



Helping Ohioans living with dementia, along with their loved ones, care partners and broader community, live with meaning, purpose and joy.

What Is Dementia?

Dementia is not a specific disease. It's an overall term that describes a wide range of symptoms associated with a decline in memory or other thinking skills severe enough to reduce a person's ability to perform everyday activities. There are different diseases that cause symptoms of dementia.

What Are the Different Types of Dementia?

Alzheimer's disease is the most common type of dementia and accounts for 60 to 80 percent of cases. The other most common types of dementia include dementia with Lewy Bodies, Frontotemporal degeneration, and Vascular disease.

Alzheimer's Disease

A progressive, neurodegenerative disorder in which brain cells are destroyed, resulting in impairment of memory, language, visuospatial skills, and executive functioning. Individuals living with Alzheimer's disease are often unable to organize tasks, may misplace things and lose the ability to retrace their steps, have difficulty handling finances, and experience word finding difficulties. Learn more at www.alzfdn.org.

Dementia with Lewy Bodies

Dementia with Lewy bodies is caused by protein deposits in the neuronal cell bodies on the frontal and temporal lobes and basal ganglia. It is reported to primarily affect men over the age of 70 and is characterized by a gradual increase of fluctuating cognitive impairment, visual hallucinations, and Parkinsonism. Individuals often experience repeated falls, brief loss of consciousness, neuroleptic sensitivity, delusions, hallucinations, sleep disorders, and depression. Learn more at www.lbda.org.

Frontotemporal Degeneration

Frontotemporal degeneration is a term used for a group of disorders characterized by atrophy in the frontal and temporal lobes. These conditions are characterized by personality and behavioral changes with less prominent memory loss early in the stage. Common personality changes include loss of personal awareness, loss of social comportment, disinhibition, impulsivity, distractibility, excessive eating, social withdrawal, repetitive behavior, and reduction of speech. Learn more at www.theaftd.org.

Huntington's Disease

A genetic, progressive, neurodegenerative disorder characterized by the destruction of nerve cells in regions of the brain that result in motor, cognitive, and psychiatric deficits. Learn more at www.hdsa.org.

Parkinson's Disease

A neurodegenerative disorder that is characterized by tremors and shakiness, stiffness, difficulty with walking, motor impairments, lack of facial expression, and impaired speech. Learn more at www.pdf.org.

Vascular Dementia

Vascular dementia can be caused by arteriosclerotic changes in the blood supply to the brain, cerebrovascular disorders, ischemic (obstruction within a blood vessel) stroke, or hemorrhagic (weakened blood vessel ruptures) stroke. A person with vascular dementia may experience an abrupt onset of cognitive changes, or the progression may be stepwise, fluctuating, or marked by continuous worsening. Cognitive impairment in vascular dementia can be quite variable depending on the region of the brain damage and the size of the injured area. Learn more at www.alz.org/dementia/vascular-dementia-symptoms.asp.

Mild Cognitive Impairment

A condition in which a person develops deficits in memory, language, or another cognitive function beyond what is typical for age-associated memory impairment. These deficits are often not severe enough to interfere with daily life but are significant enough to be noticed by friends and family members. Learn more at www.alz.org/dementia/mild-cognitive-impairment-mci.asp.

Is Dementia a Normal Part of Aging?

A common myth about dementia is that it is a natural part of aging, but Alzheimer’s disease and other dementias are in fact not a normal part of aging.

Normal Aging

- Sometimes forgets names or appointments
- Makes occasional errors when balancing a checkbook
- Needs occasional help to use household technology
- Confused about the day of the week but recalls it later
- Vision changes related to cataracts
- Sometimes has trouble thinking of the right word
- Misplaces things from time to time and retracing steps to find them
- Makes a bad decision once in a while
- Sometimes feels weary of work, family and social obligations
- Develops very specific ways of doing things and becoming irritable when a routine is disrupted.

Sign or Symptom of Dementia

- Memory loss that disrupts daily life
- Challenges in planning or solving problems
- Difficulty completing familiar tasks at home or at work
- Confused about the time of day or place
- Trouble understanding visual images and spatial relationships
- Trouble writing words or thinking of the right word often in conversations
- Misplaces things and loses the ability to retrace steps
- Decreased or poor judgment
- Withdrawn from work or social activities
- Changes in mood and personality

Who Can Diagnose Dementia?

Consulting your primary care physician is a good place to start if someone is experiencing memory loss or changes in thinking and problem solving. You then may be referred to a neurologist, geriatric psychiatrist, neuropsychologist, and/or geriatrician for a complete evaluation.



How Is Dementia Diagnosed?

First, doctors will determine if the individual has an underlying treatable condition such as abnormal thyroid function, medication interaction, or a vitamin deficiency that may relate to cognitive difficulties. Early detection of symptoms is important, as many some causes can be treated.

A medical evaluation for dementia generally includes:

Medical history.

The doctor will ask if dementia runs in the family, how and when symptoms began, if the person is experiencing changes in behavior or personality, and if the person is taking certain medications that might cause or worsen symptoms.

Physical exam.

A complete physical will help identify conditions that might cause or occur with dementia. Some conditions may be treatable.

Neurological tests.

Assessing balance, sensory response, reflexes, and other cognitive functions helps identify conditions that may affect the diagnosis or are treatable with drugs.

Cognitive and neuropsychological tests.

These tests are used to assess memory, problem solving, language skills, math skills, and other abilities related to mental functioning.

Laboratory tests.

Testing a person's blood and other fluids, as well as checking levels of various chemicals, hormones, and vitamins, can help find or rule out possible causes of symptoms.

Brain imaging.

These tests can identify strokes, tumors, and other problems that can cause dementia. Scans also identify changes in the brain's structure and function.

Psychiatric evaluation.

This evaluation will help determine if depression or another mental health condition is causing or contributing to a person's symptoms.

Genetic tests.

Some dementias are caused by a known gene defect. In these cases, a genetic test can help people know if they are at risk for dementia.