Dementia

Legislative Health & Human Services Committee
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Number of people age 65 and over, by age group, selected years 1900–2006 and projected 2010–2050

Note: Data for 2010–2050 are projections of the population.
Reference population: These data refer to the resident population.
Those over 65 increased 12% from 2010 to 2013, compared with a national increase of 10%.

New Mexico's population increased 1% from 2010 to 2013, when it reached almost 2.1 million.

The nation grew at twice that rate.

June Census Bureau Report
C. CUNNINGHAM/JOURNAL
Number of Americans with Alzheimer's

Federal Gov't Expenditures

People in US with Alzheimer's

- AD Cost to Medicare and Medicaid
- AD Research Funding (current trends)
- Number of Americans with AD (millions)

Aggregate Costs of Care by Payer for Americans Age 65 and Older with Alzheimer’s Disease and Other Dementias, 2012*

Total Cost: $200 Billion

- Medicare: $104.5 Billion, 52%
- Medicaid: $35.5 Billion, 18%
- Out-of-pocket: $33.8 Billion, 17%
- Other: $26.2 Billion, 13%

* Data are in 2012 dollars.

Created from data from the application of The Lewin Model to data from Medicare Current Beneficiary Survey for 2008. “Other” payment sources include private insurance, health maintenance organizations, other managed care organizations and uncompensated care.

Source: 2012 Alzheimer’s Disease Facts and Figures.
Normal Aging

- Subjective memory complaints
- Annoying but not disabling problems
- Frequent problems with name retrieval
- Minor difficulties in recalling detailed events

Clinical cognitive syndromes and associated neuropsychological profiles, Textbook of geriatric psychiatry, 2009
Dementia Diagnosis

One or more acquired significant impairments (independence lost) in cognitive domains such as:

- Memory
- Language
- Execution of purposeful movement
- Recognition/familiarity
- Visuospatial function
- Self control/management

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) May 18, 2013
Dementia Diagnosis

- Interview
- Cognitive Testing
- Physical Examination
- Brain Imaging
- Laboratory Testing

Intelligence, judgment, and behavior (frontal lobe)

Language (parietal lobe)

Memory (temporal lobe)
Neuronal cell loss leading to extensive shrinkage in an Alzheimer’s brain (right), as compared to a non-demented, healthy human brain (left). 

Courtesy NIA.
Cognitive Screening

Mini-Cog is a five point cognitive screen
- 3 word verbal recall
- Clock draw
- Takes 2-3 min to administer

Montreal Cognitive Assessment (MoCA)
- Takes 12-15 minutes to administer
- Tests executive function in addition to language,
  - visuospatial function and memory

Mini-Cog™ Copyright S Borson.
What Conditions Are Not Dementia

• Age-related cognitive decline: slower information processing and mild memory impairment.

• Mild cognitive impairment: Cognitive and memory problems that are not severe enough to be diagnosed dementia.

• Depression: short term memory loss

• Delirium: confusion and rapidly altering mental states.

Behavioral and psychological symptoms of dementia

- Depression
- Anxiety
- Abnormal motor behavior
- Irritability
- Apathy
- Agitation
- Disinhibition and impulsivity
- Delusions or hallucinations
- Changes in sleep or appetite.

Dementia Causes

• Alzheimer’s dementia 50-70%
• Vascular Dementia 25%
• Lewi Body Dementia 15 %
• Frontotemporal Dementia 3-5 %

The graph illustrates the progression of Alzheimer's Disease (AD) stages over time, as indicated by the Mini-Mental State Examination (MMSE) score. The x-axis represents the years of progression, while the y-axis shows the MMSE score. Key stages are labeled as follows:

- **Initial AD stage**: Cognitive deficits
- **Middle**
  - Impairment of independence
  - Behavioral abnormalities
- **Severe AD stage**: Complete dependence on nursing care

The graph is based on data from Gauthier, 1996.
Protective Factors For Dementia

- Physical activity
- Ongoing intellectual stimulation
- Omega-3 fatty acids
- Leisure/social activities
- Higher education
- Cholesterol lowering drugs (statins)
- Anti-hypertensives
- Moderate alcohol intake

Dementia Management

- FDA approved medications for use in the United States.
- Improve or stabilize memory and thinking skills in some patients
- Cholinesterase inhibitors: Donepezil (Aricept), rivastigmine (Exelon), galantamine and memantine

Caring for People with Dementia

• 24-hour care and supervision.
• Assistance with daily activities such as eating, bathing, and dressing.
• Meeting these needs takes patience and understanding.
• Sharp knives, dangerous chemicals and tools should be removed.
• Bed and bathroom safety rails
• removing locks from bedroom and bathroom doors.
• lowering the hot water temperature to 120° F or less to reduce the risk of accidental burning.

Dementia Matters

- Advance Directives
- Home Health care
- Assisted living
- Nursing Home
- Palliative Care
- Hospice Care

Caregiving

• 1 in 3 will develop symptoms of depression.
• 60% will develop stress.
• Signs: Irritability, anger, mood swings, fatigue and poor sleep.
• Prevent Burnout:
  - Make time for yourself
  - Educate yourself
  - Know your limited
  - Support groups

National Alliance For Caregiving. Publication, Caring Today Planning for Tomorrow
Creating Healthy Communities for an Aging population

• Improve transportation options

• Support the use of technology for the elderly

• Support infrastructures that provide education and tools for health promotion

Minnesota Dept of Health community and family health Division 2006
Creating Healthy Communities for an Aging population (Cont’d)

• Broaden retirement planning and education to encourage people to take responsibility

• Develop elder friendly and caregiver education regarding available resources

• Enhance and promote a community culture that support people as they age