

Dementia Basics

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Conflict of Interest

I have no conflict of interests to disclose

What we'll cover today

- Discuss the differences between normal aging, mild cognitive impairment, and dementia
- Define dementia
- Describe Alzheimer's Disease and its stages
- Describe some warning signs that may indicate cognitive impairment
- Discuss what to do when you suspect a client might have dementia
- Discuss some general approaches to caring for someone living with dementia

Spectrum of cognitive function

NORMAL

Normal decline in
cognitive functions
with age

DOES NOT
AFFECT
FUNCTION

Mild
Cognitive
Impairment

Abnormal decline
in cognitive
functions with age

DOES NOT
AFFECT
FUNCTION

Dementia

Abnormal decline
in cognitive
functions with age

DOES
AFFECT
FUNCTION

What's normal and what's not

Normal	Not normal
Not being able to remember details of a conversation or event that took place a year ago	Not being able to recall details of recent events or conversations
Not being able to remember the name of an acquaintance	Not recognizing or knowing the names of family members
Forgetting things and events occasionally	Forgetting things or events more frequently
Occasionally have difficulty finding words	Frequent pauses and substitutions when finding words
You are worried about your memory but your relatives are not	Your relatives are worried about your memory, but you are not aware of any problems

Age-Related Changes/Normal Aging

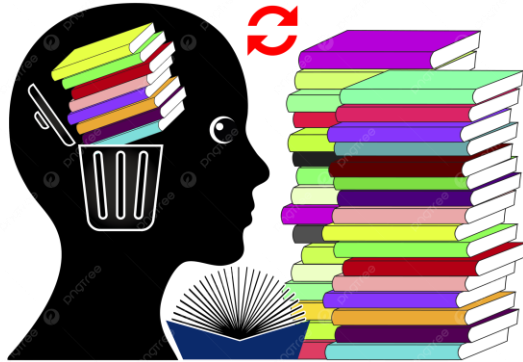
- Dynamic process with variability between individuals
- Generally well preserved:
 - Knowledge: based on experience or education
 - Long-term memory
 - Focused attention
 - Verbal abilities
 - Problem solving
- Vulnerable to aging:
 - Processing speed
 - Recent (short term) memory
 - More effort and time to recall new information
 - Divided attention – multitasking -> decreased efficiency
 - New learning is slowed, but well compensated by lists, etc

WHAT IS DEMENTIA?

- Dementia is the loss of cognitive functioning — thinking, remembering, and reasoning — to such an extent that it interferes with a person's daily life and activities.
- *Not* an inherent aspect of aging
- Different from normal cognitive lapses
- Progressive and disabling
- Dementia \neq "Crazy"



Cognitive Abilities Affected



Learning and Memory



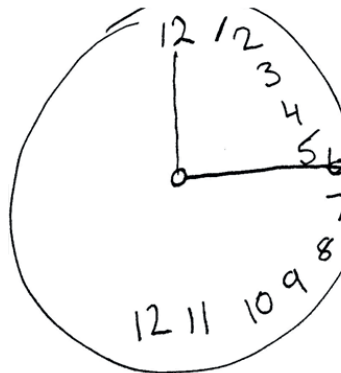
Attention



Executive Function



Language



Perception and Motor Skills



Social Functioning

Dementia

**Acquired cognitive
DECLINE in at least 1
domain:**

- Learning and memory
- Language
- Executive function
- Complex attention
- Perceptual-motor skills
- Social cognition

Progressive and disabling



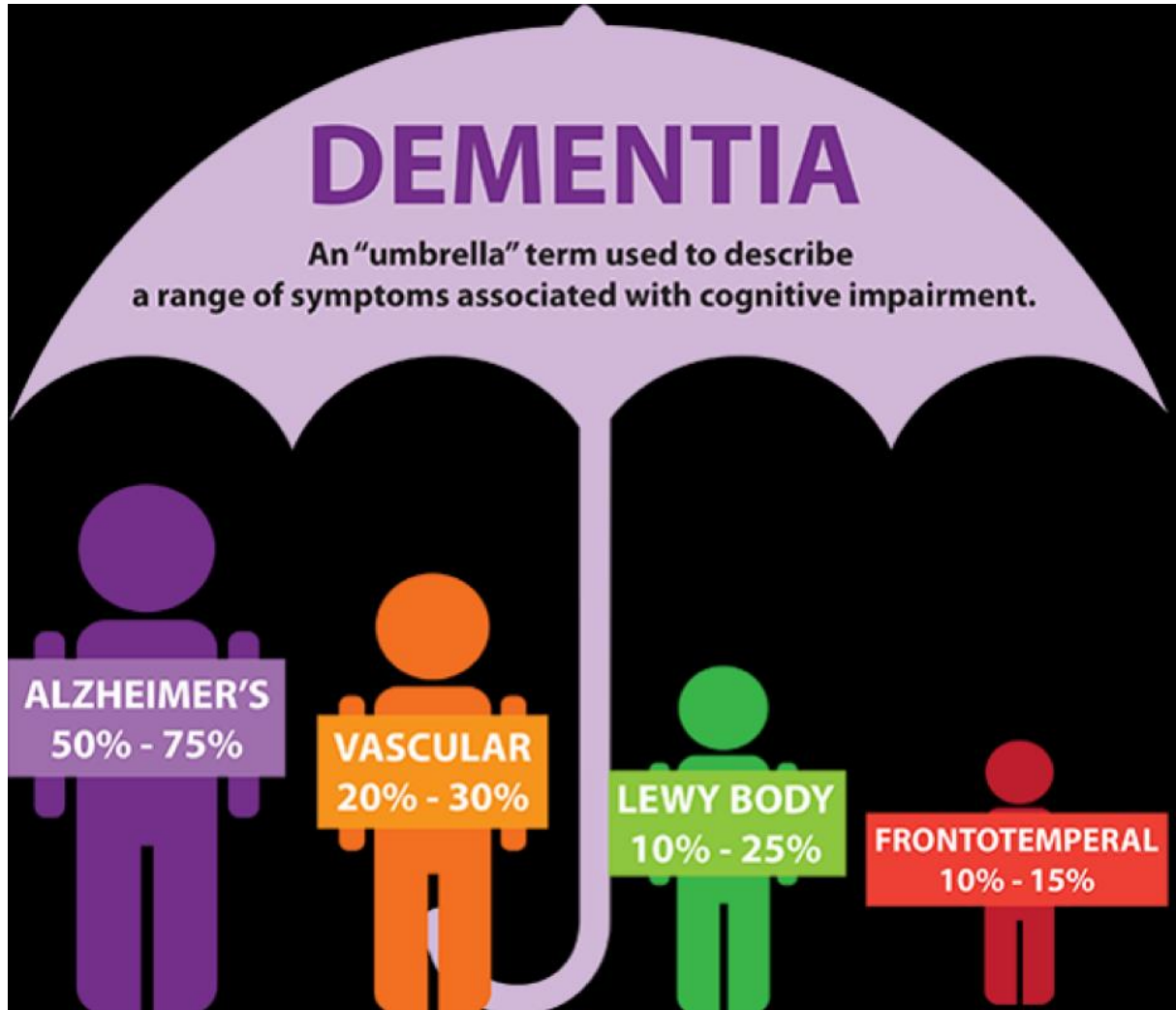
**Acquired functional
DECLINE**

and

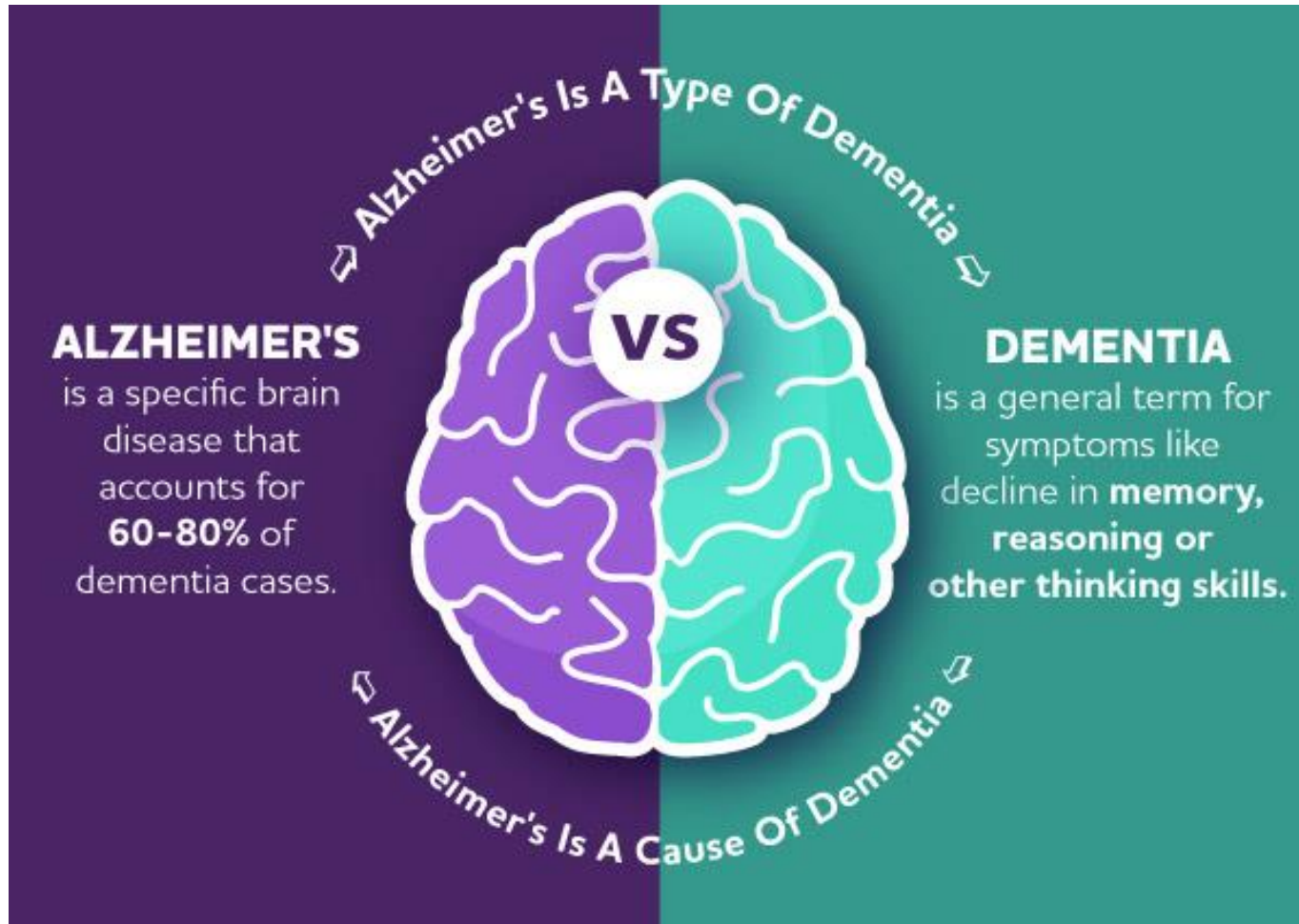
Not caused by delirium

**Dementia is not a normal part of
aging.**

Dementia is an umbrella term



Alzheimer's Dementia



How Common is Dementia?

- 6%–8% of people ≥ 65 yr have Alzheimer dementia (AD)
 - That percentage doubles every 5 yr after age 60
 - Nearly 45% or more of those aged 85+ have AD

Alzheimer's Disease

- Most common form of dementia
- **Onset:** gradual, typically after age 60
- **Cognitive symptoms:** memory impairment core feature, difficulty learning new information, language/visuospatial domains
- **Progression:** gradual, over 8-10 yrs on average

Alzheimer's: Classified in 3 Stages

It progresses slowly over time

▪ **Early (mild) dementia**

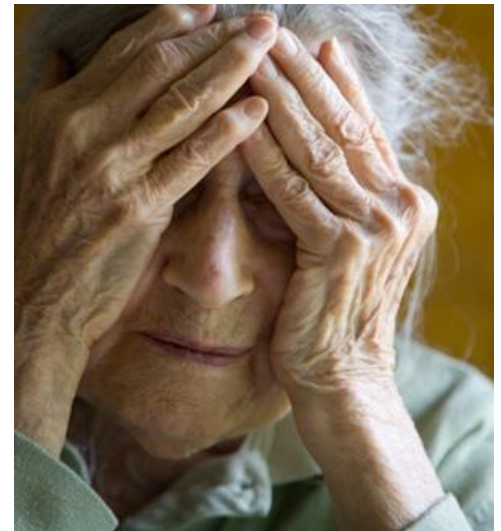
- Memory loss, confusion with time & place, repeats questions
- Trouble paying bills, taking medications

▪ **Middle (moderate) dementia**

- Increased memory loss; restlessness
- Requires assistance for basic activities
- Cannot live alone; poor impulse control

▪ **Late (severe) dementia**

- Little or no speech; Loses ability to walk and sit
- Can't control bowel or bladder; weight loss
- Inability to recognize family and friends



Mr. MF

94 year old man who is living at home.

- Independent in ADLs
- Has a relative living with him for 10 years
- Still does his own bills
- Worries about not being able to remember an acquaintance's name

Does he have dementia?

What do you need to know?

Ms. HL

76 year old retired teacher who lives at home.

- Independent of ADLs and IADLs
- Has ongoing grief over husband's death 2 years ago
- Feels forgetful of names and appointments, so writes things down in the notebook

Does she have dementia?

What do you need to know?

Mr. RG

87 year old retired small business owner who lives at home with wife.

- Independent of ADLs
- Has an involved daughter
- Endorses feeling forgetful sometimes, but feels that he is still able to do everything.
- Daughter says she sometimes thinks he talks to his brother, who died 10 years ago.

Does he have dementia?

What do you need to know?

Warning signs to look for



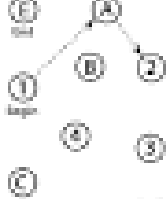







- Confusion with time and place
- Repeating Questions
- Taking longer to do things
- Losing things
- Changes in mood
- Wandering/Getting lost
- Trouble paying bills
- Withdrawal from social activities

What should you do if you suspect dementia?

- Encourage a visit with their primary care provider
- If there is family involved, you might share your observations with them
- Be supportive-it can be scary
- When they see their PCP someone should accompany them

What might happen at the medical visit

- Thorough history, including collateral history
- Cognitive or neuropsychological tests
- Blood tests
 - Rule out any reversible causes to cognitive change
- Brain imaging
 - Evaluate for structural abnormality

MONITORING COGNITIVE ASSESSMENT (MCA)		GRADE :		Date of birth :		Date of test :																					
Name of child :		Date :		Time :		Place :																					
INSTRUCTIONS : EXECUTIVE  		Copy Cube 		Coloring Book (One point each) 		Score 																					
NAME   		Coloring Book 		Score 		Score 																					
MEMORY Recall list of objects subject that were shown in combination and in isolation. (Revised after 10 minutes)		<table border="1"> <tr> <th></th> <th>FACE</th> <th>PEWEE</th> <th>CHURCH</th> <th>CHICK</th> <th>ROCK</th> </tr> <tr> <td>1st trial</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2nd trial</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			FACE	PEWEE	CHURCH	CHICK	ROCK	1st trial						2nd trial						Score 		Score 			
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1st trial																											
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ATTENTION Read list of digits (1 digit/sec.).		Subject has to respond yes or no in front of teacher. Subject has to write down the number in front of teacher.		<table border="1"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>7</td> <td>8</td> <td>9</td> <td>0</td> <td>1</td> <td>2</td> </tr> </table>		1	2	3	4	5	6	7	8	9	0	1	2	Score 									
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Depression vs. Dementia

- Symptoms of depression and dementia often overlap
- Patients with primary dementia commonly experience symptoms of depression, and may minimize cognitive losses
- Patients with primary depression are generally unlike those with dementia in that they:
 - Demonstrate reduced motivation during cognitive testing
 - Express cognitive complaints that greater than measured deficits
 - Maintain intact language and motor skills

Helping the person living with dementia

Goal: Maintain highest level of function and independence



Helping the person living with dementia

Goal: Maintain highest level of function and independence

Physical activities

Music

Safety

- Medication management
- Cooking
- Wandering
- Driving

Nutrition

Prevention of
complications

Caregiver education
and support

Advance care
planning

Summary

- Dementia is common in older adults but is **not** an inherent part of aging
- Memory changes are a common feature of dementia but there are other cognitive changes that a person living with dementia can experience
- Alzheimer's disease one type of dementia but there are many causes of dementia
- If you suspect a client may have cognitive impairment or dementia, share this information with a family member.
- Caring for a person living with dementia can be both challenging and rewarding. Focus on their strengths and assist with their limitations

Please complete our evaluation form!

The link is in the chat!

Thank you!