

Our ref: IG/FOI/FOI.369.25

15 July 2025

Sent via email to: [REDACTED]

Dear [REDACTED]

## Request under the Freedom of Information Act 2000

I write further to your request for information which was received on 16 June 2025 and subsequent clarification received on 18 June 2025, to confirm, in accordance with S.1(1)(a) of the Freedom of Information Act 2000, that Powys Teaching Health Board (PTHB) partly holds the information that you require.

For ease of reference your request is set out below and my response follows each question individually.

### Your Freedom of Information (FOI) Request and Powys response (Bold):

I am conducting analysis on current services and plans for service improvement in the diagnosis of Alzheimer's Disease. I would be grateful if you could answer the questions below for all relevant activity within the Health Board.

1. I would be grateful if you could send the Health Board's most recent planning document(s) for the diagnosis and treatment of Alzheimer's Disease including implementation of lumbar punctures (CSF) and Blood-based Biomarker testing. Please include planning documents that cover the entire Health Board and specific department plans, such as neurology, psychiatry, care of the elderly, pathology or memory clinic teams.

**I can confirm Powys Teaching Health board (PTHB) does not have any specific planning documents for the treatment of Alzheimer's Disease.**

2. How many patients were diagnosed with Alzheimer's Disease (*ICD-10 codes = G30, G30.1, G30.8, G30.9, F00, F00.1, F00.2 or F00.9*) in your Health Board in the last 12-month period for which data are available?

### Clarification Requested:

**In some instances, we record diagnosis using READ codes instead of ICD10 codes. (Eu00. = Alzheimer's Dementia, Eu057 = Mild Cognitive Impairment). Please can you confirm whether diagnoses recorded with**

**READ codes be included in the total figures or only those that have been ICD10 coded.**

Clarification Response:

The detail about Read Codes is good to know, thank you and, yes, please also include diagnoses that are defined by Read Codes.

	Number of patients
Total Alzheimer' Disease	<b>543</b>

3. How many patients were diagnosed with Mild Cognitive Impairment and / or Mild Dementia due to Alzheimer's Disease (*ICD-10 codes = G31.84, G30.1, or MMSE scores = 21 to 24*) in your Health Board in the last 12-month period for which data are available?

Clarification Requested:

**a. PTHB use the code F06.7 for mild cognitive impairment. We are unable to find any record of G31.84 in the database (ICD-10-5TH-Edition Volume 1 – Tabular list). Please can you confirm which code(s) should be used.**

**b. According to the database, G30.1 is Alzheimer disease with late onset. The code for Alzheimer disease with early onset is G30.0. Neither of these reference to mild dementia, they only distinguish between the age of onset (before/after 65). Can you please confirm which code(s) should be used.**

**In some instances, we record diagnosis using READ codes instead of ICD10 codes. (Eu00. = Alzheimer's Dementia, Eu057 = Mild Cognitive Impairment). Please can you confirm whether diagnoses recorded with READ codes be included in the total figures or only those that have been ICD10 coded**

Clarification Response:

Q3a - please ignore G31.84, "mild cognitive impairment", as you rightly point out it does not appear in the NHS ICD-10 dictionary and I suspect it is used by other organisations.

Q3b - please include G30.0 early onset Alzheimer's Disease

The detail about Read Codes is good to know, thank you and, yes, please also include diagnoses that are defined by Read Codes.

	Number of patients
Mild cognitive impairment ( <i>ICD-10 = G31.84</i> )	<b>264</b>
Early onset Alzheimer's Disease ( <i>ICD-10 = G30.1</i> )	<b>4</b>
Mild cognitive impairment ( <i>Mini-mental State Examination MMSE = 21 to 24</i> )	<b>Nil based on clarification response</b>
Mild cognitive impairment ( <i>other sources of definition</i> )	<b>Nil based on clarification response</b>

4. Where, if at all, does the Health Board carry out lumbar punctures (cerebrospinal fluid) for diagnosing patients with Alzheimer's Disease?

	Yes / No
Lumbar punctures carried out within the Health Board itself	<b>No</b>
Lumbar punctures referred elsewhere and carried out external to the Health Board	<b>No</b>
Health Board does not carry out lumbar punctures to diagnose Alzheimer's Disease	<b>No</b>

5. Please provide a list of the full names of other Health Boards/Trusts or other organisations to which the Health Board refers patients for lumbar punctures in the diagnosis of Alzheimer's Disease.

Full name of organisation(s)
<b>Not applicable</b>

6. What is the average waiting time for a patient to get an appointment for a lumbar puncture to test for a diagnosis of Alzheimer's Disease?

	Number
Average waiting time (weeks)	<b>Not applicable</b>

7. How many lumbar punctures to test for Alzheimer's Disease took place in the last 3-month period for which data are available?

	Number of procedures
Number of lumbar punctures	<b>Not applicable</b>

8. How many Blood-based Biomarker (BBBM) tests from Cerebrospinal fluid (CSF) to test for Alzheimer's Disease were conducted in the last 3-month period for which data are available?

	Number of tests
Number of Blood-based Biomarker tests (CSF)	<b>Not applicable</b>

9. Where, if at all, does the Health Board carry out Blood-based Biomarker (BBBM) tests from Cerebrospinal fluid (CSF) for diagnosing patients with Alzheimer's Disease?

	Yes / No
Pathology laboratory within the Health Board	<b>No</b>
Pathology laboratory external to the Health Board	<b>No</b>
Health Board does not test for BBBMs to diagnose Alzheimer's Disease	<b>No</b>

10. Please provide a list of the full names of other Health Boards/Trusts or other organisations, to which the Health Board refers Blood-based Biomarker tests

from cerebrospinal fluid (CSF) for pathology in the diagnosis of Alzheimer's Disease.

Full name of Health Board or organisation(s)
<b>Not applicable</b>

11. What is the average waiting time for pathology results to come back from Blood-based Biomarker tests?

	Days
Average waiting time (days)	<b>Not applicable</b>

12. To what extent are there plans for service improvement of diagnosing Alzheimer's Disease?

	Yes / No
Implementation of plans has started	<b>Yes - Cognitive assessment services</b>
A plan exists and implementation has not started	
A plan is being developed	<b>Yes - Biomarker services</b>
There is no plan	
Other - please state	

13. Are the plans for service improvement of diagnosing Alzheimer's Disease related to:

	Yes / No
Cognitive assessment services	<b>Yes</b>
Biomarker services	<b>Yes - involvement in trial/study with neighbouring health board</b>
None / neither	

14. Which of the following services does the Health Board have in place in preparation for increased service delivery for Alzheimer's Disease?

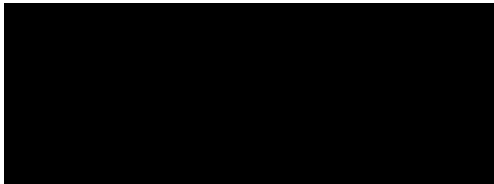
	Related to administration of lumbar punctures Yes / No	Related to Blood-based Biomarker testing Yes / No
Budget	<b>No</b>	<b>No</b>
People	<b>No</b>	<b>No</b>
Training	<b>No</b>	<b>No</b>
Clinic space / capacity	<b>No</b>	<b>No</b>
Governance arrangements	<b>No</b>	<b>No</b>

Under the terms of the Health Board's Freedom of Information procedure, individuals seeking access to recorded information held by the Health Board are

entitled to request an internal review of the handling of their requests. If you would like to complain about the Health Board's handling of your request, please contact us directly at the address below or register your complaint via [Powys.FOI@wales.nhs.uk](mailto:Powys.FOI@wales.nhs.uk)

If after Internal Review you remain dissatisfied you are also entitled to refer the matter to the information commissioner at the Information Commissioner's Office (Wales), 2nd Floor, Churchill House, Churchill Way, Cardiff, CF10 2HH. Telephone Number: 0330 414 6421.

Yours sincerely



**Elaine Lorton**  
**Executive Director of Primary Community Care and Mental Health**

Rydym yn croesawu derbyn gohebiaeth yng Nghymraeg. Byddwn yn ateb y fath ohebiaeth yng Nghymraeg ac ni fydd hyn yn arwain at oedi.

We welcome receiving correspondence in Welsh. We will reply to such correspondence in Welsh and this will not lead to a delay.