

Primary care prescribing of anti-dementia medications: exploring inequalities and improving practice.



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This study of over 240,000 patients reveals that anti-dementia medication prescribing in England is lower than expected and inequitable, with significant disparities in access based on socio-economic status, ethnicity, and the presence of learning disabilities.

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	REFERENCES
Despite established guidelines, there is limited evidence regarding the influence of patient-level characteristics on anti-dementia medication prescribing and the prevalence of memantine and acetyl-cholinesterase inhibitor co-prescribing in clinical practice.	• Study Design: A retrospective cohort study of people with Alzheimer’s or Lewy-Body dementia using the Clinical Practice Research Datalink database (2006-2024) and linked Index of Multiple Deprivation data. • Statistical Methodology: Cox-regression models, adjusted for demographics and comorbidities, and UK region. • Outcomes: Ever being prescribed an acetyl-cholinesterase inhibitor, memantine, and time-series analyses of how prescribing has changed over time.	• Among 242,007 eligible patients, 63.1% received anti-dementia medication, with significant disparities in prescribing rates associated with socioeconomic deprivation, ethnicity, and the presence of learning disabilities. • Despite most people likely being eligible for both mediations based on guidance, co-prescribing peaked at only 4.2% people.	These findings reveal significant inequities in access to evidence-based dementia treatments, specifically among socio-economically deprived groups, minority ethnicities, and patients with learning disabilities. Addressing these disparities is essential, underscoring a critical need to prioritise equitable access to existing therapies alongside the development of newer, more expensive treatments.	Morris C, Mok PLH, Robinson DL, Allan L, Ashcroft DM, Blakeman T, et al. Prescribing of anti-dementia medications in primary care: A retrospective cohort study in 1489 English General Practices. PLoS One. 2026 Jun 1;21(6):e0347921. https://doi.org/10.1371/journal.pone.0347921 Scan the code below to see the full findings, forest plots and time series analyses   ALZHEIMER'S ASSOCIATION AAIC >26