



Section 1

About dementia

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Section 1

About dementia

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What is dementia?

Dementia is not one single disease. It is the term used to describe the symptoms of a large group of illnesses which cause a progressive decline in a person's functioning. It is not a normal part of ageing.

Everyone experiences dementia differently. Your symptoms will depend on the cause of dementia and the parts of the brain affected.

Common symptoms include:

- memory loss
- challenges in planning or solving problems
- difficulty completing everyday tasks
- confusion about time or place
- trouble understanding visual images and spatial relationships
- difficulty speaking or writing
- misplacing things and losing the ability to retrace steps

- decreased or poor judgement
- withdrawal from work or social activities
- changes in mood and personality.

Dementia is generally progressive. Symptoms often begin slowly and become gradually worse over time.

It is important to remember that no two people experience dementia in the same way. People often lead active and fulfilling lives for many years after their diagnosis.

Who gets dementia?

Dementia can happen to anybody.

The risk of dementia increases with age



Over the age of 65,
dementia affects almost
one person in ten.



Over the age of 85,
dementia affects
three people in ten.

People under the age of 65 can experience dementia, although it is less common.

Researchers in dementia now believe it depends on a combination of age, genes, health and lifestyle. Dementia can sometimes be hereditary, but this is quite rare.

What causes dementia?

There are many known types of dementia. Most people are diagnosed with one of four types.

Alzheimer's disease

Alzheimer's disease is the most common cause of dementia. This disease disrupts the brain's neurons. It affects how they work and communicate with each other. A decrease of important chemicals stops messages travelling normally through the brain.

You might experience:

- difficulties with short-term memory, especially recalling more recent events
- language and comprehension difficulties, such as problems finding the right word
- increasing disorientation in time, place and person
- problems becoming motivated and initiating tasks.

Vascular dementia

Vascular dementia occurs when there is reduced blood supply to the brain, causing cells to die. This can be the result of a stroke, narrowing of the arteries supplying blood to the brain, or bleeding in the brain.

You might experience:

- stepped progression of symptoms with periods of relative stability
- slowed motor speed
- impaired attention and short-term memory
- difficulty making decisions in response to a situation
- depression and apathy.

Lewy body disease

Lewy body disease causes tiny structures to develop inside brain cells. These structures disrupt the way the brain functions and can cause cells to die.

You might experience:

- fluctuating and sudden bouts of reduced alertness and/or confusion
- slowed movement, rigidity and tremors
- loss of facial expression
- difficulty with visual and spatial perception
- hallucinations
- poor abstract reasoning and judgement
- difficulty planning, reasoning, problem-solving and making decisions
- vivid dreaming with your body moving as you dream.

Lewy bodies are also found in people with Parkinson's disease. A person who has lived with Parkinson's disease for several years can develop Parkinson's disease dementia.

Frontotemporal dementia

Frontotemporal dementia causes progressive damage to the frontal and/or temporal lobes of the brain. It can also be called frontotemporal lobar degeneration. The symptoms of frontotemporal dementia depend on which areas of the brain are damaged.

The right and left frontal lobes impact your mood, social behaviour, attention, judgement, planning and self-control. When these lobes are affected first, it is called behavioural-variant frontotemporal dementia.

The temporal lobes on each side of the brain help us process what we hear and understand what we hear and see. When the temporal lobes are affected first, there is usually a loss of language

skills. There are two types of frontotemporal dementia where language is impaired—progressive nonfluent aphasia and semantic dementia.

You may experience:

- reduced intellectual abilities
- changes in personality, emotion and behaviour.

Other causes of dementia

A wide range of other conditions can also lead to dementia. These are rare, only accounting for about five per cent of all people with dementia.

Other diseases or causes include:

- Parkinson's disease
- corticobasal degeneration
- Creutzfeldt-Jakob disease
- HIV-related cognitive impairment
- Huntington's disease
- alcohol-related brain damage and Korsakoff's syndrome

- multiple sclerosis
- Niemann-Pick disease type C
- normal pressure hydrocephalus
- Progressive Supranuclear Palsy
- Chronic Traumatic Encephalopathy (from repeated head injuries)
- Down syndrome.

Mild cognitive impairment

People living with mild cognitive impairment often experience some loss of memory and a decline in other thinking skills, also known as cognitive abilities. This is not usually defined as dementia but as a minor neurocognitive disorder.

There is an increased risk of developing dementia. This may take many years, if it happens at all.

How does dementia affect younger people?

The term 'younger onset dementia' describes dementia in people under the age of 65. Younger people may develop any type of dementia, but Alzheimer's disease is the most common type.

Familial Alzheimer's disease

In some cases, younger onset dementia has a genetic link. This is called Familial Alzheimer's disease. It affects an extremely small number of people. Less than 100 people across Australia are likely to be affected at any one time.

Many of the symptoms experienced by younger and older people with dementia are similar. However, people with younger onset dementia can need different support as their life circumstances are different.

You may be strong and healthy, in full-time employment and raising a family. You may have a mortgage or other financial commitments, with plans to work until the age of 65.

Younger people can find that they are misunderstood in the community. Often, people do not expect younger people to live with dementia.

How does dementia progress?

Despite some variations in dementia types and symptoms, dementia usually has a gradual onset of symptoms that worsen over time.

While the progression of dementia can vary, the disease usually has three stages. Understanding these stages can help you plan for potential challenges.

1

Mild or early-stage dementia

You might have some problems with memory but need minimal support.



2

Moderate or middle-stage dementia

You need support to help you function at home and in the community. Difficulties are now more obvious and have a greater impact on your abilities and dependency.



3

Severe or late-stage dementia

You are likely to be fully dependent on the care and supervision of others.

Unfortunately, dementia isn't reversible.

However, you may be able to maintain your independence and live well for many years. At each stage, there will be ways to make life better.