

# Development of a Core Outcome Set to evaluate physical activity in people with dementia

Ana Carolina Vieira Gonçalves; Dr. Alda Marques; Dr. Sara Demain; Dr. Dinesh Samuel

## Introduction

It is predicted that dementia will affect 42.3 million people worldwide in 2020 [1]. **In the UK, 820 000 people live with dementia** [2], a figure forecasted to increase to 1 million by 2025 [1].

The National Institute for Health and Care Excellence, supported by a recent Cochrane review **recommend physical activity for people with dementia** [3,4].

Caution is still needed in the interpretation of positive results of physical activity in this population due to the **heterogeneity of the available research** [5]. This heterogeneity impairs an effective synthesis of evidence and limits the development of clear recommendations for clinical practice [6].



Figure 1: Representation of a person living with dementia. Available from: [a]

A **Core Outcome Set** is an agreed minimum collection of outcomes to be used as standard in interventions of a particular condition. Core Outcome sets allow direct comparison of the effects of different interventions, minimizing risk of outcome reporting bias and increasing the power of meta-analysis [7].

## Aim

Development of a **Core outcome set to evaluate physical activity in people with dementia**, applicable to exercise/physical activity interventions in all stages of the disease progression, across settings.

## Methods

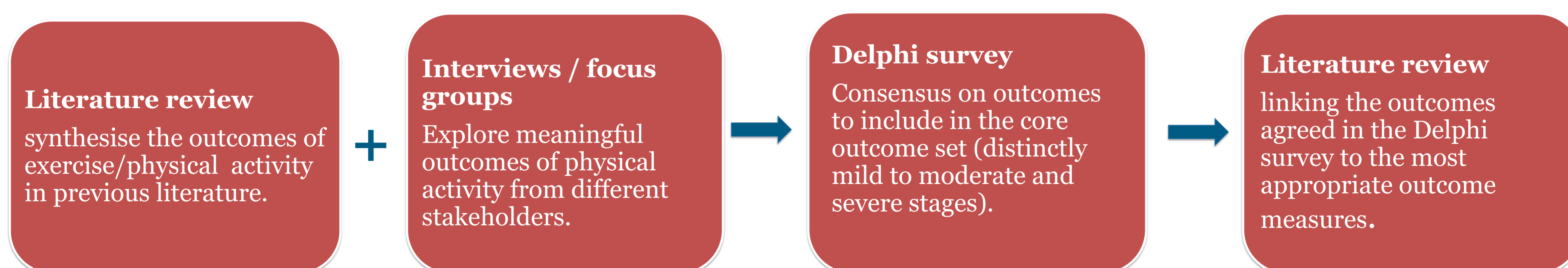


Figure 2: diagram describing the 4 phases of the development of this core outcome set .

## Conclusions

This project will:

- i) inform the **design of clinical trials** of exercise/physical activity including people with dementia and
- ii) provide **guidance for health care professionals**, assessing exercise/physical activity interventions for people with dementia, regarding the most appropriate outcomes and outcome measures

## References

- [1] Hill, K.D., et al., *Effectiveness of balance training exercise in people with mild to moderate severity Alzheimer's disease: protocol for a randomised trial*. BMC Geriatr, 2009. **9**: p. 29; [2] DoH, D.o.H., *Living well with dementia: A National Dementia Strategy*, DoH, Editor. 2009: UK.; [3] NICE, N.I.f.H.a.C.E., *Dementia - Supporting people with dementia and their carers in health and social care*, in *NICE clinical guideline 42*. 2006.; [4] Forbes, D., et al., *Exercise programs for people with dementia*. Cochrane Database of Systematic Reviews, 2013(12).; [5] Forbes, D., et al., *Exercise programs for people with dementia (Review)*. The Cochrane Collaboration, 2015(4); [6] Macefield, R.C., et al., *Developing core outcomes sets: methods for identifying and including patient-reported outcomes (PROs)*. Trials, 2014. **15**(49); [7] Williamson, P.R., et al., *Developing core outcome sets for clinical trials: issues to consider*. Trials, 2012. **13**(132). [a] <http://www.telegraph.co.uk/news/health/news/11532982/Dementia-research-gets-13-times-less-funding-than-cancer-figures-show.html>