

Dementia or Alzheimer's

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Frequently believed to be a normal part of aging, an affliction of forgetfulness, or a violent mental illness, Alzheimer's disease is best described by its clinical name: a disease. Named after a German psychologist at the turn of the twentieth century, Alzheimer's disease is caused by abnormal proteins destroying the brain's hippocampus, where memories are stored. These proteins then spread to other parts of the brain, eventually damaging language, reasoning, sensory processing, and finally motor function, including the heart and breathing. It is the sixth leading cause of death in the United States, affecting one out of every nine older Americans, and currently cannot be prevented, slowed, or cured.

The Silver Tsunami

One reason Alzheimer's disease and dementia rates are climbing is due to increasing longevity. "Medical technology is to the point where people are living much longer," said Allison Hennigan, M.D., a neurologist with Northeast Texas Neurology Associates in Tyler. "And when people live longer because they are surviving heart attacks and things like that, they are more likely to develop Alzheimer's and dementia because of their brain age, which is what we're most concerned about." As the Baby Boom generation enters its sixth decade, projections show people with Alzheimer's disease will nearly triple by 2050, with a new diagnosis every 33 seconds.

While there is no single test to confirm Alzheimer's disease, doctors use several different indicators to triangulate a diagnosis, which cannot be established in a single examination, conversation, or hospital stay. "I want to diagnose when a patient is at their best," said Hennigan,

and a patient's stress is minimized. In addition to brain imaging scans, doctors may also order thorough blood tests to rule out other conditions causing cognitive impairments.

During an evaluation, doctors typically use the five cognitive domains to look for signs of Alzheimer's disease: acquiring and remembering new information, reasoning and complex tasks, visuospatial function, language function, and personality and behavior. Symptoms can include asking repetitive questions, inability to manage complex tasks, not recognizing and unable to operate once-familiar objects, trouble thinking of common words or difficulty getting words out, and general apathy. Changes in two or more cognitive domains can indicate potential Alzheimer's disease, while changes in one domain may point toward other diseases or dementias. A corroborating patient history from a knowledgeable informant, such as a close family member, is also essential in recognizing a pattern of cognitive decline.

"Each of us has probably experienced symptoms at some point," said Hennigan. "If this is a daily occurrence or getting worse, and it's not related to something like one bad night of sleep, then that points to something much more clinical."

Another trait distinguishing Alzheimer's disease from other forms of dementia is its progression, said Hennigan. Alzheimer's disease is more "insidious" and slow but steadily develops; it can be difficult to pinpoint exactly when symptoms begin. Other forms of dementia resembling Alzheimer's disease include vascular dementia, caused by a series of small strokes damaging the brain and with more

