

Dementia & Mental Illness



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The Caring for Aging Parents Show!

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Dementia and Mental Illness

TODAY

- **Difference between Dementia & Mental Health Conditions**
- **Discuss common mental health conditions**
- **Where does dementia and mental illness overlap?**

Dementia

A Personal Story!



***“My mother was the glue
to our family...”***

Gwen Richards remembers her mother,
Helen, who had Alzheimer's.

What is Dementia?

Major Neurodegenerative Disorder

Chronic acquired decline in memory

AND

in at least one other area of cognitive function

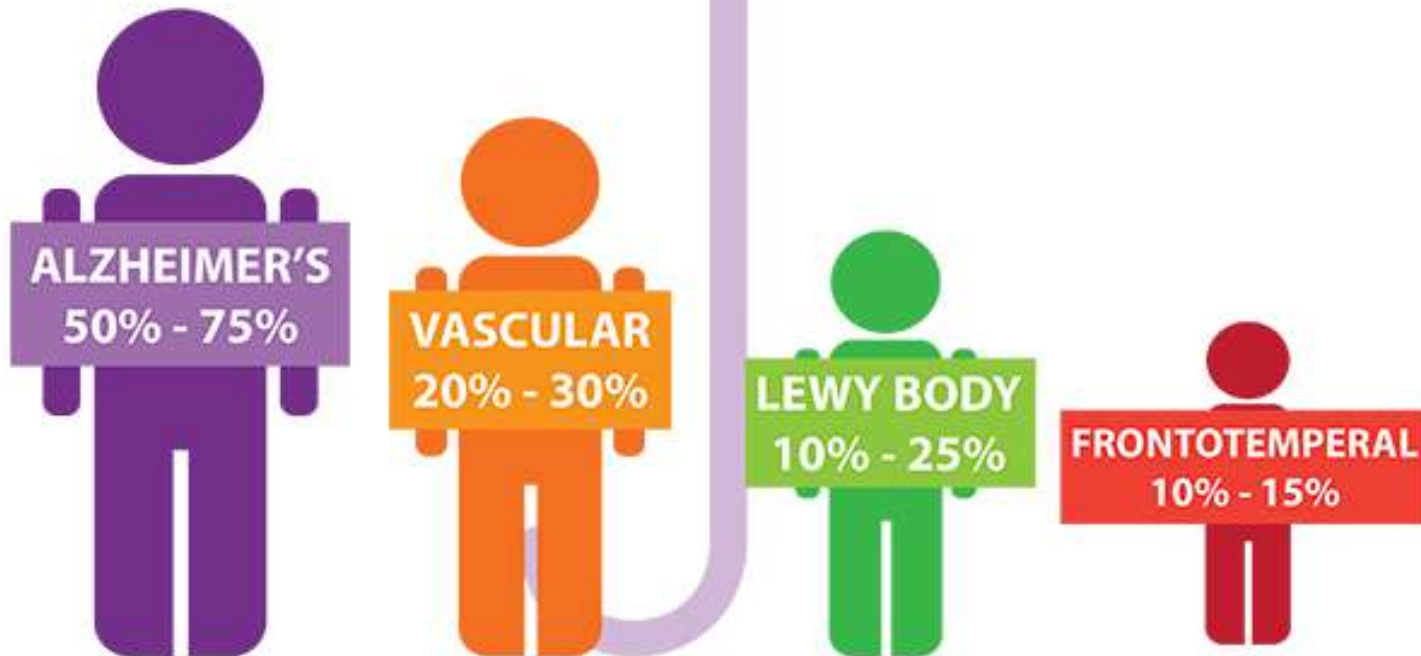
language, visual-spatial, executive function/judgment

AND

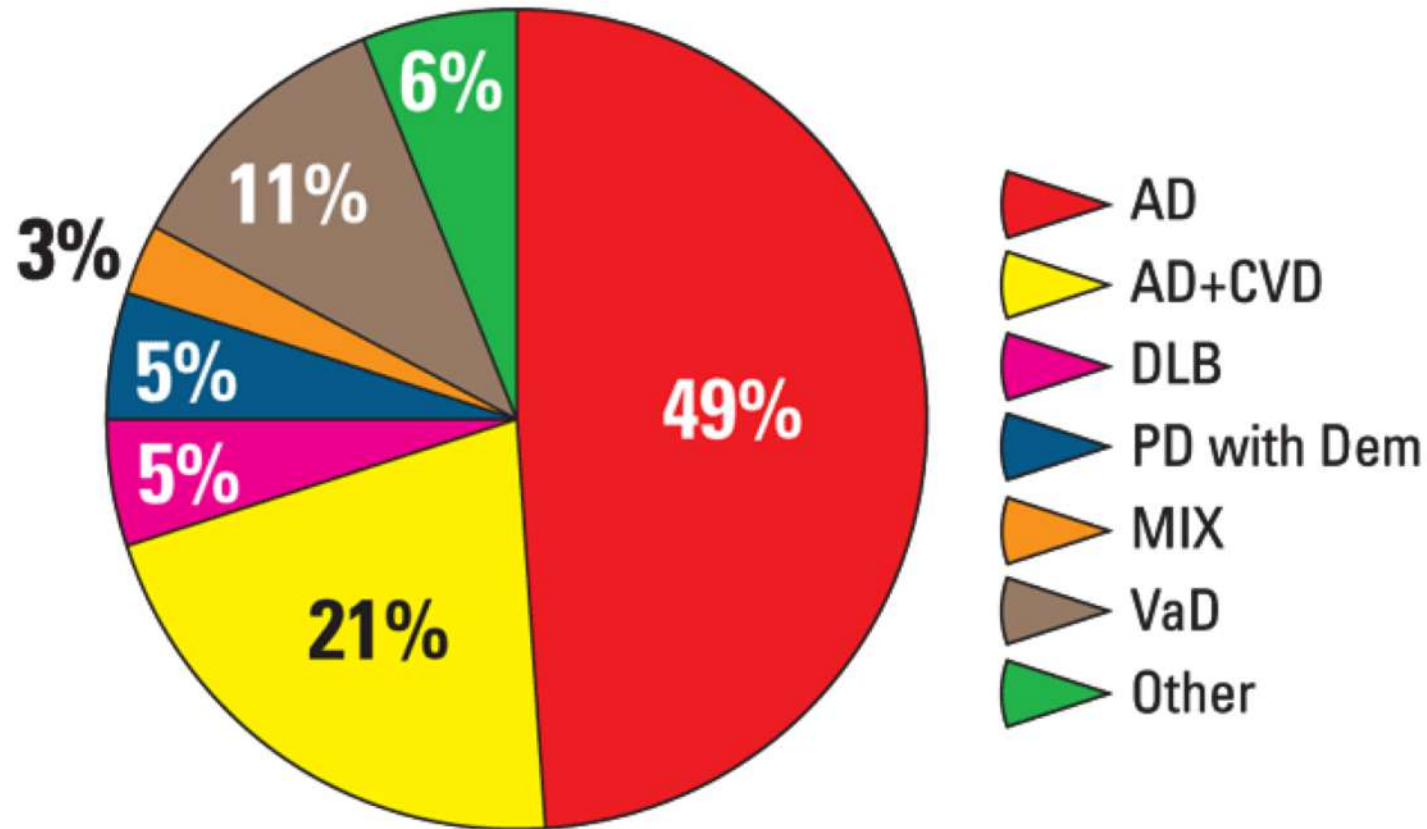
Impairment function sufficient to affect daily life.

DEMENTIA

An "umbrella" term used to describe a range of symptoms associated with cognitive impairment.

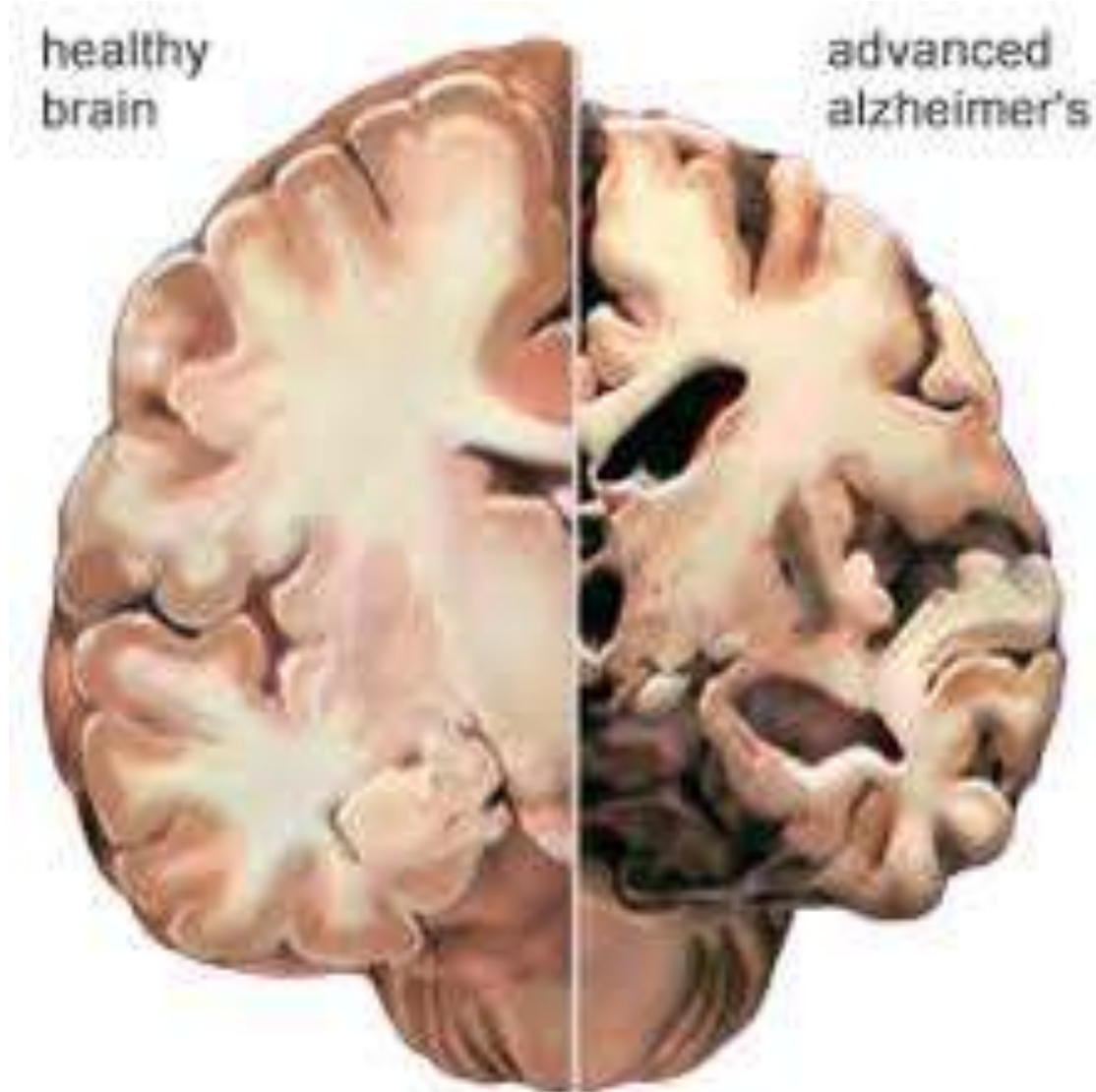


FREQUENCY OF DEMENTIA TYPES (AUTOPSY SERIES)



AD=Alzheimer's disease; CVD= cardiovascular disease; DLB=dementia with Lewy bodies; PD=Parkinson's disease; Dem=dementia; MIX=Alzheimer's disease and cerebrovascular disease; VaD=vascular dementia.

Alzheimer's Disease



Alzheimer's Disease

- **Plaques and tangles** in the brain are two of the main features of Alzheimer's disease.
- The third is the **loss of connections between nerve cells (neurons)** in the brain.

The time from diagnosis to death varies:

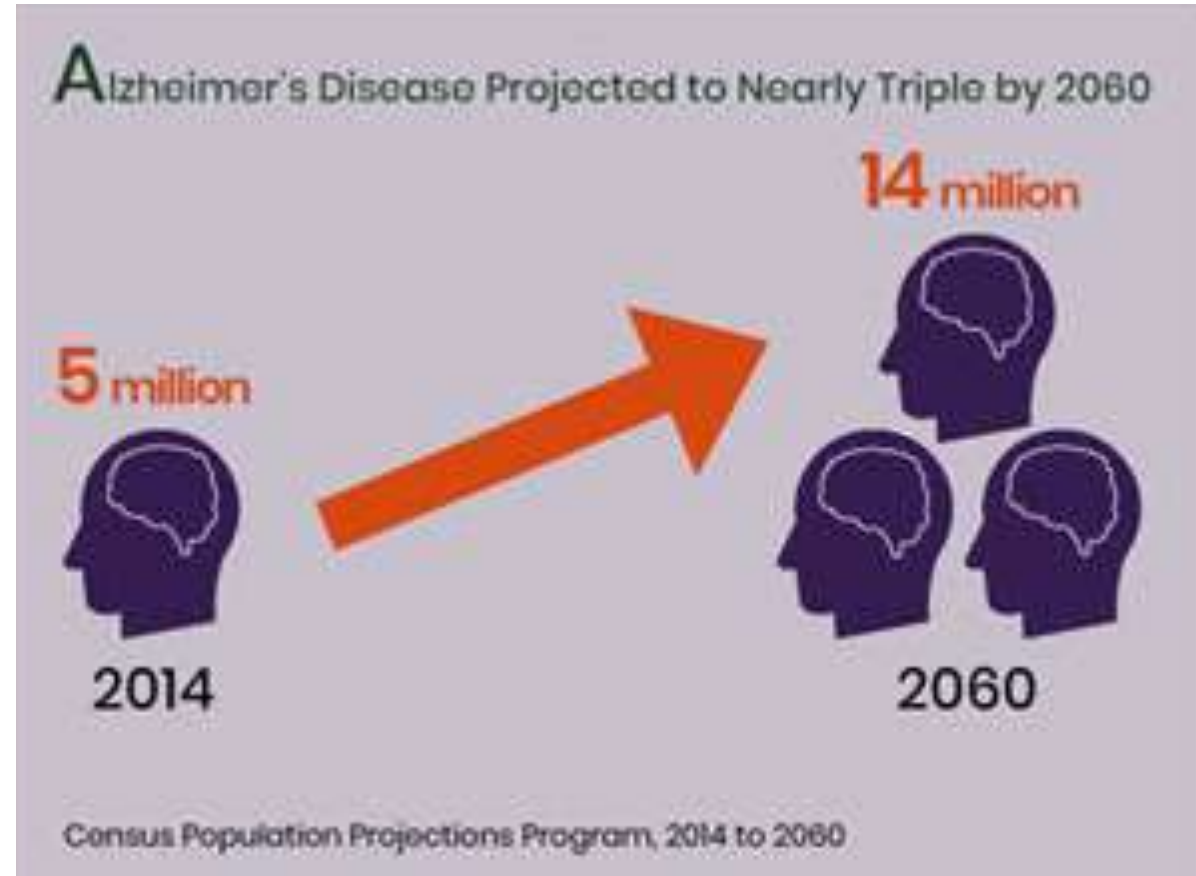
- On average, a person with Alzheimer's lives **4-8 years after diagnosis**, but can live as long as 20 years.



<https://www.nia.nih.gov/health/video-how-alzheimers-changes-brain>

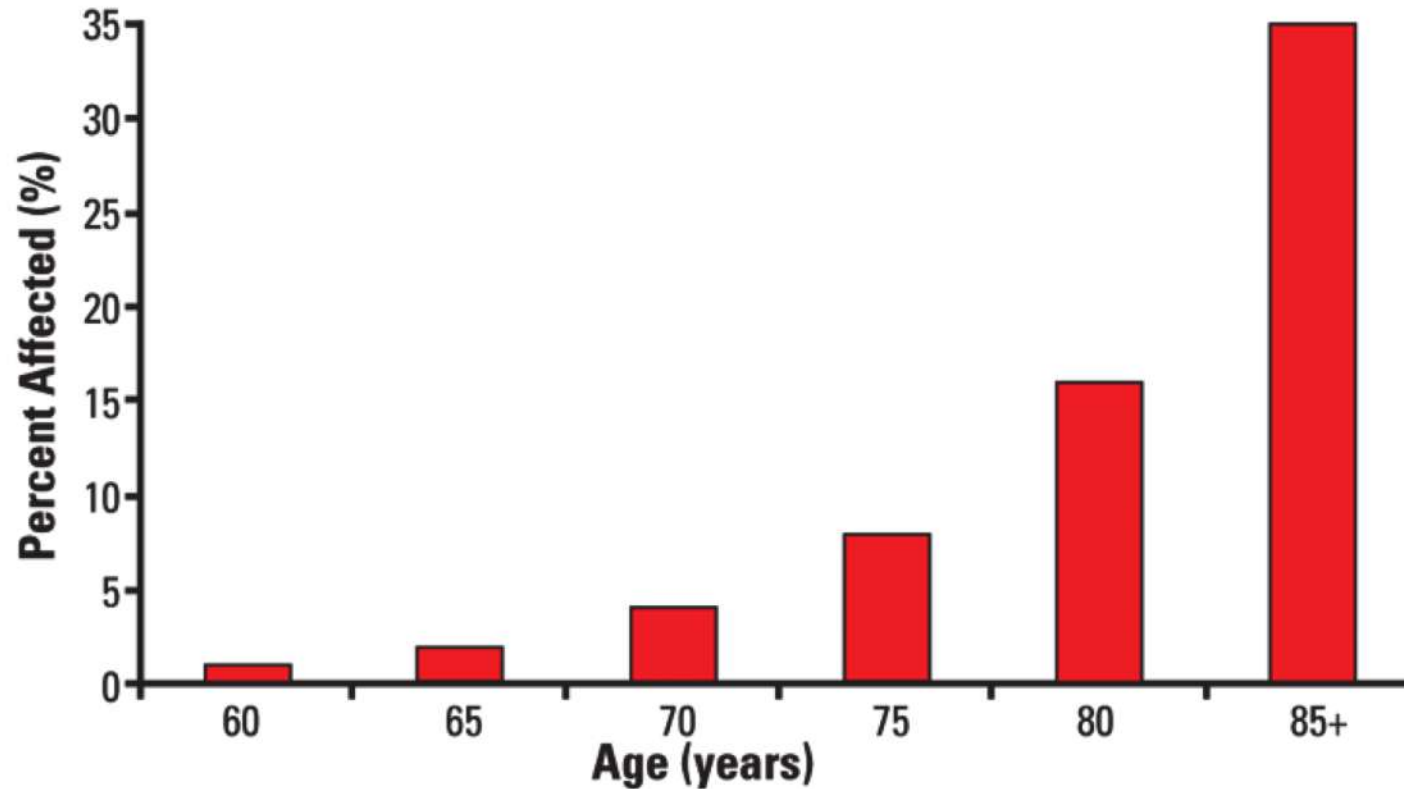
Alzheimer's Disease

- An estimated 5.3 million Americans have AD
- Almost 67% of American seniors living with AD are women
- Of people with AD, 5% are younger than age 65



Alzheimer's Disease

ALZHEIMER'S DISEASE DOUBLES IN FREQUENCY EVERY 5 YEARS AFTER 60 YEARS OF AGE



Alzheimer's Disease

Percentage of Adults Aged 65 and Older with Alzheimer's Disease by Race and Ethnicity



296340A



www.cdc.gov/aging

Centers for Medicare and Medicaid Services, 2014

Alzheimer's Disease

- More than 500,000 seniors die each year due to AD
- AD is the **6th** leading cause of death in the US
- AD is the **5th** leading cause of death for those aged 65 +
Deaths from AD **increased 68% between 2000 and 2010**,
while deaths from other major diseases decreased.

Dementia

IS NOT A NORMAL
PART OF AGING

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What are the rates?

- *1 in 9*

Adults 65 and older have dementia

- *Less than 50%*

of people over 85 have dementia!

What are the stages of
Alzheimer's Disease?

Alzheimer's Disease

Pre-Clinical

- Alzheimer's Disease is a “neurodegenerative” disorder
- The rate at which the disease progresses varies
- Changes in the brain begin years before any signs of the disease -> Pre-clinical
 - Report by patient or caregiver of memory loss
 - Objective signs of memory impairment
 - Mild construction, language, or executive dysfunction
 - No functional impairment (iADLs and ADLS intact)
 - 6%–15% annual conversion rate to dementia syndrome
 - Some cases of mild cognitive impairment may not progress to AD

Alzheimer's Disease

Phase 1

Early, Mild Impairment (yr 1–3 from onset of sx)

- MMSE 21–25
- Disoriented to date
- Naming difficulties (anomia)
- Recent recall problems
- Mild difficulty copying figures
- Problems managing finances
- Decreased insight
- Irritability, mood change
- Social withdrawal



<https://storycorps.org/stories/robert-patterson-and-his-wife-karen/>

Alzheimer's Disease

Phase 2

Middle, Moderate Impairment (yr 2–8 from sxs onset)

- MMSE 11–20
- Disoriented to date, place
- Comprehension difficulties (aphasia)
- Impaired new learning
- Impaired calculating skills
- Getting lost in familiar places
- Problems with dressing, grooming
- Not cooking, shopping, banking
- Restless, anxious, depressed
- Delusions, agitation, aggression

Alzheimer's Disease

Phase 3

Severe Impairment (yr 6–12 from sxs onset)

- MMSE: 0–10
- Remote memory gone
- Nearly unintelligible verbal output
- Unable to copy or write
- No longer grooming or dressing
- Incontinent
- Motor or verbal agitation
- Distressing conditions common in advanced dementia include pressure ulcers, constipation, pain, and shortness of breath
- Among SNF residents with advanced dementia, 71% die within 6 months of admission

Neuro-Psychiatric Symptoms & Dementia

Dementia & Depression



<https://youtu.be/nmfad3dmXSE>

*“It’s hard to know where his
personality ends
and dementia begins”*

*“Is my 80 year old mom
having an affair?”*

Alzheimer's Disease

Psychotic Symptoms (e.g., delusions, hallucinations)

- Seen in about 20% of AD patients
- Delusions may be paranoid (e.g., people stealing objects and money, spouse unfaithful)
- Hallucinations (~11% of patients) are more commonly visual

Depressive Symptoms

- Seen in up to 40% of AD patients; may precede onset of AD
- May cause acceleration or decline if untreated; suspect depression if person stops eating or withdraws
- Sadness
- Loss of interest in usual activities
- Anxiety and irritability

“Why is my loved one with dementia so mean?”

Alzheimer's Disease

Apathy

- High prevalence and persistence throughout course of AD
- Causes more impairment in ADLs than expected for cognitive status
- High overlap with depressive symptoms but lacks depressive mood, guilt, and hopelessness

Agitation or Aggression

- Seen in up to 80% of patients with AD
- A leading cause of nursing-home admission

*“My loved one with dementia won’t
accept that they have dementia.
They’re in denial!”*

Is it Denial or Disease?

Anosognosia

23-75% or 60-81%

- Lack of awareness or insight into having a medical or mental health problem
- May be unaware of some deficits, but aware of others
- The nature and intensity of anosognosia may change during the course of dementia:
 - Memory, illness, ADLs, IADLs, mental health symptoms, etc.

Mental Health Conditions

Depression

IS NOT A NORMAL
PART OF AGING

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What are the rates?

- **1% - 5%**

of people 65 and older living in community

- **13.5%**

of people who require home health care

- **11.5%**

Of older adults in the hospital

Depression

IS THE MOST PREVALENT
MENTAL HEALTH PROBLEM
AMONG OLDER ADULTS

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Signs of Depression in Older Adults

- Persistent sadness, frequent tearfulness
- Feeling worthless or helpless
- Feeling slowed down
- Excessive worries about finances and health problems
- Weight changes (due to changes in appetite)
- Pacing and fidgeting
- Difficulty sleeping
- Difficulty concentrating
- Physical symptoms such as pain or GI problems.
- Withdrawal from regular social activities

*May look like dementia,
when it's depression!!!*

Diagnosis of Depression in Older Adults



- Have at least 5 of the symptoms
- Lasting at least 2 weeks
- Impair function
 - Relationships
 - Activities

Impact of Depression on Older Adults

- Can lead to impairments in physical, mental, and social functioning
- Can affect the course of medical problems
- Increase visits to doctor and ER
- Use more medication for med problems
- Stay longer in the hospital for med problems

Depression is Treatable!

- **80% of the cases of depression are treatable** in older adults!

BUT

Depressive disorders are a widely **under-recognized** condition and often are **untreated or undertreated** among older adults!

Risk Factors for Late Onset Depression (CDC)

- Widowhood
- Physical Illness
- Low Educational Attainment (less than High School)
- Impaired Functional Status
- Heavy Alcohol Consumption

Psychosocial Factors Leading to Depression (NIH)

- Bereavement
- Perceived social support
- Neuroticism
- Personality disorders
- Loneliness
- Disability
- Total number of daily hassles
- Impaired social support, including lack of a confidante

Medical Risk Factors for Late Onset Depression (NIH)

Specific Health Risk Factors

- Heart Disease
- Dementia (Alzheimer's & Vascular)
- Cerebrovascular Compromise
- Stroke
- Parkinson's
- Diabetes

General Health Risk Factors

- Obesity
- New Medical Illness
- Poor health status
- Poor perceived health

Dementia & Depression!!

Depression likely serves as both a risk factor

AND

potentially an early sign of dementia.

(NIH)

How to Help an Older Adult with Depression

1. Help them see their primary care doctor to rule out med problems

2. Try these helpful strategies

- Offer support, understanding, patience, and encouragement
- Help keep track of appointments and medication as memory /concentration problems are common with depression
- Help with transportation to doctor appts
- Talk with them and listen
- Never ignore comments about suicide, and report them to your loved one's therapist or doctor
- Invite them out for walks, outings, or to engage in activities with you
- Remind them that with time and treatment, the depression can improve!

World Suicide Prevention Week

- White Men over 85 have the highest rate of suicide in the country (more than any other age group)
- Suicide attempts in older adults are more likely to result in death than younger adults:

Reasons being:

- Older adults plan more carefully and use more lethal means
- Older adults are less likely to be discovered and rescued
- Less likely to recover from a failed attempt

World Suicide Prevention Week

How to Help an Older Adult Who Is Suicidal

It's appropriate and important to ask:

- Do you feel as though life is no longer an option for you?
- Have you had thoughts about harming yourself?
- Are you planning to harm yourself or take your life?
- Is there a gun in the house? Or a collection of pills?
- Are you often alone?

World Suicide Prevention Week

How to Help an Older Adult Who Is Suicidal

Intervene by:

- Removing pills, weapons, or other means
- Calling family physician or mental health provider
- Calling police

Care for the older adult by:

- Encouraging them to see physician or mental health provider
- Depression may be a side-effect of illness or medication
- Family member or friend to accompany older adult to the doctor

World Suicide Prevention Week

How to Help an Older Adult Who Is Suicidal

NATIONAL
SUICIDE
PREVENTION
LIFELINE

8 2 5 5
1 (800) 273 TALK

 **Veterans
Crisis Line**
1-800-273-8255 **PRESS 1**

National Suicide Prevention Lifeline

We can all help prevent suicide. The Lifeline provides 24/7, free and confidential support for people in distress, prevention and crisis resources for you or your loved ones, and best practices for professionals.

 **1-800-273-8255**

Anxiety Disorders

- Depression & Anxiety go hand in hand
- Almost half of older adults who are diagnosed with a major depression also meeting the criteria for anxiety
- Anxiety may be underestimated due to emphasis on physical complaints, rather than emotional
- An anxiety disorder causes feelings of fear, worry, apprehension, or dread that there are excessive or disproportional to the problems/situations that are feared.

Anxiety Disorders

Signs of Anxiety Disorders

- Excessive worry or fear
- Refusing to do routine activities or being overly preoccupied with routine
- Avoiding social situations
- Overly concerned about safety
- Racing heart, shallow breathing, trembling, nausea, sweating
- Poor sleep
- Muscle tension, feeling weak and shaky
- Hoarding/collecting
- Depression
- Self-medication with alcohol or other central nervous system depressants

Sleep Problems

1. Difficulty falling asleep -

-- *Initiation , latency*

2. Difficulty staying asleep after falling asleep

-- *Maintenance, fragmentation, WASO*

3. Difficulty with the nature and quality of the sleep

-- *Sleep efficiency and architecture*

Why is Sleep So Important?

- Daytime functioning
- Cognition – memory loss, poor judgment mental dexterity
- Medication errors and mismanagement
- Mood: Irritability , anxiety, depression
- Accidents, falls
- Institutionalization
- Poor Sleep hygiene practices



**May look like dementia,
when it's sleep impairment!!!**

What you can do
to help!

What You Can Do To Help!

Dementia

- Encourage EARLY Assessment
- Provide education
- Provide support and psychotherapy
- Help PLWD and family understand that the process to caring for dementia does not include rehabilitation- it is a progressive illness with no cure.
- Help the individual and loved one to process loss and grieve
- Help manage the turbulent changes in disease process
- Provide guidance on behavioral modification

What You Can Do To Help!

Dementia



Program Areas Grants Aging & Disability in America



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Area Agencies on Aging

PROGRAM AREAS

Overview

Aging and Disability Networks

- Aging and Disability Resource Centers
- Americans with Disabilities Act National Network
- Area Agencies on Aging
- Assistive Technology Network
- Centers for Independent Living
- Protection and Advocacy Systems
- Senior Centers and Supportive Services for Older Adults

An Area Agency on Aging (AAA) is a public or private nonprofit agency designated by a state to address the concerns of all older persons at the regional and local levels. AAA is a general term—names of



By 2025, it is anticipated that the number of Georgians living with Alzheimer's will increase by nearly 30%

Supporting Patients, Care Givers and Healthcare Professionals

[Click to Learn More](#)



Support Groups,
Education, Resources

What You Can Do To Help!

Mental Health Concerns

- Encourage older adult to see their primary care provider
- Encourage optimal health with medical conditions
- Encourage friend/family connection and inclusion in appointments
- Provide education about normal aging
- Provide hope about treatment
- Encourage treatment
- Brainstorm barriers to treatment (transportation, etc).

Contact Me!

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1. Tips for Caregivers
2. Senior Care Resources
3. Caring for Aging Parents Show!



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CARING FOR AGING PARENTS SHOW!

with

Dr. Regina Koepf

Facebook Live Mondays at 8:30pm EST

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Dr. Regina Koepf
Psychologist in Atlanta, Georgia

welcome to the

CARING FOR AGING PARENTS SHOW!

ABOUT DR. REGINA KOEPP

I'm So Glad You're Here!

Caring for aging parents is overwhelming and complicated.

You shouldn't have to do this caregiving-th...

See More

Thank
You!

The image features a row of six black silhouettes of people in profile, engaged in conversation. Above them are six colorful speech bubbles: yellow, pink, light blue, red, green, and purple. The red bubble is the largest and contains the text "Let's Talk".

Let's Talk

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