Dementia: What’s Up?

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Navigating Transitions in Later Life
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Dementia: What’s Up?

Warning Signs

What to Do to Diagnose

What to Do to Intervene

Special Issues

- Problem Behaviors
- Depression
- Driving

Discussion/Questions
10 Warning Signs of Dementia

1. Memory changes that disrupt daily life
2. Challenges in planning or solving problems
3. Difficulty completing familiar tasks at home, at work or at leisure
4. Confusion with time or place
5. Trouble understanding visual images and spatial relationships

Source: Alzheimer’s Association
10 Warning Signs of Dementia:

6. New problems with words in speaking or writing
7. Misplacing things and losing the ability to retrace steps
8. Decreased or poor judgment
9. Withdrawal from work or social activities
10. Changes in mood and personality

Source: Alzheimer’s Association
Dementia: What’s Up?

Warning Signs

What to Do to Diagnose

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Discussion/Questions
What to Do to Diagnose

- Seek an evaluation
  - Primary Care Physician
  - Neurologist
  - Geriatrician
  - Psychiatrist

- Usual Evaluation
  - Careful history and targeted physical exam
  - Rule out reversible causes
    - Blood tests
    - Imaging
Dementia Diagnosis

Alzheimer’s Disease (AD)

Vascular Dementia (VD)

Mixed Type Dementia – AD and VD

Frontotemporal Dementia (FTD)

Lewy Body Disease

Dementia due to Parkinson’s Disease
Dementia Diagnosis Characteristics

Executive Function Impairment

- Sequencing
- Problem Solving
- Distraction
- Initiation
Dementia Diagnosis Characteristics

Alzheimer’s Disease

- Executive Function Impairment
- Memory
Dementia Diagnosis Characteristics

Vascular Dementia

- Large or intermediate vessel – depends on area of involvement
- Microvascular – executive function and memory, defined motor/sensory with fatigue/stress
Dementia Diagnosis Characteristics

Mixed Type

- Executive Function
- Memory
- Motor/Sensory Impairment
Dementia Diagnosis Characteristics

Frontotemporal Dementia (Pick’s Disease)

• Apathy or Disinhibition
• Language and speech deficits
• Memory loss is less pronounced but present
Dementia Diagnosis Characteristics

Lewy Body Disease

- Hallucinations with agitation
- Motor Impairment
  - Stiffness
  - Tremors
- Memory loss is less pronounced but present
Dementia Diagnosis Characteristics

Dementia with Parkinson’s

- Motor Impairment
  - Stiffness
  - Balance - falls

- Hallucinations

- Agitation

- Memory loss
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Discussion/Questions
Dementia: What to do to Intervene

Environment
Activity
Medications
Dementia: What to do to Intervene

Environment

• Routine
• Low Stimulation

Activity

Medications
Dementia: What to do to Intervene

Environment

Activity

- Physical
- Mental

Medications
Dementia: What to do to Intervene

Medications

- Slow progression – modestly
  - Cholinesterase Inhibitors
    - Aricept (donepezil)
    - Exelon (rivastigmine)
    - Razadyne (galantamine)
    - Namenda (memantine)

- Side effects
  - GI
  - Cardiovascular
Dementia: What to do to Intervene

Medications

- FDA approved
  - Cholinesterase Inhibitors
    - Alzheimer’s Disease
    - Parkinson’s Disease (Exelon only)
  - Namenda (memantine)
    - Alzheimer’s Disease (moderate-severe)
  - Implications for Medicare Part D plans
Dementia: What to do to Intervene

Medications

- Evidence based
  - Small studies
    - Cholinesterase Inhibitors
      - Lewy Body Disease
      - Mild cognitive impairment
    - Namenda (memantine) – for behavior disturbances
Dementia: What’s Up?

Warning Signs
What to Do to Diagnose
What to Do to Intervene

Special Issues
  ■ Problem Behaviors
  ■ Depression
  ■ Driving

Discussion/Questions
Dementia: Special Problems

Problem Behaviors
Depression
Driving
Dementia: Special Problems

Problem Behaviors - General Approach

• Need driven – seek root cause
• Avoid trying to rationalize/convince
• Avoid saying – “don’t you remember”
• Try distraction
• Avoid fatigue/new situations
• Try intervening with emotion vs rational
Dementia: Special Problems

Problem Behaviors

- Wandering
- “Go home” – packing up
- Repetition
- Apathy
- Sleep/wake cycle disruption
Dementia: Special Problems

Problem Behaviors - Interventions

- Behavioral
  - Routine
  - Low Stimulation
  - Seek root cause
  - Regular daily activities
  - Start, don’t invite
  - Avoid escalation
Dementia: Special Problems

Problem Behaviors - Interventions

• Medications
  • Last resort
  • In combination with behavior interventions
• Mood stabilizers
  • Depakote (valproic acid)
• Anti-psychotics
  • Traditional vs atypical
    • Black Box warning
• Benzodizepines
  • Not recommended
  • Widely used
Dementia: Special Problems

Depression
Typical Warning Signs of Depression

- Sadness
- Fatigue
- Abandoning or losing interest in hobbies or other pleasurable pastimes
- Social withdrawal and isolation (reluctance to be with friends, engage in activities, or leave home)
- Weight loss; loss of appetite
- Sleep disturbances (difficulty falling asleep or staying asleep, oversleeping, or daytime sleepiness)
- Loss of self-worth (worries about being a burden, feelings of worthlessness, self-loathing)
- Increased use of alcohol or other drugs
- Fixation on death; suicidal thoughts or attempts

Adapted from American Academy of Family Physicians
Depression in Older Adults:

Older adults often times deny feeling sad or depressed

Here are the clues to look for:

- Unexplained or aggravated aches and pains
- Hopelessness
- Helplessness
- Anxiety and worries
- Memory problems
- Loss of feeling of pleasure
- Slowed movement
- Irritability
- Lack of interest in personal care (skipping meals, forgetting medications, neglecting personal hygiene)

Adapted from American Academy of Family Physicians
Suspect Depression?

Steps to take:

- Seek an evaluation
  - Primary Care Physician
  - Geriatrician
  - Psychiatrist

- Seek Treatment
  - Medications
  - Counseling
  - Very treatable disease and can complicate dementia
Dementia: Special Problems

Driving
Older drivers up close

they aren't
dangerous

except maybe to themselves

Ann Landers says "the mail keeps pouring in" on older drivers. Halting horror stories about crashes involving seniors at the wheel, she says she's "outraged" about these "semi-capacitated" drivers. She's not alone, but is her concern warranted? By many measures, no. The nation's seniors don't drive much, compared with younger people, and they pose little threat to others on the road. But a problem does exist for the older drivers themselves. They're just more likely than younger people. They're more likely to die when they get injured. The result is that seniors have higher death rates per mile driven. As the population ages and older people drive more, they'll represent a bigger proportion of the total highway safety problem.

"To get a full picture of what's happening, you have to look at their crash experience from different perspectives," says Institute of Traffic safety chief scientist Allan Williams. "Whether seniors have an excess of crashes depends on how you measure it."

Seniors have very low crash rates per capita, especially compared with teenagers. One reason is that many older people don't drive, and
PER CAPITA

All crashes and fatal crashes per population show no big societal problem caused by older drivers.

all crashes per 100 people, 1995

fatal crashes per 10,000 people, 1995
PER MILE TRAVELED

Deaths per mile show a problem for older drivers themselves but not for others on the road.

- Driver deaths per 100 million miles, 1995
- Deaths of pedestrians, motorcyclists, bicyclists, and other vehicle occupants in 2-vehicle collisions, per 100 million miles, 1995
Warning Signs of Trouble Driving

More frequent "close calls" (i.e., almost crashing), or dents and scrapes on the car or on fences, mailboxes, garage doors, curbs

Failing to use the turn signal, or keeping the signal on without changing lanes

Drifting into other lanes

Range-of-motion issues (in looking over the shoulder, moving the hands or feet, etc.)

Trouble moving the foot from the gas to the brake pedal, or confusing the two pedals

Oblivious to the frustration of other drivers, not understanding why they are honking

Reluctance from friends or relatives to be in the car with the senior driving

Trouble paying attention to signals, road signs, pavement markings, or pedestrians

Slow reaction to changes in the driving environment
Driving

If you are concerned about the safety of a senior driver

Closely monitor driving to decide whether

1. Brush up on their driving skills
2. OR give up their driver’s license altogether

Watch for changes in driving habits, general behavior, and health.

Encourage a driving evaluation through the Department of Motor Vehicles

Encourage refresher driving lessons

- AARP Driver Safety course.
Driving

Offer the senior some **self-evaluation tools** to assess driving risk, or work together on these quizzes.

- National Highway Traffic Safety Administration
- University of Michigan Transportation Research Institute.

Explore ways to **reduce driving**

**Garner support** from the older adult's primary care physician and other family members.

- Driving Prescription

Research and propose **alternative modes of transportation**

- Senior Driving: Transportation Alternatives and Tips for Safe Driving
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Q&A

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