

DEMENTIA

The Different Causes



What happens to a brain with dementia?

Dementia is an umbrella term that describes decline in mental ability severe enough to interfere with daily life.

Dementia is not normal aging; it is a result of physical changes to the brain, rather than a mood or personality disorder.

There are myriad disorders and conditions that cause dementia, each with its own changes to the brain. Memory loss is not present in all types of dementia.

THE FIVE MAJOR TYPES ARE:

1. ALZHEIMER'S DISEASE
2. VASCULAR DEMENTIA
3. FRONTOTEMPORAL DEMENTIA
4. LEWY BODY AND PARKINSON'S DEMENTIA
5. MILD COGNITIVE IMPAIRMENT



Each of these conditions impacts the brain differently. The results of each disease also varies from person to person, even with the same diagnosis.

ALZHEIMER'S DISEASE

This photo of two brains shows changes due to advanced Alzheimer's. The image on the left is a normal brain. The one on the right is a person with advanced Alzheimer's disease. From this view, it is clear Alzheimer's is a brain disease, where the person's brain becomes severely and irreversibly damaged. The brain on the left weighs about 3 lbs.; the one on the right weighs only about 1 lb.

HEALTHY BRAIN



ADVANCED ALZHEIMER'S

IMAGE COURTESY OF THE NATIONAL INSTITUTE ON AGING/NATIONAL INSTITUTES OF HEALTH

VASCULAR DEMENTIA

- While the effects and severity of this condition vary, it results from abnormal blood flow to the brain or from one or more strokes.
- Symptoms vary widely from person to person because the area(s) of the brain it impacts in any individual are different than others.
- People with vascular dementia can experience a lot of ups and downs in their symptoms. They may be very confused at times but less so at others.
- According to the Alzheimer's Association, about 20 percent of people with dementia have vascular dementia.

FRONTOTEMPORAL DEMENTIA

- Usually onset is in people in their 50s and 60s.
- There are three main variants of frontotemporal dementia that impact:
 - Behavior (the most common)
 - Language
 - Movement
- Memory or thinking problems may not be present in some types.
- Behavioral variant symptoms include:
 - Personality changes
 - Poor impulse control
 - Recklessness
 - Socially unacceptable behavior
 - Lack of self-care including hygiene



LEWY BODY AND PARKINSON'S DEMENTIA



These two types of dementia, while different diseases, are thought to be closely related. They are often mistaken for one another and/or misdiagnosed as Alzheimer's.

- People living with either Lewy body dementia or Parkinson's disease dementia have Lewy bodies - an abnormal protein - in their brains.
- Both types have movement symptoms referred to as "Parkinsonism."
- Typically dementia develops early in the Lewy body disease. In contrast, Parkinson's dementia (if it develops) comes later in the disease.
- People with Parkinson's disease may experience a type of mild cognitive impairment that begins any time, including before motor symptoms appear. However, this does not mean dementia will also develop.
- A sleep disturbance called rapid eye movement sleep behavior disorder may precede Lewy body or Parkinson's dementias.

MILD COGNITIVE IMPAIRMENT

This diagnosis is associated with a variety of underlying conditions. Symptoms include mild problems with memory, thinking and decision making. These difficulties are not usually severe enough to impair daily activities.

Mild cognitive impairment may or may not advance to dementia; only time will tell. Further development of symptoms may lead to a more specific diagnosis.

Mild cognitive impairment is not a part of normal aging.

MIXED DEMENTIA

Mixed dementia refers to having more than one type of dementia, such as Alzheimer's and vascular dementia. This may occur due to the various effects of aging on the body and brain.

This is just one reason the symptoms of dementia shown by each individual are so varied and often do not fully "fit" with typical symptoms of any one type of dementia.

What is the first step to take if I notice signs of dementia in myself or a loved one?

The first thing you should do if you suspect you or a loved one may have dementia is to see your primary care doctor or neurologist. New York is home to some of the best neurology clinics and memory disorder centers in the United States. Ask your doctor or primary care manager for a referral and make an appointment as soon as you can.

If you receive the diagnosis of Alzheimer's disease or another cause of dementia, you may be interested in home care or companion care services. An experienced service provider can match the right caregiver and tailor a program that provides the right amount of support. ComForCare NYC can provide support for just three to four hours per week, and as much as 24 hours per day, seven days per week.

SOURCES
HTTPS://WWW.ALZ.ORG/DEMENTIA/DOWNLOADS/TOPICSHEET_LEWYBODY.PDF
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