### Shpacpol MASTERCLASS IN DEMENTIA AND DELIRIUM

#### Masterclass Dementia and Delirium Program

This seminar will be delivered by a combination of a 6-week self-paced learning package followed by a live one-day seminar

Self-paced learning package

Available Friday 5 April 2024

Topic 1: Dementia		
Topics covered & presenters	Learning objectives	
Pathophysiology	<ul> <li>Outline the pathophysiology underlining common types of dementia</li> <li>Describe basic brain anatomy and how damage to different areas leads to specific cognitive symptoms</li> <li>Understand the risk factors for dementia and cognitive decline and what can be done to mitigate this risk</li> <li>Explain hypothesized pathophysiology for upcoming treatment options</li> </ul>	
Diagnosis and cognitive tests	<ul> <li>Outline the steps and complexities involved in a dementia diagnosis</li> <li>Understand how brain imaging techniques aid a dementia diagnosis</li> <li>Interpret the results of commonly used cognitive tests and how clinicians may apply these results in practice</li> </ul>	
Available treatments	<ul> <li>Overview the pharmacology of anticholinesterases and memantine</li> <li>Interpret the evidence for these therapies in the different types of dementia</li> <li>Discuss the limitations of these therapies and their role in practice</li> </ul>	
Future treatments	<ul> <li>Interpret the evidence for anti-amyloid therapies for Alzheimer's Disease</li> <li>Evaluate the proposed benefits and limitations of anti-amyloid therapy and their role in the management of dementia</li> </ul>	

## **shpacpd** MASTERCLASS IN DEMENTIA AND DELIRIUM

BPSD in dementia	<ul> <li>Describe the different types of behaviours that may occur and identify which behaviours are appropriate for pharmacological management</li> <li>Evaluate the evidence available for antipsychotic use in BPSD</li> <li>Compare and contrast the different antipsychotics used for BPSD and identify appropriate therapy</li> <li>Identify the risks involved in antipsychotic use and how antipsychotic stewardship may mitigate these risks</li> </ul>	
Topic 2: Delirium		
Topics covered & presenters	Learning objectives	
Background	<ul> <li>Describe the common types of delirium presentations and their associated risks.</li> <li>Identify the risk factors for delirium: modifiable and non-modifiable.</li> <li>Overview the epidemiology of delirium.</li> <li>Describe predisposing and precipitant risk factors for delirium.</li> <li>Define the concept of the vulnerable brain.</li> <li>Outline the systems integration failure hypothesis.</li> </ul>	
Diagnosis	<ul> <li>Describe the common tools used to detect delirium.</li> <li>Describe the detection and evaluation of a patient with delirium: to touch on delirium in different settings, ICU/post-op/EOLC etc.</li> </ul>	
Management & Pharmacist role	<ul> <li>Outline the non-pharmacological interventions used to manage patients with delirium.</li> <li>Describe the differences in pharmacological management based on delirium cause e.g. substance withdrawal, end of life.</li> <li>Discuss how medications can precipitate delirium.</li> </ul>	

# **shpacpd** MASTERCLASS IN DEMENTIA AND DELIRIUM

	<ul> <li>Describe common medications that can precipitate/compound delirium focusing on neurotransmitter pathways.</li> <li>Outline the evaluation and management of delirium and the role of interprofessional team members in collaborating to provide well-coordinated care and enhance patient outcomes.</li> </ul>
Behaviours of concern in delirium	<ul> <li>Describe the different types of behaviours that may occur and identify which behaviours are appropriate for pharmacological management in delirium.</li> <li>Evaluate the evidence available for antipsychotic use in delirium.</li> <li>Compare and contrast the different antipsychotics used for behaviours of concern in delirium and identify appropriate therapy</li> </ul>

### Shpacpd MASTERCLASS IN DEMENTIA AND DELIRIUM

#### Masterclass Dementia and Delirium Program

Live virtual seminar: Saturday 18 May 2024

All times listed are in AEST. The below may be subject to change

Time AEST	Session		
0900 - 0910	Welcome/introductions		
0910 - 0930	Q&A from self-paced learning package		
Part 1: Demer	Part 1: Dementia		
	Case Session 1: Dementia		
0930 – 1030	<b>Case lead: Anna Jennings,</b> Senior Clinical Pharmacist, Health of Older People Unit, Alfred Health, Vic		
1030- 1040	Morning tea break		
1040 – 1110	Presentation: Complex BPSD		
	Nadia Mouchalieh, Senior Aged Care Pharmacist, Austin Health, Vic		
	Case Session 1.2: Dementia		
1110 - 1140	<b>Case lead: Anna Jennings,</b> Senior Clinical Pharmacist, Health of Older People Unit, Alfred Health, Vic		
	Expert Panel Discussion – Dementia		
1140 - 1210	Danielle Byrne, Cognition Clinical Lead, Monash Health, Vic Dr Julie Lustig, Medical Lead for Delirium, Dementia and Cognitive Impairment, Monash Health, Vic Nadia Mouchalieh, Senior Aged Care Pharmacist, Austin Health, Vic		
1210 - 1240	Lunch break		
Part 2: Deliriu	Part 2: Delirium		
	Case Session 2: Hyperactive Delirium		
1240 – 1330	<b>Case lead: Alexandra Brown,</b> <i>Quality Coordinator for Outpatient and Diagnostic</i> Services; Clinical Pharmacist, Northern Health, Vic		
	Presentation: Managing behaviours of concern in delirium		
1330 - 1400	Dr Kim Jeffs, Geriatrician, Northern Health, Vic		

# Shpacpol MASTERCLASS IN DEMENTIA AND DELIRIUM

1400 – 1410	Afternoon tea break	
	Case Session 3: Hypoactive Delirium	
1410 – 1500	Case lead: Vidya Menom, Senior Pharmacist, RCT/OPAL - Geriatrics, Flinders Medical Centre, SA	
	Expert Panel Discussion – Hypoactive and Hyperactive Delirium	
1500 – 1530	Danielle Byrne, Cognition Clinical Lead, Monash Health, Vic Dr Julie Lustig, Medical Lead for Delirium, Dementia and Cognitive Impairment, Monash Health, Vic Gauri Godbole, Specialist Aged and Palliative Care Pharmacist, Gosford Hospital, NSW	
1530 – 1545	Presentation: Polypharmacy Stewardship Roles Dr Nashwa Masnoon, Postdoctoral Research Fellow, University of Sydney, NSW	
1545	Program wrap up & close	

Please note: presentation recordings from the live virtual seminar will not be available