

# Dementia

## What is dementia?

Dementia is a gradual loss of mental functions such as the ability to think, remember, reason, and plan. Dementia is not a disease, but a group of symptoms. As dementia gets worse, the person is no longer able to do everyday tasks. Behavior and personality also change.

Dementia is not a normal part of aging. In normal aging memory loss is slow, not sudden. As they age, people may forget names, phone numbers, or where objects are. People with dementia also have problems with problem-solving and thinking things through.

Contact your healthcare provider if you are unsure whether symptoms are due to normal aging or to another cause.

## How does it occur?

The most common cause of dementia is Alzheimer's disease. Strokes, sometimes in the form of many small strokes you may not be aware of having, also can cause dementia. Other conditions that can cause dementia include:

- Huntington's disease
- multiple sclerosis
- vascular disease
- Pick's Disease
- Creutzfeldt-Jakob disease
- Parkinson's disease
- Lewy body disease (a disorder similar to Alzheimer's)
- alcoholism or drug abuse
- AIDS.

Medicines or untreated depression may cause symptoms that look like dementia.

Damaged brain cells that can no longer store or work with information in the normal way cause the symptoms of dementia. As the disease causing the dementia progresses, more brain functions are lost.

## What are the symptoms?

Many symptoms are possible. At the beginning of dementia, symptoms may be mild. However, as time passes, people may have more of the following symptoms:

- memory problems (trouble remembering recent events or trouble remembering people, places, times, and dates)
- poor judgment and not being able to understand the results of their actions
- decline in thinking ability (for example, not being able to figure out the correct order to put clothing on when getting dressed)
- inability to follow instructions or stay with a task (problems paying bills, fixing meals, shopping, taking medicines)
- lack of emotions (lack of interest in what is going on around them, less participation in activities previously enjoyed, withdrawal from people)
- loss of interest in food and less concern about looking neat and being clean

- irritability and a tendency to overreact
- tendency to wander away from home or get lost
- believing that someone is taking money or belongings or that family members are impostors.

As the disease grows worse, more problems with control of the body occur. The person may:

- be unable to control bowel or bladder
- be unsteady while walking, leading to falls and the eventual inability to walk
- forget how to eat or have trouble chewing and swallowing
- have a hard time speaking and thinking of the right words and eventually become unable to speak.

## **How is it diagnosed?**

Family members or friends need to tell the provider how long the person has had symptoms and whether they started suddenly or came on gradually.

The healthcare provider will do a physical exam to find out whether the person has had a stroke or has another condition that could cause the symptoms. The provider will ask about symptoms and any drug or alcohol use. The following tests also may be done:

- blood tests
- brain wave tracing (EEG, or electroencephalogram)
- heart wave tracing (EKG, or electrocardiogram)
- CT scan
- MRI
- tests to check how well the person can concentrate, remember, understand, and make decisions.

## **How is it treated?**

There is no cure for dementia. You need to make sure the person is safe and well cared for. Medicine may help calm agitation and frightening thoughts. There are some medicines that slow the progress of early symptoms of Alzheimer's in some people. Donepezil (Aricept), galantamine (Razadyne), and rivastigmine (Exelon) are drugs that may slow memory loss early in the disease. Memantine (Namenda) may help slow memory loss in later stages of the disease. Vitamin E and other medicines continue to be studied to see whether they might be helpful. None of these medicines can cure or reverse Alzheimer's disease. You should not expect big improvements when these medicines are given. Not all people with dementia should take these medicines. Those whose disease is very severe will not benefit. It is important to talk to your healthcare provider about these issues.

## **What happens to people with dementia?**

A few medical conditions, such as encephalitis (a viral infection in the brain), cause symptoms of dementia that can be reversed with treatment.

Most dementias do not get better and will get worse over time. Your healthcare provider can explain more about what to expect.

## **What can a family member or friend do?**

The most important thing is to understand that a person with dementia is not responsible for

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his or her behavior. It occurs because of damage to brain cells. A person with dementia may say or do hurtful things that family and friends must overlook.

It can be difficult to know how to care for persons with dementia. They may need care 24 hours a day. Keep these things in mind:

- Give them choices when you can.
- Decide what kind of care they need and who will give them care.
- See that anyone caring for them treats them with respect.
- Make sure you know what kind of care they are getting.

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