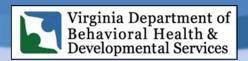
Health Trends



December 2019

Office of Integrated Health



Dementia







What is Dementia? Dementia is a blanket term referring to a wide range of specific medical conditions, including Alzheimer's disease. Disorders grouped under the general term "dementia" are caused by abnormal brain changes. These changes are a collection of symptoms affecting cognition and memory caused by a number of different diseases that damage brain cells and affect daily functioning. They also affect behavior, feelings and relationships (Alzheimer's Association, 2019). Dementia ranges in severity from the mildest stage, when it is just beginning to affect a person's functioning, to the most severe stage, when the person must depend completely on others for basic activities of daily living (National Institute on Aging, 2017).

Alzheimer's disease is the most common form of dementia, causing 60-80% of dementia cases (Alzheimer's Association, 2019). Other common diseases that cause dementia include vascular dementia, frontotemporal lobar degeneration, dementia with Lewy bodies, and Parkinson's disease dementia. Mixed dementia refers to a combination of diseases, often Alzheimer's disease and vascular dementia (National Institute on Aging, 2017). There are also other conditions that can cause symptoms of dementia, including some that are reversible, such as thyroid problems and vitamin deficiencies (Alzheimer's Association, 2019).

Persons with an intellectual disability (ID), especially with Down syndrome, are more likely to develop dementia than the general population (Strydom, Chan, King, Hassiotis, & Livingston, 2013). The clinical presentation of dementia in persons with ID can differ from persons without an ID diagnosis. Personality and behavioral changes can start occurring earlier in the course of the disorder. Individuals with Down syndrome show early behavioral changes, which are believed to be linked to frontal lobe malfunctions (Strydom, Shooshtari, Lee, Raykar, Torr, Tsiouris, & Maaskant, 2010). By age 55, three out of every five individuals with Down syndrome will be diagnosed with Alzheimer's disease or another neurodegenerative condition (Rubenstein, Hartley, & Bishop, 2019).

There are an estimated 150,000 adults age 65 or older currently living with Alzheimer's disease in Virginia. This number is expected to rise to 190,000 by 2025. Dementia is the sixth leading cause of death in the United States, with one person diagnosed roughly every sixty seconds. (Alzheimer's Association, 2019).

Risk factors:

- Age. The risk of developing dementia doubles every five years after the age of 65 (Alzheimer's Association, 2019).
- · Genetics/family history affects individuals who have a parent, or sibling diagnosed with dementia making them more likely to develop the disease (Alzheimer's Association, 2019).
- Smoking and alcohol use are directly related to increased risk for vascular dementias.
- Atherosclerosis (deposits of fatty substances, cholesterol, and other matter in the inner lining of an artery).
- Hypercholesterolemia (high levels of low-density lipoprotein
- Plasma homocysteine. Research has shown a higher-thanaverage blood level of homocysteine, a type of amino acid, is a strong risk factor in the development of Alzheimer's disease and vascular dementia.
- Diabetes increases the risk for both Alzheimer's disease and vascular dementias.
- Mild cognitive impairment (Stanford Health Care, 2019).

Symptoms may include:

- · Sporadic memory lapses.
- · Getting lost or misdirected.
- · Problems with gait or walking.
- Confusion with familiar tasks or in familiar situations.
- Increased frustration and lack of patience.
- Changes in personality (Jokinen, Janicki, Keller, Mc Callion, & Force, 2013).

The symptoms of dementia vary widely by individual and specific disease, but typically include significant impairment of at least two of the following areas: memory, communication and language, ability to focus and pay attention, reasoning and judgment, and visual perception (Alzheimer's Association, 2019).

Complications of Dementia

- Severe intellectual deterioration.
- Immobility.
- Falls.
- Seizures.
- · Difficulties with swallowing.
- Respiratory and breathing problems.
- · Complete loss of self-care skills.
- Conditions leading to death (Jokinen, et al., 2013).

Continued on PAGE 2 ...



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How is Dementia Diagnosed?

To diagnose dementia, physicians first assess whether a person has an underlying treatable condition such as abnormal thyroid function, normal pressure hydrocephalus, or a vitamin deficiency that may relate to cognitive difficulties (National Institute on Aging, 2017).

The diagnostic process often begins with a preliminary assessment of cognitive and physical functioning to confirm suspicions and to determine the presence of any neuropathological indicators associated with dementia. Because of preexisting cognitive issues, standard cognitive instruments used in detection and progression in the general population make early stage dementia detection difficult in people with ID. The process includes neuropsychological examinations, blood tests, assessments for delirium or depression, and brain scans such as CT or MRI. An accurate diagnosis involves a confirmation of data from the assessment and a firm understanding of intellectual disability and causes of dementia (Bishop, Hogan, Janicki, Keller, Lucchino, Mughal, & Wolfson, 2015).

Individuals living with intellectual and developmental disabilities (ID/DD) are increasingly living longer lives, though life expectancy remains lower than for the general population. Individuals with Down syndrome are at highest risk for developing Alzheimer's disease or a related dementia, and typically develop it in their 50s or earlier. For other individuals with DD, prevalence is thought to be higher than for the general population, although with a similar age of onset and time frame (Virginia Alzheimer's Disease and Related Disorders Commission, 2019).

Resources

- Healthy Brain Initiative 2018-2023 Road Map (Alzheimer's Association & Centers for Disease Control, 2018) as a guide to the practical steps that can be taken to achieve better outcomes.
 - https://www.cdc.gov/aging/pdf/2018-2023-Road-Map-
- Brain Health Virginia http://www.vdh.virginia.gov/brain-
- Virginia devised and made available dementia capability training modules for Options Counselors, Care Transitions Coaches, Information and Referral Specialists. Links to these modules are available at https://alzpossible.org/training/
- The GMHP has created and disseminated more than 20 webinars to train community-based staff and providers as well as family caregivers under its Mental Health and Aging Training Initiative.

https://www.worldeventsforum.net/mhati/

Mobile App of the Month



Alzheimer's and other dementia's caregivers now have help at their fingertips. This app, a resource brought to you by Home Instead Senior Care®, helps build caregivers confidence to provide care by arming them with immediate tips and practical advice for all of the behaviors and situations they face on a daily basis. Caregivers can search on situations they are struggling with, and the app will return immediate and relevant answers.

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Happy Holidays from the Office of Integrated Health. Check out this link to the Health & Safety Alert on the **Dangers of Holiday Plants** to keep everyone safe and happy during the holidays.

Link: http://www.dbhds.virginia.gov/assets/document-

library/archive/library/oih/oih%20programs/educational%20resources/pdfs/archive%20health%20and%20safety%20