National Task Group Early Detection Screen for Dementia

NTG-EDSD

Background for NTG-EDSD

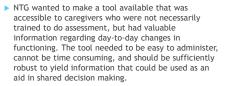
- ▶ The NTG-EDSD considered an administrative, and not a clinical assessment, tool.
- The NTG-EDSD was not designed to diagnose dementia, but to be a help in the early identification and screening process, as well as to provide information to begin the dialogue with health care professionals.

Why do we need early detection of Alzheimer's or other dementias?

With early detection, assessment and diagnosis can be carried out to determine whether cognitive changes are the result of a neuropathological process related to disease or trauma to the brain, or attributable to other causes, often treatable and reversible.

Early detection in persons with Intellectual Disabilities

- Early detection among persons with lifelong cognitive impairments can often be difficult and problematic. Specialized measures are needed that help take in account lifelong impairment and assist in picking up on subtleties in dysfunction.
- The NTG-EDSD was developed to address these issues, capturing early changes in function and specializing in accounting for subtleties in these changes.



The items that make up the NTG-EDSD are associated with the changes typically observed in dementia. Via the use of this screening tool caregivers or staff can substantiate if a person with and intellectual disability manifests these changes and can then share the information with health care providers.

Uses of the EDSD

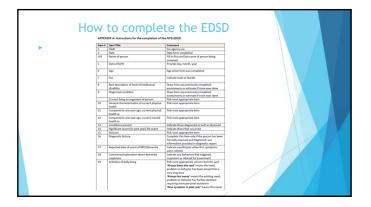
- The NTG-EDSD can be completed at any point in time on an adult with an intellectual disability. Minimally it can be used on an annual or as indicated basis with adults with Down syndrome beginning with age 40, and with other atrisk persons with intellectual or developmental disabilities when suspected of experiencing cognitive change.
- The initial review using the NTG-EDSD can be accompanied by notes indicating onset of conditions.
 Following the initial review which would serve as a baseline, the caregiver completing the form can indicate whether there has been a change within the last year since the last review.

Who can complete the NTG-EDSD?

- The form can be completed by anyone who is familiar with the adult (that is, has known him or her for over six months), such as a family member, agency support worker, or a behavioral or health specialist using information derived by observation and from the adult's personal record.
- The estimated time necessary to complete this form is between 15 and 60 minutes. Some information can be drawn from the individual's medical/health record

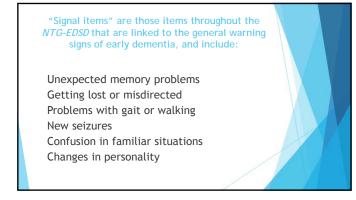
Useful information to have available to complete the EDSD

Sources such as the individual's medical record, information on living arrangement and personal functioning, as well as consensus information on functioning from other staff or family members would be highly beneficial to have on hand. A list of laboratory tests that can be useful in determining if there are medical conditions that may contribute to cognitive or adaptive changes are found in Appendix B.



How do we use the information completing the NTG-EDSD gives us?

- 1. If no "signal items" pop up as warranting further attention, then the form should be retained for comparison against any future administrations
- 2. If select signal items begin to show, then the form can be used to begin a conversation with available clinicians to determine their relevance and immediacy for concern
- 3. The information on the form can be shared with the examining physician during any health visit, and in particular during the annual wellness visit



Languages available

- ▶ The NTG-EDSD form is available in:
 - English
 - Dutch
 - German
 - Greek
 - Italian
 - Japanese Scottish
 - French
 - Spanish North American
- The NTG-EDSD Manual is available in:
 - English
- French
- Italian
- Other languages may become available see www.aadmd.org/ntg/screening
- for copies of available language versions for the tool and manual

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