The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

A Practical Two-Stage Frailty Assessment for Older Adults Undergoing Aortic Valve Replacement.
[The chair rise test with targeted CGA may be a practical strategy to identify older patients at high risk for mortality and poor recovery after SAVR and TAVR in whom individualized care management should be considered]

[Cognitive problems are common after stroke and their identification and management is important for survivors, carers and clinicians. However, the appropriateness of the screening methods and ways in which results inform community clinical care have not been established. The aim of this phase of the Cognitive Management Pathways in Stroke Services study was to explore key issues to undertaking cognitive assessment, particularly in community settings.]
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Dementia: prevalence and pathophysiology.
[Key points: The UK, in common with other industrialised societies, has an ageing population; Older people are at increased risk of dementia; however, the incidence of dementia is falling due to improvements in health; Women are twice as likely as men to have dementia and research is required to find the reasons for this; Staff working in care services require a good knowledge of dementia in order to provide this vulnerable population with high-quality care.]
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Does Sensory Retraining Improve Sensation and Sensorimotor Function Following Stroke: A Systematic Review and Meta-Analysis.
[Findings from the meta-analyses and single studies highlight some support for the effectiveness of passive sensory training in relation to sensory impairment and motor function. However, evidence for active sensory training continues to be limited. Further high-quality research with rigorous methods (adequately powered with consistent outcome measures) is required to determine the effectiveness of sensory retraining in stroke rehabilitation, particularly for active sensory training.]
Freely available online
Frailty and Associated Outcomes and Resource Utilization Among Older ICU Patients With Suspected Infection.


[Suspected infection and sepsis are common conditions seen among older ICU patients. Frailty has prognostic importance among critically ill patients, but its impact on outcomes and resource utilization in older patients with suspected infection is unknown. We sought to evaluate the association between patient frailty and outcomes of critically ill patients with suspected infection. We also evaluated the association between frailty and the quick Sequential Organ Failure Assessment score.]

Handbags and glad rags: preserving identity in dementia.


[Key points: Maintaining personhood and identity in dementia may often become dependent upon the support of others—both professional and family carers. Clothing and accessories are an important element in displaying who we are to the outside world; this is even more important in dementia. The handbag and its contents can be used to reinforce memories, personhood and identity.]

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Impact of community based screening for hypertension on blood pressure after two years: regression discontinuity analysis in a national cohort of older adults in China

BMJ 2019::doi.org/10.1136/bmj.l4064.

[Community based hypertension screening and encouraging people with raised blood pressure to seek care and adopt blood pressure lowering behaviour changes could have important long term impact on systolic blood pressure at the population level. This approach could address the high burden of cardiovascular diseases in China and other countries with large unmet need for hypertension diagnosis and care.]

Freely available online

Low intake of vitamins B6, C, E and folate from dietary sources may lead to a higher risk of developing frailty in older adults.

Fletcher J. Evidence-Based Nursing 2019;22(3):88.

[Frailty was determined by participants reporting more than 3 out of 5 predetermined criteria. Over the course of the follow-up period, 89 of the included participants developed frailty by these criteria. Those who developed frailty were mostly older women with a higher body mass index, lower educational level and lower intake of most of the 10 evaluated vitamins. However, for individual vitamins, results were statistically significant only for dietary intake of vitamins B6, C, E and folate.]

Available with an NHS OpenAthens password

Marine-derived n-3 fatty acids therapy for stroke.

Alvarez Campano CG. Cochrane Database of Systematic Reviews 2019;6:CD012815.

[Currently, with stroke burden increasing, there is a need to explore therapeutic options that ameliorate the acute insult. There is substantial evidence of a neuroprotective effect of marine-
derived n-3 polyunsaturated fatty acids (PUFAs) in experimental stroke, leading to a better functional outcome.]

**Pharmacotherapy for hypertension in adults 60 years or older.**
Musini VM. *Cochrane Database of Systematic Reviews* 2019;6:CD000028.
[Elevated blood pressure (known as ‘hypertension’) increases with age - most rapidly over age 60. Systolic hypertension is more strongly associated with cardiovascular disease than is diastolic hypertension, and it occurs more commonly in older people. It is important to know the benefits and harms of antihypertensive treatment for hypertension in this age group, as well as separately for people 60 to 79 years old and people 80 years or older.]

**Stroke in Patients With Peripheral Artery Disease.**
Kolls BJ. *Stroke* 2019; doi: 10.1161/STROKEAHA.118.023534.
[In patients with symptomatic PAD, ischemic stroke and TIA occur frequently. Comorbidities such as age, prior stroke, prior atrial fibrillation/flutter, diabetes mellitus, higher blood pressure, prior amputation, lower ankle-brachial index, and geographic region were each independently associated with occurrence of all-cause stroke. Use of ticagrelor, as compared with clopidogrel, was associated with a lower adjusted rate of ischemic and all-cause stroke.]

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**When words make a difference in palliative care.**
Nyatanga B. *British Journal of Community Nursing* 2019;24(7):347.
["Over my years of working in and teaching palliative care, I have often used the terms ‘empathy’, ‘sympathy’ and ‘pity’—in some cases, even interchangeably...In this column, I intend not only to define them, but also to show the impact they have on communication with patients in their palliative care phase. The definitions I have chosen here are the ones I use when teaching, which are scenario rather than dictionary-based, to help illustrate these concepts visually."]

**Reports**
*The following report(s) may be of interest:*

**Going the Extra Step: A compendium of best practice in dementia care.**
Housing Learning and Improvement Network (Housing-LIN); 2019.
[This case study report provides examples of extra care schemes and other housing-related community services supporting people with dementia to develop meaningful relationships to reduce social isolation and loneliness.]

*Freely available online*

**Healthy lifestyle reduces dementia risk even in those with genetic risk factors.**
NHS Behind the Headlines; 2019.
[This report highlights the benefits of a healthy lifestyle in reducing dementia risk, even in individuals with genetic risk factors.]
Researchers found that among participants who had a higher genetic risk of getting dementia, only about 11 in every 1,000 with healthier lifestyles developed the condition during follow-up, compared with about 18 in every 1,000 with unhealthy lifestyles.]

Freely available online

**Over-75s who stop taking statins ‘may raise risk of heart attack’**.
NHS Behind the Headlines; 2019.

[French researchers looked at records of more than 120,000 people who were regularly taking statins at age 75, who had not previously had a heart attack or stroke. They followed them up for an average 2.4 years. They found that people who stopped taking their statins were about a third more likely to be admitted to hospital after a heart attack or stroke, compared to those who continued with their medication.]

Freely available online

**Pulmonary rehabilitation may modestly improve anxiety and depression in adults with chronic obstructive pulmonary disease.**
NIHR Dissemination Centre; 2019.
[https://discover.dc.nihr.ac.uk/content/signal-000794/copd-rehabilitation-may-improve-anxiety-and-depression](https://discover.dc.nihr.ac.uk/content/signal-000794/copd-rehabilitation-may-improve-anxiety-and-depression)

[NIHR Signal. This review of 10 trials is the first to show that pulmonary rehabilitation – already known to improve quality of life and exercise capacity - may also improve anxiety and depression, which are common in people with COPD.]

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The joint campaign from CILIP and Health Education England
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