

Can GPs clinical judgement be used for the diagnosis of dementia?

Clinical Question	How accurate is general practitioners' (GPs) clinical judgement for diagnosing cognitive impairment and dementia in symptomatic people presenting to primary care?
Bottom Line	In practice general practitioners (GPs) are unlikely to use clinical judgement as a single test either to confirm or to exclude mild-moderate dementia or cognitive impairment, but these results indicate that clinical judgement is likely to be more specific than sensitive. It would be necessary to use additional tests to confirm the diagnosis for either dementia or cognitive impairment, or to confirm the absence of these conditions, but clinical judgement may inform the choice of further testing. Many people who a GP judges as having dementia will have the condition. People with false negative diagnoses are likely to have less severe disease and some could be identified by using more formal testing in people who GPs judge as not having dementia. Some false positives may require similar practical support to those with dementia, but some - such as some people with depression - may suffer delayed intervention for an alternative treatable pathology.
Caveat	The strength of evidence in this review is restricted by limitations in the primary studies regarding participant flow, and heterogeneity in the data. This may in part reflect the historic practical difficulties of investigating a disease in a low prevalence setting: large numbers of patients require evaluation to identify the people with disease; evaluating large numbers of people with a reference standard is resource intensive and arguably burdensome for people who are unlikely to have a cognitive disorder. Partial verification may have led to over optimistic estimates of diagnostic accuracy in some studies.
Context	In primary care, GPs unavoidably reach a clinical judgement about a patient as part of their encounter with patients, and so clinical judgement can be an important part of the diagnostic evaluation. When evaluating patients for dementia, many GPs report using their own judgement to evaluate cognition, using information that is immediately available at the point of care, to decide whether someone has or does not have dementia, rather than more formal tests.
Cochrane Systematic Review	Creavin ST, Noel-Storr AH, Langdon RJ, Richard E, Creavin AL, Cullum S, Purdy S, Ben-Shlomo Y. Clinical judgement by primary care physicians for the diagnosis of all-cause dementia or cognitive impairment in symptomatic people. Cochrane Database of Systematic Reviews 2022, Issue 6. Art. No.: CD012558. DOI: 10.1002/14651858.CD012558.pub2. This review contains 10 trials in the analysis with a total of 6087 participants.

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Systematic review link:

https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD012558.pub2/full