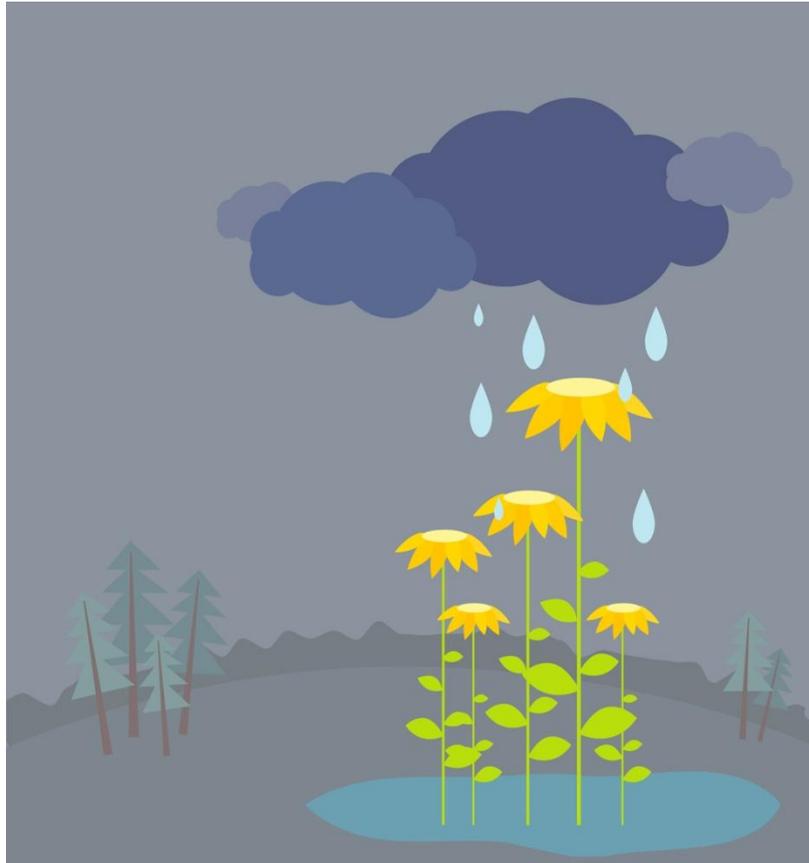


# WHEN YOU SUSPECT ALZHEIMER'S DISEASE



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# Memory Loss: What's Normal and Not Normal as We Age?

We've all done it — missed an appointment, forgotten a name, or misplaced our keys. As we get older, we all have trouble remembering things from time to time. Common changes after the age of forty include increased difficulty with short-term memory (for example, remembering names or where you put something); a slowdown in the ability to recall information; and taking longer to learn new things.

These changes are normal, and they can be annoying. But they do not affect our ability to live our lives as we have always done. However, memory loss that gets progressively worse and that DOES disrupt everyday life can be a sign of something more serious.

There are many things that can cause memory loss, including many conditions that can be treated. That is why it is important to get a thorough diagnosis when problems with memory arise. Even if the diagnosis is Alzheimer's disease or a related condition, much can be done to help the patient and family.

**If you, or someone you care for, is having memory problems, you should see a doctor right away.**

## What are the Ten Warning Signs of Dementia?

It is important to remember that some of the following warning signs of dementia may be symptoms of other disorders that can be treated effectively. Therefore, it is critical to seek an accurate medical diagnosis.

< **Trouble with New Memories.** While it is normal to occasionally forget appointments, names, or telephone numbers, those with dementia will often forget new information and not be “jogged” by reminders.

< **Difficulty performing familiar tasks.** People with dementia often find it hard to complete familiar, everyday tasks, for example, using a household appliance, participating in a hobby, fixing a meal, or driving.

< **Problems with language.** We all have trouble finding the right word sometimes, but a person with dementia may forget words, substitute unusual words, or lose their place in the middle of a conversation.

< **Confusion about time and place.** It’s normal to occasionally forget the day of the week. But people with dementia often cannot remember the date without looking at a calendar/newspaper or they can become lost and disoriented even in familiar places.

< **Poor/decreased judgment and making bad decisions.** For example, dressing inappropriately for the weather, giving away money to telemarketers, or paying for home repairs that are not needed.

< **Problems with making decisions.** Someone with dementia may have difficulty focusing or choosing between more than two choices (e.g., increased difficulties with ordering off menus,

choosing what to wear, handling the daily mail, and managing finances).

**Misplacing things.** Anyone can temporarily misplace keys or a wallet, but a person with dementia regularly misplaces objects and doesn’t remember moving them.

**Changes in mood or personality.** We all change somewhat as we age, but a person with dementia may experience rapid mood swings, paranoia, or express false beliefs that they believe to be true (e.g., “someone is stealing from me.”)

< **Loss of initiative.** At times, we all tire of activities and routine. But a person with dementia may lose interest in activities they once enjoyed or be increasingly apprehensive about leaving home.

## **POSSIBLE CAUSES OF MEMORY LOSS INCLUDE ...**

**Medications**

**Depression**

**Metabolic or endocrine problems**

**Head injury**

**Alcohol/drug abuse**

**Prolonged grief/stress**

**Chronic sleep problems**

**Poor nutrition**

**Dehydration**

**Brain tumors**

**Stroke**

**Heart or Lung Disease**

**Infection (e.g., urinary tract)**

**Low B12**

**Normal pressure hydrocephalus**

**Electrolyte Imbalance**

**Poorly-controlled diabetes**

**... and More!**

## **The First Step: FINDING OUT WHAT'S WRONG**

When there's a problem with memory, it's important to make an appointment with your doctor and explain the reason for your visit. Physicians only have a limited amount of time to spend with patients, so you can help by being prepared and doing the following:

- **Take a list of all medications to the doctor with you, both prescribed and over-the-counter (e.g., vitamins, aspirin)**
- **Take a list of past and current medical problems, including any history of memory problems in your family**
- **Write out a list of symptoms or changes you have noticed, when they began, and how frequently they occur. Be specific. For example, "My wife is having problems preparing meals."**
- **Answer the doctor's questions honestly and to the best of your ability.**
- **Ask the doctor to explain any tests and how long it will take to get a diagnosis.**

## **Is Dementia the Same Thing as Alzheimer's Disease?**

No. Dementia, in and of itself, is NOT a medical diagnosis but a term used to refer to a group of symptoms that can cause impairment in thinking, remembering, and reasoning severe enough to hinder everyday activities and social relationships. The important thing to remember is that MANY things that cause dementia are treatable or even reversible, such as depression, nutritional causes, drug interactions, thyroid problems, infection. Other causes of dementia, such as Alzheimer's disease, are progressive but can be managed to help a person maintain independence and quality of life for as long as possible. Besides Alzheimer's disease, other conditions that cause progressive dementia include vascular dementia, Lewy Body dementia, Pick's disease, and more.

<b>A COMPLETE MEDICAL EVALUATION FOR MEMORY LOSS SHOULD INCLUDE:</b>	
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- A medical, social, and psychiatric history
- Medication inventory, including history of abuse or misuse
- A physical and neurological exam that may include brain imaging techniques, such as CT or MRI scans
- Laboratory tests and screening (including blood and urine, electrolyte and metabolic panel, vitamin B-12 and folate levels)
- An evaluation of the person's ability to perform common daily activities, such as balancing a checkbook or taking medications
- A "mini-mental status exam" to measure the person's thinking and memory
- A family or caregiver interview

## **HOW IS A DIAGNOSIS MADE?**

There is no single test that can tell if a person has Alzheimer's disease. A diagnosis is made through a complete assessment that considers and "rules out" all other possible causes.

If the evaluation does not indicate Alzheimer's or a related illness, but

## **WHAT IS ALZHEIMER'S DISEASE?**

Not a normal part of aging, Alzheimer's disease is a neurological illness that attacks the brain and causes problems with memory, thinking, and behavior. It is a progressive condition.

Over 5.4 million Americans have Alzheimer's disease, including approximately 120,000 Hoosiers.

the symptoms continue to get worse over time, your doctor may need to order more tests. If you are still not satisfied, you may want to get a second opinion from a specialist (for example, a neurologist or a neuropsychologist). A diagnosis of "probable Alzheimer's disease" is accurate 80-90% of the time.

## WHAT YOUR DOCTOR SHOULD DO:

- Explain the diagnosis, let you know what to expect in the future, and tell you where to get more information and help.
- Tell you about the possible treatments. Together, you can select what is best for the patient.
- Schedule your next visit and let you know how often he/she would like to see you.

## WHEN THE DIAGNOSIS IS ALZHEIMER'S DISEASE OR A RELATED DEMENTIA

### Questions to ask your doctor

#### Diagnosis

- What does the diagnosis mean?
- Can you explain it in a way that I will understand?
- What other tests should be taken?

Should we see a neurologist or other specialist?

- What can we expect in the future and over time?
- Do you have any written material on this disease. If not, who does?
- Are there organizations and services that can help?

#### Treatment

- Are there treatments that don't involve medications?
- Is there anything that we can change at home to make things easier or safer?
- What medications are available for memory loss? For behavior changes? What are the risks and benefits? What are side effects? How long will the patient take this medicine? Is there anything else we should know/do?
- Should we consider participating in a drug trial? What are the risks and benefits

- What do you recommend concerning diet, vitamins, physical exercise and other lifestyle changes?

- T Under what circumstances should we contact your office?
- T Can we schedule our next appointment?

### **Other concerns**

- Will the patient continue to be able to work? To drive?
- What will our regular appointment schedule be?

Don't worry if you get home and realize you have forgotten to ask some of your questions. Write them down and call the doctor, or bring them to the next visit.

### **Step Two: Working with Your Doctor to Get the Best Care**

Good communication with your physician is extremely important and often takes time and effort.

The patient's needs will change over time. Regular doctor visits (about every six months or right away if a sudden change occurs) will help you and your family get the best care.

**MEDICATIONS**, such as cholinesterase inhibitors, may temporarily improve memory or slow down memory loss. Current FDA-approved medications include a choice between Aricept, Exelon, and Razadayne - plus another type of drug, Namenda. Talk to your doctor about the treatment that is best for your loved one.

## TIPS FOR FOLLOW-UP DOCTOR VISITS

- **Be prepared**

Make a list of the types of issues you want to discuss with your doctor, including:

- changes in symptoms
- general health
- caregiver health
- help needed
- questions to ask

- **Ask questions**

If you don't understand something, ask questions until you do. Don't be afraid to speak up and to share your point of view.

**For more formation,  
please contact us at:**

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