

# [Free pico analysis of dementia essay sample](https://assignbuster.com/free-pico-analysis-of-dementia-essay-sample/)

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Dementia is rapidly growing worldwide and on each four seconds a new case of dementia is reported. According to the Blom, around 2040 it will turn 90 million people into its victim (Blom, Emmelot-Vonk & Koek, 2013).
Increasing frequency of disease is creating a financial burden on society and caregivers. There are several reasons out of which aging is the foremost reason. Another big cause is vascular risk factors (VRF) that may enhance the susceptibility towards dementia (Blom, Emmelot-Vonk & Koek, 2013; Lopez-Hartmann et al., 2012). Informal caregivers of dementia patients feel burdened and to protect them from such situations, contemporary health care policies are designed to delay the institutionalization among patients. Many support strategies are proposed and applied, but they still need a systematic analysis to check their efficacy (Spijker et al., 2008).
The research question for this research is prepared using PICO method. “ Which types of support programs are proposed yet in healthcare to delay institutionalization among dementia patients and are they effective?”
The targeted population (P) is the informal caregivers who do not belong to any professional organization, instead provides care to a relative or friend. The care recipient is the dementia patient who needs regular support from caregivers in accomplishing his daily activities.
As intervention (I) in this research includes a broad spectrum of focusing the available caregiving programs that facilitate informal caregivers. For comparison (C) various support systems are studied to evaluate the eligibility for inclusion criteria. The effects on multiple caregivers will be targeted collaboratively as the outcome (O). The essay aims to proffer an overview of diverse outcomes concluded in selected studies.

## Search Strategy

The search was based on using keywords relevant to the research topic Dementia. For the chosen topic and to find out answers to the formulated question I have selected five journal articles that were evidence-based primary studies and systematic reviews. The selected articles were extracted from online databases like PubMed, Medline, and Mesh. Google scholar has also been a good source of appropriate scholarly articles of relevant research.
The articles were selected through several keywords. Hundreds of articles were found related to dementia, but the selection criterion was centrally focused on a narrow spectrum linked to informal caregivers. Articles are carrying additional information like reasons, treatments and medications were excluded.

## Results

This literature review aims to provide a glimpse of the literature highlighting the informal caregiver support systems. The findings from five selected studies are discussed. Analysis of 5 articles concludes that these nonpharmacological programs exhibit considerable potential in lessening the odds of institutionalization. According to Hartmann, three main types of support have been provided in previously conducted studies, namely psychosocial, respite and information and communication technology (ICT) support (Lopez-Hartmann et al., 2012).
Work by Spijker et al., (2008) on dementia proffered a systematic review that conducted a meta-analytical estimation for calculating the efficacy of such nonpharmacological support programs (Spijker et al., 2008). These informal caregiver support systems can increase the time to institutionalization facilitating the caregivers to take care of dementia patients at home for longer periods. Respite services are most desired intervention that provides caregiver some time for himself (Spijker et al., 2008).
Most of the studies regarding informal caregivers found that they require a quality support service for better quantity and suppleness in respite stipulation. A study by Gaugler targeted the 4, 761 caregivers from various areas of US in three years of time. Using Cox regression demonstrated that caregivers who utilized home services earlier in their career delayed the chances of institutionalization. The author concluded that early community-based services were cost efficient and able to control stress in this service. Though it was a multiregional study, the sample size cannot represent all the caregivers. The findings strongly emphasized the methodological concerns linked to the outcomes and supported the early acceptance of community-based service can delay the institutionalization (Gaugler, Kane, Kane & Newcomer, 2005).
An article aimed to determine the factors envisaging institutionalization included seventy-nine samples and the study model was based on the logistic regression to find out the answers. The findings suggested 6six predictors out of which three were patient related, and three were linked to the caregiver. The first three were the high score on the Brief Psychiatric Rating Scale, high score of Clinical Dementia Rating, and short duration of dementia. The other three were the younger age of the caregiver, higher education and higher cost of home care. The study was one centered and presented the sample of one place but introduced the strong predictors and can be a reference to the intracultural and cross-cultural comparisons (Kim et al., 2002).
The literature review of five articles concludes that there are three types of informal caregiving services that are impacted by several factors linked to both patients as well as caregiving individual.
Evidence Table

## Reference

Blom, K., Emmelot-Vonk, M. H., & Koek, H. D. L. (2013). The influence of vascular risk
factors on cognitive decline in patients with dementia: a systematic review. Maturitas, 76(2), 113-117.
Gaugler, J. E., Kane, R. L., Kane, R. A., & Newcomer, R. (2005). Early community-based
service utilization and its effects on institutionalization in dementia caregiving.
The Gerontologist, 45(2), 177-185.
Gaugler, J. E., Pot, A. M., & Zarit, S. H. (2007). Long-term adaptation to institutionalization in
dementia caregivers. The Gerontologist, 47(6), 730-740.
Kim, J. M., Shin, I. S., Jeong, S. J., Gormley, N., & Yoon, J. S. (2002). Predictors of
institutionalization in patients with dementia in Korea. International journal of geriatric
psychiatry, 17(2), 101-106.
Lopez-Hartmann, M., Wens, J., Verhoeven, V., & Remmen, R. (2012). The effect of caregiver
support interventions for informal caregivers of community-dwelling frail elderly:
a systematic review. International journal of integrated care, 12.
Spijker, A., Vernooij-Dassen, M., Vasse, E., Adang, E., Wollersheim, H., Grol, R., & Verhey, F.
(2008). Effectiveness of nonpharmacological interventions in delaying the
institutionalization of people with dementia: A meta-analysis. Systematic care for
caregivers of people with dementia in community mental health services, 56, 27.