



Down's Syndrome Association

A Registered Charity No. 1061474

Annual Health Checks for Adults with Down's Syndrome

Check List

Ideally the following things should be included as part of a comprehensive and thorough Annual Health Check

What to expect from an Annual Health Check

Your GP Practice should send/give you a Pre-Health Check Questionnaire. This will help prepare the patient and carer for their health check appointment, reduce anxiety and improve effectiveness of appointment.

How long will the Health Check take?

The appointment should be carried across two separate 30 minute appointments. One with the practice nurse followed with an appointment with the patient's usual doctor.

Routine Blood Tests

Try and arrange any routine blood tests at least 1 week before the health check.

Some patients may find blood tests difficult and will require extra explanation and support.

The blood should be screened for the following:

- Full blood count (FBC)
- C-reactive protein or viscosity
- Urea and electrolytes (Kidney function)
- Liver function Tests
- Thyroid function tests
- Random glucose and glycosylated haemoglobin (HgbA1c)
- Lithium and anti-epilepsy drug (AED) levels -check level before morning dose ("trough level")
- Calcium and vitamin D levels if on AED, poor sun exposure or from a black or ethnic minority
- FSH in women who have not had a period for 6 months
- Consider prostate specific antigen in men over 50 years

Follow this link to the RCGP Annual health checks for people with learning disabilities - step by step toolkit. In the resources section you will find a pre-health check questionnaire for people with a learning disability. <http://www.rcgp.org.uk/clinical-and-research/toolkits/health-check-toolkit.aspx>

During the annual health check the following areas will be checked for all people with a learning disability:

- Assessment of feeding, bowel and bladder function
- Assessment of behavioural disturbance
- Assessment of vision and hearing

Down's Syndrome Specific Checklist

The following should also be checked for all adults with Down's syndrome.

Monitor for any loss of independence in living skills, behavioural changes and/or mental health problems

Audio Visual - Eyes and Ears

Ophthalmic problems such as cataract, glaucoma, keratoconus and refractive errors need to be checked:

- Full assessment by optician/optometrist at least every 2 years
- If examination difficult, refer to specialist optician or ophthalmologist for assessment.

Audiological Problems: hearing impairment and deafness

- Otoscopy - (Gentle examination as short ext. auditory canals)
- Audiological assessment every year (including auditory thresholds, impedance testing)

Well over 50% of people with Down's syndrome have significant hearing impairment, which can range from mild to profound. Sensorineural and/ or conductive loss may be present at any age. If undetected it is likely to be a significant cause of preventable secondary disability. The main cause of conductive loss is persistent (OME, glue ear).

Dental

- Annual Dental Review as periodontal disease is common.
- Look for Signs of oesophageal reflux

Cardiovascular Examine for Adult

- Auscultation – particularly if imminent dental procedure
- A single ECHO should be performed in adult life
- Adults with a pre-existing structural abnormality should be informed of current prophylactic antibiotic protocols

Coeliac Disease

Screen clinically by history and examination annually.

Testing in those with suspicious symptoms or signs, including:

- Disordered bowel function tending to diarrhoea or to new onset constipation
- Abdominal distension

- General unhappiness and misery
- Arthritis
- Rash suggesting dermatitis herpetiformis
- Test all those with existing thyroid disease, diabetes or anaemia.

Endocrine System

- There is an increased prevalence of hypothyroidism at all ages, rising with age with a small increase in hyperthyroidism
- Thyroid function blood tests (TFTs), including thyroid antibodies at least every 2 years
- Perform TFTs more often if accelerated weight gain, generally unwell, possible diagnosis of depression or dementia
- Type I diabetes is also relatively more common (2%) and should be checked for

Immunisation

Due to congenital heart disease and reduced immunity most adults are eligible for Influenza and Pneumococcal vaccination.

Musculoskeletal Atlanto Axial Instability

Most cases have been described in children with longitudinal studies of children and adults show a high degree of stability both clinically and radiologically.

Routine cervical -spine X-ray not recommended.

It can present as acute or chronic cord compression:

- Neck pain
- Reduced range of neck movement, torticollis
- Unsteadiness

Psychiatric/Psychological

- Alzheimer's type dementia (clinical onset uncommon before 40 years)
- Check that people with a diagnosis of Alzheimer's disease has had depression, hypothyroidism, and deafness excluded firstly
- Symptoms of dementia: decline in function, memory loss, ataxia, seizures or urinary and/or faecal incontinence
- Psychological problems often present as deterioration in self-help skills or behaviour change. Need to exclude depression, thyroid disorder and hearing impairment
- Depression is common in older adults, often as a result of bereavement and/or changes in living situation

Respiratory

Examine nose, oral cavity and lungs:

- Blocked nasal passages
- Lower airway disease

Ask about sleep apnoea which may due to a hypoplastic pharynx or nasal congestion.

Women

Check for hot flushes and menopausal symptoms in women over 40 as they have an earlier onset of menopause compared to women in the general population at 44 years of age. The symptoms of menopause may look similar to those of dementia. Women with Down's syndrome reach the menopause approximately 6 years earlier than the general population and are more susceptible to osteoporosis particularly if they are inactive.

Other Conditions to check for

- Blood Dyscrasias
- Skin disorders
- Obesity- check weight changes

The Down's Syndrome Association (DSA) is the only organisation in England, Wales and Northern Ireland which supports people with Down's syndrome at every stage of life.

Down's Syndrome Association, Langdon Down Centre, 2A Langdon Park, Teddington, Middlesex, TW11 9PS. Tel: 0333 1212 300 | Email: info@downs-syndrome.org.uk | Web: www.downs-syndrome.org.uk

Publication date: February 2014

Amended: October 2014

Amended: June 2017