

# Understanding dementia:

## A guide for professionals



### Making a difference together: A health toolkit

#### What is dementia?

Dementia is an umbrella term used to describe a group of symptoms. It involves a wide range of diseases and disorders of the brain, with differing causes.



This results in progressively deteriorating intellectual functioning, including a decline in cognitive performance and memory. Dementia is a terminal condition as currently there is no cure.

Common types of dementia include Alzheimer's disease, vascular (multi-infarct) dementia, and frontal lobe dementia. Different types of dementia affect a person in different ways.

#### People with learning disabilities and dementia

Since people with learning disabilities are living longer they have an increased chance of developing dementia. Dementia may present at a younger age in people with learning disabilities compared to the general population.

People with Down syndrome have a significantly increased risk of developing dementia which is usually, but not exclusively, Alzheimer's disease. The clinical symptoms of this may be present from age 50 years onwards.

Dementia may present atypically in people with Down syndrome, where changes may initially manifest as behavioural rather than cognitive.

Diagnosing dementia is more difficult for someone with a learning disability so that appropriate treatment and support systems can be provided.



“ Sometimes people don't see me, they only see the dementia. ”

## Learning disability and dementia: Early symptoms

It is vital that dementia is recognised and diagnosed at an early stage. This means noticing early changes in the person, some of the most common are:

- Short-term memory loss and not recognising forgetfulness
- Apathy, inactivity and a loss of interest in hobbies
- Deterioration / loss of daily living skills
- Reduced communication
- Disorientation and confusion
- Social withdrawal
- Changes in depth perception e.g. difficulties with steps or kerbs
- An increase in wandering for no reason

## Ruling out other possibilities

Carers shouldn't assume that all changes in a person's health status are dementia related. A number of conditions may mimic symptoms of dementia and need to be ruled out, for example:



- Depression: similar symptoms including withdrawal; less active; sleep problems; loss of interest; and confusion
- Thyroid problems
- Sensory impairments: hearing/visual (cataracts)
- Pain (joint pain, broken bone)
- Medication side effects
- Dehydration
- Poor diet and/or malnutrition
- Bereavement
- Significant life or environmental changes, such as moving house
- Lack of sleep

**If you believe that someone may have dementia**, an early medical referral is vital. It is important to involve **family members and carers** to help construct an accurate picture of the person and supporting evidence for a diagnosis.

**For more information visit the following websites:**

[www.learningdisabilities.org.uk](http://www.learningdisabilities.org.uk)

[www.learningdisabilityanddementia.org](http://www.learningdisabilityanddementia.org)

[www.alzheimers.org.uk](http://www.alzheimers.org.uk)