

R042: Living alone with dementia: related use of drugs – QUB

Approximately one-third of community-dwelling people with dementia in the UK and the United States, and 51% of people with dementia in Germany live alone (Eichler et al., 2016). In 2010, there were 141,460 people with dementia living alone in the UK (Miranda-Castillo et al, 2010).

Research has explored differences between people with dementia living alone with those who live with an informal caregiver. No difference was found in drug-related problems, nutrition, quality of life, cognitive and functional impairment; however, people living alone used professional services, such as home care, more often (Eichler et al., 2016). Other research explored the unmet needs for people with dementia who live alone (Miranda-Castillo, Woods, & Orrell, 2010). These unmet needs include help with looking after home, help with self-care, and having company.

In Sweden, people with Alzheimer's disease who live alone were more likely to receive antidepressants, antipsychotics, hypnotics and sedative drugs compared to people who live with an informal caregiver (Cermakova et al., 2017). On the other hand, people living with a caregiver were more likely to receive cholinesterase inhibitors and cardiovascular medications. A significant difference was also found in dementia medication because people living with a caregiver were more likely to receive memantine than people living alone.

This study explores medication differences between people with dementia living alone, or living with an informal caregiver, or people with dementia living in care homes in Northern Ireland. The living arrangements of people with dementia will be initially measured through the Northern Ireland patient register alongside subsequent changes in marital status and transitions in care homes. A limitation of this study concerns the proxies to find the living arrangements of people with dementia (i.e. the marital status' data and the patient register) because this data might not be updated across the years. However, at present further data relating to carers isn't available through the Honest Broker Service.

Primary objectives:

- To explore differences in dementia medication (drug name and dosage) between people with dementia living alone, those living with an informal caregiver, and those who live in a care home.
- To explore differences in comorbidity medication (drug name and dosage) between people with dementia living alone, those living with an informal caregiver, and those who live in a care home.

Secondary objectives:

- To explore other differences in people living alone, including their age, gender, area of living and deprivation.