

Digital tools for Dementia detection and referral pathways in Nigeria



Temitope Farombi, Agustin Ibanez, Rufus Akinyemi, Katherine Possin.



Integrating digital cognitive assessment with telemedicine in Nigerian primary care has the potential to improve early dementia detection by providing an accurate, feasible, and scalable referral pathway for resource-limited settings.

INTRODUCTION



Despite strong international evidence supporting digital cognitive assessment via telemedicine, its integration into a telemedicine-supported dementic care model has not yet been evaluated in Nigeria.

Hence, this study will assess the diagnostic performance, feasibility and acceptability using the Brain Health Assessment (TabCAT) with telehealth supported referral system in Nigerian Health primary care setting.

METHODS

- **Study design:** Mixed-methods study combining a cross-sectional diagnostic accuracy design with a pre-post quasi-experimental evaluation.
- **Setting:** Southwest Nigeria.
- **Participants:** Fifty primary care physicians (25 trained) will screen 192 older adults (≥ 60 years). AD (30), MCI (72), and healthy controls (90).
- **Tools:** Brain Health Assessment (TabCAT), Montreal Cognitive Assessment (MoCA), and IDEAS tools.
- **Diagnostic confirmation:** Diagnoses confirmed by neurologists via a mobile health application.
- **Outcomes evaluated:** Diagnostic accuracy, telemedicine use, dementia screening.
- **Analysis:** Appropriate statistical analyses will be used to assess outcomes and the impact of physician training.

EXPECTED OUTCOME



The study is expected to demonstrate that the Brain Health Assessment (TabCAT) has good diagnostic performance for identifying cognitive impairment in Nigerian primary care settings. Its integration with a telehealth-supported referral system is anticipated to be feasible and acceptable to both healthcare providers and patients.

CONCLUSIONS



This study will provide robust evidence on the diagnostic accuracy and feasibility of digital dementia screening in primary care settings. Findings will also inform scalable, context-appropriate referral pathways for early detection of cognitive impairment in Nigeria and other similar settings.

ACKNOWLEDGEMENT



This work was supported by funding from Alzheimer's Association, Alzheimer's UK and Global Brain Health Institute, Trinity College Dublin (GBHI ALZ UK-26-1467796).

CONTACT



 Temitope Farombi
[LinkedIn](#)



ALZHEIMER'S
ASSOCIATION

AAIC>26

