



CONNECTING MINDS

DEMENTIA CARE NEWSLETTER

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Types of Dementia Explained

Dementia is a syndrome consisting of a number of symptoms that includes memory loss, judgment and reasoning, and changes in mood and behavior. These symptoms may affect a person's functioning at work, in social relationships or in day to day activities. Sometimes symptoms of dementia can be caused by conditions that may be treatable, such as depression, thyroid disease, infections or drug interactions. However, if the symptoms are not treatable and progress over time, they may be due to damage to the nerve cells in the brain. Dementia, an umbrella syndrome, can be categorized under five types of the disease.

Alzheimer Disease, the most common form, accounts for 64 % of all dementia in Canada. The features of Alzheimer Disease include a gradual onset and continuing decline of short term memory, progressing to a decline in longer term memory. Changes in judgment or reasoning usually occur with an inability to perform familiar tasks. An inability to recognize close friends and family members will eventually occur as the disease progresses.

Alzheimer's disease is characterized by "plaques", tiny dense toxic deposits occurring throughout the brain and "tangles" which interfere with the transmission of information and killing of brain cells.

If a sudden onset of memory loss, problems of behavior, or difficulty with speech or movement should occur, the sudden onset suggests that some other form of dementia than Alzheimer Disease is present. A person, therefore, should seek a thorough medical assessment.

Vascular Dementia Disease is the result of having a single or multiple strokes. A stroke in the main area of the damaged brain is caused by a loss of blood flow. Strokes might be "large" or "small" and have a cumulative effect with each stroke adding to the damage caused by the previous strokes and loss of blood supply. Strokes may alter the person's ability to walk, cause weakness in an arm or leg, and cause slurred speech or emotional outbursts.

Vascular Dementia may begin immediately following a stroke and may progress step by step to an ever worsening condition. It may stabilize for a time and then deteriorate further. Cognitive symptoms may vary in degree from person to person, affecting the brain with respect to language, vision or memory.

Vascular Dementia is the second most common form of Dementia after Alzheimer Disease and may co-exist with Alzheimer Disease in a person and be referred to as Mixed Dementia. Both men and women can be affected.

Risk factors are age, normally over 65, high blood pressure, heart disease and diabetes. Smoking, being overweight, having elevated cholesterol and a family history of strokes, also increases the risk of Vascular Dementia. It's vitally important therefore to manage the risk factors associated with strokes to avoid onset of the disease.

Pick's Disease is also known as Frontal Lobe Dementia, Frontotemporal Dementia, Primary Progressive Aphasia, Corticobasal Degeneration and Pick's Complex. Pick's Disease is a progressive dementia that affects the frontal and temporal lobes of the brain. In some cases, brain cells in these areas can shrink or die. In other cases, the brain cells in these areas get larger, containing round, silver, "pick's bodies". In both situations, the changes affect the person's functioning. Early symptoms often affect either *behavior* and/ or *speech*.

Incontinence occurs early in the disease. Changes in *behavior* may include becoming socially uninhibited or withdrawn. Loss of interests, lack of personal hygiene, easily distracted or doing things repetitiously are typical characteristics. Overeating, stuffing one's mouth or putting non food items in ones mouth may occur.

Problems with speech can range from reduction of speech to total loss. Echoing what is said by others and stuttering are common. Difficulty sustaining a train of thought or maintaining a conversation

is difficult for the person. Unlike with Alzheimer Disease, the person may remain currently oriented in time and have preserved memory in the early to mid term stages. Later, memory will likely fade, the person will become confused and general symptoms of dementia will likely occur. Motor skills may be lost and swallowing difficulties will occur.

Both men and women can be affected and usually after age 50. Duration of the disease is seven to eight years. The causes of Picks Disease are not known but some genetic factors may be a cause. There is no treatment for Picks Disease although some symptoms may require treatment.

Lewy Body Dementia is a form of progressive dementia identified by abnormal structures in brain cells called “Lewy Bodies”, distributed in various areas of the brain and their cause is unknown. It can occur alone by itself or in combination with Alzheimer Disease or Parkinson’s disease. It accounts for 15 to 20 percent of all dementia. Other names for this disease are Diffuse Lewy Body Disease, Cortical Lewy Body Disease, and Senile Dementia of Lewy type.

Lewy Body Dementia is similar to Alzheimer’s disease in that there is a progressive loss of memory, language, reasoning and other mental functions such as calculation. Short term memory is lost first, finding the right choice of words and sustaining a train of thought. The individual may also experience depression and anxiety. Depression and anxiety can vary from hour to hour. Progression of the disease is faster than for Alzheimer’s disease.

Some symptoms like muscular rigidity, tremors, stooped posture and slow shuffling movement are similar to that in Parkinson’s disease. The disease is more common in men than women. There is no known cause of the disease and there is no treatment other than for symptoms.

Creutzfeldt-Jakob Disease is a rare form of progressive dementia characterized by a degeneration and loss of nerve cells leading to the production of microscopic holes in the brain. The disease has a rapid onset and final decline. Early symptoms may include lapses in memory, mood swings similar to depression, lack of interest and social withdrawal. The person may become unsteady on his/her feet. Later symptoms may include blurred vision, sudden jerky movements and muscular rigidity in the limbs. The person may experience slurred speech and have difficulty swallowing. Eventually, movement and speech are lost.

Both men and women can be affected by Creutzfeldt-Jacob Disease. Onset of the disease is between 45 to 75 years of age.

There are four recognized variants of the disease; “Sporadic”, occurring here and there in the general population; “Familial,” occurring in families from a common gene; “Transmissible”, occurring when a person comes in contact with infected brain material; “Variant”, occurring from eating beef products containing “Mad Cow Disease” protein prions. Beef products are all independently inspected and highly regulated in Canada so the risk of infection by eating meat is extremely remote. There is no treatment for the disease although symptoms can be treated.

Reference: “Related Dementia Information Sheets”, Alzheimer Society of Canada

Katherine Punch Resource Library

For more information on dementia visit the Alzheimer Society’s resource library.

For more information call 942-2195

Upcoming Events—Pan Northern Geriatric Care Conference

The 2nd annual Northern Geriatric Care conference will offer the equivalent of 2 full days of intensive learning to all health care professionals who work with older adults in different settings across the continuum of care. The conference and trade show will provide participants with the latest developments in evidence based best care practice that will foster the innovative delivery of collaborative geriatric care.

Wednesday, October 28th, 2009

To

Friday, October 30th, 2009

Great Northern Hotel and Conference Centre

For further information please contact Deana Stephen 1 866 551 6501
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