

Disorders of Aging- December 2, 2015

Cognitive Disorders-

Delirium=

- disturbance in attn. or awareness
- develops over short period of time
- additional disturbance in cognition, i.e. visuospatial ability, memory deficit
- *appears to be direct consequence of something going on in your body (i.e. substance intoxication, w/d symptoms, typically a clear cause that can be fixed unlike alz/dementia)
- specifiers= substance intox or w/d, acute or persistent, hyper (tense, agitated, all over the place) or hypoactive (withdrawn, tired)
- prevalence = 14-24% among hospitalized individuals, 1-2% in community and 15% among 85 yr+

Alzheimers=

- major or mild neurocog d/o due to alzheimers: insidious or onset and gradual progression in one or more cognitive domains
- *can only be diagnosed post-mortem → due to fact that we have to study brain structure after death to see physical/neuro signs of alz
- for major neurocog= genetic history, decline in memory, progressive decline in cognition w/o plateau, NO mixed etiology
- probable alzheimers = genetic history
- possible alzheimers= don't know genetic history/no evidence of genetic story, but have symptoms for alzheimers
- *alz is always dementia, but dementia is not always alz → dementia is like an umbrella for these specific neurocog disorders
- alz accounts for 50-70% dementia cases, 5.1 mill americans, early onset alz is anywhere from 55-60 yrs old upon diagnosis (tends to progress more quickly than a later diagnosis), risk increases over 40% after age 84
- *tend to have severe mood swings/emotions due to fact that frontal cortex matter diminishes over time
- Stages of Alzheimers=
 - 1= no impairment (can still have Dx b/c of post mortem diagnosis)
 - 2= mild cog impairment, i.e. forgetful, cant think of your name, misplace everyday objects
 - 3= mild cog decline noticed by family (cant remember new names or info, decline in ability to plan/organize, loss of valuable objects, trouble recalling words or names)
 - 4= mild cog decline, decreased knowledge of recent events, inability to do math/complex tasks, at this stage might need caretaker or res facility, reduced memory of personal history (i.e. where they went to college, etc), may become subdued or withdrawn (due to both neuro and shame/embarrassment part)

5= mod severe cog decline, cant recall own address/phone number, need help picking out clothes, retain some info about themselves, still can recognize people close to them, usually don't require any help eating or toilet but might need assistance in things like paying bills, etc.

6= severe cog decline, unaware of recent experiences, unaware of surroundings, occasionally forget spouse's name but can distinguish familiar and unfamiliar, huge disruption in sleep cycle, significant personality changes, hallucinations, wander and become lost, common for res facilities at this time

7= severe cog decline, need help doing basic everyday functions (i.e. going to bathroom), have hard time holding head up or smiling (point where brain/neuro impairment becomes apparent), swallowing is impaired, lose ability to walk or sit w/o assistance

*For stages, think **DNEPW** (displacing objects, names, events, personal, wander/severe)