

Dementia

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November 2025

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1. The impact of music therapy on agitation in elderly patients with dementia: A systematic review and meta-analysis

Authors: Hu, Jing and Xu, Ling

Publication Date: 2026

Journal: Archives of Gerontology and Geriatrics 140, pp. 106048

Abstract: Competing Interests: Declaration of competing interest The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.; Agitation impacts 50 - 80 % of elderly dementia patients, imposing burdens on caregivers and healthcare systems. Pharmacological treatments are limited, whereas non-pharmacological music therapy (MT) holds promise. This study sought to evaluate MT's efficacy in alleviating agitation. A thorough search across multiple databases was carried out, incorporating 14 studies (10 RCTs, 4 pre-post trials; n = 847). Meta-analysis demonstrated that MT significantly reduced agitation with a moderate effect size (d = 0.42). Subgroup analyses yielded consistent findings. Heterogeneity was low, and publication bias was negligible. MT effectively mitigated agitation in dementia patients despite heterogeneity in aspects like music duration and genre, underscoring its generalizability, particularly in resource-constrained areas and households lacking professional nursing support. It offers evidence for integrating MT into patient care. The review was registered on PROSPERO (CRD420251033860). (Copyright © 2025 Elsevier B.V. All rights reserved.)

2. Dementia risk literacy in older Australians: beyond knowledge

Authors: Eccleston, Claire;Kitsos, Alex;Vickers, James and Doherty, Kathleen V.

Publication Date: 2025

Journal: Public Health Research & Practice 35(4)

Abstract: Objectives: Knowledge about dementia risk influences preventive behaviours, yet has been primarily explored as risk factor awareness. This study investigated the understanding of dementia prevention by systematically assessing general dementia risk knowledge and participants' capacity to recognise specific evidence-based dementia risk mitigation strategies and identify common misconceptions about purported mitigation strategies.; Methods: This cross-sectional study used the Knowledge of Dementia Risk Reduction survey instrument to assess dementia literacy. The multi-component instrument assesses general knowledge about dementia risk, recognition of mitigation strategies for risk factors and the ability to appraise specific common misconceptions. Items were generated from a literature review and expert consultation. The instrument was administered to participants of an Australian online public health cohort study into dementia risk self-management.; Results: Participants numbered 3334 and had a median age of 62 years. Most (72.5%) identified as female; 44.5% had a university education, and 49.1% had a family history of dementia. Most participants (79.5%) agreed that you can reduce your chances of developing dementia. The most recognised mitigation strategies included increased physical activity, social activity and cognitive stimulation, with one-quarter of participants unsure about the management of cholesterol and adoption of a Mediterranean diet. Scores for general dementia risk knowledge and recognition of modifiable risk reduction were midrange and moderately correlated with each other. Correct appraisal of common misconceptions; for example, that aluminium exposure is a risk factor, was poor; only 5.0% of participants scored a midrange score (6/12) or higher, and only 0.2% of participants correctly identified all misconception items.; Conclusions: The study highlights the additional insights offered by simultaneously assessing multiple components of dementia risk literacy. Participants in the study demonstrated some knowledge of dementia risk and risk factor mitigation strategies, but had a poor appraisal of common misconceptions. Such insights can inform risk reduction messaging and enable more effective public health campaigns for future risk mitigation. (© 2025 The Author(s) (or their employer(s)). Published by CSIRO Publishing on behalf of the Sax Institute.)

3. Health Experiences of LGBTQ+ People Living With Dementia and Their Care Partners: A Scoping Review of Research and Policy

Authors: Harris-Gersten, Melissa; Simmons, Ames; Hendren, Stephanie and May, Jennifer

Publication Date: 2025

Journal: Journal of Aging and Health 37(10), pp. 669–682

Abstract: Competing Interests: Declaration of Conflicting Interests The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.; Objectives This scoping review aimed to synthesize research on the health experiences of LGBTQ+ people living with dementia (PLWD) and their caregivers, and the impact of health policies on this population. Methods Six databases were searched for research studies and policy literature. Titles, abstracts, and full texts were reviewed by a three-member team. Data was extracted and thematically analyzed. Feedback from 7 LGBTQ+ adults was collected through a community consultation session. Results A total of 9257 unique research and 945 policy citations were identified, of which 60 research and 19 policy papers were reviewed. Nine research studies and ten policy papers met eligibility criteria. Themes emerged through the analysis of research findings, the community listening session, and policy findings. Discussion Future work needs to disentangle the impact of policies on the health experiences of this population. Dementia-specific and LGBTQ+ inclusive services and policies are needed to address growing health disparities.

4. Recruiting Spousal Caregivers of People Living With Alzheimer's or a Related Dementia for Caregiver Intervention Research: Lessons Learned From a Feasibility Study

Authors: Henderson, Alexandria; Weiss, Samantha; Harris, Katherine; Maza, Valentina I.; Carney, Olivia L.; Wickline, Sierra; Widjaja, Trudy; Garrett, Brighton; Beach, Katherine and LeRoy, Angie S.

Publication Date: 2025

Journal: Journal of Applied Gerontology 44(12), pp. 2045–2049

Abstract: Improving caregivers' quality of life begins with conducting research that aims to understand caregiver's needs. However, caregivers may be reluctant to participate in research studies, adding to the importance of developing, tracking, and evaluating recruitment strategies. Here, we review the nationwide community outreach practices we implemented as our lab embarked on a program of research to develop an online intervention tailored for those caring for a spouse with Alzheimer's Disease or a Related Dementia (ARD). We made hundreds of "cold" calls and e-mails to organizations across the US who may have access to caregivers, but whom we had no prior relationship with. It took 36.5 contact attempts to possible recruitment sites for every 1 enrolled caregiver. While time consuming, this low-cost recruitment method may offer a route for research teams to recruit caregivers into research studies without access to a medical center or collaborating physician(s).

5. Cognitive Decline and Dementia in Chronic Widespread Pain: A Longitudinal Population-based Study

Authors: Jiang, Xue;Johansson, Elin;Nijs, Jo and Wang, Xueqiang

Publication Date: 2025

Journal: Anesthesiology 143(6), pp. 1560–1571

6. Effectiveness of various exercise on neuropsychiatric symptoms among older adults with mild cognitive impairment or dementia: A systematic review and network meta-analysis

Authors: Kong, Qinghuan;Huang, Kexin;Li, Shuang;Li, Xinyun;Han, Rui;Yang, Haiqi;Pu, Yuhang;Chen, Li and Jia, Yong

Publication Date: 2025

Journal: Ageing Research Reviews 112, pp. 102890

Abstract: Competing Interests: Declaration of Competing Interest The authors declare they have no known competing financial interests or personal or professional relationships that could have appeared to influence the work reported in this paper.; Objective: To identify the comparative efficacy of exercise for reducing neuropsychiatric symptoms (NPS) among older adults with mild cognitive impairment (MCI) or dementia.; Methods: Ten databases were systematically searched from their inception to April 29, 2025, with the latest update in July 13, 2025. Randomized controlled trials (RCTs) and quasi-experimental studies evaluating the effectiveness of exercise on NPS in older adults with MCI or dementia were included. Risk of bias was assessed using the Risk of Bias tool (RoB 2) tool for RCTs and the Joanna Briggs Institute (JBI) critical appraisal checklists. A random-effects network meta-analysis model was employed to synthesize all available evidence. The registration number of this study is CRD420251087869.; Results: A total of 34 studies involving 3655 participants were included. Among them, 29 RCTs showed a low to high risk of bias, while 5 quasi-experimental studies had moderate risk. A network meta-analysis revealed that for NPS, resistance exercise (SMD = -1.70, 95 % CI: -3.12 to -0.29) ranked first with 91.8 %; for cognition function, multi-component exercise (SMD = 1.45, 95 % CI: -0.56 to -3.47) ranked first with 80.2 %; for quality of daily life (QoL), aerobic exercise (SMD = 0.37, 95 % CI: -0.26 to -0.99) ranked first with 77.5 %; and for activities of daily living (ADL), finger exercise (SMD = 0.86, 95 % CI: 0.02 to -1.71) ranked first with 89.6 %.; Conclusions: This network meta-analysis suggests that resistance exercise is most likely the optimal intervention for improving NPS among older adults with MCI or dementia, while finger exercise appears most effective for enhancing ADL. However, due to the limited number of studies on resistance exercise, these findings should be interpreted with caution, and further high-quality research is needed to confirm its

7. Sepsis increases the risk of dementia in middle-aged and elderly adults: a large prospective cohort study

Authors: Liu, Jie;Fei, Yunhan;Wang, Enquan;Guo, Taipu;Cong, Wei;Cui, Yan and Xie, Keliang

Publication Date: 2025

Journal: Journal of Affective Disorders 391, pp. 120013

Abstract: Competing Interests: Declaration of competing interest The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.; Background & Aims: Sepsis is associated with dementia; however, there is little real-world evidence to study the long-term risk of sepsis for dementia. This study investigated the long-term risk of dementia after sepsis, combined with genetic data, to identify the effects of apolipoprotein E (APOE) on the relationship between sepsis and dementia and provide data support for the later management of sepsis.; Methods: This large-scale, prospective cohort study evaluated participants from the UK Biological Sample Bank. A multivariate Cox proportional hazards model was used to examine the relationship between sepsis and the risk of long-term dementia. A stratified analysis was conducted to elucidate the relationship between sepsis and dementia in different sex and age groups, as well as in APOE gene populations.; Results: Among 499,238 participants, sepsis was associated with higher dementia risk than chronic diseases. Although the risk of dementia after sepsis increased, this association gradually decreases over time with the progressive exclusions of follow-up. Subgroup analysis revealed that sepsis was an independent risk factor for dementia among aged 45 and above. Compared without sepsis patients, sepsis patients carrying APOE ϵ 2 and APOE ϵ 3 alleles had a 2.863 and 2.815 fold increased risk of dementia, respectively (all $P < 0.001$). However, no significant correlation was found between sepsis and dementia among participants carrying APOE ϵ 4 ($P = 0.097$).; Conclusions: Sepsis increases the short-term dementia risk but not long-term risk. Attention should be paid to people aged 45 and above after sepsis. Notably, The APOE gene affects the sepsis-dementia relationship. (Copyright © 2025. Published by Elsevier B.V.)

8. The short-term impact of music interventions on stress: Results of a multinational cluster-randomized trial using salivary cortisol and alpha-amylase assessments in care home residents with dementia

Authors: Rasing, Naomi L.;Janus, Sarah I. M.;Vink, Annemieke C.;Frischen, Ulrike A. S.;Neuser, Johanna;Wake, Jo Dugstad;Skoluda, Nadine;Sveinsdottir, Vigdis;Geretsegger, Monika;Langeland, Elias;Kreutz, Gunter;Gold, Christian;Nater, Urs M. and Zuidema, Sytse U.

Publication Date: 2025

Journal: Psychoneuroendocrinology 182, pp. 107640

Abstract: Competing Interests: Declaration of Competing Interest The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.; Objective: Stress can have a negative impact on well-being and quality of life in people with dementia. Our study explored the effect of music as a potentially stress-reducing strategy in care home residents with dementia and depression of 25 care home units included in the multinational cluster-randomized controlled trial Music Interventions for Dementia and Depression in Elderly care (MIDDEL).; Methods: Group music therapy consisted of singing well-known songs and reminiscence in small groups, optionally improvising on instruments and moving to music. Choir singing consisted of rehearsing well-known and new songs in larger groups of 10 + participants. During month 1, 3, and 6, saliva samples were collected 10 min before and 15 and 60 min after a session of group music therapy ($n = 55$), recreational choir singing ($n = 72$) or a book reading ($n = 56$) in 183 care home residents, along with a stress visual analogue scale.; Results: Of 1014 saliva samples collected, 671

(66 %) were valid for alpha-amylase assay and 633 samples (62 %) for cortisol assay. Significant pre/post session changes were found for salivary cortisol, alpha-amylase, and subjective stress within study arms, although no significant difference was found between study arms.; Conclusion: Group interventions, including music therapy, can have a positive impact on stress levels in care home residents with dementia. The level or intensity of participation required from the person with dementia may play a role in the impact of music on stress. Findings indicate it is feasible to collect saliva in persons with dementia non-invasively. Future studies in this population should consider strategies to improve validity of data, such as stimulating saliva flow.; Clinicaltrials: gov registration NCT03496675. (Copyright © 2025 The Authors. Published by Elsevier Ltd.. All rights reserved.)

9. The risk of dementia in breast cancer survivors: a meta-analysis of observational studies

Authors: Tan, Shijun;Yang, Jiawei;Guo, Guiping;Hong, Shicui;Guo, Li and Situ, Honglin

Publication Date: 2025

Journal: Annals of Medicine 57(1), pp. 2529579

Abstract: Objective: Cognitive problems are among the most common post-treatment symptoms experienced by breast cancer patients, raising concerns about their long-term cognitive health. This meta-analysis aims to clarify the relationship between cognitive decline in breast cancer survivors and the risk of developing dementia.; Materials and Methods: PubMed, Embase, and Cochrane Library were searched for cohort studies published from database inception to August 27, 2024, using medical subject headings (MeSH) and keywords. All statistical analyses were performed using Stata statistical software version 14.0. If $p > 0.1$ and $I^2 \leq 50\%$, a fixed-effects model was adopted. If $I^2 > 50\%$, a random-effects model was adopted. The funnel plot and Egger's test were used to evaluate publication bias.; Results: The meta-analysis, comprising 9 studies and involving 887,678 individuals, revealed that breast cancer survivors did not exhibit an increased risk of all-cause dementia RR = 0.997, 95%CI (0.965, 1.029); $I^2 = 0.0\%$, $p = 0.386$], Intriguingly, endocrine therapy RR = 0.904, 95%CI (0.865, 0.946); $I^2 = 41.7\%$, $p = 0.161$] and chemotherapy RR = 0.754, 95%CI (0.604, 0.940); $I^2 = 0.0\%$, $p = 0.592$] may even serve as potential protective factors against dementia in breast cancer survivors.; Conclusion: This meta-analysis indicates that breast cancer survivors do not face an elevated risk of all-cause dementia. Furthermore, treatments such as endocrine therapy and chemotherapy may have a protective effect against dementia. Further research is needed to explore the underlying mechanisms and confirm these findings.

10. Meta-analyses of personality change from the preclinical to the clinical stages of dementia

Authors: Terracciano, Antonio;Luchetti, Martina;Karakose, Selin;Miller, Amanda A.;Stephan, Yannick and Sutin, Angelina R.

Publication Date: 2025

Journal: Ageing Research Reviews 112, pp. 102852

Abstract: Competing Interests: Declaration of Competing Interest The authors have no actual or potential perceived conflicts of interest to declare.; Personality changes are a clinical criterion for dementia diagnosis, yet their progression across disease stages remains unclear. This systematic review and meta-analyses examined change in the five major personality traits across the preclinical, transitional, and clinical dementia stages. We conducted pre-registered searches of three databases from their inception to November 2024. The standardized mean difference (SMD) with 95 % CIs were combined in random-effects meta-analyses. Prospective studies based on self-reports of personality (13 studies; N = 6895) found subtle changes in the preclinical and transitional stages (SMD = 0-0.2), which became more pronounced (SMD = 0.3-0.5) in the clinical stage. Retrospective studies based on informant ratings (26 studies; N = 1069) found smaller changes during mild cognitive impairment compared to dementia, with large (>1 SMD) increases in neuroticism and decreases in extraversion and conscientiousness. Surprisingly, changes in frontotemporal dementia were slightly smaller than

those observed in Alzheimer's disease. By triangulating findings across study designs, we conclude that personality changes are subtle and inconsistent in the early preclinical stage. Personality changes become significant and pronounced as the disease progresses, in line with the rise of emotional and behavioral symptoms. Future multimethod studies should examine to what extent the rate of change is related to the underlying neurodegenerative processes. Our findings provide a framework for interpreting the timing and magnitude of non-cognitive changes in dementia, informing disease monitoring and targeted symptom management. (Copyright © 2025 Elsevier B.V. All rights reserved.)

11. Does pneumonia increase the risk of dementia and cognitive decline? A systematic review and meta-analysis

Authors: Yan, Zhen;Zhang, Min;Yu, Lifang and Zhang, Fulian

Publication Date: 2025

Journal: Annals of Medicine 57(1), pp. 2517376

Abstract: Objective: The link between pneumonia and elevated risk of dementia and cognitive decline is still unclear. This study aims to evaluate the link between pneumonia and the subsequent risk of developing dementia.; Methods: MEDLINE (via PubMed), EMBASE (Excerpta Medica Database), Cochrane Central Register of Controlled Trials (CENTRAL), Web of Science, Scopus, ClinicalTrials.gov and the World Health Organization International Clinical Trials Registry Platform (WHO ICTRP) databases were searched for studies, published up to 29 February 2024. Eligible studies provided data on adult patients diagnosed with pneumonia and reported outcomes related to dementia or cognitive decline. Quality of observational studies was assessed by the Newcastle-Ottawa Scale. Pooled hazard ratios (HRs) and odds ratios (ORs) with 95% confidence intervals (CI) were calculated using random-effects models. Subgroup analyses were done based on age, geography, study design and pneumonia type.; Results: Ten studies were included, encompassing a diverse population sample. Pooled analysis demonstrated a significant correlation between pneumonia and increased risk of dementia (HR = 1.738; 95% CI: 1.358 to 2.225), with substantial heterogeneity across the studies ($I^2 = 97.1\%$). Subgroup analysis indicated that the association was more pronounced in older adults and varied slightly by region and study design. The risk did not significantly differ between bacterial and non-specific pneumonia types.; Conclusions: This meta-analysis suggests that pneumonia is associated with a significantly higher risk of developing dementia. These findings underscore the need for diligent monitoring and preventive strategies for patients recovering from pneumonia, particularly among the elderly, to mitigate potential cognitive decline.PROSPERO registration number: CRD42024520631.

12. The potential for clinical pharmacists to support older people with dementia in the community: A qualitative interview study.

Authors: Burnand A.

Publication Date: 2025

Journal: British Journal of Clinical Pharmacology 91(11), 3141-3149.

Abstract: [The prevalence of multiple long-term health conditions including dementia is rising globally. Managing dementia presents significant challenges for healthcare providers. Clinical pharmacists, with expertise in medication management, have emerged as valuable members of the primary care team.]

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