Major Types of Dementia

First Consideration – Delirium versus Dementia

Delirium - Acute, rapid onset, changes in alertness, arousal and consciousness, sudden worsening

***Causes*:** medication changes, fever, infections, nutritional problems, electrolyte problems, organ failure, toxicity

Second Consideration – Depression versus Dementia

Depression – weeks to months of onset, withdrawal from activities, problems with sleep and appetite, irritability

Can be treated and improved with medications and other interventions.

Then, Major Divisions: Cortical versus Sub-cortical Symptoms and involvement

Cortical – changes in intellectual functioning – including memory, language, visuospatial skills, problems in judgment, cognitive slowing, problems with planning, mathematical & calculation skills

Sub-cortical – movement problems, attention and arousal problems, sensory processing problems, tremors

Big Categories:

- Alzheimer's Disease
- Vascular Dementia
- Frontal-temporal Dementia
- Lewy Body Dementia & Parkinson's Dementia
- Other Dementias…

There are over 120 causes, variations, and types of dementia – some of them are listed below

Mild Cognitive Impairment		
Typical Onset	**Major Symptoms**	**Progression**
Gradual, slow worsening over time	Problem with new learning, immediate recall impaired OR word finding problems OR changes in behavior OR changes in personality OR problems with spatial orientation or processing skills	50% will change to Alzheimer's in 5 yrs

Young Onset Alzheimer's Disease

Typical Onset	Major Symptoms	Progression
Between 29-60 yrs of age Noticeable over a6-12 months time	Amnesia, aphasia, apraxia, agnosia, anomia Recent & immediate memory, word finding, difficulty with complicated unfamiliar tasks, difficulty interpreting meaning, varied awareness of deficits More motor issues noted in young onset	2-5 yrs rapid progression after diagnosis – may live longer at end of disease Left brain hit first in hippocampus -– then spreads throughout Plaques and tangles

Alzheimer's Disease

Typical Onset	Major Symptoms	Progression
After age 65 – typical onset mid 70s – primary protein errors – in beta amyloid and tau proteins	Like ABOVE Preserved old memory, familiar patterns, motor abilities, emotional memories	8-10 yrs of life after diagnosis; Left brain hit first in hippocampus -– then spreads throughout Plaques and tangles

Mixed Picture Dementia

Typical Onset	Major Symptoms	Progression
One dementia starts then after a period of 2-5 years they start showing signs of a second dementia	Combined symptoms of TWO or more dementia – Most common Alzheimer's & vascular Lewy body & Alzheimer's	Progression is complex based on types and changes with each – generally harder to predict

Lewy Body Dementia

Typical Onset	Major Symptoms	Progression
After age 55; Primary protein error – synuclein protein	Fluctuating levels of consciousness, varying attention, vivid visual hallucinations, delusional thinking, some memory problems, nightmares, frequent falls, episodes of insomnia, problems swallowing, intention tremors	Worsening of motor skills and intellectual abilities, 50% can have severe reactions to neuroleptics – toxicity & immobility, may have paradoxical reaction to anti-anxiety drugs and anti-depressants -worsening over time until death – 7-9 years

Parkinson's Related Dementia

Typical Onset	Major Symptoms	Progression
After 3-5 yrs of Parkinson's onset, typically after age 65	Resting tremors, stiff movement, poor balance, depression, memory problems, problems with concentration	40% of those with Parkinson's will develop dementia, memory and language will become problematic

Vascular Dementia

Typical Onset	Major Symptoms	Progression
40's onward – hypertension, diabetes, heart disease, stroke… called a 'secondary dementia' – not a brain disease – blood supply problem	Problem solving and planning, emotionally labile or flattened affect and apathy, depressed or angry mood, fluctuations in performance and abilities day to day, selected lesions due to blood supply problems, depression or mood problems common, concentration problems	Step-wise progression in losses, spotty losses, not predictable – some estimates 3-30 years

Alcohol Induced Dementia Korsakof Syndrome

Typical Onset	Major Symptoms	Progression
Result of long term excessive alcohol abuse	Behavior and logic losses, memory loss – black out episodes progressing to severe memory losses – holes, frontal lobe type symptoms – impaired judgment, reasoning, emotional control, awareness of others, worsening word finding difficulties	Generally, once the symptoms appear they continue to progress Opinion varies as to the exact impact continued versus stopping all drinking will have on progression rates

Frontal-Temporal Dementia / Pick's Disease

Typical Onset	Major Symptoms	Progression
Over age 45	Combination of language and executive function problems – speech problems and ability to understand what is said happen early – person may stop speaking or may speak only in jargon PLUS there is , dis-inhibition (lack of impulse control), hyper-orality, ego-centric behavior, possibly physical acting out due to frustration, (mouthing things, eating sweets), depression, OCD type issues,	Damage occurs in both the frontal cortex and the left temporal area - ability to use words and understand them is generally lost, ability to comprehend tasks and care needs is lost as well frequently resulting in severe care issues and problems,

Frontal Lobe Dementia

Typical Onset	Major Symptoms	Progression
h/o TBI, head injury or familial tendency	Behavioral dis-inhibition, problems with task sequence, severe limits in self-awareness, unable to pick up on and use social cues	5-8 years after symptoms appear, worsening behavioral issues, then other parts of brain show impact

Temporal Lobe Dementias

Typical Onset	Major Symptoms	Progression
Mid 40s-mid 60s most common	Language loss – two major types Fluent – has rhythm not content, limited awareness of loss Non-fluent – choppy, struggling speak, aware of loss, can't find the words – knows what they want to say	75%will experience progressive loss and spread thru remainder of brain over 5-10 years, 25% will lose language only and the disease will halt there

See FTD sheet for more types of FTDs

Huntington's Disease

Typical Onset	Major Symptoms	Progression
40s and 50s – genetically linked	Writhing movements, behavior changes, personality changes, irritability, depression, impulsivity, seizures	5-8 years of life after diagnosis, early need for major amounts of physical assistance and major difficulty with any movement

Creutzfeldt-Jakob's Disease

Typical Onset	Major Symptoms	Progression
Any age, sudden onset of symptoms,	Rapid loss of memory skills, problems with movement – poor coordination & jerking movements, severe language problems	Rapid progression to death, motor skills deteriorate rapidly, 6-9 months after diagnosis

Progressive Supranuclear Palsy

Typical Onset	Major Symptoms	Progression
After age 50	No tremor, neck and trunk rigidity, earlier swallowing and speech problems, major gait and balance problems (early), limited gaze downward	Rapid progression – worsening of mobility early, cognitive skills deteriorate rapidly after onset of other symptoms

AIDS related Dementia

Typical Onset	Major Symptoms	Progression
20-60 – following development of AIDS	Fluctuations in alertness and awareness, planning and problem-solving difficulties, memory problems, language comprehension problems	Worsens with worsening of AIDS

Multi-System Atrophy

Typical Onset	Major Symptoms	Progression
At least 6 different syndromes – Hits in later middle life (40-60)	No resting tremor, severe autonomic dysfunction, more rapid functional decline than Parkinsons	Not typically responsive to levadopa (sinamet)

Normal Pressure Hydrocephalus		
Typical Onset	**Major Symptoms**	**Progression**
After age 50	Gait problems, incontinence, rapid cognitive changes	Rapidly progressive – gait worsens quickly If not addressed quickly, damage can be permanent and death can result