Atrial fibrillation linked to increased dementia risk, even in stroke-free patients

Atrial fibrillation (AF) is linked with an increased risk of dementia, including in people who have not had a stroke, according to a Korean study **published in the *European Heart Journal***. The study also found that patients with AF who took oral anticoagulants to prevent blood clots had a reduced risk of dementia. AF is the most common heart rhythm problem among older people, and more than half the people with AF are aged 80 years or more. It increases the risks of stroke, other medical problems, and death. As populations age, the incidence of AF is expected to increase, and there is some evidence that AF may contribute to the development of cognitive problems and dementia. The investigators analysed data for 262 611 people in the Korea National Health Insurance Service – Senior cohort aged 60 years or more and without AF and dementia in 2004. By the end of 2013, AF had been diagnosed in 10 435 people, of whom 2522 (24.4%) had developed dementia during the follow-up period; 36 322 (14.4%) AF-free people had developed dementia. "We found that the people who developed AF had a 50% increased risk of developing dementia compared to those who did not develop the condition; this increased risk remained even after we removed those who suffered a stroke from our calculations. This means that, among the general population, an extra 1.4 people per 100 of the population would develop dementia if they were diagnosed with AF. We also found that AF increased the risk of Alzheimer's disease by 30% and more than doubled the risk of vascular dementia. However, among people who developed AF who took oral anticoagulants… the risk of subsequently developing dementia reduced by 40% compared to patients who did not take anticoagulants."

https://academic.oup.com/eurheartj/advance-article/doi/10.1093/eurheartj/ehz386/5520105

Children with high functioning autism may not get help they need

Autism researchers from the Telethon Kids Institute have called for the term "high functioning autism" to be abandoned because of the misleading and potentially harmful expectations about the abilities of children on the autism spectrum it causes. In research **published in *Autism***, the researchers noted that the term was coined in the 1980s as a descriptor for people who had autism but not an intellectual disability. The Telethon Kids researchers reviewed data for 2225 children and young people (1–18 years old) diagnosed with autism, about half of whom had an intellectual disability. They found that those with an intellectual disability had functional skills that closely matched their reported IQ level. However, the adaptive functional abilities of those typically deemed "high functioning" because of their average or higher IQ level were well below what would be expected on the basis of their IQ score. "The implication of this study is that children given this 'high functioning autism' label are not just presumed to have better functioning than they really do, but they actually have far greater challenges with everyday skills than the label would suggest." They said regarding someone as "high functioning" based on IQ alone not only raised false expectations about their abilities, but also exposed them to disadvantage. "It might be used, for example, to argue that a child should be able to go to a mainstream school without support when in fact, while they may perform well on cognitive assessments, they still struggle with skills like understanding instructions, note-taking, self-care, changes to routine, or interacting with their peers. By continuing to use this term, we may be inadvertently perpetuating a cycle that denies people access to services and support that they need based solely on their IQ."

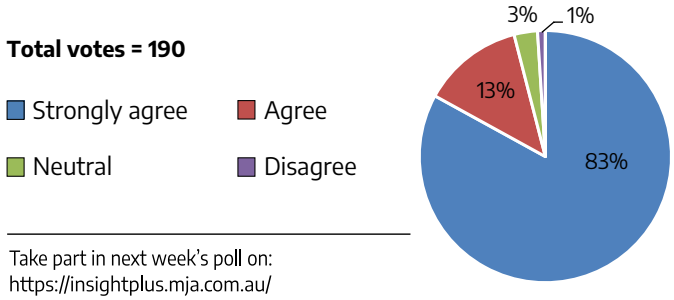
https://journals.sagepub.com/doi/10.1177/1362361319852831

doi: 10.5694/mja2.50252

InSight+ Poll

Even with the latest changes, it is not cost-effective for me to visit patients in residential aged care facilities

Total votes = 190



Take part in next week's poll on:
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Professor C Dimity Pond is Professor of General Practice at the University of Newcastle. She talks about improving the delivery of primary care to older people, to accompany her co-authored Perspective published in this issue.

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