Management of dementia

The treatment of dementia depends on its cause. Treatment will focus on delaying the onset of the disease and slowing the progress. Developing new treatments for Alzheimer's disease is an active area of research.

The management of dementia involves the doctor, patient, caregiver and the community. The quality of life of the caregiver, to a large extent, determines the quality of life of the patient. Caregivers must be aware of ways to manage their emotions by learning as much as possible about the disease.

Non-medical treatment should be implemented prior to attempting medical treatment. This involves psycho-education and support of the caregiver, establishing a safe and familiar routine for the patient, helping the patient with daily activities and keeping him/her occupied.

Call your healthcare provider if:

- A sudden change in mental status occurs
- You are unable to care for a person with dementia at home

For more information contact:

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MENTAL HEALTH INFORMATION CENTRE
Southern Africa

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What is dementia?

Dementia is a descriptive term for a group of symptoms that can be caused by a number of brain disorders. It is a progressive, degenerative brain syndrome that affects memory, thinking, behavior and emotion. Dementia is NOT a part of normal ageing.

Different types of dementia

Alzheimer's disease: In this condition, a biological change occurs in the brain, eventually resulting in loss of brain tissue. The onset may be slow initially, but then it is followed by steady acceleration to a rapid deterioration. Alzheimer's disease is not reversible, but some medications can slow its progress.

Vascular dementia: Here, the brain develops multiple small areas of dead tissue as a result of blockages in small brain arteries. This is more common amongst those with a history of high blood pressure, strokes, smoking or alcohol abuse. Treating these conditions can slow the progress of vascular dementia.

Alcohol-induced dementia: Brain damage caused by chronic, prolonged alcohol abuse. Treatment requires sobriety, vitamin replacement, correction of medical problems and management of behavior problems.

Other types include dementia caused by Huntington's disease, Parkinson's disease, Lewy body dementia, Creutzfeldt-Jakob disease, Pick's disease and HIV/Aids.

What causes dementia

The causes of dementia may include certain medical conditions, post-substance abuse or a combination of both. In developed countries Alzheimer's disease accounts for about half of all cases of dementia.

Characteristic symptoms

Symptoms of dementia vary considerably and depend on the individual and the underlying cause. Usually the first sign of dementia is short-term memory loss. Other symptoms include mood changes, communication problems and feeling sad, frightened or angry.

Early warning signs include:

- recent memory loss
- disorientation of time and place
- difficulty in performing familiar tasks
- changes in mood or behavior
- problems with language (trouble naming familiar objects)
- poor judgment
- loss of initiative
- misplacing things
- problems with abstract thinking
- personality changes

As dementia becomes worse, symptoms become more obvious and may include:

- difficulty performing basic tasks such as driving, preparing meals, reading or writing
- forgetting detail about current events
- poor judgment and loss of ability to recognize danger
- delusions, hallucinations, depression, agitation
- change in sleeping patterns, often waking up at night
- social withdrawal
- speaking in confusing sentences and using words incorrectly
- having arguments and violent behavior

Those with severe dementia may be unable to perform basic activities of daily living, recognize family members or understand language.

Prevention of dementia

- Most causes of dementia are not preventable
- Quitting smoking and treating high blood pressure and diabetes may reduce the risk of vascular dementia
- A healthy lifestyle, balanced diet and regular exercise may also reduce the risk of vascular dementia