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Serving the ADRC of BUFFALO and PEPIN COUNTIES

Dementia 101

Dementia 101 Objectives

- What is Dementia
- Common Types
- Early Symptoms
- Diagnosing Dementia
- Dementia Friendly Community
- * ADRC Resources



What is Dementia

- Dementia is...a group of symptoms that affect thinking, memory, reasoning, planning, language, and/or social skills to the point that it negatively affects everyday life.
- Dementia is...a decline from a previously higher level of functioning.
- ▶ Dementia is...caused by brain cell death and is not a normal part of aging.
- ▶ Dementia is...progressive and terminal.

What is Dementia

Dementia is not...a normal part of aging

▶ Dementia is not…an old person's disease

▶ Dementia is not…best treated with medications

Dementia falls into two categories: reversible and irreversible



Reversible Dementia

Can be caused by treatable conditions such as the following:

- Infection (UTI)
- Medication Induced (Combinations/Interactions)
- * Mood disorders (Anxiety, Bipolar, schizophrenia, **Depression**)
- Constipation
- Chronic Pain

- Poor Nutrition, Dehydration,Vitamin Deficiency
- Sensory Losses (Hearing, Vision, Sensation)
- Carbon Monoxide Poisoning
- Chronic Infection (Syphilis, Lyme Disease)
- Fluctuating Blood Sugar
- + Hypothyroidism/Hyperthyroidism

 Is caused by physical changes in the brain that lead to brain cell death – progressive brain failure

Irreversible Dementia

- The way dementia affects each person is unique and the progression is also unique
- * Heart conditions, diabetes and those who have had several strokes or infections are likely to have a faster deterioration of the disease

Types of Irreversible Dementia

Alzheimer's Dementia: most common type of dementia, typically noticed first with memory issues as usually first affects the hippocampus which is where memoires are stored. For most people symptoms first appear in their mid 60's but can be earlier and later.

Dementia with Lewy Bodies: considered by some to be 3rd most common, hallmark is hallucinations, body tremors and rigidity of muscle groups, "Lewy bodies" are abnormal deposits of protein in the brain. Symptoms start slowly and worsen over time.

Frontotemporal Dementia: the result of progressive cell degeneration in the frontal (area behind your forehead) and temporal (regions behind your ears) areas of brain; affects personality; strikes earlier and progresses quickly

Vascular Dementia: a decline in thinking skills caused by conditions that block or reduce blood flow to the brain, depriving brain cells of vital oxygen and nutrients.

Parkinson's Dementia: not everyone with Parkinson's will develop dementia; decline in thinking and reasoning that manifests at least 1 year after the Parkinson's diagnosis

Types of Irreversible Dementia

Huntington's Disease:
genetically linked; hallmark
symptoms are uncontrollable
movements of head, face and
upper body

Wernicke-Korsakoff Syndrome: caused by severe deficiency of thiamine (vitamin B-1) often associated with alcohol abuse

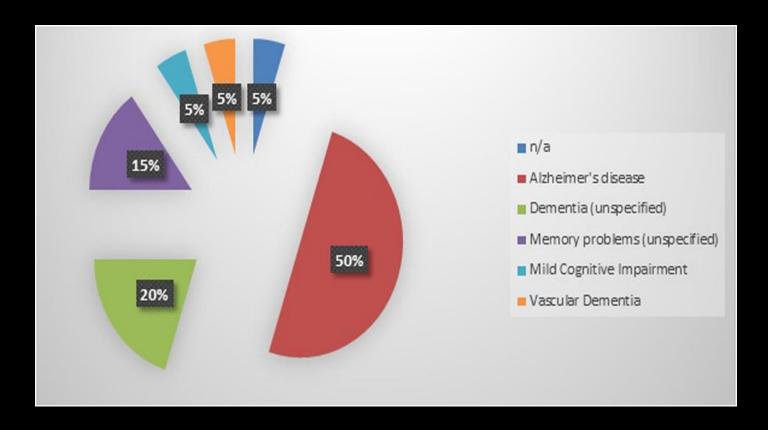
<u>Creutzfeldt-Jakob Disease:</u> very rare but quick progression

Normal Pressure

Hydrocephalus: often
misdiagnosed as Alzheimer's or
Parkinson's, some short relief
possible with relief of fluid but
not certain how effective

Mixed Type Dementias:
Alzheimer's, vascular and Lewy
Body are common mixed type
dementias

Mild Cognitive Impairment



Early Warning Signs

Signs vary depending on type of dementia and area of brain affected

- Memory loss that disrupts daily life
- Challenges in problem solving or planning that are new
- * Difficulty completing familiar tasks at home, work or leisure
- Confusion with time or place
- Trouble understanding visual images and spatial relationships

- New problems with words in speaking or writing
- Misplacing items and losing the ability to retrace steps
- Decreased or poor judgement
- Withdrawal from work or social activities
- Changes in mood and personality

Recognizing when a person may have dementia

- ► They may look like, or even say that they are a bit lost or confused
- ► They might appear to be searching for something they cannot find
- ► They might look like they don't know what to do next
- ► They might appear to have problems understanding what you are saying
- ► They may repeat questions
- ► They may speak slowly or speak softly

Diagnosing Dementia

- ► There is no single test to conclusively diagnose dementia
- ▶ Physicians can typically determine a person has dementia, they may not be able to identify the exact cause.
- ▶ Medical tests, including neurological and brain imaging tests are used to help determine diagnosis.
- ► Home screening tests are not scientifically proven to be accurate and can have false positive results.
- ► Early diagnosis is important to helping person plan for future needs, participate in clinic trials if interested and treatments that help with symptoms associated with Alzheimer's work best early in the disease

Early Detection Matters:

Important to check into changes early to maintain quality of life

Some changes could be caused by reversible conditions as discussed

Medications & lifestyle can possibly help preserve quality of life for some time longer in some individuals

Allows for time to make wishes known and plan for future cares

Recognizing when a person may have dementia

They may be slow to process what is said

They may be slow to pull out a purse or credit card

They might appear to have problems handling or understanding their money, or how to use their credit card

They might find selfservice facilities hard to understand

They may forget to pay for things they have picked up A partner or companion may indicate to you that the person they are with has dementia.

Some people carry a card or wear a bracelet that indicates that they have dementia

3 stages of Dementia

Mild dementia is associated with some memory loss, minor personality changes and challenges in some day to day activities. In this stage both the person with dementia and the family may cover up or gloss over challenges.

Moderate dementia is noticeable by the increase in memory loss, confusion and significant personality changes. In this stage a person with dementia is no longer safe to drive due to loss of problem solving skills and may be experiencing challenges in managing money and medications.

In the final or severe stage, the person with dementia is no longer able to complete daily cares. This is the final stage and as the disease progresses, the person with dementia and their family may benefit from hospice services.

Dementia Facts

- ► More than 5 million Americans are living with Alzheimer's disease
- ► Alzheimer's Disease is the 6th leading cause of death
- ▶ 1 in 3 seniors will die with Alzheimer's or another dementia
- ▶ In 2020 it is estimated the costs associated with treating dementia will top \$305 million
- ► An average of 16 million Americans provide unpaid care to a person with dementia amounting to approximately 18.6 billion hours valued at approximately \$244 billion

Dementia facts (Con't)

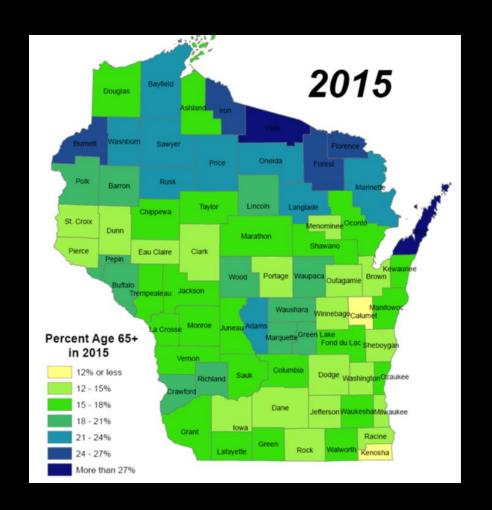
- ► Two-thirds of those affected by dementia are women
- ► African Americans are two times more likely than their Caucasian counterparts to be affected by dementia;
- ► Latino persons are 1.5 times more likely to be affected
- ▶ Racial discrepancies are thought to be the result of increased chronic conditions such as diabetes and heart disease, limited health care options and limited insurance and other socioeconomic factors.

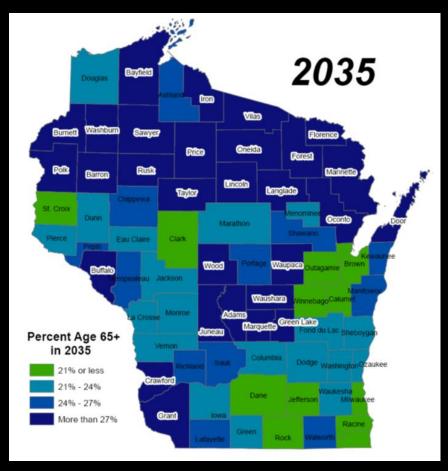
Courtesy of Alzheimer's Association

Dementia Facts (con't)

- ▶ WI currently has 120,000 persons identified with a dementia diagnosis.
- ► At age 65, 1 out of 9 individuals will have some form of dementia.
- ► At age 85, this increases to 1 out of 2 individuals having some sort of dementia.
- ▶ By 2040, an estimated 213,000 people will have dementia in Wisconsin

Courtesy of Alzheimer's Association and ERI







▶ How do you communicate with someone who has dementia?

COMMUNICATION

Be flexible and patient.

Encourage involvement in daily life.

Avoid correcting the person.

Help the person remain as independent as possible.

Offer opportunities for choice.

Simplify instructions.

Establish a familiar routine.

Respond to the person's feelings.

Simplify, structure and supervise.

Provide encouragement and support.

Other ways to improve communication with a person with dementia is by changing your own thought pattern:

- Stop thinking: "She's confused, she has dementia."
- Start thinking: "I'm confused. I don't know what she's trying to tell me."
- Instead of: "How can I *stop* this person from doing...?"
- Think: "How can I *accommodate* this person? What may they be feeling and can I help ease that?"
- Stop thinking: "he can't understand, he has dementia"
- Think: "How *can* he participate in this ...?"

Communication

Communicating with a person with dementia...

It's not about making sense in your world, it's about making sense in their world.

....DR. NATALI EDMONDS, PSYD, ABPP, GEROPSYCHOLOGIST

How to communicate with someone with Dementia

What does
Dementia
Friendly
Communication
look like:

Eye contact

Body language and facial expression match what you are saying

Person should be able to see your face clearly

Tell the person who you are

Don't stand too close or over someone If possible, use visual clues (writing, pictures, gesture)

What is a Dementia Friendly Community?

- A community that shows a high level of public awareness and understanding of dementia
 - ► In which it is possible for the greatest number of people with dementia to live a good life
- ► Where persons with dementia are enabled to live as independently as possible and to continue to be part of their community
- ► Where they are met with understanding and given support where necessary

Building a Dementia Friendly Community

A Dementia Friendly Community is one in which a person with dementia:

- Can feel safe
- Can find their way around safely
- Can access local businesses and services they are familiar with and where they are known such as banks, restaurants, salons/barbers, library, grocery stores, gas stations
- ► Maintain their social networks while maintaining a sense of belonging
- ► What will you do to build a Dementia Friendly Community?

Thank you

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(she/her/hers)

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