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Driving with dementia: When is it time to stop?

Keisha Lovence

Eastern Michigan University, USA

Driving helps older adults stay independent, and the literature notes that the number of older adult drivers has increased. As an older person ages, he or she experiences changes in vision and cognition. Progression of these disease processes causes alteration to safe driving and risk to road safety. Additionally, medications (over the counter and prescribed) used to treat these disease processes also alter older adults' driving ability. The role of the clinician is to assess all these variables properly and determine when it is safe for older adults to drive. This may require a clinician to perform regular eye exams or schedule referrals to an ophthalmologist, assess cognition using the Montreal Cognitive Assessment (MoCA), or refer a patient to a clinical neuropsychologist. In some cases, a patient should be referred to a driver rehabilitation specialist. Requiring patients to follow up is key for the clinician because it ensures refills and compliance with medications and that all appointments to referrals are attended. If a patient fails to render treatment or if a patient is unsafe to drive on the road, then the clinician must be aware of the reporting requirements in his or her jurisdiction.

Biography

Keisha Lovence has completed her Doctor of Nursing Practice from Wayne State University. She is an assistance professor at Eastern Michigan University and maintains her clinical practice as an acute care nurse practitioner at Henry Ford Hospital.

Notes: