

FROM : DEMENTIA SA

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DEMENTIA NEEDS ACTION NOW!

There is no antidote for ageing. As we are born, so we are guaranteed that until we reach the full stop of our lives, we are going to age. The question is how to prepare for it. We all hope to travel life's journeys with as few stumbling blocks as possible. Inevitably and often unavoidably things happen along the way.

Due to various factors, life expectancy today is a lot longer than in previous decade. This can be attributed to better health care and a general awareness of living a better lifestyle, thus incorporating good nutrition, exercise and the management of stress. We all know that our lives are composed of various aspects, namely, physical, emotional, financial, cognitive and mental health. We all yearn towards searching for the panacea to provide us with a **holistic quality of health**.

Without education and awareness we fail ourselves and society at large in believing the myth that failing memory and cognitive skills are a result of old age. There is little further from the truth! Dementia **is by no means a normal part of the ageing process**.

Age is certainly undeniably an important risk factor, but it is imperative that it be known that it is not the only one. There are a number of other medical conditions which are treatable and that can also result in memory impairment. It is thus essential to have memory difficulties carefully checked out especially if one's daily life is being affected and resulting in anxiety.

Statistics show that dementia affects one in 20 people over the age of 65 and one in 5 people over the age of 80. This means that 20% of people over the age of 80 develop dementia which by implication means that 80% do not. There are however diagnosed and documented cases of early – onset dementia before the age of 65.

Because it has been reported that a new case of dementia arises every **seventy seconds** in the developed world it is estimated that by 2040 the amount of people with dementia will have risen from 24, 3 million people who are currently affected to 81, 1 million. One in three people with HIV/Aids in SA will develop HIV/Aids dementia complex - are these not staggering statistics!

In South Africa it is thus clearly evident that the need for community-based services, welfare and support for people with dementia as well as their carers is exceedingly large. This will no doubt place pressure upon our local government to dramatically increase such services.

“The message is crystal clear that we need to be prepared. The climate for change and action needs to be hastily created in terms of awareness and education to policymakers, governments, medical aids, health care professionals, home based carers and society at large. We need to encourage the change of social conscience by including the aged and more specifically, those with dementia” says Karen Borochowitz, Executive Director of dementia SA.

Well, what exactly is dementia? Too often it is a term that is bandied about without a clear understanding and thus it has developed a stigma that needs to be repudiated.

Dementia is a disease that affects the brain. It affects **memory, thinking and actions** – sometimes simultaneously. It is a progressive disease which affects the person with dementia gradually and increasingly. There are many kinds of dementia, the most common being Alzheimer’s disease (about 50-60%) as well as Vascular dementia.

Alzheimer’s disease damages individual brain cells one by one so that the brain can no longer continue to function as it has been used to.

With Vascular dementia, there are problems with blood supply to the brain cells. The most common type of Vascular dementia is Multi-Infarct dementia. Tiny strokes (infarcts) damage small areas of the brain resulting in a probable change as to how the person is coping and functioning. Sometimes the effect causes the sufferer to feel unwell and temporarily more confused. Sometimes the person does not notice the effect.

All other medical conditions have to be excluded to ensure that the memory loss is not attributed to a treatable medical condition. The observations of family members and carers are essential when assessing if there really is a memory problem which causes difficulty with familiar activities. If you are worried about your memory or have reason to believe that someone you know may be struggling with daily activities (personal hygiene, confusion, misplacing of things etc.) it is thus important to be checked out by a doctor or a specialist (Neurologist, Psychiatrist or Geriatrician).

Every person is unique and affected differently by the disease.

The 10 most common early symptoms of dementia (including Alzheimer's disease) include:

1. Memory Loss
2. Difficulty in performing familiar tasks
3. Problems with language
4. Disorientation of time and place
5. Impaired Judgement
6. Problems keeping track of things
7. Misplacing things
8. Changes in mood or behaviour
9. Personality changes
10. Loss of Initiative

How dementia can impact upon family life

Upon confirmed diagnosis of dementia, the challenge of coming to terms with the expected changes needs to be faced, dealt with and understood. Being prepared assists in being able to equip oneself with a plan in order to be able to cope. It is comforting to know that there is help and support at hand and that the changes will occur gradually. However one does need time to adjust one's lifestyle with any difficult challenge at hand.

What the family and friends can expect

There are various traits that may become apparent to people who spend time with the person who has been diagnosed. In order to know what to expect one needs to have the insight and understanding by being informed.

The natural progression of the disease follows the pattern of initially having trouble in remembering words, finishing thoughts, following directions or remembering names or information. Often irritability, frustration and confusion are noticeable. Changes in personality and behaviour become apparent. As time goes on problems will increasingly manifest with thinking and remembering, reading and writing will also become more difficult. It will also become harder for the person to make decisions and take in new information.

Later, everyday mundane activities will become really difficult, for example, remembering to keep appointments, shopping lists, coping with money, cooking and general caring for themselves. This then leads to the person needing assistance with basic activities such as washing, dressing and eating.

These changes are very gradual and the person may stay the same for months or even years. Each person with dementia is different and thus it is difficult to predict when changes will occur and at what pace. Although it may become difficult to continue some of their usual activities, people with dementia may discover other activities to enjoy, for example, sorting out family photographs, gardening or listening to music.

The all important factor not to lose sight of, is to maintain respect and dignity for the person with the disease.