NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE indicator guidance

Date first published on NICE menu: August 2013

Last update: August 2019

# Indicator NM72

# The percentage of patients with dementia (diagnosed on or after 1 April 2014) with a record of FBC, calcium, glucose, renal and liver function, thyroid function tests, serum vitamin B12 and folate levels recorded up to 12 months before entering on to the register

# Indicator type

General practice indicator for use outside the QOF.

Corresponding QOF indicator DEM005 was retired from the QOF in 2019 as data showed average numbers of eligible patients per practice to be less than 20 per year.

# Introduction

# Dementia is a term used to describe a range of cognitive and behavioural symptoms that can include memory loss, problems with reasoning and communication and change in personality, and a reduction in a person's ability to carry out daily activities, such as shopping, washing, dressing and cooking. It is a progressive condition, and progression will vary; each person will experience dementia in a different way.

Alzheimer’s Research UK ([Dementia statistics hub](https://www.dementiastatistics.org/)) report that in the UK that 850,000 people are estimated to be living with dementia. NHS Digital’s [recorded dementia diagnoses data](https://digital.nhs.uk/data-and-information/publications/statistical/recorded-dementia-diagnoses) (June 2019) reports that 472,408 have a coded dementia diagnosis. [QOF data for 2017/18](https://digital.nhs.uk/data-and-information/publications/statistical/quality-and-outcomes-framework-achievement-prevalence-and-exceptions-data/2017-18) shows around 446,000 people in England are currently on a general practice dementia register. The estimated diagnosis rate for people 65 years and over is 73% (2019). The current (2015) cost of dementia is £26 billion. A [report published by the Alzheimer’s society](https://www.alzheimers.org.uk/info/20025/policy_and_influencing/251/dementia_uk) in 2013 suggested that based on current trends, by 2025, 1,143,000 people will have dementia.

# Rationale

# A range of tests are carried out in people with suspected dementia, some of which are to exclude potentially reversible or modifying causes for the dementia and help exclude other diagnoses (such as delirium). Reversible or modifying cases include metabolic and endocrine abnormalities (for example, vitamin B12 and folate deficiency, hypothyroidism, diabetes and disorders of calcium metabolism).

In primary care, a range of screening tests for dementia are carried out, which should include routine haematology, biochemistry tests (including electrolytes, calcium, glucose, and renal and liver function), thyroid function tests and serum vitamin B12 and folate levels.

# Source guidance

[Dementia: assessment, management and support for people living with dementia and their carers](https://www.nice.org.uk/guidance/ng97/) (2018) NG97, recommendation 1.2.2.

# Specification

Numerator: The number of patients in the denominator with a record of FBC, calcium, glucose, renal and liver function, thyroid function tests, serum vitamin B12 and folate levels recorded between 12 months before or 6 months after entering on to the register.

Denominator: The number of patients with a dementia diagnosed on or after 1 April 2014.

Calculation: (Numerator/denominator) \* 100.

Exclusions: None.

Minimum population: The indicator would be appropriate to assess performance of collaborations or networks of GP practices serving populations of around 30,000 to 50,000.

# Further information

This is NICE indicator guidance, which is part of the [NICE menu of indicators](https://www.nice.org.uk/Standards-and-Indicators/index). This document does not represent formal NICE guidance.