

Loving Arms
Elder Care

PARKINSON'S DISEASE DEMENTIA

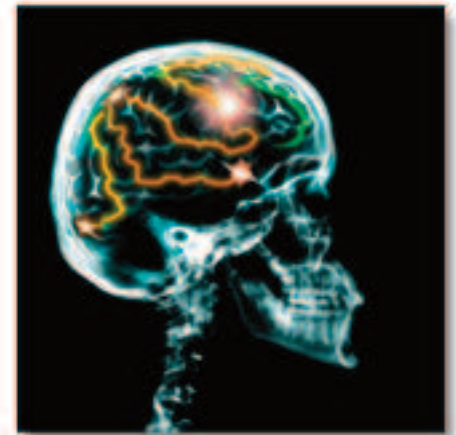
Parkinson's disease dementia occurs when a patient with Parkinson's disease develops a progressive dementia at least two years after a diagnosis of Parkinson's disease has been made, and other causes of dementia have been ruled out. Not all people with Parkinson's disease have dementia--only 50% of people with Parkinson's disease have some mild cognitive impairment. As many as 20-40% may have more severe symptoms or dementia. For those patients with Parkinson's disease who go on to develop dementia, there is usually at least a 10 to 15 year lag time between their Parkinson's diagnosis and the onset of dementia. After having Parkinson's disease for 15 years, the prevalence of Parkinson's disease dementia increases to 68%.

Parkinson's disease dementia is usually different in how it presents itself from Alzheimer's disease. In Parkinson's disease dementia, people usually have major problems with attention, functioning, and memory retrieval. In Alzheimer's disease, the memory problem is more often one of storing memories. People with Parkinson's disease dementia may also have more insight into having a memory problem than people with Alzheimer's disease. Alzheimer's disease and Parkinson's disease are both common in the elderly, especially in those over 85. Therefore, patients with Parkinson's who develop dementia may develop Alzheimer's dementia as well.

SIGNS & SYMPTOMS

Signs of Parkinson's disease dementia include:

- difficulty concentrating
- slowed thought processes
- anxiety, depression or irritability
- lack of motivation or interest
- hallucinations (can be an early sign)
- loss of decision-making ability
- inflexibility in adapting to changes
- disorientation in familiar surroundings
- problems learning new material
- changes in appetite and energy levels
- sleepiness (especially during the daytime)
- attention and alertness (can change from day to day)
- staring blankly (to the extent that you touch them for a response)
- loss of short and long term memory (initially respond to hints and cues)
- difficulty putting a sequence of events in correct order
- problems using complex language and comprehending others
- difficulty in making decisions, planning activities and solving problems
- difficulty in controlling their emotions



Regardless of age at onset of the disease, dementia symptoms tend to appear later in the course of the disease. Dementia is relatively rare in people with onset of Parkinson's disease before age 50 years, even when the disease is of long duration. Dementia is more common in people with an older age at onset of Parkinson's disease. The appearance of a single cognitive symptom does not mean that dementia will develop.



RISK FACTORS

There are some factors that put Parkinson's disease patients more at risk for dementia.

- age 70 years or older (it is rare that someone with Parkinson's disease under the age of 65 will develop dementia.
- someone experiencing hallucinations or delusions early on in their condition
- someone who has had Parkinson's for a long period of time
- someone with a family member with dementia
- a score greater than 25 on the Parkinson's disease rating scale
- depression, agitation, disorientation, or psychotic behavior when treated with the drug levodopa
- exposure to severe psychological stress
- cardiovascular disease
- low socioeconomic status
- low education levels
- severe motor problems

DIAGNOSIS

A specialist will diagnose Parkinson's disease dementia based on the patient's symptoms, their medical history and the results of a medical examination. Tests of memory and thinking will help confirm what the problem is. The specialist may also talk with family members to confirm the memory problems and their effect on day to day routines. It is important that other problems, such as depression, are excluded before the diagnosis is considered.

TREATMENT

If someone with Parkinson's disease has been diagnosed with Parkinson's disease dementia, the next step is for their physician to have a look at what medications they are taking. (Some of the side effects of Parkinson's medication can make the symptoms of dementia worse.) Treating dementia often requires a compromise between managing the physical problems and managing the issues caused by dementia because reducing the dose or withdrawing the drugs may mean that the physical symptoms are not as well controlled. As with Parkinson's disease, the symptoms of dementia cannot be cured, but they can be treated.

MEDICATIONS

Some people with Parkinson's disease dementia may be suitable for dementia medication. This is likely to depend on the stage of dementia and the person's health. It may involve further memory and cognitive testing to see whether there is any change in symptoms over time. These medications can't cure or slow down the condition's progress, but they can treat symptoms of dementia, such as hallucinations, delusions and confusion.



Some people with Parkinson's disease dementia can experience behavioral problems, such as sudden outbursts of anger. Medications called 'antipsychotics' or 'Neuroleptics' might be considered for treatment of these symptoms. If a patient with established Parkinson's disease develops signs of Alzheimer's dementia, he or she will probably benefit from medications for Alzheimer's dementia as well. Another notable features of Parkinson's disease dementia is that people can respond very well to treatment with cholinesterase inhibitors

HELPFUL ADVISE

If you are caring for someone with dementia, there are some practical things you can do:

- keep to a daily routine as much as you can
- try to use familiar objects and phrases
- pay attention to body language
- speak clearly
- listen carefully to what a person says
- use physical contact to reassure the person
- avoid unfamiliar environments – these can be quite stressful
- make sure you have their full attention before you speak
- encourage someone with dementia to keep engaging and interacting with people
- hobbies are also a great way to keep memory and thinking as active as possible
- show respect and keep in mind they have the same feelings and needs as they had before developing dementia

During the early stage of dementia, we highly suggest making some important decisions concerning your finances, will and healthcare choices. You may also want to choose someone to handle your affairs and be your Power of Attorney.

It may be necessary for family or friends to start helping with things such as shopping, housework or cooking. This would be a good time to consider support services such as in home care through **Loving Arms Elder Care**. If you are caring for someone with dementia, these services can give you a chance to have time for yourself and can also help maintain an individual's level of independence in their own home.