

Plain Language Summaries of paper on WP1

Effectiveness of interventions aimed at improving physical and psychological outcomes of fall-related injuries in people with dementia: a narrative synthesis

Quick read:

People with dementia are more likely to fall and have more difficulty recovering than people without dementia. We are designing a new way of caring for people with dementia with fall-related injuries and so we wanted to see if anyone else had come up with any ideas. To do this, we searched for and compared research studies.

Our results were:

- New treatments provided in hospital by a team of healthcare professionals worked better
- Any health improvements were not long-lasting
- The earlier patients were walking after a fall, the sooner they could go home
- The studies were hard to compare, so we cannot draw firm conclusions

We will now use this knowledge to help us develop a new way of caring for people with dementia with fall-related injuries.

Longer summary

The UK population is ageing, which means that the number of people with dementia is rising. People with dementia are more likely to fall, have more difficulty recovering and stay in hospital for longer than people without dementia. Little is known about the care people with dementia receive after a fall. Many people with dementia who have fallen and hurt themselves go to hospital, but they may also get treatment from other healthcare services. This can be a problem because services do not always communicate with each other.

We wanted to find out from the literature whether any research studies describing new means of caring for people with dementia improved their mental and physical health after a fall. To do this, we conducted an in-depth search and compared the results from the research studies.

After comparing 7 studies, our results were:

- Assessments and new treatments provided by a team of healthcare professionals in hospital worked better than standard care
- Any improvements on health did not last longer than 6 months
- The earlier patients were walking again after a fall, the less time they spent in hospital and the sooner they could go home. This was more common for people with mild or moderate dementia than severe dementia.
- The studies measured different things and their results were mixed, so it is hard to compare them and make any firm conclusions about which treatments worked best.

We are now talking to health professionals, patients and their carers to identify ways of improving existing services for people with dementia. We will then use all of this knowledge to help us design a new way of caring for people with dementia who have been injured after a fall.

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