

Freedom of Information Act 2000

The Royal Cornwall Hospitals NHS Trust Response to Information request

Date Request Received: 16th June 2025

FOI Ref No 29204

Requested Information / Response:

1. I would be grateful if you could send the Trust's most recent planning document(s) for the diagnosis and treatment of Alzheimer's Disease including implementation of lumbar punctures (CSF) and Blood-based Biomarker testing. Please include planning documents that cover the entire Trust and specific department plans, such as neurology, psychiatry, care of the elderly, pathology or memory clinic teams.
 - **Royal Cornwall Hospitals Trust (RCHT) has a dementia pathway for caring for patients with dementia. A new guideline on the dementia pathway has recently been written by the Trust's dementia and delirium lead. This cannot be shared at this time as it is currently being reviewed by the panel and cannot be implemented prior to its acceptance.**
 - **RCHT does not have a protocol for the diagnosis of general dementia nor a specific protocol for the diagnosis of Alzheimer's Disease. This is because RCHT is an acute trust and Alzheimer's Disease and/or general dementia should not be diagnosed in an acute hospital setting, unless it is the cause for admission.**
 - **Most patients would present to the Trust with delirium or mild cognitive decline and would need a dementia assessment to be diagnosed. These patients would be referred to the Memory Assessment Service (not operated by RCHT) and receive an assessment after they are discharged. Because the admission may have caused or could be due to delirium, completing the assessment after discharge gives the patient time to return to their normal baseline, providing the opportunity for a fair assessment.**
 - **There are diagnostic criteria for Alzheimer's Disease, and for other dementias, but these criteria are not stipulated in a formal protocol. Using Lumbar Puncture to look for biological markers is not safe practice for this group of patients as the results do not confirm diagnosis but merely indicate if Tau and Amyloid proteins are detected. These are proteins that exist within the body, therefore true diagnosis can only be confirmed at postmortem.**

2. How many patients were diagnosed with Alzheimer's Disease (ICD-10 codes = G30, G30.1, G30.8, G30.9, F00, F00.1, F00.2 or F00.9) in your Trust in the last 12-month period for which data are available?

- There were **873** completed inpatient spells* where the patient had a coded diagnosis including at least one of the below ICD-10 codes (in any position), between 01/06/2024 – 31/05/2025 (inclusive):
 - G30.0 - Alzheimer disease with early onset
 - G30.1 - Alzheimer disease with late onset
 - G30.8 - Other Alzheimer disease
 - G30.9 - Alzheimer disease, unspecified
 - F00.0 - Dementia in Alzheimer disease with early onset
 - F00.1 - Dementia in Alzheimer disease with late onset
 - F00.2 - Dementia in Alzheimer disease, atypical or mixed type
 - F00.9 - Dementia in Alzheimer disease, unspecified

Please note that this is a count of inpatient spells and therefore the same patient may be counted more than once.

**A Spell is the total inpatient stay linking the 1st Consultant Episode ('Admitting' episode) with the Last (Final) Consultant Episode ('Discharging' episode)*

3. How many patients were diagnosed with Mild Cognitive Impairment and / or Mild Dementia due to Alzheimer's Disease (ICD-10 codes = G31.84, G30.1, or MMSE scores = 21 to 24) in your Trust in the last 12-month period for which data are available?

- There were **64** completed inpatient spells* where the patient had a coded diagnosis including the below ICD-10 code (in any position), between 01/06/2024 – 31/05/2025 (inclusive):
 - F06.7 - Mild cognitive disorder

We are unable to classify 'mild' dementia within ICD-10.

Please note that this is a count of inpatient spells and therefore the same patient may be counted more than once.

***A Spell is the total inpatient stay linking the 1st Consultant Episode ('Admitting' episode) with the Last (Final) Consultant Episode ('Discharging' episode)**

4. Where, if at all, does the Trust carry out lumbar punctures (cerebrospinal fluid) for diagnosing patients with Alzheimer's Disease?

	Yes / No
Lumbar punctures carried out within the Trust itself	NO
Lumbar punctures referred elsewhere and carried out external to the Trust	NO
Trust does not carry out lumbar punctures to diagnose Alzheimer's Disease	YES

- **As explained in the response to question 1, RCHT does not perform lumbar punctures to diagnose Alzheimer's Disease.**

5. Please provide a list of the full names of other Trusts or other organisations to which the Trust refers patients for lumbar punctures in the diagnosis of Alzheimer's Disease.

Full name of organisation(s)
None, RCHT does not refer patients for lumbar punctures for the purpose of diagnosing Alzheimer's Disease.

6. What is the average waiting time for a patient to get an appointment for a lumbar puncture to test for a diagnosis of Alzheimer's Disease?

	Number
Average waiting time (weeks)	N/A

- **RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer’s Disease.**

7. How many lumbar punctures to test for Alzheimer’s Disease took place in the last 3-month period for which data are available?

	Number of procedures
Number of lumbar punctures	N/A

- **RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer’s Disease.**

8. How many Blood-based Biomarker (BBBM) tests from Cerebrospinal fluid (CSF) to test for Alzheimer’s Disease were conducted in the last 3-month period for which data are available?

	Number of tests
Number of Blood-based Biomarker tests (CSF)	N/A

- **RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer’s Disease.**

9. Where, if at all, does the Trust carry out Blood-based Biomarker (BBBM) tests from Cerebrospinal fluid (CSF) for diagnosing patients with Alzheimer’s Disease?

	Yes / No
Pathology laboratory within the Trust	NO
Pathology laboratory external to the Trust	NO
Trust does not test for BBBMs to diagnose Alzheimer’s Disease	YES

- **RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer’s Disease.**

10. Please provide a list of the full names of other Trusts or other organisations, to which the Trust refers Blood-based Biomarker tests from cerebrospinal fluid (CSF) for pathology in the diagnosis of Alzheimer’s Disease.

Full name of Trust or organisation(s)
RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer’s Disease and therefore, does not refer BBM tests from CSF for pathology in diagnosis of Alzheimer’s Disease

11. What is the average waiting time for pathology results to come back from Blood-based Biomarker tests?

	Days
Average waiting time (days)	N/A

- **RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer’s Disease.**

12. To what extent are there plans for service improvement of diagnosing Alzheimer’s Disease?

	Yes / No
Implementation of plans has started	Please see the comments below
A plan exists and implementation has not started	
A plan is being developed	

There is no plan	
Other – please state	

- In line with the national audit on delirium and dementia, RCHT have instigated a hospital wide training programme to teach key, front door services how to recognise and treat dementia and delirium.
- New policy documents have been written in the last 12 months
- RCHT has released a dementia and delirium podcast, which can be found online, to help the local population identify loved ones with potential risk symptoms.
- The Trust’s Dementia and Delirium Lead has become the chair for the dementia conference for next year and will be focusing on the signs and symptoms of dementia, as well as how to recognise them. This conference is for professionals and families, not just medical staff, and will be open to the Cornish Community.

13. Are the plans for service improvement of diagnosing Alzheimer’s Disease related to:

	Yes / No
Cognitive assessment services	NO
Biomarker services	NO
None / neither	YES

14. Which of the following services does the Trust have in place in preparation for increased service delivery for Alzheimer’s Disease?

	Related to administration of <u>lumbar punctures</u> Yes / No	Related to <u>Blood-based Biomarker testing</u> Yes / No
Budget	NO	NO



People	NO	NO
Training	NO	NO
Clinic space / capacity	NO	NO
Governance arrangements	NO	NO

- RCHT does not carry out lumbar punctures for blood-based biomarkers for the purpose of diagnosing Alzheimer's Disease.

Attachment(s):

No Attachment(s)

Date Response sent: 7th July 2025