommendation is written accordingly</td>
<td></td>
</tr>
<tr>
<td>There is some justification to recommend/not recommend the intervention even though the evidence is weak</td>
<td>Yes</td>
</tr>
<tr>
<td>The hierarchy of strength of evidence is adequately described</td>
<td>Yes</td>
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<tr>
<td>Overall, the scientific quality of this recommendation does not present risks of bias</td>
<td>Yes</td>
</tr>
<tr>
<td>The strength of evidence attributed to the recommendation is adequately described and justified</td>
<td>Yes</td>
</tr>
<tr>
<td>Risks and benefits have been weighed</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Acceptability/Applicability</strong></td>
<td></td>
</tr>
<tr>
<td>Overall, the recommendation is acceptable</td>
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<td>The intervention/equipment is available in the context of use</td>
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<td>The necessary expertise is available in the context of use</td>
<td>Yes</td>
</tr>
<tr>
<td>There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation</td>
<td>Yes</td>
</tr>
</tbody>
</table>
NICE QUESTION: FOR PEOPLE WITH DEMENTIA, DO PSYCHOSOCIAL/BEHAVIOURAL INTERVENTIONS FOR THE MANAGEMENT OF BEHAVIOUR THAT CHALLENGES (INCLUDING AGGRESSION, AGITATION, DISINHIBITION [SEXUAL], APATHY, WANDERING, DISRUPTIVE VOCALISATIONS, EATING DISORDERS, HOARDING, PSYCHOSIS AND SLEEP DISTURBANCE) WHEN COMPARED TO ‘STANDARD CARE’ PRODUCE BENEFITS/HARM IN THE SPECIFIED OUTCOMES?

See search in 13a and 13b. Searched for systematic reviews and RCTs. Searched multiple databases up til 2006.

<table>
<thead>
<tr>
<th>P</th>
<th>People with Alzheimer’s Disease/Vascular dementia/ dementia with Lewy bodies/ Parkinson’s Disease plus dementia/ Frontotemporal dementia/ other dementias (subcortical, mixed dementias) And challenging behaviour (including aggression, agitation, disinhibition [sexual], apathy, wandering, disruptive vocalizations, eating disorders, hoarding, psychosis, sleep disturbance)</th>
</tr>
</thead>
</table>
| I | • Psychosocial interventions (including reality orientation, validation therapy, reminiscence) – see above  
  • Behavioural interventions  
  • Occupational/ Structured activities  
  • Environmental interventions/ modifications  
  • Sensory enhancement/ relaxation  
  • Social contact  
  • Staff training  
  • Medical/ Nursing Care Interventions (including Bright-light therapy/ sleep interventions, Pain management, Hearing aids, Removal of restraints)  
  • Combination therapies  
  • Interventions involving working with carers  
  • Snoezelen (Multi-sensory stimulation)  
  • Psychodrama  
  • Subjective barriers to prevent wandering |
| C | ‘standard care’  
  active control  
  social contact  
  wait list control |
| O | For the person with dementia:  
  - Challenging behaviour  
  - ADL test score (e.g. ADL, IADL, BGP, NOSGER)  
  - Admission to hospital/care home  
  - Subjective improvement in quality of life  
  - Global rating scale (e.g. CIBC-Plus, CGIC, SCAG, GDS)  
  - Depression/well being  
  For the carer of the person with dementia:  
  - Carer stress (e.g. Carer Burden Scale) |

Findings: 17RCTs were included and a large number were excluded – see Appendix 15f for full details. See Appendix 16 and 20 for evidence tables and forest plots. Recommendations – see 8.6.1

**Scientific validity of guidelines**
<table>
<thead>
<tr>
<th>Statement</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, the evidence was valid</td>
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<tr>
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**Acceptability/Applicability**

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<td>Yes</td>
</tr>
</tbody>
</table>

**NICE QUESTION:** FOR PEOPLE WITH DEMENTIA AND DEPRESSION/ANXIETY, DO PSYCHOLOGICAL INTERVENTIONS WHEN COMPARED TO ‘STANDARD CARE’ PRODUCE BENEFITS/HARM IN THE SPECIFIED OUTCOMES?

Details: A number of databases were searched up until 2006 for RCTs

<p>| P | People with Alzheimer’s Disease/Vascular dementia/ dementia with Lewy bodies/ |</p>
<table>
<thead>
<tr>
<th>I</th>
<th>Parkinson’s Disease plus dementia/ Frontotemporal dementia/ other dementias (subcortical, mixed dementias) And Co-morbid Depression/ Anxiety</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Including: CBT - discrete, time limited, structured psychological intervention, derived from the cognitive-behavioural model of affective disorders and where: 1. Therapist and patient work collaboratively to identify the types and effects of thoughts, beliefs and interpretations on current symptoms, feelings states and/or problem areas; 2. Develop skills to identify, monitor and then counteract problematic thoughts, beliefs and interpretations related to the target symptoms/problems; 3. Learn a repertoire of coping skills appropriate to the target thoughts, beliefs and/or problem areas. Multi-sensory stimulation • Relaxation - Progressive relaxation training including generalisation procedures, and assessment and home practice activities • Animal-assisted therapy – see above</td>
</tr>
<tr>
<td>C</td>
<td>‘standard care’, active control, social contact, wait list control</td>
</tr>
<tr>
<td>O</td>
<td>Depression (e.g. Cornell Scale for Depression in Dementia, Hamilton Depression Scale) - Subjective improvement in self-reported mood and quality of life (e.g. GDS) - Anxiety (e.g. RAID)</td>
</tr>
</tbody>
</table>

Findings: 2 studies included (included and excluded studies can be found in appendix 15g) See Table 24 in the guidelines. Four qualitative studies were included. See recommendations at 8.6.4

**Scientific validity of guidelines**

| Overall, the evidence was valid | Yes |
| Given the search strategy, the risk that relevant evidence has been missed is low | Yes |
| The criteria for selecting the evidence is explicit | Yes |
| Settings and protocols of selected studies fit with the health question | Yes |
| Outcomes were clinically sound | Yes |
| The criteria used for assessing the quality and validity of the selected studies are adequately reported | Yes |
| The risk that biased evidence has been reported is low | Yes |
| When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed | NA |
| Coherence between the evidence and recommendations | Yes |
| The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation | Yes |
| Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported | Yes |
| The conclusions are clinically relevant | Yes |
| The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly | Yes |
| There is some justification to recommend/not recommend the intervention even though the evidence is weak | Yes |
| The hierarchy of strength of evidence is adequately described | Yes |
| Overall, the scientific quality of this recommendation does not present risks of bias | Yes |
| The strength of evidence attributed to the recommendation is adequately described and justified | Yes |
| Risks and benefits have been weighed | Yes |

**Acceptability/Applicability**
Overall, the recommendation is acceptable | Yes
---|---
The strength of evidence and the magnitude of effect adequately support the grade of the recommendation | Yes
There is sufficient benefit of the intervention, compared with other available management | Yes
The recommendation is compatible with the culture and values in the setting where it is to be used | Yes
Overall, the recommendation is applicable | Yes
The intervention is applicable to the patients in the context of use | Yes
The intervention/equipment is available in the context of use | Yes
The necessary expertise is available in the context of use | Yes
There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation | Yes

**NICE QUESTION:** FOR PEOPLE WITH DEMENTIA, DO EDUCATIONAL INTERVENTIONS INCREASE KNOWLEDGE AND AWARENESS?
Details: searched multiple databases up til 2006 for quantitative and qualitative research

<table>
<thead>
<tr>
<th>P</th>
<th>People with all forms of dementia</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Educational interventions – 1. Any program involving interaction between information provider and service user or family. These programs address the disorder from multidimensional viewpoints, including the following perspectives: a) familial, b) social, c) biological, d) pharmacological. 2. Service users and/or families are provided with support, information and management strategies. 3. To be considered as well defined, the educational strategy should be tailored to the need of individuals or families. Aim to provide patients (and their families) with information about the nature of their illness and its treatment</td>
</tr>
<tr>
<td>C</td>
<td>‘standard care’</td>
</tr>
</tbody>
</table>
| O | - Perceived benefit  
- Reduced distress  
- Greater knowledge  
- Better ability to access services |

Findings: There were no studies that specifically evaluated the impact of education and training for people with dementia on knowledge and awareness. Extrapolation is made from two studies that are somewhat relevant. See appendix 15i for included and excluded studies. No recommendations are made.

**Scientific validity of guidelines**

| Overall, the evidence was valid | Unsure |
| Given the search strategy, the risk that relevant evidence has been missed is low | Yes |
| The criteria for selecting the evidence is explicit | Yes |
| Settings and protocols of selected studies fit with the health question | Yes |
| Outcomes were clinically sound | Yes |
The criteria used for assessing the quality and validity of the selected studies are adequately reported
Yes

The risk that biased evidence has been reported is low
Yes

When a meta-analysis was performed, statistical analyses were appropriate. Sensitivity analysis and test of heterogeneity was performed
NA

Coherence between the evidence and recommendations
NA

The evidence was direct. Patients and interventions included in the studies were comparable to those targeted by the recommendation
NA

Conclusions were supported by data and/or the analysis; results were consistent from study to study. When inconsistencies existed in data, considered judgement was applied and reported
NA

The conclusions are clinically relevant
NA

The conclusions derived from data point to effectiveness/ineffectiveness of the intervention and the recommendation is written accordingly
NA

There is some justification to recommend/not recommend the intervention even though the evidence is weak
NA

The hierarchy of strength of evidence is adequately described
NA

Overall, the scientific quality of this recommendation does not present risks of bias
NA

The strength of evidence attributed to the recommendation is adequately described and justified
NA

Risks and benefits have been weighed
NA

Acceptability/Applicability
Overall, the recommendation is acceptable
NA

The strength of evidence and the magnitude of effect adequately support the grade of the recommendation
NA

There is sufficient benefit of the intervention, compared with other available management
NA

The recommendation is compatible with the culture and values in the setting where it is to be used
NA

Overall, the recommendation is applicable
NA

The intervention is applicable to the patients in the context of use
NA

The intervention/equipment is available in the context of use
NA

The necessary expertise is available in the context of use
NA

There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation
NA

NICE QUESTION: WHAT MODELS OF TRAINING (LIAISON) FOR HEALTH AND SOCIAL CARE STAFF HAVE POSITIVE OUTCOMES FOR PEOPLE WITH DEMENTIA?
Search included a number of databases up until 2006 for RCTs and qualitative research

<table>
<thead>
<tr>
<th>P</th>
<th>Health and social care staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Training (liaison) for health and social care staff</td>
</tr>
<tr>
<td>C</td>
<td>Standard training</td>
</tr>
<tr>
<td>O</td>
<td>For the person with dementia: cognitive impairment, depression, behavioural disturbance, functional ability.</td>
</tr>
</tbody>
</table>
Findings: A summary of the literature is provided in this area. Recommendations made 9.7.1

**Scientific validity of guidelines**

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<td>Risks and benefits have been weighed</td>
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**Acceptability/Applicability**

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<tr>
<td>There are no constraints, legislation, policies or resources in the health care setting of use that would impede the implementation of the recommendation</td>
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References