

RENEW & REFLECT

quick tips from SLIconnect

The Facts about Dementia

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The term dementia is a comprehensive word used to describe the symptoms of cognitive impairment. Alzheimer's disease, while the most common type of dementia, is just one of many variations within the dementia family. There are many types of dementia, including dementia resulting from alcohol misuse, dementia associated with HIV, and dementia resulting from traumatic brain injury. Below we explore the characteristics of and differences among the four most common types of dementia.

Alzheimer's Disease

Alzheimer's can be described as a slow process of going backwards in time. The disease process is divided into seven stages, beginning with simple confusion. The later stages can mean significant impairment (e.g., loss of ability to swallow) and the need for full-time care. Early symptoms include:

- Memory loss that disrupts daily life
- Challenges in planning or problem-solving
- Difficulty completing familiar tasks at home or at work
- Confusion with time or place
- Trouble understanding visual images and spatial relationships
- New problems with words in speaking or writing
- Misplacing things and losing the ability to retrace steps
- Decreased or poor judgment
- Withdrawal from work or social activities
- Changes in mood or personality

Lewy Body Dementia (LBD)

Also known as Dementia with Lewy Bodies, LBD is another very common, yet frequently misdiagnosed or undiagnosed type of dementia. Symptoms include:

- Changes in thinking and reasoning
- Confusion and alertness that varies significantly from one time of day to another or from one day to the next
- Parkinson's symptoms, such as a hunched posture, balance problems and rigid muscles
- Visual hallucinations
- Delusions
- Trouble interpreting visual information
- Acting out dreams, sometimes violently, known as rapid eye movement (REM) sleep disorder
- Malfunctions of the "automatic" (autonomic) nervous system
- Memory loss that may be significant but less prominent than in Alzheimer's

Vascular Dementia

This type of dementia, sometimes called “post stroke dementia,” is very different from Alzheimer’s or LBD. Vascular dementia is brain damage traced to cardiovascular problems, or mini-strokes that have caused bleeding or injury in the brain. Symptoms may be most obvious when they happen soon after a major stroke. The use of medication has been shown to prevent or slow further brain damage.

Sudden post-stroke changes in thinking and perception may include:

- Confusion
- Disorientation
- Trouble speaking or understanding speech
- Vision loss

Frontotemporal Dementia (FTD)

FTD occurs when there is deterioration to the frontal and temporal lobes of the brain. Symptoms may occur in clusters, and some may be more prevalent in early or later stages.

Symptoms include:

- Poor judgment
- Loss of empathy
- Socially inappropriate behavior
- Lack of inhibition
- Repetitive compulsive behavior
- Inability to concentrate or plan
- Frequent, abrupt mood changes
- Speech difficulties
- Problems with balance or movement
- Memory loss

Resources

NIA Alzheimer’s and Related Dementias Education and Referral (ADEAR) Center

1-800-438-4380 | adear@nia.nih.gov

www.nia.nih.gov/alzheimers

National Institute of Neurological Disorders and Stroke

1-800-352-9424 | braininfo@ninds.nih.gov

www.ninds.nih.gov

Association for Frontotemporal Degeneration

1-866-507-7222 | info@theaftd.org

www.theaftd.org

Lewy Body Dementia Association

1-404-975-2322

1-844-311-0587 (LBD Caregiver Link)

www.lbda.org

For More Information

Saint Luke Institute's Aging and Memory Evaluation assesses whether signs of cognitive decline are due to neurological or psychological issues. Contact us at info@slu.org or 301-422-5429 to schedule an evaluation.

