

فقيه.

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فقيه.

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DEMENTIA

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What is dementia?

Dementia is a general term used to describe a group of symptoms caused by brain disorders that affect memory, thinking, behaviour and the ability to perform daily tasks.

The most common cause of dementia is Alzheimer's disease, but there are many other types.

Common types of dementia:

1. Alzheimer's disease

The most common type of dementia. It is a progressive atrophy of brain cells, caused by the accumulation of abnormal proteins (such as beta-amyloid and tau), which leads to impaired memory and mental abilities over time.

2. Vascular dementia

Caused by reduced blood flow to parts of the brain, usually after strokes or due to damage to blood vessels. It affects thinking, attention, and mental speed, and is often accompanied by sudden changes in cognitive abilities.

3. Lewy body dementia

It is associated with the appearance of abnormal bodies inside the brain cells, and its symptoms appear in the form of:

- Visual hallucinations.
- Movement and balance disorders.
- Sleep disturbance and fluctuations in consciousness.

4. Frontotemporal dementia

It usually appears at a younger age (65-40 years old). Symptoms begin with changes in personality or behaviour, or difficulties with language such as speaking, writing or understanding.

5. Dementia associated with Parkinson's disease.

It affects some patients with advanced Parkinson's disease. It starts with tremors and slow movement, and later progresses to impaired memory, attention and decision-making.

6. Other causes:

- Repeated head injuries.
- Certain infections such as syphilis or immunodeficiency virus.
- Genetic or neurological syndromes such as Down syndrome.

Alzheimer's Disease (Detailed Overview)

What is it?

Alzheimer's disease is a progressive neurodegenerative disorder that leads to a steady decline in cognitive function and is the most common cause of dementia.

Symptoms of Alzheimer's disease by stages:

1. Early stage:

- Forgetting recent events or information.
- Difficulty choosing words or remembering people's names.
- Losing things and putting them in unusual places.
- Poor planning and organization.
- Difficulty performing typical social and occupational tasks.

2. Intermediate stage:

- Forgetting important personal events.
- Temporal and spatial disorientation.
- Mood and behavioral changes such as isolation or aggression.
- Repetition of questions or actions (such as tearing tissues or shaking hands).
- Loss of the ability to choose appropriate clothing or control output.
- Changes in sleep pattern, increased risk of getting lost when going out.

3. Late stage:

- Loss of awareness of what is happening around them.
 - Loss of the ability to move or swallow.
 - Total dependence on others for all daily tasks.
 - Difficulty communicating.
 - Greater susceptibility to infections, such as pneumonia or urinary tract infections.
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Changes associated with the disease:

- Distrust and suspicion.
 - Mood swings and depression.
 - Stubbornness, fear, social withdrawal.
 - Aggression or unusual behavior.
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Possible complications:

- **Pneumonia:** Due to difficulty swallowing and food entering the airway.
 - **Urinary infections:** As a result of catheter use and lack of control over elimination.
 - **Injuries resulting from a fall:** Such as fractures or head injuries.
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Diagnosis:

Doctors can accurately diagnose more than 90% of cases through:

Required tests:

- Clinical tests and history.
 - Blood tests to rule out other causes.
 - Cognitive and memory tests.
 - Brain imaging.
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Treatment:

Available medications do not stop the disease, but they temporarily slow the deterioration and may improve communication between nerve cells and possibly improve behavioral symptoms. There are also medications to help with anxiety, depression, sleep and behavioral disorders. There are also many non-pharmacological methods among the treatment options for people with the disease.

The role of the family in care:

- Educate family members about the nature and stages of the disease.
 - Distribute tasks among family members based on ability and time.
 - Provide short and frequent visits to reassure the patient.
 - Support the patient in maintaining independence as much as possible in the early stages.
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Risk factors and ways to prevent Alzheimer's disease:

There are a number of factors that may increase the risk of developing Alzheimer's disease, but on the other hand, there are behaviors and actions that can reduce this risk or slow the progression of the disease.

First: Risk Factors

1- Aging

- Age is the biggest risk factor. Most cases begin after the age of 65, although early Alzheimer's may appear earlier in some rare cases.

2- Genetic factors and family history:

- Having a patient in the family (especially the first degree) increases the likelihood of developing the disease, especially if the APOE-e4 gene is mutated.

3- Cardiovascular diseases:

- such as high blood pressure, diabetes, obesity, and high cholesterol, all of which negatively affect brain health.

4- Head injuries:

- Experiencing severe or repeated head trauma may increase the risk of later dementia.

5- Reduced mental and social activity:

- Lack of participation in mental or social activities may lead to a decrease in "cognitive reserve," an important protective factor against Alzheimer's.

6- Limited education:

- Some studies link a lack of education to a higher risk, possibly due to less brain activation throughout life.

7- Down syndrome and learning disabilities:

- Individuals with Down syndrome have a higher risk of developing Alzheimer's at an earlier age.

Second: Methods of prevention and risk reduction

Although some risk factors are unchangeable, such as age and genetics, there are many effective preventive measures:

1- Controlling cardiovascular disease:

- Maintain normal blood pressure, and monitor cholesterol and blood sugar levels.

2- Regular physical activity:

- Walking, swimming, and aerobic exercise strengthens blood circulation and supports brain health.

3- Engage in sustained mental activities:

- Reading, solving puzzles, learning a new language, or playing thought-provoking games.

4- Maintain social contact:

- Regular interaction with others reduces feelings of isolation and maintains mental vigor.

5- Eat a healthy diet:

- Such as the Mediterranean diet, rich in vegetables, fruits, fish and olive oil.

6- Avoid smoking and minimize alcohol consumption:

- Both are associated with damage to blood vessels and deterioration of brain function.

7- Prevent head injuries:

- Wear a helmet when riding a bike or playing sports, and use a seat belt in a car.

How do you make your home safe for the patient?

As Alzheimer's disease progresses, the risk of falling or being injured inside the home increases. Here are important actions to make the home environment safer:

1. Fall safety:

- Remove loose or slippery carpets.
- Keep hallways clear of obstructions.
- Install grab bars (handrails) in places that need support such as bathrooms and stairs.
- Use night lighting in hallways and bedrooms.
- Avoid using shiny or slippery floors.

2. Bathroom safety:

- Install non-slip rubber mats inside the bathtub.
- Use a shower chair and supports to stabilize the patient.
- Lock medicine cabinets or use safety locks.

3. Safety in the kitchen:

- Turn off the gas when not under supervision.
- Keep sharp kitchen utensils (such as knives) in locked cabinets.
- Use automatic shut-off stoves if possible.

4. Safety from poisoning or burns:

- Secure cleaning supplies, alcohol, or medications in locked cabinets.
- Install safety caps on stove and oven switches.

5. Prevent dangerous exits from the house:

- Install safety locks on high doors or alarms when doors are opened.
- Use an identification card or medical bracelet for the patient in case of going out unaccompanied.

6. Support mobility within the home:

- Use comfortable and safe chairs of appropriate height.
- Remove sharp corners of furniture or use plastic protectors on them.