Physiotherapists’ knowledge about dementia
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Introduction:
Dementia is now the 2nd leading cause of death of Australians (behind heart disease) with an increase in 5% in the last year and 30% in the last 5 years. Patients with dementia have more comorbidities than their age matched counter-parts and are 6-7 times more likely to have dementia as an additional diagnosis rather than the focus of care. Therefore all physiotherapists in the hospital, irrespective of their area of expertise need to have a basic knowledge of the disease and its trajectory.

Aim:
To identify and rectify knowledge gaps that exist about dementia amongst physiotherapists working in a major metropolitan hospital.

Method:
A cross-sectional survey of 50 acute & subacute physiotherapists (40% Grade 1s, 60% seniors) working within a major metropolitan hospital was completed using the Dementia Knowledge Assessment Tool version 2.

Procedure:
Following baseline measurement, a 45 minute dementia education session was provided by Senior Aged Care physiotherapists and the 42 staff in attendance were re-surveyed following this session.

Results:
Pre-education: Physiotherapists answered Q1, 2 and 21 well. 100% answered Q1 correctly (dementia occurs because of changes in the brain-yes), 94% answered Q2 correctly (brain changes causing dementia are often progressive - yes) and 96% answered Q21 correctly (exercise can sometimes be of benefit to people who have dementia-yes).

Physiotherapists demonstrated limited knowledge in Q 9, 14, 15 and 20. 58% answered Q9 correctly (dementia is likely to limit life expectancy-yes), 66% answered Q14 correctly (difficulty swallowing occurs in late stage dementia-yes), 72% answered Q15 correctly (movement is limited in late stage dementia-yes) and 76% answered question 20 correctly (it is impossible to tell if a person who is in the later stages of dementia is in pain-no).

Post-education: Improvement in knowledge occurred in Q 9 (98% correct), 14 (81% correct), 15 (88 % correct) and 20 (83% correct).

Conclusion:
There are key knowledge gaps within physiotherapy regarding dementia, but these can be addressed through targeted education. Physiotherapists’ lack of knowledge regarding dementia may have implications for clinical decision making and may be associated with adverse outcomes and costly futile interventions. Further research is required to develop specific education to increase physiotherapists’ knowledge to ensure best practice care.

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