DEMENTIA: UNDERSTANDING IT AND TREATING IT

What is dementia? There has been a lot of attention to this topic in the media for the past few years. The population all over the developed world is aging, baby boomers included. This brings about more cases of dementia.

Dementia is not an illness. It is a **syndrome** (a combination of symptoms) that can be present in different diseases. By far, the most common type of dementia is Alzheimer's dementia, a result of degeneration of the brain tissue. 60-70% of all dementia cases are Alzheimer's dementia. No one knows for sure the cause of this condition. However, there has been an indubitable relationship between Alzheimer's and a person's age. Prevalence of Alzheimer's disease is about 3% at age 65 and doubles every 5 years of one's life. In other words - the older we are, the more likely this condition is to occur. Other types of dementia are (to name a few): vascular dementia (caused by stroke or series of strokes), Parkinson's dementia (accompanying Parkinson's disease), Frontal and Temporal Lobe Dementia, Lewy Body disease, Huntington's dementia, dementia due to traumatic brain injury, and AIDS-related dementia. What do they all have in common? Dementias almost universally present with the disturbance of memory (usually short-term memory related to recent events suffers much more than the ability to recall distant events), decreased ability to organize day-to-day affairs, problems handling tasks, difficulties expressing oneself or comprehending speech, also with problems recognizing people, objects or words. In case of Alzheimer's dementia, usually those problems occur later in life and progress gradually (fairly slowly). In advanced stages of dementia, a person is no longer capable to tending of their needs, navigate their way in an environment, recognize even the closest people in their lives. In the early stages, a person may have no change in their appearance yet exhibit deficiency in reasoning, remembering things, being able to handle financial affairs or understand other complex problems. One of the first things that becomes affected by dementia is the ability to learn new material, such as new words, new skills and alike.

Is dementia preventable? Preventing dementia is actually easier than to treat it. Things that have been shown to prevent or at least stave off Alzheimer's and other common types of dementia are fairly easy to implement – healthy lifestyle that includes physical exercises, staying mentally active and being socially engaged, diet that is low in saturated fats, maintaining normal body mass, avoiding smoking and moderating alcohol intake, monitoring blood pressure and cholesterol, taking care of chronic health problems such as diabetes, wearing a helmet when biking, having regular checkups with a doctor.

Is dementia treatable? There are some cases of dementia that would be at least partially reversible if the underlying cause is successfully treated (for example, dementia due to vitamin B12 deficiency or thyroid dysfunction). In other cases, the success is much more difficult to achieve. Alzheimer's dementia at this point can be helped by certain medications (such as Aricept, Exelon, or Namenda) but usually the improvement is modest at best. Medications may slow down the progression of Alzheimer's dementia but typically not by much – just by a few months to a year. There is a lot of research going on in the field of Alzheimer's and other dementias, and experimental treatments may offer some hope, at least potentially.

There are many psychiatric symptoms accompanying dementia. They may include emotional problems (depression, anxiety, anger), sleep disturbance, behavioral difficulties such as agitation, resistance to care, wandering. Many of those can be successfully treated by psychotherapeutic interventions and medications. Oftentimes, those symptoms actually respond to treatment better than dementia itself. Psychotherapeutic options include behavioral modification, changing the environment, educating caregivers, providing psychological support to patients and their family members, implementing sleep hygiene. Medications can successfully address emotional instability, fear, sadness, despondency, they can help improve frustration tolerance and decrease irritability. Using psychotropic medications in elderly people, especially those afflicted with dementia, often is challenging. It requires not only the knowledge of psychotropic drugs but also taking into consideration general medical condition of a person, as well reviewing other medications that they may be taking for other health conditions. Many medications that are used in general medical practice may contribute to confusion, mood problems, altered level of consciousness, insomnia, and other psychological difficulties. Sometimes discontinuing those medications can actually be more helpful than adding a new drug. Many general medical conditions aggravate or mimic dementia (such as urinary tract infection, electrolyte imbalance, dehydration). In assessing someone's mental status, assessing their general medical condition is of the utmost importance. Treating those conditions can often lead to drastic improvement in mental state.

So, not all the news is bad. Dementia to a certain degree is preventable. While dementia may not respond well to treatment by itself, many accompanying problems can be successfully managed.

Leonid Remenson, MD