



Memory Loss, Dementia and Alzheimer's Disease:

The Basics



What is age-related memory loss?

Typical changes

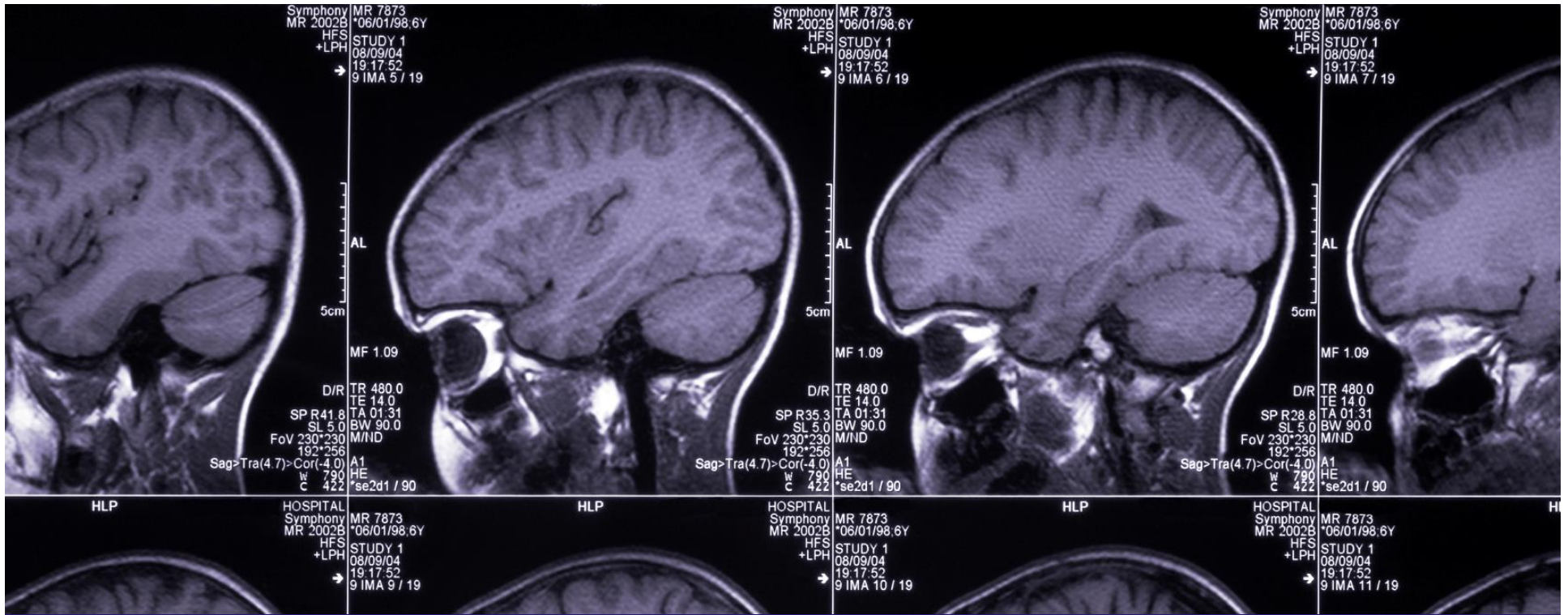
Typical age-related changes involve:

- ◆ Making a bad decision once in a while
- ◆ Missing an occasional monthly payment
- ◆ Forgetting which day it is and remembering later
- ◆ Sometimes forgetting which word to use
- ◆ Losing things from time to time

Problematic changes

Changes indicating the need for a doctor's visit:

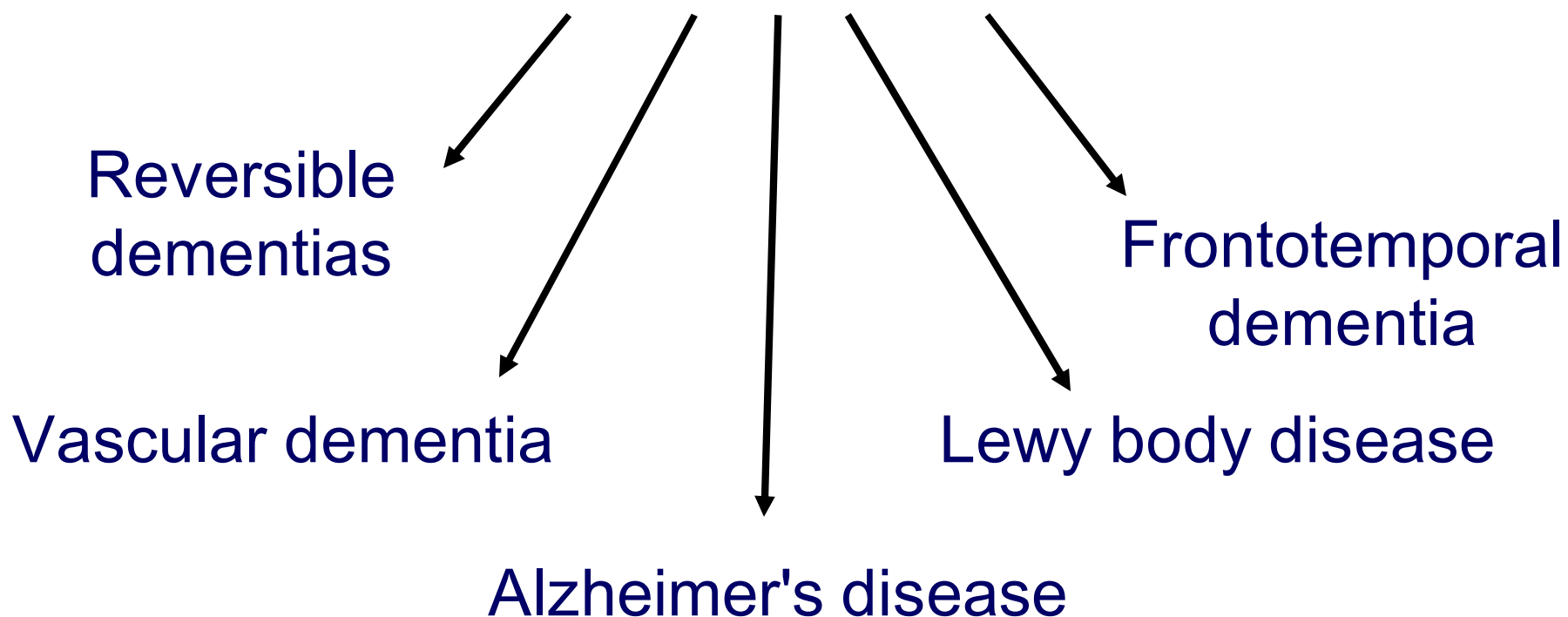
- ◆ Consistent poor judgment and decision making
- ◆ Loss of an ability to manage money
- ◆ Inability to keep track of the date or the season
- ◆ Difficulty having a conversation
- ◆ Misplacing things and loss of the ability to retrace steps to find them
- ◆ Trouble with visual and spatial relationships
- ◆ Challenges in planning or solving problems



What is dementia?

Understanding dementia

Dementia



What is dementia?

- ◆ Loss of cognitive functioning serious enough to interfere with daily functioning
- ◆ Causes changes in:
 - ◆ memory
 - ◆ language
 - ◆ thought
 - ◆ navigation
 - ◆ behavior
 - ◆ personality / mood

Reversible causes of dementia

Depression, delirium

Emootional disorders

Metabolic disorders (e.g., hypothyroidism)

Eye and ear impairments

Nutritional (e.g., B12 deficiency)

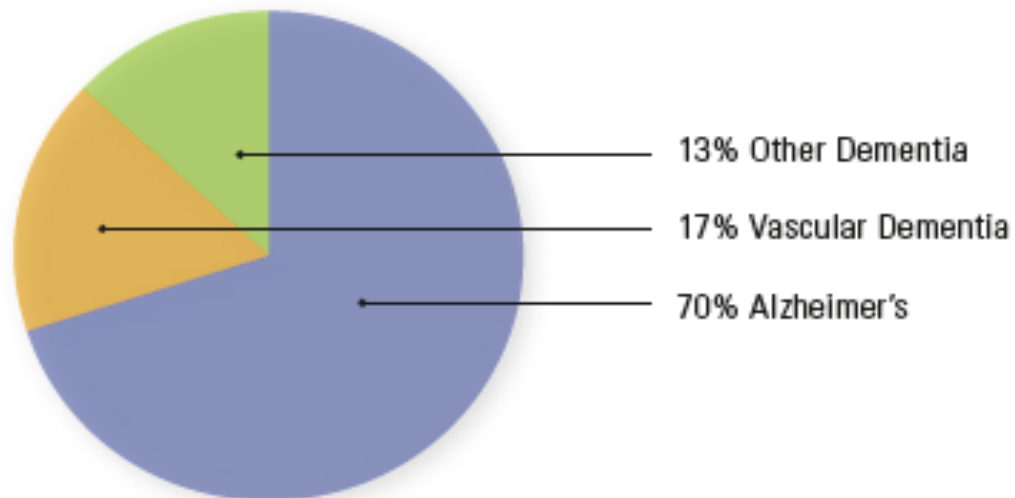
Tumors

Infections

Alcohol, drugs, medication interactions

Irreversible types of dementia

Causes of Dementia in People Aged 71+, ADAMS



Created from data from Plassman et al. ²

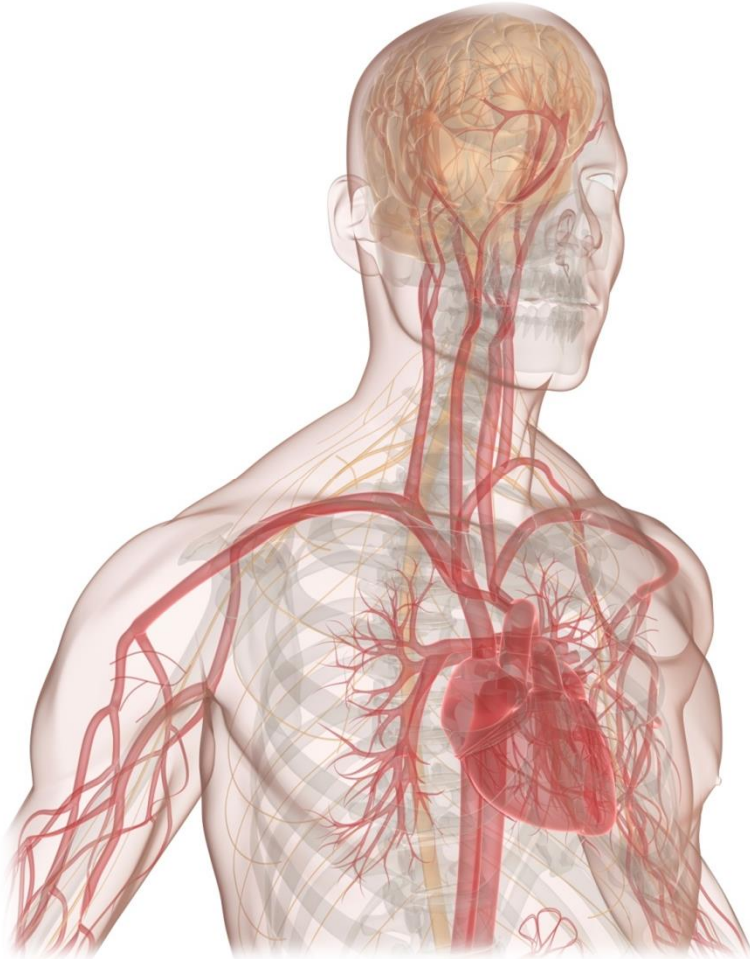
- ◆ Alzheimer's disease: the most common type
- ◆ Over 70% of people with dementia have Alzheimer's disease

Mild cognitive impairment

- ◆ Severe enough to show up on tests
- ◆ Increases risk of developing Alzheimer's disease



Vascular dementia



- ◆ Second most common form of dementia
- ◆ Caused by damage as result of reduced blood flow from one or more strokes

Mixed dementia

- ◆ Alzheimer's disease and another type of dementia can exist at the same time
- ◆ This may account for nearly half of the cases where Alzheimer's is present



Dementia with Lewy bodies



- ◆ Wide variations in attention and alertness
- ◆ May include:
 - ◆ Hallucinations
 - ◆ Tremors
 - ◆ Rigidity

Frontotemporal dementia

- ◆ Sometimes called “Pick’s disease”
- ◆ Begins earlier and progresses more quickly than Alzheimer’s disease
- ◆ First symptoms are usually personality changes and disorientation



More rare types of dementia

Other more rare dementias include:



- ◆ Creutzfeldt-Jakob disease
- ◆ Parkinson's disease
- ◆ Huntington's disease
- ◆ Normal pressure hydrocephalus
- ◆ Wernicke-Korsakoff syndrome



Alzheimer's disease

What is Alzheimer's disease?

Alzheimer's disease:

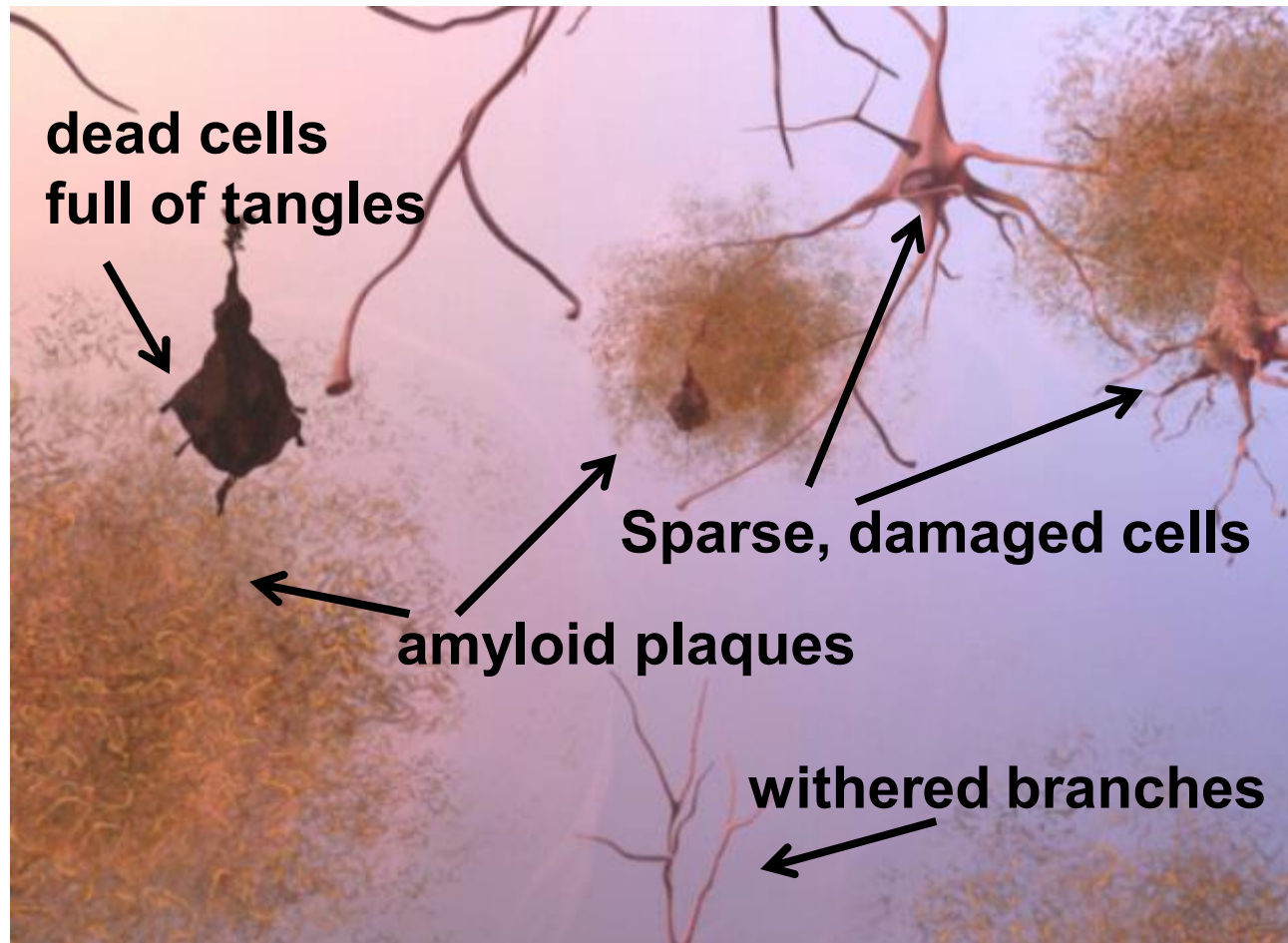
- ◆ is a brain disorder
- ◆ is a progressive disease
- ◆ is the most common form of dementia
- ◆ has no cure
- ◆ is eventually fatal

How the brain works

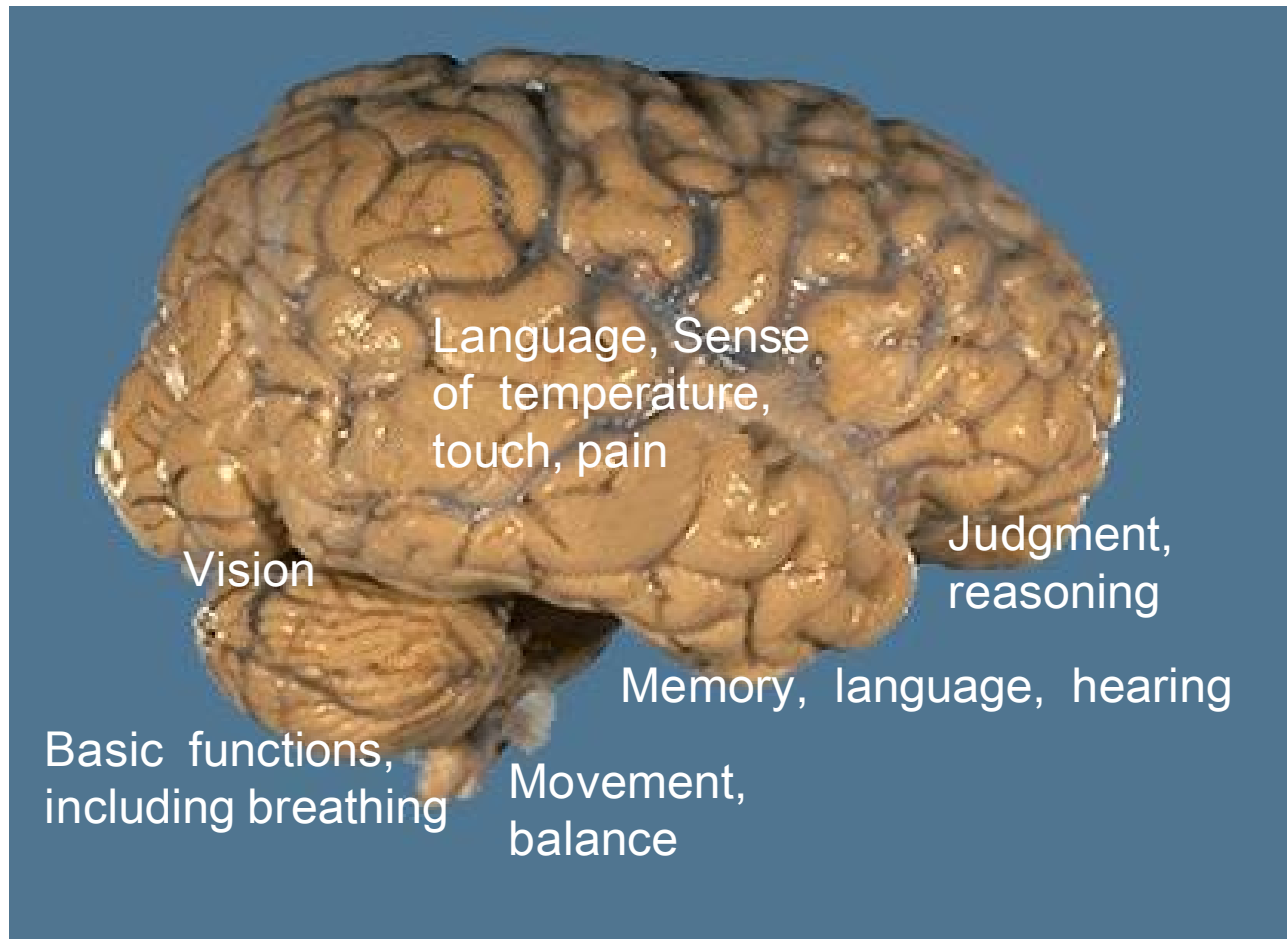
- ◆ There are 100 billion nerve cells, or neurons, creating a branching network.
- ◆ Signals traveling through the neuron forest form memories, thoughts and feelings.
- ◆ Alzheimer's destroys neurons.



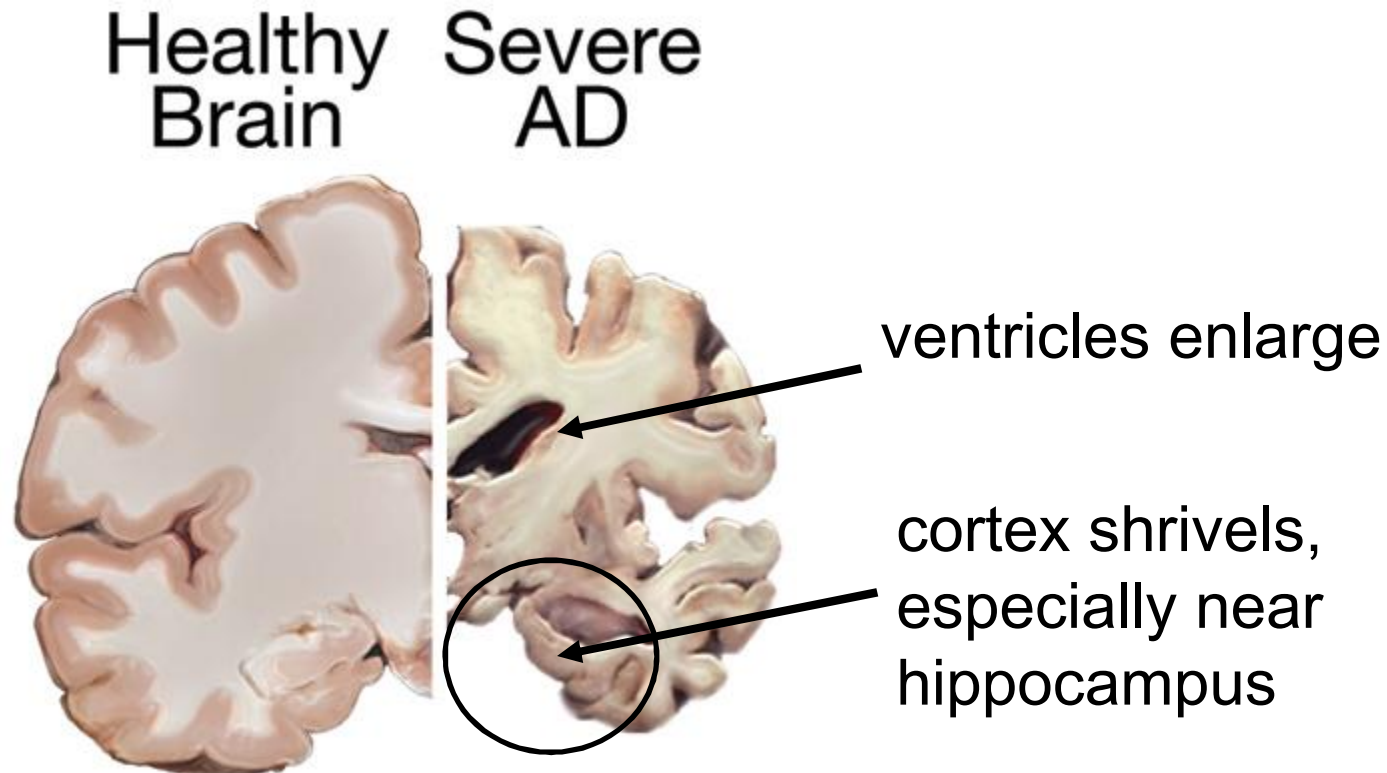
Neurons affected by Alzheimer's



Which functions are affected?



Healthy vs. Alzheimer brain





Who is at risk?

Major risk factors

- ◆ The primary risk factor is age
- ◆ The incidence is higher in women due to women living longer
- ◆ Down syndrome is correlated with AD
- ◆ Family history can increase risk
- ◆ There are two categories of genes

Estimated Percentage of Americans Aged 71+ with Dementia by Gender, ADAM



Created from data from Plassman et al.²

FAQs: Causes and other risks

- ◆ If I have had a head injury, am I at greater risk for Alzheimer's disease?
- ◆ Does my diabetes and my high blood pressure put me at higher risk for developing Alzheimer's?
- ◆ Can doing crossword puzzles reduce my risk of developing Alzheimer's?
- ◆ Could broccoli or other foods be prevention tools?
- ◆ Will memory screening tools help me avoid a visit to the doctor?



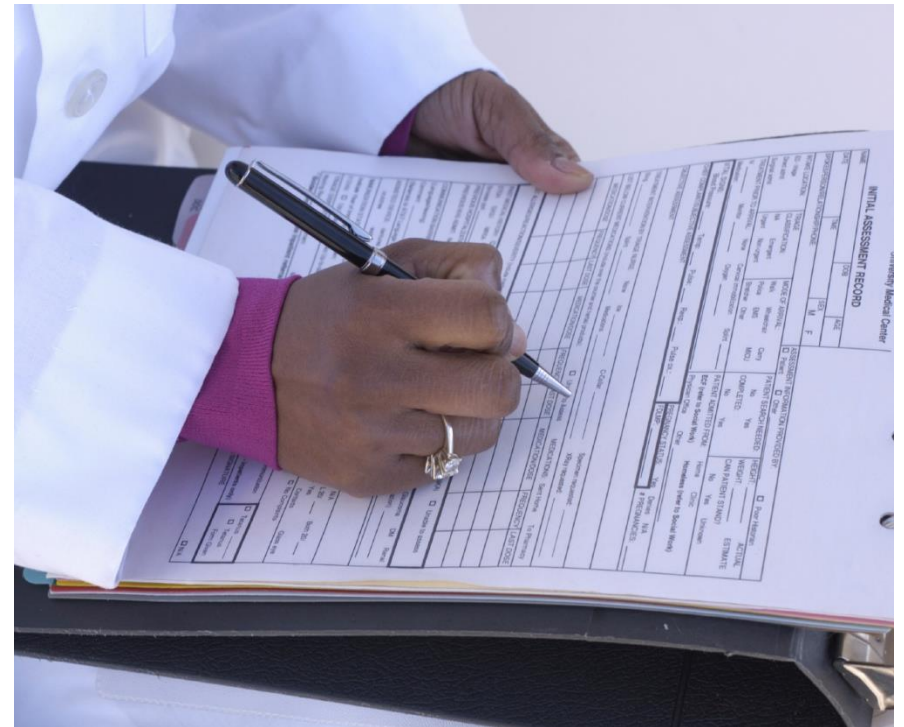
Getting a thorough diagnosis

Selecting a doctor

Doctors can diagnose Alzheimer's disease with accuracy

Choose from:

- ◆ Regular primary care physician
- ◆ Geriatrician
- ◆ Neurologist
- ◆ Psychiatrist
- ◆ Neuropsychologist

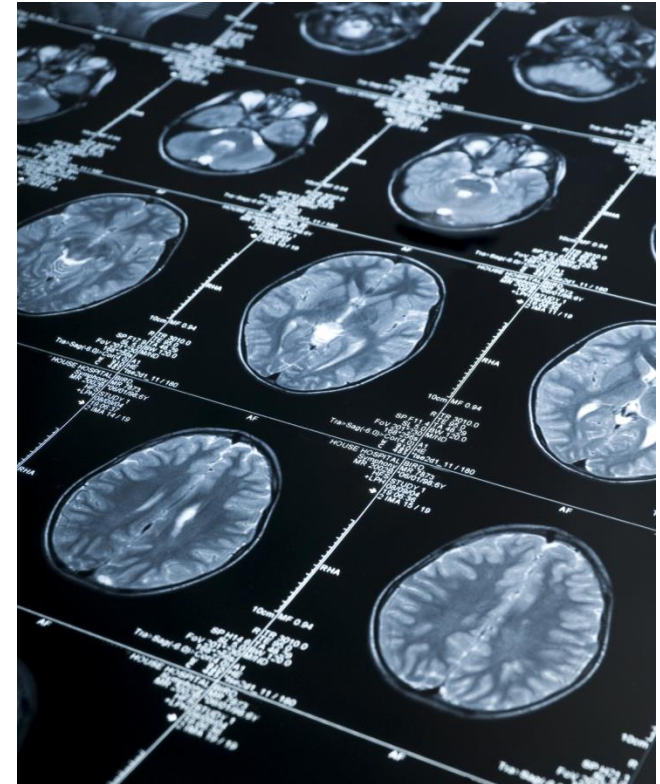


Preparing for the doctor's visit

- ◆ Keep a log
 - ◆ Write a list of symptoms, be specific
 - ◆ Include when, how often and where
 - ◆ Develop the list with input from other family members
- ◆ List current and previous health problems
- ◆ Bring all medication (prescription, vitamins, herbal supplements and over the counter medication)

The doctor's visit

- ◆ Medical and family history
- ◆ Physical and neurological exam
- ◆ Lab tests
- ◆ Mental status exam
- ◆ May include brain imaging (MRI, CT scan)
- ◆ May include neuropsych tests



Medications to treat symptoms

- ◆ Cholinesterase inhibitors for mild to moderate symptoms
 - ◆ Donepezil (Aricept®)
 - ◆ Rivastigmine (Exelon®)
 - ◆ Galantamine (Razadyne®)

Medications to treat symptoms

- ◆ Glutamate regulator for moderate to severe symptoms
 - ◆ Memantine (Namenda®)

Clinical studies



- ◆ Promising new strides for treatment, prevention and diagnosis
- ◆ Participants receive a high standard of care

Alzheimer's Association



a guide to caring
for people with alzheimer's
and related dementias

alzheimer's  association®
the compassion to care, the leadership to conquer

caregiver
notebook

alzheimer's association
Senior Housing FinderSM

www.alz.org


comfort zoneTM



Resources to help

alzheimer's  association®

Programs and services

- ◆ Educational programs for families and professionals
- ◆ 24-hour Helpline
- ◆ Information and referrals
- ◆ Care consultation
- ◆ Support groups
- ◆ Online community
- ◆ Safety services

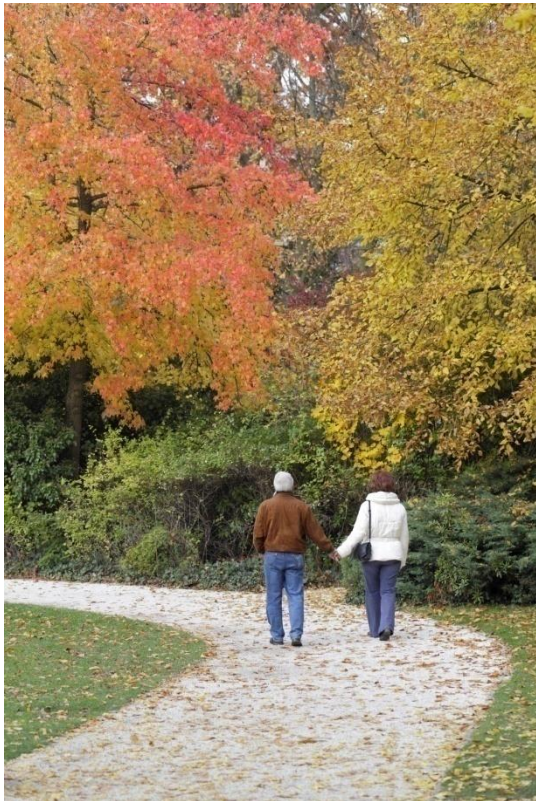




To learn more...

Contact us!

When Alzheimer's disease touches your life,
turn to us.



Nationwide 24-hour Helpline Whether you need information, or just want someone to talk to, call us at 1.800.272.3900.

www.alz.org Our award-winning Web site is a rich resource of evidence-based content.

Contact us at 1.800.272.3900 or www.alz.org



Thank you.