Workshop 4: Cognitive Assessment For Older People in Daily Clinical Practice – A Primer

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The world faces a rapid population aging. Based on the World Health Organization (WHO) estimates, number of individuals older than 60 years is expected to double by 2030. With this demographic shift, non-communicable diseases are on the rise in the older population, especially neurocognitive disorders (NCD). Globally, 10 million new cases of dementia are detected every year according to the WHO (2019) data. Mild Cognitive Impairment (MCI) has an even greater prevalence of 15-20% with a conversion rate of 5-10% each year. NCD are not only progressive, but are associated with impairment of functioning, reduced autonomy, behavioral challenges, altered quality of life and caregiver burnout.

In light of the same, brief, tailored and culturally sensitive cognitive assessments need to be an integral component of routine mental healthcare for older people. However, training and validation related to such rating scales are often lacking, there exists ambiguity in their interpretation and their use is limited to tertiary settings. Further, various challenges in their use such as effect of education, ceiling effects, linguistics and patient comfort are often not taken into account.

With this background, the current interactive workshop will involve

- Understanding the various domains of cognitive assessments in older people
- Clinical nuances for early detection of cognitive deficits
- Familiarity with the basic rating scales (screening and batteries) for assessing cognitive deficits in older adults
- Bedside lobar assessments

*This workshop intends to make the participants comfortable and interested in using structured cognitive assessments and clinical evaluation of cognitive deficits as a routine component of their clinical care for older adults.

Workshop 5: Mitigating Ageism in Everyday Clinical Care

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Learning objectives: At the end of this workshop, participants will be able to:

- Integrate a human rights and dignity-based strategies into daily clinical care for older persons with mental health conditions
- Identify the effects of intersections of ageism, ableism, mentalism and elder abuse on the care provided to older persons with mental health conditions

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