Conversations Around Brain Health: Reframing Expectations for Healthcare Providers, Patients, and Caregivers



By now, you have seen how you can help patients prevent or delay cognitive decline and dementia by discussing brain health and addressing modifiable risk factors. You can also diagnose Alzheimer's disease earlier, which benefits both patients and caregivers. We know that conversations about brain health, MCI, and dementia are challenging, but there are helpful strategies for starting a dialogue, communicating a diagnosis of MCI or dementia, and improving interactions with patients even as cognitive symptoms progress.

Let's explore some practical ways to begin these conversations.

- First, when you bring up the topic of brain health, consider screening older adults for hearing and vision loss. These deficits can interfere with effective communication and are modifiable risk factors for cognitive decline.
- Next, normalize the conversation. Introduce brain health as a routine topic and continue the conversation across visits to help patients feel more comfortable with the topic.
- Ask patients about memory or cognitive concerns and whether they have noticed any changes.
- Actively listen to both patients and family members. Thoughtful responses can prompt patients
 and family members to be more willing to share information. This is important because family
 members may be able to provide valuable insights about cognition-related symptoms and
 behaviors.
- Observe patients for subtle signs of cognitive impairment during your interactions, such as difficulty following conversations or recalling information.
- Consider adding a question about memory or cognition to health questionnaires that patients complete before appointments.
- Finally, leverage your EMR system to flag modifiable risk factors and prompt discussions during appointments.

These strategies may seem to be simple and straightforward, but there are often barriers that need to be addressed.

- Many patients feel embarrassed or ashamed about cognitive concerns due to the stigma surrounding dementia, and it's unlikely they know the differences between normal aging and clinical cognitive decline. To overcome this barrier, take the lead and treat these discussions as routine to normalize the topic and reduce stigma.
- Media portrayals of Alzheimer's disease as a terminal illness contribute to fear and skepticism.
 Educate patients about evidence-based interventions and provide clear, concise information on how these can help.
- Recognize that cultural norms influence how patients approach cognitive concerns. There may
 be language barriers and limited access to appropriate healthcare. Be sure to tailor your
 approach to reflect patients' social and cultural context, and partner with community resources
 when needed to bridge gaps.

So, you've had discussions about brain health with a patient. What if that patient has MCI or dementia? What is the best way to communicate the diagnosis? In a recent study, patients and caregivers indicated what they would want from clinicians in this situation: clear and empathetic communication, education, discussion of next steps, and access to care and support resources. Some best practices include:



Conversations Around Brain Health: Reframing Expectations for Healthcare Providers, Patients, and Caregivers



- Fostering relationships with patients and caregivers by building rapport through empathetic communication, and maintaining connections with patients and families.
- Educating patients and family by explaining how the diagnosis was reached, providing information about disease progression and expectations, and following up to ensure patients and families understand the information shared
- Taking a family-centered approach by meeting with family members prior to the diagnosis, when
 possible, and involving the caregiver or family when to discuss the diagnosis and include them in
 care planning.

Dementia affects language skills, making communication increasingly difficult over time. However, nonverbal cues often become more important than words. Here are tips to improve interactions with patients as symptoms worsen:

- Treat patients with dignity and respect, always addressing them as adults.
- Learn about the patient as a person, including their hobbies, likes, and dislikes.
- Pay close attention to their emotions and respond with empathy.
- Be mindful of your own nonverbal communication, such as facial expressions, body language, and tone of voice

Don't wait to bring up brain health with your patients! Begin the conversation now and continue it over time. Ask about cognitive concerns, engage family members, and tailor your approach to each patient's social and cultural context. Foster relationships with patients and families and adjust your communication strategies as symptoms worsen.

Effective communication is critical for supporting brain health and improving care for patients with dementia. By applying these strategies, you can make a meaningful difference in the lives of patients and their families, both today and in the future.

References

Borson S, Small GW, O'Brien Q, Morrello A, Boustani M. Understanding barriers to and facilitators of clinician-patient conversations about brain health and cognitive concerns in primary care: a systematic review and practical considerations for the clinician. *BMC Primary Care*. 2023;24:233.

Collins R, Hunt A, Quinn C, et al. Methods and approaches for enhancing communication with people with moderate-to-severe dementia that can facilitate their inclusion in research and service evaluation: findings from the IDEAL programme. *Dementia*. 2022;21(4):1135-53.

Dubois B, Padovani A, Scheltens P, Rossi A, Dell' Agnello G. Timely diagnosis for Alzheimer's disease: a literature review on benefits and challenges. *J Alzheimer's Dis*. 2016;49(3):617-631.

Gerontological Society of America. The GSA KAER Toolkit for primary care teams: supporting conversations about brain health, timely detection of cognitive impairment, and accurate diagnosis of dementia. Available at https://www.kaerbrain.org/. Updated 2024. Accessed October 22, 2024.

Halminen O, Vesikansa A, Mehtälä J, et al. Early start of anti-dementia medication delays transition to 24-hour care in Alzheimer's disease patients: a Finnish nationwide cohort study. *J Alzheimers Dis*. 2021;81(3):1103-1115.



Conversations Around Brain Health:

Reframing Expectations for Healthcare Providers, Patients, and Caregivers



Krainer J. Communication strategies in dementia care. Available at https://www.alz.org/media/gwwi/images/communication-strategies-and-complex-behaviors-handout-jkrainer.pdf. Updated October 2018. Accessed October 23, 2024.

Livingston G, Huntley J, Liu KY, et al. Dementia prevention, intervention, and care: 2024 report of the *Lancet* standing Commission. *Lancet*. 2024;404:572-628.

Mielke MM, Anderson M, Ashford JW, et al. Considerations for widespread implementation of blood-based biomarkers of Alzheimer's disease. *Alzheimers Dement*. 2024. doi: 10.1002/alz.14150. Online ahead of print.

Rasmussen J, Langerman H. Alzheimer's disease – why we need early diagnosis. *Degener Neurol Neuromuscul Dis.* 2019;9:123-130.

USAgainstAlzheimer's Center for Brain Equity. A practical guide: communicating brain health messages with Latino and African American Communities. Available at

https://www.usagainstalzheimers.org/sites/default/files/2022-

04/BrainHealthEquity_PracticalGuide_Final_Digital.pdf. Updated April 2022. Accessed September 23, 2024.

Wollney EN, Armstrong MJ, Bedenfield N, et al. Barriers and best practices in disclosing a dementia diagnosis: a clinician interview study. *Health Serv Insights*. 2022;15:11786329221141829.

Wollney EN, Bylund CL, Bedenfield N, et al. Persons living with dementia and caregivers' communication preferences for receiving a dementia diagnosis. *PEC Innov*. 2024;4:100253.

Woods B, Arosio F, Diaz A, et al. Timely diagnosis of dementia? Family carers' experiences in 5 European countries. *Int J Geriatr Psychiatry*. 2019;34(1):114-121.

