

Can Danes with increased dementia risk be engaged in lifestyle intervention?

Development and pilot testing of the dialogue concept CST-Health

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Introduction

Dementia risk can be reduced by lifestyle interventions, but a healthy lifestyle can be hard to implement

Alternative professional ways to motivate behavioural changes in people at risk are needed

A group-based Cognitive Stimulation Therapy (CST*) approach using direct and indirect learning was adapted with a specific focus on healthy aging, including factors that may prevent dementia development: **CST-Health**

Objectives

To detect how CST-Health may engage Danes with increased dementia risk in lifestyle intervention

Setting and interventionists



CST-Health Intervention 2025. 7 participants with MCI

Women/men: number (%)	4 (57%) / 3(43%)
Age: mean (min/max)	77 years (71-86)
Initial MoCA* score: mean (min/max)	22,6 (20-24)
*Montreal Cognitive Assessment; scores between 19 and 25 indicate mild cognitive impairment	

CST-Health



Examples of the 18 CST* key Principles

- Mental stimulation
- Fostering new ideas and associations
- Person-centered care
- Social interaction
- Language stimulation
- Physical activity
- Focusing on opinions over facts
- Supportive, fun atmosphere

Additional CST-Health principles

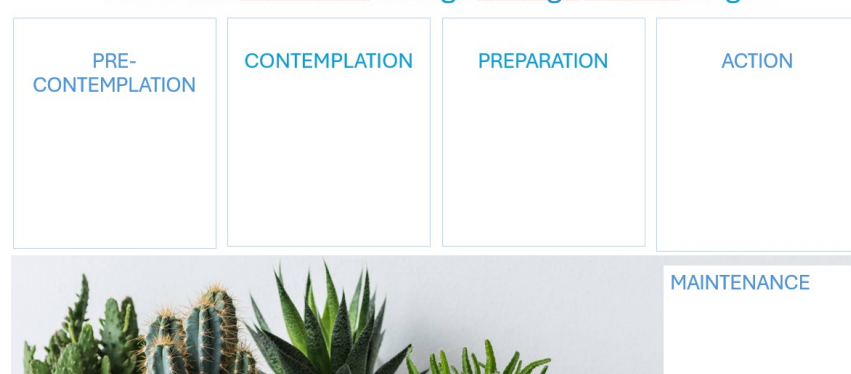
- Focus on risk factors for dementia
- Talk about changes of habits in relation to risk factors
- Create coherence between sessions
- Initiate activity between sessions: homework
- Foster discussions at home through hand-outs about today's topic

Six novel CST-Health sessions:

- 1) Health as a framework of the programme
- 2) Habits and everyday activities
- 3) Social relations
- 4) Diet and nutrition
- 5) Alcohol
- 6) Wind-up and evaluation



Habit and behaviour change through several stages



Quantitative evaluation

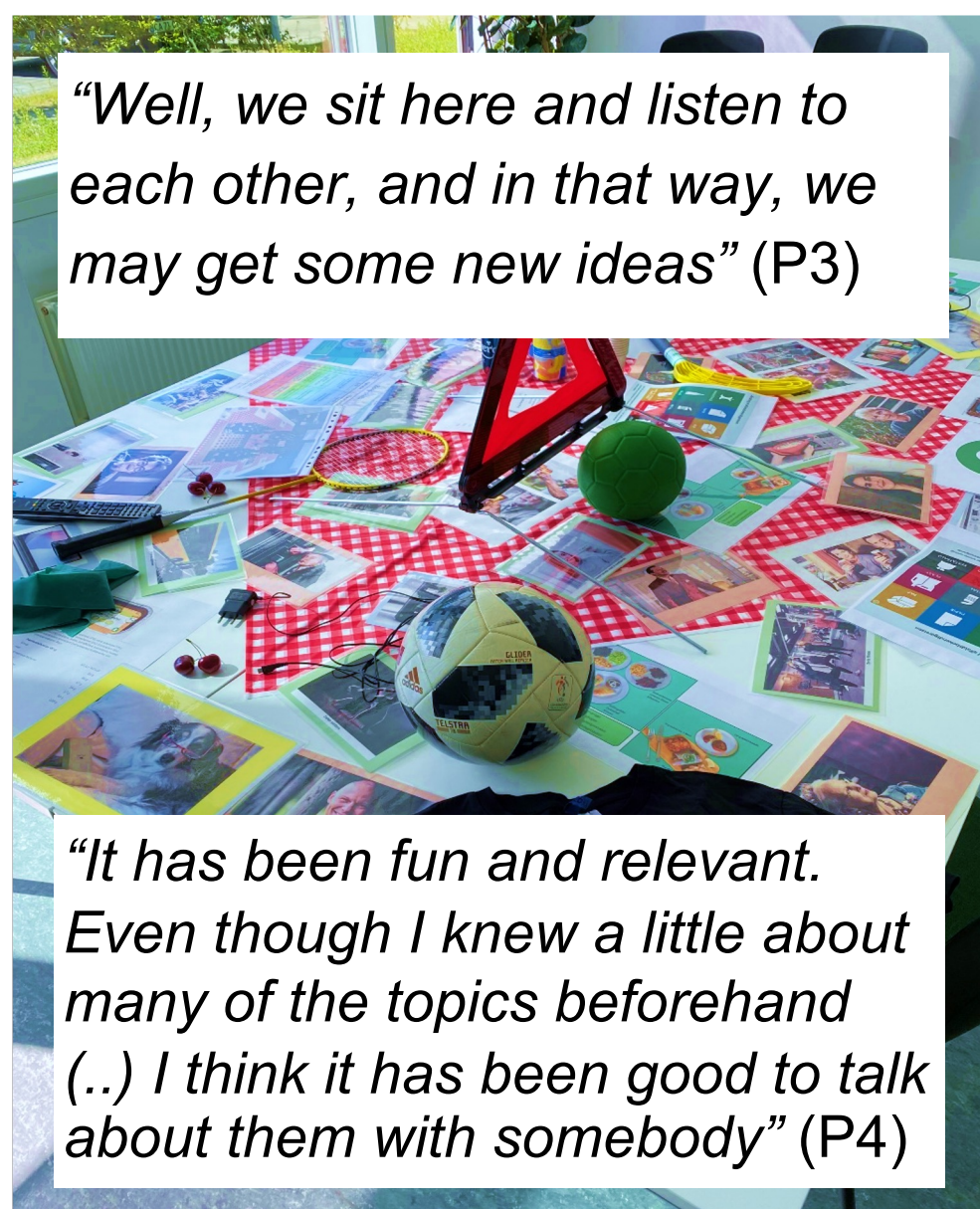
Median 5 of 6 sessions attended (2 to 6)

Participants' evaluations, across session 1-6

	VAS scale 0-100 mean (min-max)
How was it to participate today <i>(not good at all – very good)</i>	89 (76-96)
How did you like the topic of today <i>(not good at all – very good)</i>	89 (78-93)
How did you like the group spirit today <i>(not good at all – very good)</i>	88 (73-94)
How much did you talk today <i>(not at all – very much)</i>	74 (69-80)
How much did you laugh today <i>(not at all – very much)</i>	73 (56-85)
How much did you think of something new today <i>(not at all – very much)</i>	58 (44-68)

Qualitative evaluation

- In general: interesting and fun
- Some felt motivated to try out new kinds of physical activities
- Some had become aware of the importance of a social network
- Small changes concerning alcohol: serving friends and family non-alcoholic drinks
- Some had not made changes but felt they now had better arguments for healthy lifestyle



Conclusions

- Yes: People with MCI can be engaged in lifestyle intervention
- The CST-Health format was motivating and fun
- We are encouraged to continue the development of CST-health
- New ideas for further topics, inspired by participants:
Use of digital technology, Physical activity, and Communication