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TX: 29.04.03 – SHOULD ELDERLY PEOPLE WITH ALZHEIMERS DISEASE BE TAGGED?

PRESENTER: John Waite

WAITE

Electronically tagging confused elderly people to prevent them from wandering off may sound like an extreme measure but a scheme doing just that has already been piloted in London. In the first trial of its kind anywhere in the world patients with Alzheimer's or dementia were fitted with bracelet tags, like those worn by young offenders, and which trigger an alarm if they stray out of safe areas in hospitals and nursing homes. Well already some members of the Royal College of Nursing are so concerned that electronic tagging could be used as a substitute for personal nursing care that they'll be voting at their annual conference tomorrow as to whether tags should be banned.

But Dr Frank Miskelly is the man behind the pilot scheme and he's in no doubt that it could save the lives of some Alzheimer's sufferers.

MISKELLY

About 40 per cent of them have at some time a wandering phase where they will go off wandering and forget where they are, unable to find their way home again. Not uncommonly in these circumstances people disappear, perhaps for weeks, for months and they're found three months later in a canal or in the lake having died. And the wandering phase may only last for six months or a year as part of their illness.

WAITE

And that is just a feature, is it, of having Alzheimer's, that is something about the behaviour of someone with dementia that you can't do anything about during that phase, that episode?

MISKELLY

It's quite often people with Alzheimer's are physically very fit and agile and in fact some of them are hyperactive. So it's a 24 hour a day, seven day a week job, looking after these people, preventing them getting at risk. Because of their disease they don't recognise risk, they don't realise they're getting themselves into danger.

WAITE

So these tags then, how do they work and how effective have they proved?

MISKELLY

The tags are like a wristwatch that go on your wrist and we have a central monitor which continually monitors the tag, so that if somebody goes more than a set distance, say, 20 yards, 30 yards away from the monitor then the carer or the relative will - they'll be wearing a pager and the pager will alert them that the patient has wandered outside the radius of the monitor.

WAITE

And how effective have they proved during your trials?

MISKELLY

Oh during our trials they've been 100 per cent effective, extremely effective in warning relatives that people with dementia have wandered off.

WAITE

But critics of course say this is an insult, first of all, to the dignity of old people to have a bracelet

dementia are able to give their consent into quite an advanced stage of their disease. And that's the first one - consent. I think that the second major issue is more in a care home situation where these devices might be used instead of appropriate care, instead of an inappropriate environment that allows people to wander, as an excuse to reduce staffing levels for instance.

WAITE

And that would be something. What about offending the dignity of the elderly, I mean these things are used on young offenders and here we are using them on innocent elderly people?

DENEGRI

Yeah that is a concern and I think - but I also think that we shouldn't be waylaid by the typecasting of these devices, potentially do give people greater peace of mind by providing greater security and

poor care and what we're very keen on is seeing adequate staffing to prevent those kinds of issues happening. We'd far rather see proper therapies, give somebody something to do, interest them, make them want to stay where they are in terms of occupational therapy, music therapy, whatever interests them and if they want to go on walks, and people are very physically fit into late stages with Alzheimer's they want to walk, if they've walked - if you've walked all your life some of your vestigial memory remains and that's what you want to carry on doing.

WAITE

But you heard there Dr Miskelly say 100 per cent success rate on this trial, all the patients and all their families extremely happy about this, if they're not worried about it Linda why should you be?

BAILEY

Well I'm into evidence base, I mean I work in public health and I'm into an evidence base and I've done an extensive literature search and there is no published research on this issue, there's very little published research on any aspect of this issue. I mean there are - there's other research about how you sort of try and divert people from wandering in terms of - funnily enough the interior decoration of a ward and all sorts of things of a home like that. But he might say 100 per cent effectiveness but I'd actually need to see the paper and I couldn't find it when I did the literature search. So yeah he's interested in it, he's got a vested interest in it because he's promoting it but I've not seen it written up in a clinically refereed journal.

WAITE

Simon Denegri would the answer here be some guidelines before these things are introduced, if they are introduced, some proper guidelines so everyone knows where they are?

DENEGRI

Well I'd actually go back a step further than that, I think we need a lot more projects like we've heard today, a lot more research into the viability of these technologies and where they're appropriate. And then I think we do need to think about guidelines because I think it's inevitable that we're going to see wider use of these sorts of technologies. Better that there be guidelines and protocols in place that protect issues like autonomy and consent as we go forward.

WAITE

Simon Denegri of the Alzheimer's Society and Linda Bailey of the RCN thank you both very much indeed.