

SINGHEALTH DUKE-NUS MEMORY AND COGNITIVE DISORDER CENTRE SCIENTIFIC MEETING 2021

In conjunction with World Alzheimer's Day



**The Journey with Dementia -
from ageing to disease, from home to hospital to community care**

23 & 24 September 2021

PROGRAMME AND ABSTRACTS

Organised By



**Memory & Cognitive
Disorder Centre**

Sponsored By





SINGHEALTH DUKE-NUS MEMORY AND COGNITIVE DISORDER CENTRE SCIENTIFIC MEETING 2021

23 & 24 SEPTEMBER 2021 - ABOUT SDDC & ORGANISING COMMITTEE

ABOUT SINGHEALTH DUKE-NUS MEMORY AND COGNITIVE DISORDER CENTRE

The SingHealth Duke-NUS Memory and Cognitive Disorder Centre (SDDC) was established in March 2020 to meet this need. The virtual Centre is a network that brings together the strengths and expertise of healthcare professionals from different specialties across SingHealth institutions to help patients access multi-disciplinary treatment and support at all stages of their dementia journey.

Our SDDC members are also looking beyond today's dementia care needs to plan for the future. The Centre will collaborate with researchers and educators from SingHealth institutions and Duke-NUS to deepen knowledge in the causes of dementia and cognitive impairment, drive innovation to find better ways to prevent, diagnose and treat conditions and ensure healthcare professionals have the skills they need to provide the best care for patients.

The Centre will also serve as a hub to promote closer collaboration with various community partners to provide holistic and financially viable dementia services.

For more information on SDDC and the Care Team, please click [here](#) to visit the website.

SDDC SCIENTIFIC MEETING 2021 ORGANISING COMMITTEE



CHAIRPERSON

Adj Assoc Prof Lim Si Ching

Director of Education, SDDC and Senior Consultant, Department of Geriatric Medicine
Changi General Hospital



CO-CHAIRPERSON

Assoc Prof Laura Tay

Deputy Head, SDDC and Head & Senior Consultant, Department of Geriatric Medicine
Sengkang General Hospital



MEMBER

Dr Simon Ting

Head, SDDC and Head of Neurological Services & Senior Consultant
National Neuroscience Institute @ CGH



SINGHEALTH DUKE-NUS MEMORY AND COGNITIVE DISORDER CENTRE SCIENTIFIC MEETING 2021

23 SEPTEMBER 2021 - TOPIC & ABSTRACT

WELCOME ADDRESS

0800 - 0810

Dr Simon Ting

Head, SingHealth Duke-NUS Memory and Cognitive Disorder Centre (SDDC)

Head of Neurological Services and Senior Consultant, National Neuroscience Institute @ CGH

SYMPOSIUM INTRODUCTION

0810 - 0820

Adj Assoc Prof Lim Si Ching

Director, Education, SingHealth Duke-NUS Memory and Cognitive Disorder Centre (SDDC)

Senior Consultant, Department of Geriatric Medicine, Changi General Hospital

SESSION 1: TIMELY DIAGNOSIS OF DEMENTIA

SESSION CHAIR - ASSOC PROF LAURA TAY, HEAD & SENIOR CONSULTANT,
DEPARTMENT OF GERIATRIC MEDICINE, SENGKANG GENERAL HOSPITAL

THE ROLE OF PRIMARY CARE IN EARLY DIAGNOSIS OF DEMENTIA (G-RACE PROGRAMME)

0825 - 0845



Dr Chris Tsoi Tung

Senior Consultant, Department of Psychological Medicine

National University Hospital

Diagnosing dementia in Singapore has been the bottleneck of dementia care. As traditionally, dementia has only been diagnosed by the specialist.

G-Race has tried a collaboration with Polyclinic, by training and supporting family physicians diagnosing dementia for the past 8 years. We have scaled up the service from 1 to 4 Polyclinic led memory clinic. Wish to share the challenges we have faced while building up this new collaboration.



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WHEN IS IT DEMENTIA - FROM PRECLINICAL ALZHEIMER'S DISEASE (AD) TO CLINICAL DISEASE

0850 - 0910



Assoc Prof Nagaendran Kandiah

Senior Consultant, Department of Neurology
National Neuroscience Institute

In this lecture, the trajectory and pathobiology of Alzheimer's disease will be presented. The clinical presentation, cognitive change as well as functional aspects in the continuum from pre-clinical AD, prodromal AD and mild AD dementia will be discussed. Methods for screening and longitudinal evaluation will also be presented.

Changes on neuroimaging at each stage of the continuum, along with biomarker panels that can be useful to track disease progression will be discussed. The role of digital biomarkers in the monitoring of preclinical and prodromal AD will also be presented. In addition to cognitive changes, aspects of behavioural change in prodromal dementia, including the entity of Mild Behavioural Impairment will be highlighted.

THE EVER CONFUSING 4DS - DELIRIUM, DEPRESSION, DEMENTIA, DRUGS

0915 - 0935



Adj Assoc Prof Lim Si Ching

Director of Education, SDDC & Senior Consultant, Department of Geriatric Medicine
Changi General Hospital

When the patient present with cognitive symptoms, are there any other diagnoses apart from dementia? Depending on the history, time frame and other medical comorbidities, dementia may not be the correct diagnosis for every case.



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SESSION 2: MODIFIABLE RISK FACTORS OF DEMENTIA

SESSION CHAIR - ADJ ASSOC PROF LIM SI CHING, SENIOR CONSULTANT,
DEPARTMENT OF GERIATRIC MEDICINE, CHANGI GENERAL HOSPITAL

DELIRIUM AND DEPRESSION AS RISK FACTORS OF DEMENTIA

1005 - 1025



Dr Tham Keng Seng

Associate Consultant, Department of Psychological Medicine
Changi General Hospital

Delirium has a complex relationship with dementia. It has been established that delirium increases the risk of developing dementia, shortens life span and also hastens the decline in existing dementia. Patients with dementia are at a higher risk of developing delirium as well. There are several hypotheses on how delirium interacts with the development of dementia.

Depression is a common comorbid in patients with dementia. In severe depression, it can sometimes mimic symptomology of dementia. It has been shown that the risk of developing dementia is increased if the first episode of depression occurs after the age of 65. There is growing evidence that depression in the elderly is a prodrome of a cognitive disorder. In my talk, I would like to share some of the recent findings of delirium and depression in the elderly population and case vignettes to highlight the complexity of these topics.

DEMENTIA AND EPILEPSY

1030 - 1050



Dr Chiew Hui Jin

Consultant, Department of Neurology
National Neuroscience Institute

This lecture provides an overview of the relationship between cognition, dementia and epilepsy. I will approach the topic from 3 aspects:

1. Epilepsy in patients with dementia
2. Cognition in patients with epilepsy
3. Disorders causing both epilepsy and cognitive impairment



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WHITE MATTER AND COGNITION 1055 - 1115



Dr Ng Kok Pin

Consultant, Department of Neurology
National Neuroscience Institute

Dementia is a major public health concern in Singapore and worldwide. In Singapore, findings from the Well-being of the Singapore Elderly (WISE) study showed that 1 in 10 Singaporeans above the age of 60 years have dementia. As such, the prevalence of dementia in Singapore is expected to increase from the current 82,000 cases to above 100,000 over the coming few years. The two commonest types of dementia are Alzheimer's disease (AD) and Vascular Dementia. While amyloid related mechanisms have been postulated to be the major pathogenic mechanism for dementia, emerging studies have demonstrated that the prevalence of non-amyloid pathology, specifically small vessel cerebrovascular disease (svCVD) is high and also play an important role in the pathophysiology of dementia.

svCVD which affects the deep perforating vessels in the brain can be visualized as white matter hyperintensity (WMH) in MRI. WMH has been shown to be a major cause of cognitive impairment, with many studies having demonstrated the association between WMH and dementia. Work from our group had demonstrated that even after correcting for medial temporal atrophy, WMH remains an independent risk factor for progression from mild cognitive impairment to dementia. Hence in this presentation, I will be discussing the pathophysiology, clinical consequences and management strategies for WMH. The presentation will also be illustrated by a case discussion.

ROLE OF DIET AND EXERCISE AS MODIFIABLE RISK FACTORS IN DEMENTIA 1120 - 1140



Dr Adeline Chuo

Senior Consultant, Department of Geriatric Medicine
Sengkang General Hospital

As the number of patients suffering from dementia rapidly increases worldwide and there being next to no disease-modifying treatments currently available, there is an urgent need to look at ways to identify and manage modifiable risk factors contributing to this debilitating disease, such as diet and exercise which will have an impact in delaying the onset of disease.

In this lecture, we will be looking at the evidence thus far addressing diet and exercise as lifestyle risk factors and their impact on the prevention and progression of dementia.



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23 SEPTEMBER 2021 - TOPIC & ABSTRACT

SESSION 3: WHAT HAPPENS AFTER DIAGNOSIS

SESSION CHAIR - ADJ ASSOC PROF LIM SI CHING, SENIOR CONSULTANT,
DEPARTMENT OF GERIATRIC MEDICINE, CHANGI GENERAL HOSPITAL

CAREGIVERS: OUR PARTNERS IN THIS JOURNEY

1200 - 1220



Dr Tan Rui Qi

Consultant, Department of Psychological Medicine
Changi General Hospital

Caregiving for a person with dementia can be a long, intense and emotional journey. In this talk, we seek to understand how caregiving may impact caregivers, and explore the factors that can impact the quality of their caregiving experience. Interventions and resources available for caregivers will also be shared.

ASSESSMENT FOR MENTAL CAPACITY

1225 - 1245



Dr Peter Chow Chiu Leung

Consultant, Department of Geriatric Medicine
Changi General Hospital

Since the Mental Capacity Act Singapore (MCA) was passed by the Parliament in 2008 and endorsed by the Ministry in 2010, the mental capacity of an adult person becomes an important issue in both medical and social care. This is particularly common and essential in the care of persons with dementia.

The mental capacity of a person with dementia is crucial when the healthcare team formulates a treatment plan for the person. While the team should respect the patient's autonomy if the person has mental capacity, the team should act in the patient's best interests if the person has no mental capacity. However, with the gradual progress of dementia, the assessment of a person's mental capacity could be challenging. This difficulty will be more apparent in the situation of making a Lasting Power of Attorney (LPA).

This lecture will cover the general statutory principles provided in MCA to be applied during the assessment of mental capacity, the use of various instruments in making an advance decisions and the challenges in the situation where there is a family conflict in decision making and LPA.



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WELCOME ADDRESS

0830 - 0840

Assoc Prof Laura Tay

Deputy Head, SingHealth Duke-NUS Memory and Cognitive Disorder Centre (SDDC)
Head & Senior Consultant, Department of Geriatric Medicine, Sengkang General Hospital

SESSION 1: HOSPITAL - FRIEND OR FOE

SESSION CHAIR - ASSOC PROF LAURA TAY, HEAD & SENIOR CONSULTANT,
DEPARTMENT OF GERIATRIC MEDICINE, SENGKANG GENERAL HOSPITAL

THE ROLE OF HOSPITAL IN DEMENTIA CARE - JOINING THE DOTS IN DEMENTIA CARE FROM CENTRE OF EXPERTISE TO COMMUNITY

0845 - 0905



Adj Assoc Prof Lim Si Ching

Senior Consultant, Department of Geriatric Medicine
Changi General Hospital

The hospital has specialists and highly trained staff for dementia care, but hospitals are not always the best place for the persons living with dementia. Unexpected to many, staying in the hospitals may cause more harm than good.

THE ROLE OF USING IPADS ASA NOVEL INTERVENTION FOR THE OLDER PATIENTS IN HOSPITAL

0910 - 0930



Dr Vivian C Barrera

Resident Physician, Department of Geriatric Medicine
Changi General Hospital

The COVID-19 pandemic has caused huge disruptions to people's lives and put tremendous strains on the healthcare systems. The elderly patients in the hospitals, especially the elderly with cognitive problems develop delirium, agitation, loneliness and are at risk of hospital associated problems like falls due to unfamiliar environment and absence of their usual caregivers. The research examined the use of iPads as treatment modalities using simulated presence and various other therapies to manage behavioural symptoms. The patients showed active participation with improvement in patients' mood, sleep, sundown symptoms and reduction in their agitation. The nurses too gained benefit from this form of therapy.



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BRAIN DONATION: YOUR GIFT TO FUTURE GENERATIONS 0945 - 0950



Ms Jillian Terese Teo

Assistant Manager & Donor Coordinator
Brain Bank Singapore

{No abstract}

SESSION 2: PALLIATIVE CARE AND DEMENTIA

SESSION CHAIR - ADJ ASSOC PROF LIM SI CHING, SENIOR CONSULTANT,
DEPARTMENT OF GERIATRIC MEDICINE, CHANGI GENERAL HOSPITAL

PALLIATIVE CARE IN DEMENTIA 1000 - 1020



Dr Koh Lip Hoe

Senior Consultant and Head of Department, Department of Geriatric Medicine
Head of Palliative Care Service
Changi General Hospital

Dementia is a life limiting syndrome with no curative treatment. People with dementia may have similar symptom burden compared to those with malignant diseases. Caring for patients with dementia can also pose challenges such as uncertain prognosis, communication and behavioural issues. A palliative care approach in managing patients with dementia is helpful to improve symptom burden, rationalise treatment and reduce caregiver burden.



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ADVANCE CARE PLANNING PREFERENCES AND OUTCOMES AMONG ELDERLY PATIENTS IN GERIATRIC MEDICINE

1025 - 1045



Dr Sigaya Kenneth Villan

Staff Registrar, Department of Geriatric Medicine
Changi General Hospital

Advance Care Planning (ACP) is defined as a process of formal decision-making that aims to help patients to establish decisions about future care which take effect when they lose capacity. In people living with dementia, the capacity to make decisions is gradually lost; hence, advance planning for their care should be initiated while they are still able to make and express their decisions. In this talk, I will discuss about the relevance of ACP and share the findings on preferences and care outcomes of the elderly patients from a retrospective review of completed ACP discussions in the Department of Geriatric Medicine.

SESSION 3: INSTITUTION CARE AND DEMENTIA

SESSION CHAIR - ADJ ASSOC PROF LIM SI CHING, SENIOR CONSULTANT,
DEPARTMENT OF GERIATRIC MEDICINE, CHANGI GENERAL HOSPITAL

THE JOURNEY OF A PERSON WITH DEMENTIA (PWD) IN THE NURSING HOME

1105 - 1125



Assoc Prof Edward Poon Wing Hong

Senior Director, Department of Nursing
St Luke's Eldercare

This lecture will discuss the lived experience of PWD in the nursing home. As the elder is away from their own home and love one, we wanted to create a new model of care focusing on a Home Concept. We wanted to kill the 3 plagues in older person such as 1. Boredom, 2. Loneliness and 3. Helplessness.

With this transformation we sought to enhance the quality of life care through meaningful connections, seeing the world from their perspectives, understanding difficulties faced and learning to support, allow them to live their preferred lifestyle.



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NEW MODEL OF CARE FOR PERSON LIVING WITH DEMENTIA (PLD) IN A NURSING HOME (JADE CIRCLE)

1130 - 1150



Ms Low Mui Lang

Executive Director, Administration and Clinical
The Salvation Army, Peacehaven Nursing Home

Jade Circle is an initiative by Lien Foundation, Khoo Chwee Neo Foundation and The Salvation Army, Peacehaven Nursing Home to re-invent residential and community care with a focus on autonomy, choices & dignity for the seniors.

New Philosophy of Care based on Person Centred and Relationship Based Model through the application of 5 pillars of preserving individual identity, facilitating optimal function, promoting continuous connection & engagement, supporting lifelong learning & encouraging a legacy-driven purpose the outcomes were measured. 85% of the residents showed an improvement in their functional ability, 84% are purposefully engaged, 90% of the residents are connected and 61% showed improvement in total well-being scores. This is evidence base on how Person Living with Dementia (PLD) can live a meaningful engaged life in a residential setting provided with the right facility and model of care.

DEMENTIA CARE IN THE COMMUNITY: THE ROLE OF FAMILY DOCTORS

1155 - 1215



Dr Yap Chee Mun

Family Physician
Marine Parade Polyclinic

With a rapidly aging population in Singapore, resources for dementia care are increasingly scarce. With proper training and support, family doctors are well-placed to support dementia care in the community. Strong doctor-patient relationships coupled with their ease of accessibility allow family doctors to play an important role in early dementia diagnosis, dementia management and caregiver support. The SHP GRACE Cognition and Memory Clinic is an example of dementia care provided by family doctors.



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MEETING SECRETARIAT

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Corporate Communications Department

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