

# What is Dementia? Does a Loved One Have It?

## DEFINING DEMENTIA

It can be troubling when an aging parent or other loved one becomes forgetful. Memory loss is often associated with “dementia,” which mostly occurs in older people. While some decline in mental ability is to be expected as people age, memory impairment is not a normal part of growing older. But it isn’t a de facto sign of dementia, either. Dementia-like symptoms can be caused of a number of conditions, many of which are curable. Getting a professional medical diagnosis if symptoms don’t improve quickly, and especially if they worsen, will ensure the loved one receives appropriate care as early as possible.

Dementia is not a disease per se. It is an umbrella term used to describe a range of symptoms caused by any of a number of diseases that attack areas of the brain and erode its ability to function properly.

People often use the term Alzheimer’s disease interchangeably with dementia; however, Alzheimer’s is simply the most common cause of progressive dementia. (Progressive means it gets worse over time and is irreversible). Alzheimer’s is characterized by clumps and tangles of proteins in the brain and may have a genetic basis, especially when it occurs before age 60.

Other progressive dementias include:

- Vascular dementia (second most common) – resulting from reduced or blocked blood flow to the brain
- Lewy body dementia (more common) – marked by clumps of proteins in the brain and cognitive symptoms like Alzheimer’s along with aspects of Parkinson’s disease
- Frontotemporal dementia (less common) – tends to occur between ages 40 and 65; characterized by the breakdown of nerve cells in the areas of the brain associate with behavior, personality and language

Other associated progressive disorders include:

- Huntington’s disease – affects nerves in the brain and spinal cord
- Traumatic brain injury – caused by repetitive head trauma like what boxers and football players experience
- HIV – the virus that causes AIDS, which can destroy brain matter
- Creutzfeldt-Jakob disease (rare) – inherited or caused by exposure to diseased brain or nervous system tissue
- Movement disorders – e.g., Parkinson’s disease

On the other hand, a number of reversible and resolvable conditions can result in dementia-like symptoms, too:

- urinary tract infections (UTIs)
- Infections and immune disorders (e.g., meningitis, encephalitis, untreated syphilis or Lyme disease)
- Medication effects and interactions
- Dehydration and nutritional deficiencies

## TELL-TALE SIGNS

- Depression or other mood disorder
- Poisoning (e.g., exposure to heavy metals or pesticides)
- Heart and lung problems (which deprive the brain of vital oxygen)
- Metabolic problems/endocrine abnormalities (e.g., thyroid problems, hypoglycemia, levels of sodium or calcium that are too low or too high)

Dementia symptoms can vary depending on the specific individual, the underlying cause, and other factors. Typical characteristics involve:

- **Memory loss.** Trouble recollecting/remembering more recent experiences (though older/farther-back recollections/memories may seem unaffected).
- **Repetition.** Repeating stories, sometimes verbatim, and asking the same question over and over despite its have been answered each time.
- **Communication deficits.** Struggling to remember even basic words. Disorganized thinking.
- **Personality changes.** Inclined to sudden mood swings, becomes angry for no discernible reason.
- **Disorientation.** Gets lost in places that should be familiar. Has trouble completing basic tasks such as cooking a meal. Misplaces things in entirely inappropriate locations – liking leaving keys in the refrigerator.
- **Bad hygiene.** Stops taking an interest in appearance; wears stained clothes and does not bathe.

## PROGNOSIS

When a person starts exhibiting signs of cognitive difficulties, it is common for people close to him or her to rationalize at first. Any disease—especially one affecting thinking, behavior and personality—can be a scary prospect. However, it is always better to err on the side of caution and get a professional diagnosis as soon as possible. Geriatric care specialists and neurologists typically have the most experience diagnosing dementia, but even family doctors can recognize the signs and perform basic tests then refer to a specialist as needed.

No one test can conclusively establish whether a person has progressive dementia. Much of the process involves ruling out other causes. A thorough diagnosis typically involves a review of the person's medical history and the medical history of close relatives; a physical examination; a range of tests, both standard (e.g., blood) and specialized (e.g., cognitive written/oral, brain imaging); and interviews with family and other who have observed the symptoms (the affected person is often unaware)

The therapeutic options and prognosis for virtually any disease are best in the earliest stages. Even if the dementia is irreversible, new medications and therapeutic approaches exist that can help ease and even delay symptoms—improving the quality of life for the affected person, and helping brighten the outlook somewhat for those who care about the individual.