

# How the GP can support a person with dementia

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**It is important that people with dementia have regular checkups with their GP and see them as soon as possible if they develop any health concerns. This factsheet looks at the different forms of support available from a GP for a person with dementia. It also explains how they and their carer can access them.**

Treating even minor complaints can make a considerable difference to a person's wellbeing.

GPs can offer a range of support to a person with dementia, including:

- general advice on ways of preventing illness and promoting fitness
- medical advice and treatment
- referrals to specialist help and other services.

If you think that you, or someone you know, may have dementia but it has not been diagnosed, see factsheet 426, Diagnosis and assessment.

## Appointments

Some people with dementia find it helpful if someone they trust goes with them to the surgery. A close friend or relative may be able to help describe any symptoms or problems to the GP. They can also remember afterwards what was said, if the person has memory problems.

In later-stage dementia, the person's memory problems may have worsened, so it can be even more important to have someone go with them and provide support. It can also help to ensure that everyone involved is as clear as possible about what is happening.

### **Tips for carers: Accompanying someone to the GP**

- Before going to the surgery, write down all the points you would both like to discuss with the GP. It can be difficult to remember everything you want to say during a consultation.
- Make a note of anything important the doctor says. For example, you might want to write down any medical terms that are used.
- If there is anything you do not understand, ask the doctor to explain in simpler language.
- If you come from a different background or culture from the GP, mention any relevant customs, attitudes or beliefs. This can help the GP to decide on appropriate treatment and services.
- Try not to talk to the doctor over the person's head as though they aren't there. If you feel you need to talk to the doctor on your own, make a separate appointment.
- At the end of the appointment, offer to leave the room so that the person with dementia can speak with the doctor alone.

## **Confidentiality**

Sometimes people with dementia prefer to see their GP alone, or it may not be possible for anyone to go with them. If this is the case, a carer or family member may wish to talk to the GP afterwards. When a carer or relative contacts a GP with concerns about a person, the GP may decline discussion on the grounds of breaking patient confidentiality.

The General Medical Council (GMC) has issued guidance on this matter (Confidentiality, 2009). This guidance states that doctors should listen to the concerns of carers, relatives, friends or neighbours

because they may have valuable information that can help their patient. The GP should make it clear that they may tell the patient about the conversation.

## **Capacity**

Capacity refers to the ability of the person with dementia to make decisions for themselves. For more information on capacity, see factsheet 460, Mental Capacity Act 2005.

If a person has capacity to make decisions about their health and related matters, their doctor should only share information about them in certain situations. This would be when the benefit to the public or another person may outweigh the public interest and/or patient's rights in keeping the information confidential. Examples could be when not sharing the information may result in a crime being committed, or another person being harmed.

The guidance states that if the person does not have the capacity to consent to their information being shared, the doctor should assume that they would want those closest to them to know about their condition, unless they have indicated otherwise.

If someone who lacks the ability to consent to share information objects to their information being shared, the doctor can still share relevant information with carers, relatives or friends if they think it is in the person's best interests. The GP may also need to share some information with relatives, friends or carers to determine what is in the person's best interests.

A GP may be reluctant to share information about someone who lacks capacity to agree to this. If as a carer you believe this is not in the person's best interests, speak to the GP about your concerns and mention the GMC guidance. If the situation is not resolved, ask the surgery for a copy of the complaints procedure.

Someone making a complaint in England can access support from the Independent NHS Complaints Advocacy service in their area. Their

surgery, the local Citizens Advice Bureau, or NHS Choices can provide contact details.

In Wales, the local Community Health Council can help with complaints, and NHS Direct Wales can provide you with contact information. In Northern Ireland, you can access support with a complaint through the Patient and Client Council (see 'Other useful organisations' for more details).

## When to see the GP

A person with dementia should see their GP as soon as they feel unwell or have concerns about their health. They should also see their GP if they suddenly become more confused or agitated, or if there are any worrying changes in their behaviour, as this could be a sign that they are ill. Many physical conditions, including chest and urinary tract infections, infected leg ulcers, and constipation, can cause additional confusion and distress. These conditions usually respond to treatment.

The person should also see the GP if they feel unhappy, anxious or restless, if there have been marked changes in their sleeping or eating patterns, or if they become very withdrawn. Any of these can be a sign of depression, which is particularly common during the early stages of dementia. The GP may consider prescribing antidepressant medication, counselling or other forms of support. For more information, see factsheet 444, Depression and anxiety.

If at any time the person with dementia or their carer feels that a specialist opinion is needed, they can ask the GP for a referral. The GP is usually the only person who can refer on to a specialist. All patients are entitled to request a second opinion, and can do so even if the GP doesn't see the need.

## Services

The GP can also refer patients to other health professionals, such as community nurses, and may suggest helpful services. For more

information on other help and support available from the NHS, see factsheet 454, How health and social care professionals can help.

Advice about other services is available from older people's services at your local council. Services may include home care, meals on wheels, short home visits to provide respite for carers, and residential care. If you have not already done so, ask for an assessment of your needs by social services. The GP can refer you, or you can contact social services directly. Their number will be in the local telephone directory under the name of your local council, or you can find their number online via the government website under the name of your local council – [www.gov.uk/find-your-local-council](http://www.gov.uk/find-your-local-council) For more information see factsheet 418, Community care assessment.

## Advice on medication

Ask the GP about any prescribed medication. You need to know what each drug is for, how it should be taken, what the effects are likely to be, and whether there are any side effects to watch out for.

If any drug appears to be having a side effect, contact the GP straight away. The drug may need to be changed or the dose altered. Make sure the doctor knows about any other medication the person takes, either prescribed or over the counter. The interaction of certain drugs can produce unpleasant, and sometimes dangerous, effects. It is also essential to find out whether alcohol can safely be consumed while taking the medication.

Generally, the fewer drugs prescribed for a person with dementia in addition to the main treatment drugs, the better. Some drugs may make it harder to cope by causing confusion or other problems. Older people usually need lower doses of drugs than younger people, and it is recommended that older people have their medication reviewed at least annually. Some drugs also require blood-test monitoring as well as routine annual testing. The GP or practice nurse will advise on these additional checks.

The local pharmacist also has a vital role to play in drug safety and ensuring the correct doses are taken at the correct times. They will often speak to the GP about drug schedules. The use of dosette boxes or blister packs can be useful in managing these.

## Drugs for dementia

A wide range of medicines may be prescribed at different times for a person with dementia. Someone with Alzheimer's disease, mixed dementia or – in some cases – dementia with Lewy bodies may be offered drugs that can sometimes temporarily slow down the progression of symptoms. The first prescription of these drugs must be given by a specialist, and prescriptions after that can be issued by the GP. For more information see factsheet 407, Drug treatments for Alzheimer's disease.

For a person with vascular dementia, the GP will prescribe (or continue to prescribe) drugs for the underlying condition: high blood pressure, high cholesterol, diabetes or heart problems.

## Changing doctors

There could be many reasons you might want to see a different GP. Perhaps you may prefer a GP of a particular gender, a GP you feel understands you or your condition better, or someone you feel more comfortable with or get along with better. There may be another doctor in the practice who you could see instead. Make some tactful enquiries at reception.

If you are very dissatisfied with the GP and there is no one else in the practice you would prefer, you can arrange to change doctors, providing another practice is taking new patients. It may be quite difficult to change doctors in some areas. If you live in England your local clinical commissioning group (CCG) can advise you. The GP surgery or Citizens Advice Bureau will have the contact details. Alternatively, you can look on the NHS Choices website (see 'Other useful organisations' for details).

If you live in Wales the local health board can assist. The GP surgery or local Citizens Advice Bureau will have contact details. Alternatively, contact NHS Direct Wales, or look on their website. In Northern Ireland, the Health and Social Care in Northern Ireland Gateway will be able to provide you with advice and a full list of GP contact details (see 'Other useful organisations' for details).

As a carer, you may wish to change the doctor of the person you care for. Whether you can do this depends on the person's capacity. If they have the capacity to make this decision for themselves, then it is their decision to make. If they are not able to make this decision for themselves, you may be able to make the decision. Generally, it will be the person's attorney under a health and welfare Lasting Power of Attorney, or the person's Deputy for personal welfare, who will make this decision and arrange it. For more information, see factsheet 472, Lasting Power of Attorney.

## **Carers' needs**

Caring for someone with dementia can cause considerable physical and emotional stress. Try to dedicate some time for yourself and don't neglect your own health and wellbeing. You should see your own GP on a regular basis to check up on your health and discuss any problems you may be experiencing. For more information see factsheet 523, Carers: looking after yourself.

## Other useful organisations

### **Citizens Advice Bureau (CAB)**

Various locations

W [www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)  
[www.adviceguide.org.uk](http://www.adviceguide.org.uk)

Your local CAB can provide information and advice in confidence or point you in the right direction. To find your nearest CAB look in the phone book, ask at your local library or look on the Citizens Advice Bureau website (above). Opening times vary.

### **NHS Choices**

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

Website providing information about NHS services in England to enable people to make choices about care and treatment. The website also has contact details for local clinical commissioning groups in England.

### **NHS Direct Wales**

T 0845 46 47  
[www.nhsdirect.wales.nhs.uk](http://www.nhsdirect.wales.nhs.uk)

Provides information and advice about health, illness and health services in Wales.

### **Health and Social Care in Northern Ireland Gateway**

W [www.hscni.net](http://www.hscni.net)

Provides information and links about community care and health care services in Northern Ireland.

## **Patient and Client Council (Northern Ireland)**

T 0800 917 0222

E [info.pcc@hscni.net](mailto:info.pcc@hscni.net)

W [www.patientclientcouncil.hscni.net](http://www.patientclientcouncil.hscni.net)

Offers help and advice to someone making a complaint about health or social care services in Northern Ireland.

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Last reviewed: July 2013

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Reviewed by: Dr Alex Turnbull, GP and Gwyn Grout, Independent Consultant Nurse (Older People's Mental Health)

This factsheet has also been reviewed by people affected by dementia.

A list of sources is available on request.



## Alzheimer's Society National Dementia Helpline

England, Wales and Northern Ireland:  
**0300 222 11 22**

9am–5pm Monday–Friday  
10am–4pm Saturday–Sunday

[alzheimers.org.uk](http://alzheimers.org.uk)

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