

What Difference Does it Make what Kind of Dementia it is? Strategies for Care



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What is dementia?

Umbrella term

Used to describe a group of symptoms, and consists of a wide range of diseases and disorders of the brain.

With differing fundamental causes, they result in progressively deteriorating intellectual functioning, including a decline in cognitive performance and memory (Kerr, 2007; Prasher, 2005; Janicki & Dalton, 1999)

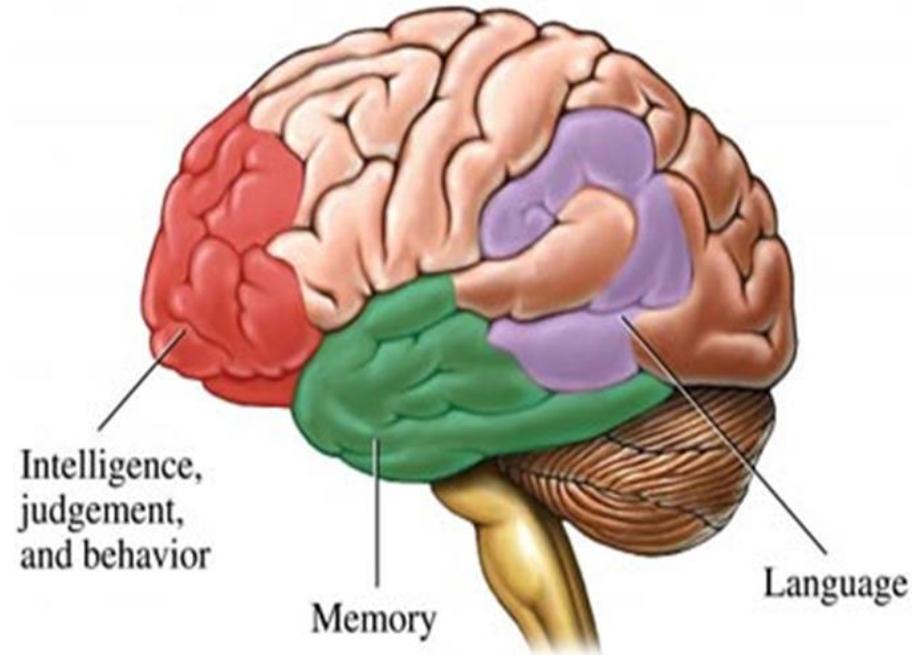
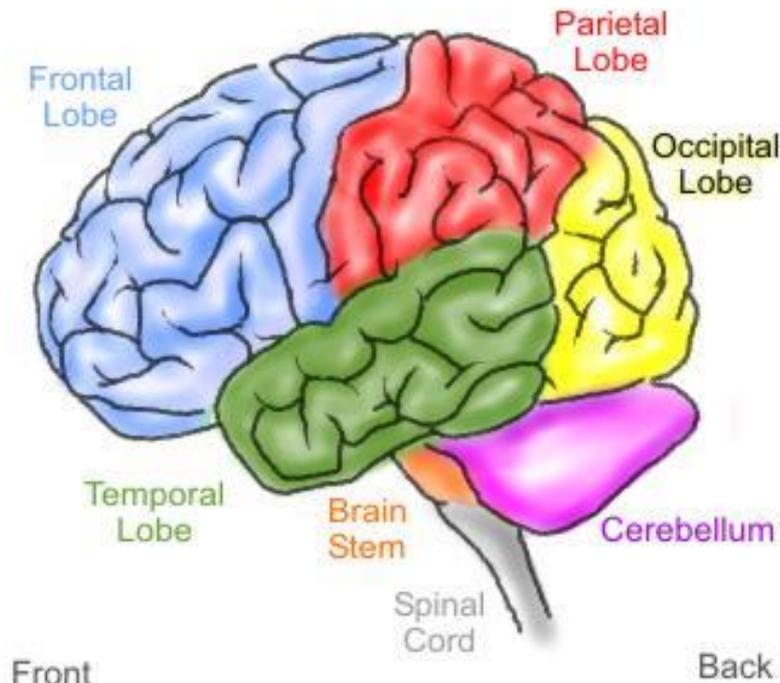
Different types such as Alzheimer's disease, Lewy body, frontal lobe

Each type of dementia affects a person in a different way

understanding the person's sense of reality is essential

The Brain Structure

Regions of the Human Brain



Images used with permission from Watchman, Kerr & Wilkinson (2010)

The brain is a complex structure; different regions of the brain control different functions. It is important to understand which part of the brain is affected by dementia, as this will indicate which clinical symptoms develop. For instance, Alzheimer's disease initially affects the temporal lobe, which is where our memory is located (Watchman, Kerr & Wilkinson, 2010)

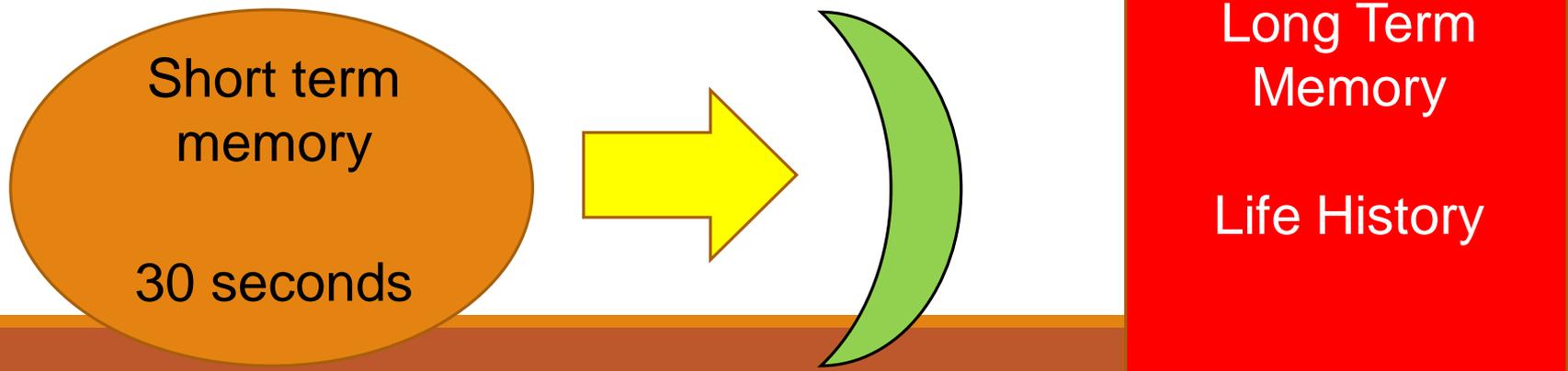
Understanding Dementia

The Two Laws of Dementia (Buijssen, 2005)

1) The law of disturbed encoding

No longer able to successfully transfer information from short term memory and store it long term memory.

Main consequence: unable to form new memories for the things they experience or for things they are told.



Understanding Dementia (Continued...) (Buijssen, 2005)

2) Law of roll back

- Long term memory contains all memories that have been acquired from most recent working back towards childhood memories.
- At first long term memories will remain intact, however as dementia progresses, long term memories will also begin to deteriorate and eventually disappear altogether.
- Deterioration begins with the most recent memories and progresses until only memories of early childhood remain, hence memory can be said to be rolling back

Initial changes associated with dementia

- Short-term memory loss
- Apathy and inactivity
- A loss of interest in activities and hobbies which were previously enjoyed
- Deterioration/ loss of daily living skills
- Social withdrawal
- Reduced communication/ language difficulties
- A sense of disorientation and confusion
- Difficulty in depth perception, this may result in difficulties with steps
- An increase in wandering for no reason
- Not being aware of having forgotten something

(Kerr, 2007; Dodd, Turk, & Christmas, 2009; Watchman, Kerr & Wilkinson, 2010)

What should I do next? Advice for Families

- If you believe that someone may have dementia, it is vital that a referral is made as soon as possible.
- A lack of information on this process may make this difficult and cause delays. However, it is important the referral procedure is identified and initiated.
- It is important to have the input from the individual suspected of having dementia, family members and carers in order to build up an accurate picture and supporting evidence for any diagnosis.



Difficulties of a Diagnosis

Diagnosis

- Diagnosis is difficult- diagnostic overshadowing
- Typical tests may not suitable and assessment tools are limited
- Baseline assessments are needed but not always given
- Not everyone is given a diagnosis- which may have implications

(Dodd et al., 2009b; Watchman et al., 2018)

Misdiagnosis

- Sensory impairments
- e.g. change in eyesight or hearing
- Physical/ Social
- Undiagnosed pain
- Emotional or grief
- Effects of medication
- Mental health problems
- Nutritional deficiencies



Changes in Communication

As dementia progresses the communication ability of the individual will begin to change.

- Difficulty in finding words or forgetting recently learnt words
- People may repeat words
- Increase in changed behaviour: shouting, becoming flustered, upset
- People may start to lose track of a conversation
- People may become withdrawn as they struggle to communicate

(Kerr, 2007; Watchman et al., 2010)

Types of Dementia



Alzheimer's Disease

60 to 80 percent of dementias.

Causes brain cells to die.

Forgetting names, recent events often occurs early on.

Pervasive pattern of lower functioning due to memory loss.

Confusion & mood changes. Difficulty walking and talking.

Vascular Dementia

Second most common type of dementia.

Caused by lack of blood flow to the brain.

May occur after stroke or with heart problems.

Can appear rapidly or slowly depending on cause.

Confusion and disorientation are common early signs.

Poor concentration, poor vision, hallucinations.

Lewy Body Dementia

Caused by protein deposits in nerve cells.

Interrupts chemical messages in the brain, causing memory loss & disorientation.

Experience visual hallucinations; may not sleep at night or fall asleep suddenly during the day.

Has features of Alzheimer's & Parkinson's.

Weakness, tremors, and trouble walking are common symptoms.

Parkinson's Disease

May with Parkinson's may develop dementia.

Reasoning & judgment affected early.

May have frightening hallucinations.

Very irritable; may develop paranoia or become depressed as the disease progresses.

May have trouble finding words.

Frontotemporal Dementia

Also known as Pick's Disease; it's the name of several types of dementia.

All types affect front and side portions of the brain—those that control language & behavior.

Affects those as young as 45 years old.

No one knows what causes it.

Loss of inhibitions & motivation; very compulsive.

Mixed Dementia

Mixed dementia refers to a situation where a person has more than one type of dementia.

Mixed dementia is very common, and the most common combination is vascular dementia and Alzheimer's.

According to the Alzheimer's Association, up to 45 percent of people with dementia have mixed dementia but don't know it.

Normal Pressure Hydrocephalus

Normal pressure hydrocephalus (NPH) is a condition that causes a person to build up excess fluid in the brain's ventricles.

Can sometimes be cured with surgery if caught early enough.

May cause gait disturbances early on.

Frequent falls, changes in mood, incontinence may occur.

Huntington's Disease

Huntington's disease is a genetic condition that causes dementia.

The juvenile form is rarer and causes symptoms in childhood or adolescence.

The adult form causes symptoms in a person when they're in their 30s or 40s.

Causes a premature breakdown of the brain's nerve cells, which can lead to dementia as well as impaired movement.

Planning Ahead

No cure for progressive dementias like Alzheimer's.

Treat underlying chronic disease.

Symptom-controlling medications may help.

Safety is the most critical concern for individuals with dementia.

Planning ahead for care is essential.

Identity Crisis/Validation

What are the 5 most important things I need to know?

- *Where were they from?
- *Who are the important people in their family?
- *What was their profession?
- *What made them special as a person?
- *What music did they like?

Who they were pre-dementia is critical to validating who they ARE with dementia.

Questions



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