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Introduction

Providing essential end-of-life care for patients with advanced dementia depends on physicians' ability to identify eligible individuals and refer them to hospice services. In practice, however, such referrals are often delayed—or not made at all

Objectives

To examine the factors associated with physicians' knowledge and attitudes toward referring patients with advanced dementia to home hospice care

Methods

A cross-sectional study among 200 physicians from Soroka Medical Center and in community clinics in the city of Beer-Sheva. A dedicated questionnaire was developed for the purpose of the study, based on a representative clinical case involving a patient with advanced dementia.

Findings

- **84.3%** had treated at least one patient with advanced dementia in the past six months
- only **88 (44.2%)** physicians reported referring to home hospice care such patients during that time
- only **6%** of physicians correctly answered all four knowledge questions on the topic

Logistic regression model for predicting the referral of advanced dementia patients to home hospice

Variable	OR	95% CI	p value
Gender (male)	1.237	0.624–2.452	0.543
Age	0.991	0.956–1.027	0.622
Country of Birth (Israel)	0.524	0.242–1.131	0.099
Professional Status (Board-certification)	2.217	1.047–4.697	0.038
Workplace (hospital)	0.816	0.365–1.827	0.622
Number of advanced dementia patients treated in the past 6 months			
None	1.000		
1–4 patients	5.363	1.446–19.885	0.012
≥5 patients	8.240	2.076–32.706	0.003

Conclusion

This study revealed substantial gaps in the recognition of advanced dementia and in the timely referral of affected patients to hospice care among community-based family physicians and hospital-based internists.

Policy Implications

Targeted training in hospice care for all relevant physicians and structured exposure to end-stage dementia patients during residency, may increase the likelihood of appropriate and timely referrals.