Holistic Approach in Primary Care for Preventing Memory Impairment aNd Dementia (HAPPI MIND)

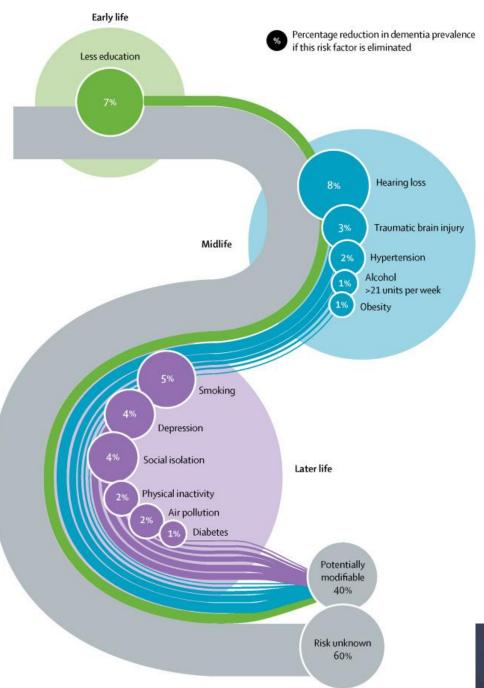






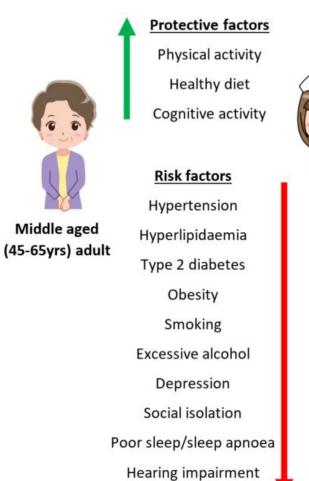
- 40% of all cases of dementia are associated with 12 potentially modifiable risk factors
 - Early-life: 7%
 - Mid-life: 15%
 - Later-life: 18%
- <u>Aim</u>: To evaluate the effectiveness of a multi-domain intervention (HAPPI MIND program) for assessing dementia risk and reducing dementia risk factors in middle-aged adults in the primary care setting.

Livingston G et al, Lancet. 2020:396(10248) p413-446



• <u>Methods</u>:

- 2-arm Cluster Randomised Controlled Trial
 - Minimal intervention vs HAPPI MIND intervention
- Recruiting primary care clinics in NSW & Vic
- Each clinic will recruit ~15 patients
 - English speaking, community dwelling
 - 45-65 years
 - ≥2 modifiable risk factors for dementia
 - ≥1 visit to the practice in past 12 months
 - owns and able to use a smartphone



High risk medication



Trained practice nurse and GP team



Minimal intervention

Clinic receives

- Practice nurse(s) trained to
 - identify risk factors for dementia
 - deliver Montreal Cognitive Assessment (MoCA)
- Remuneration of up to \$13,500 to cover staff time
 <u>Patient receives</u>
- Individualised dementia risk report
- Education on dementia risk reduction
- Referral to GP to discuss risk reduction

HAPPI MIND intervention

Clinic receives

- Practice nurse(s) trained to
 - identify risk factors for dementia
 - deliver Montreal Cognitive Assessment (MoCA)
 - perform motivational interviewing in line with behaviour change theory

Remuneration of up to \$32,500 to cover staff time

Patient receives

Individualised dementia risk report

HEPPI MIND HECOMP, Daisy Testduck Data Date: Dec 18, 2021 Health Measures Health Measures Heweby Diet Weeky Diet Weeky Diet Weeky Diet Weeky Diet

- Education on dementia risk reduction
- 6x sessions with trained nurse to develop and implement risk reduction behaviour change
- HAPPI MIND smart phone app (designed with CSIRO)



- Primary outcome
 - Change in Australian National University Alzheimer's Disease Risk Index (ANU-ADRI) dementia risk score between 12 months and baseline in participants enrolled in the HAPPI MIND program versus minimal intervention.

-13 0

64

- Secondary outcomes
 - Change in ANU-ADRI at 24 and 36 months from baseline
 - Change in QoL (EQ-5D) at 12, 24 and 36 months from baseline
 - Change in individual risk factors for dementia at 12 and 36 months from baseline
 - Economic evaluation of the HAPPI MIND intervention



Next steps...

- Complete the expression of interest (EOI) form
- Clinic eligibility:
 - Accredited practice as per RACGP standards for general practice
 - Have at least 500 middle-aged (45-65yrs) active patients in your database
 - Agree to allocated protected time for your practice nurse(s) to attend the training, conduct screening and recruitment, and deliver intervention
 - Have a private room or area in your clinic for completion of trial tasks
 - Be committed to completing the full 3-year trial
- Please send completed EOIs and any enquires to: •

happimind@monash.edu



Are your middle-aged patients worried about developing dementia? Do you help them to reduce their risk of developing dementia?

rensity is partnering with the Hunter New England and Central Coast Primary Health Network to offer practices an opportunity to implement one of two new primary care based interventions for assessing dementia risk and reducing dementia risk factors in middle-aged adults (aged 45 - 65 years).

in 2020, there was a	an estimated WHAT'S INVOLVED?		BENEF	TS FOR YOUR PRACTICE		
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	Be committed to completing the full 3-year trial. Orgoing support will be provided.					
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What will be the future benefits for general practice?



