

Dementia training fact sheet

What is dementia?

Dementia is not a disease in itself. It is a term used to describe a group of symptoms. These include a gradual loss of memory, a decline in the ability to think and reason, and problems with communication.

These symptoms are caused by a variety of different disorders and conditions. The most common of these are Alzheimer's disease, vascular dementia and dementia with Lewy bodies.

It is possible to have more than one form of dementia. Older people, in particular, may have both Alzheimer's disease and vascular dementia.

Who gets dementia?

While the risk of developing dementia increases dramatically with age, the majority of older people do not develop the condition. The Alzheimer's Society believes that the majority of people in residential or nursing care are likely to have some form of dementia. It is not, however, an inevitable consequence of getting older.

Dementia is not associated with any particular race, gender or culture. People in all walks of life may be affected – university professors, labourers, doctors, scientists, artists, office and factory workers.

What causes dementia?

The cause of Alzheimer's disease and most other dementias has yet to be established. Alzheimer's disease is probably caused by a combination of factors. We know more about vascular dementia, which occurs when brain cells are deprived of oxygen from an efficient blood supply. People with high blood pressure, high blood fats and diabetes are at a greater risk of developing vascular disease.

Incidence of dementia

Under age 65	1 in 1,000
Age 65 to 70	1 in 50
Age 70 to 80	1 in 20
Over age 80	1 in 5

It is thought that there are over 750,000 people in the UK who have some form of dementia. Of these, 18,500 are under 65.

Symptoms of dementia

We have seen that dementia is a combination of symptoms such as memory loss, confusion and disorientation. It is a condition that results from too many brain cells dying and it is generally progressive. The symptoms vary from person to person, but usually include difficulties with the following:

- Remembering
- Making decisions
- Looking at yourself
- Expressing your thoughts
- Understanding what others are saying
- Finding your way around

Dementia is a very individual experience, and people respond to what is happening to them in their own particular way.

Types of dementia

There are various types of dementia. The symptoms of the different types of dementia are not identical, as each one can affect different parts of the brain.

The most common types of dementia include:

- Alzheimer's disease
- Vascular dementia (which includes multi-infarct dementia)
- Dementia with Lewy bodies

It is thought that the proportions of people with different types of dementia can be broken down as follows;

Alzheimer's disease	55% of people with dementia
Vascular dementia	20%
Dementia with Lewy bodies	15%

Alzheimer's disease

Alzheimer's disease is the most common type of dementia. The German neurologist Alois Alzheimer first described Alzheimer's disease in 1907.

During the course of the disease 'plaques' and 'tangles' form in the structure of the brain. Researchers are unsure how or why these changes occur, but they result in the death of brain cells, particularly in the outer layers of the brain. People with Alzheimer's disease also have a shortage of chemicals called neurotransmitters in the brain: these are involved in the transmission of messages.

Vascular dementia

In vascular dementia (including multi-infarct dementia), the blood supply fails and brain tissue dies. Very small strokes (infarctions) in the brain may be experienced as 'dizzy spells', and an accumulation of these small strokes can lead to dementia.

In vascular dementia, the decline is more sudden than in Alzheimer's disease, progressing in a more erratic series of 'steps'. The person may experience elements of depression, mood swings or epilepsy. Some areas of the brain may be worse affected than others, depending upon the severity or concentration of the strokes. Many people who have vascular dementia have an insight into the problems they are experiencing.

Signs and symptoms

Very few people with dementia will have all of the problems listed below. This is simply a guide to the kinds of problems that people with dementia and their partners, families and friends may come across.

Although the signs and symptoms of dementia are important, an individual does not suddenly become just a collection of symptoms. They respond to their dementia in their own way. Memory loss may cause extreme distress in one person, but only mild concern in another.

A person with dementia may seem:

- apathetic
- less interested in hobbies or activities
- unwilling to try new things
- unable to adapt to change
- less able to make decisions or plans
- slower to grasp complex ideas
- ready to blame others for `stealing` mislaid items
- more self-centred.

A person with dementia may also:

- be forgetful of recent events
- be repetitive in speech or actions
- be confused regarding time and place
- be neglectful of hygiene or eating
- become angry or distressed very rapidly
- see or hear things that are not there.

All of the above listed in a way that recognises the progressive nature of dementia.

Getting a diagnosis

There are several reasons why it is important for people with dementia to get a proper diagnosis:

- It helps a person with dementia and their family to plan for the future.
- Once diagnosed, the person with dementia may be able to benefit from new treatments.
- Other health problems may be identified and appropriate action taken.
- Other sources of help and advice can be identified

There is no straightforward test for dementia. A diagnosis is usually made by excluding other causes. Most GPs will ask a specialist for help in carrying out a diagnosis. In many areas there are special clinics, usually known as `memory clinics`, that provide help for people with suspected dementia.