



Provider Guide to Understanding Dementia

Symptoms, Types, and Warning Signs of Dementia

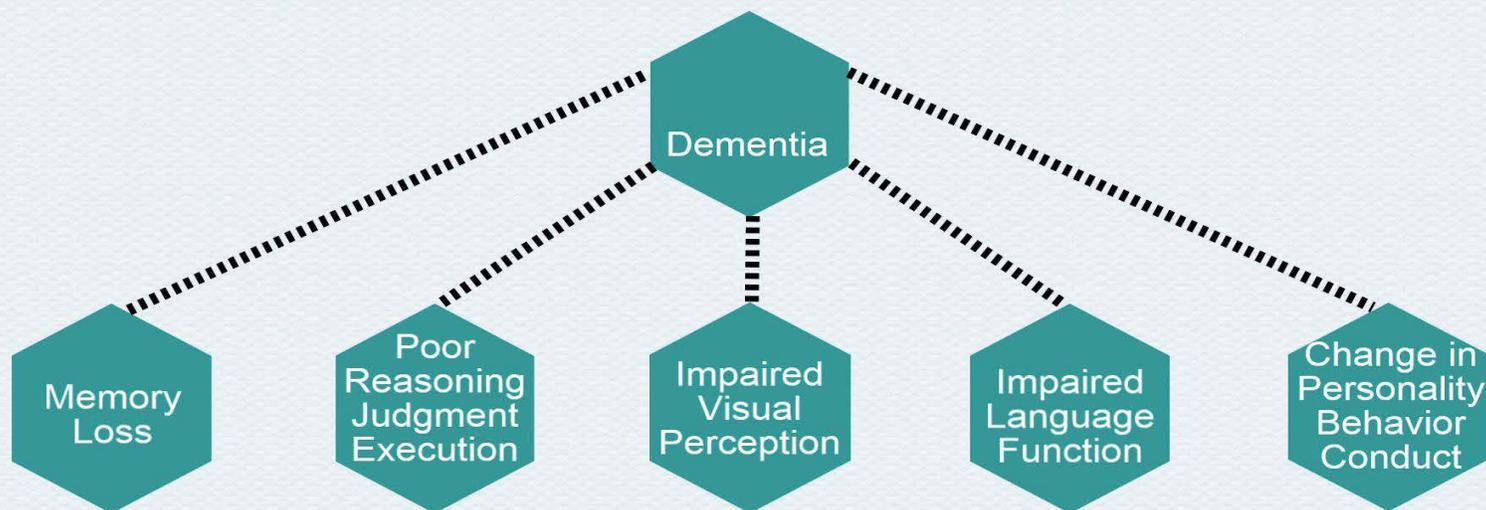
What is Dementia?

Dementia is defined as an impairment in cognition or behavior that leads to functional impairment in social or work activities and represents a significant decline from a previous level of functioning.

Dementia involves a minimum of two of the following five domains:

- 1) Impaired ability to acquire and remember new information**
 - repetitive questions or conversations
 - misplacing personal belongings
 - forgetting events or appointments
 - getting lost on a familiar route.
- 2) Impaired reasoning and handling of complex tasks, poor judgment**
 - poor understanding of safety risks
 - inability to manage finances
 - poor decision-making ability
 - inability to plan complex or sequential activities
- 3) Impaired visuospatial abilities**
 - inability to recognize faces or common objects
 - inability to find objects in direct view despite good acuity
 - inability to operate simple implements, or orient clothing to the body
- 4) Impaired language function (speaking, reading, or writing)**
 - difficulty thinking of common words while speaking
 - hesitations
 - speech, spelling, and writing errors
- 5) Changes in personality, behavior, or conduct**
 - uncharacteristic mood fluctuations such as agitation
 - impaired motivation, lack of initiative, apathy
 - loss of drive
 - social withdrawal and decreased interest in previous activities
 - loss of empathy
 - compulsive or obsessive behaviors
 - socially unacceptable behaviors.

To be classified as dementia, the impairments cannot be explained by delirium (a sudden state of confusion that is usually temporary and reversible) or a major psychiatric disorder such as depression.



Different Types of Dementia



Alzheimer's Disease

A slowly progressive brain disorder with a slow/insidious onset that gradually destroys memory, thinking, and other abilities. The most common type of dementia, accounting for 60-80% of all cases.

Symptoms: Prominent short-term memory loss; problems with object and face recognition; impaired reasoning, judgment, and problem-solving; apathy and depression.

Brain Changes: Deposits of amyloid protein plaques outside of brain cells; Misfolded tau protein inside of brain cells; brain cell damage and death

Treatment: Cholinesterase inhibitors, glutamate antagonists, non-drug approaches, and antidepressants, anxiolytics, and antipsychotics for behavioral and psychiatric symptoms



Vascular Dementia

Impairments in various domains of cognitive function caused by impaired blood flow to the brain (i.e. after a stroke). The second most common type of dementia, accounting for 20-30% of all cases.

Symptoms: Confusion, trouble with speaking and concentrating, loss of vision, impaired reasoning, judgment, problem-solving, and decision-making; mood or behavioral changes

Brain Changes: Infarcts (dead brain tissue); evidence of hemorrhages (bleeding) in the brain; damage to blood vessels, brain cells, and brain cell connections (white matter)

Treatment: Controlling vascular/stroke risk factors such as high blood pressure and high cholesterol along with implementing healthy lifestyle changes can reduce further vascular insults or impairment and reduce incidence in cognitively normal individuals.



Dementia with Lewy Bodies

A progressive, degenerative brain disease that causes cognitive decline, fluctuations in alertness and attention, hallucinations, and problems with movement. The third most common type of dementia, accounting for around 20% of all cases.

Symptoms: Sleep disturbances, visual hallucinations, and Parkinson's symptoms - tremor, muscle stiffness, and movement problems

Brain Changes: Abnormal deposits of protein, such as alpha synuclein, inside of brain cells (Lewy Bodies); brain cell damage and death

Treatment: Cholinesterase inhibitors, antidepressants, anxiolytics, antipsychotics (used with extreme caution), and non-drug therapies (physical, occupational, speech, and psychotherapy)



Mixed Dementia

Occurs when there is evidence of more than one type of dementia presenting simultaneously. Typically seen as a mixture of Alzheimer's Disease and Vascular Dementia; Alzheimer's Disease with Lewy Bodies; or Alzheimer's Disease, Vascular Dementia, and Lewy Bodies.

Symptoms: Varies depending on the types and areas of the brain affected.

Brain Changes: Deposits of amyloid protein plaques outside of brain cells; Misfolded tau protein inside of brain cells; deposits of alpha synuclein protein inside of brain cells; infarcts or blood vessel damage; and brain cell damage and death

Treatment: Vascular/stroke risk reduction, FDA-approved drugs for Alzheimer's Disease if that type is among the conditions contributing to the mixed dementia.



Frontotemporal Dementia

A progressive, degenerative brain disease caused by nerve cell death in the frontal and temporal lobes of the brain. The most common type of dementia in those under age 60. Also referred to as frontotemporal degeneration, frontotemporal lobar degeneration, or Pick's disease.

Symptoms: Behavioral and personality changes that impact social activities and work, difficulty with language, movement and motor dysfunction

Brain Changes: Nerve cell damage and death in frontal and temporal lobes in the brain

Treatment: Antidepressants and atypical antipsychotics can be used, with caution, for behavioral symptoms and speech therapy for language difficulties. Avoid cholinesterase inhibitors and typical antipsychotics.



Others

Other types of dementia include, but are not limited to, Parkinson's disease (a type of Lewy Body Dementia), Normal Pressure Hydrocephalus (excessive fluid on the brain), Progressive Supranuclear Palsy (impaired movement and balance), Wernicke-Korsakoff Syndrome (Alcohol Abuse/Dependence), Head Trauma/Traumatic Brain Injury, Huntington's Disease, and Creutzfeldt-Jacob Disease.



Warning Signs for Dementia in a Health Care Setting



- The individual is confused about the appointment date or location.
- Missed appointments or frequent phone calls by the individual/family to the doctor/health care professional.
- The individual cannot remember recent events or conversations.
- The individual defers to their caregiver/family member to answer questions.
- The individual has difficulty with medical/social/family history.
- The individual is dressed inappropriately and/or has poor hygiene.
- New onset of depression or social withdrawal
- Patient is confused about medications
- Increased emergency room visits
- Frequent Falls
- Weight loss



The presence of any of these warning signs may warrant assessment and further evaluation.



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