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

- Reversible dementias
  - Vascular dementia
  - Alzheimer's disease
  - Frontotemporal dementia
  - Lewy body disease
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
- Emotional 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

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

Causes of Dementia in People Aged 71+, ADAMS.

- 70% Alzheimer’s
- 17% Vascular Dementia
- 13% Other Dementia

Created from data from Plassman et al. 2
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
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:
- Dead cells full of tangles
- Sparse, damaged cells
- Amyloid plaques
- Withered branches
Which functions are affected?

- Language, Sense of temperature, touch, pain
- Judgment, reasoning
- Memory, language, hearing
- Movement, balance
- Basic functions, including breathing
- Vision
Healthy vs. Alzheimer brain:

- Healthy Brain
- Severe AD

- Ventricles enlarge
- Cortex shrivels, especially near hippocampus
Who is at risk?
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.
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
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)
Medical and family history
Physical and neurological exam
Lab tests
Mental status exam
May include brain imaging (MRI, CT scan)
May include neuropsych tests
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

Resources to help
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.