Alzheimer’s & Your Health

The majority of people with the disease are diagnosed after the age of 65.

Alzheimer’s, also called “early onset Alzheimer’s disease,” occur before a person turns 65. This form, however, affects less than 5 percent of those with Alzheimer’s.

Progress of Alzheimer’s Disease

Alzheimer's is progressive, meaning its symptoms get worse, and its victims become more disabled over time. In the beginning, people with the disease may have problems with simple memory-related tasks, such as writing checks or taking the bus. By the end, they “forget” how to use the toilet, eat or even walk.

Memory loss, however, is just one symptom. People with Alzheimer’s often show significant personality changes or act inappropriately as the disease progresses. They may have mood changes, including depression. In the middle stages of the disease, they may become agitated and/or aggressive.

Diagnosing Alzheimer’s Disease

The Alzheimer’s Association lists 10 warning signs of Alzheimer’s disease:
1. Memory loss that disrupts daily life
2. Challenges in planning or solving problems
3. Difficulty completing familiar tasks at home, at work or at leisure
4. Confusion with time or place
5. Trouble understanding visual images and spatial relationships
6. New problems with words in speaking or writing
7. Misplacing things and losing the ability to retrace steps
8. Decreased or poor judgment
9. Withdrawal from work or social activities
10. Changes in mood and personality

Questions to Ask Your Health Care Professional

1. Do you treat people with Alzheimer’s disease? If not, can you recommend a specialist?
2. Which tests will be performed and what can I, or the person I’m worried about, expect to experience during those tests?
3. How quickly will the test results be available?
4. How can you be sure the problems I’m experiencing are really Alzheimer’s and not just part of the normal aging process?
5. What behavioral and mental changes can I expect over time? How quickly will these changes occur?
6. What treatments are available for these symptoms? What side effects are likely?
7. Do you suggest changes in immediate surroundings or activities that could alleviate some of the symptoms?
8. Do you recommend any alternative treatments, such as omega-3 supplements or coconut oil?
9. Are there any clinical trials you recommend?
10. Is there a caregiver support group you recommend, either locally or online?

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There is no single test to diagnose Alzheimer’s, but it can now be diagnosed with up to 90 percent accuracy. Health care professionals use a combination of medical history, lab tests, physical exam, brain scans and neuro-psychological tests that gauge memory, attention, language skills and problem-solving abilities.

It’s important to get a proper diagnosis so you can rule out other forms of dementia that can be treated. More than 150 medical conditions, some temporary, can cause dementia. If you are diagnosed with Alzheimer’s, you can get help managing symptoms and planning for the future.

To ensure the right diagnosis, seek help at centers devoted to memory problems or find a physician who specializes in age-related disorders.

**Treating Alzheimer’s Disease**

The complexity of Alzheimer’s makes it difficult to delay, prevent, cure or reverse the disease. But there are treatments that can help people maintain their mental function and temporarily stabilize or slow progression of the disease.

Four drugs are approved by the U.S. Food and Drug Administration to treat Alzheimer’s. Donepezil (Aricept), rivastigmine (Exelon) and galantamine ( Razadyne) are used to treat mild to moderate Alzheimer’s. They are known as cholinesterase inhibitors and work by increasing the amount of the neurotransmitter acetylcholine in the brain. Acetylcholine helps brain cells communicate.

Donepezil, along with memantine (Namenda), may be used to treat moderate to severe Alzheimer’s. Memantine works on a different neurotransmitter called glutamate. Because all of the drugs work in similar ways, switching from one to another usually doesn’t provide significantly different results, but some people may respond better to one drug than another.

None of the drugs change the underlying disease process, though they can help maintain thinking and memory skills and help with speech or behavioral problems for a while. Other drugs may be used to treat behavioral problems, such as sleeplessness, agitation, depression or anxiety.

Research continues to look for a way to prevent the disease or stop its progress. In clinical trials, scientists are looking at interventions ranging from immunization therapy to cognitive training, physical activity, antioxidants and the effects of cardiovascular and diabetes treatments.

**Alzheimer’s Caregivers**

More than 15 million Americans provide an estimated 17.5 billion hours of unpaid care to people with Alzheimer’s and other dementia, a service valued at more than $216 billion. The majority (62 percent) of these caregivers are women. Nearly one-fourth of the caregivers are aged 65 or older and nearly a third have children under 18 living with them—the “sandwich” generation.

Studies find that middle-aged and older women who provide care for an ill or disabled spouse are six times as likely to suffer depressive or anxious symptoms as those who have no care-giving responsibilities.

Other possible health effects include:
- Weakened immune system
- Higher risk of cardiovascular disease
- Higher risk of high blood pressure

Women caregivers also have a risk of dying earlier, studies find. That may be related to the effects of stress on their health, the fact that they don’t take care of their own health or because the caregiving may worsen an existing illness.

There are ways to manage the stress of caregiving. These include joining support groups, getting regular physical activity, structuring daily routines, accepting help from friends and family and looking for respite-care resources in your community.

Additionally, simply learning to accept your own and your loved one’s imperfections can help you cope. For instance, accept that your husband may never be able to drive again and rejoice that he can still share a meal with you.

**Resources**

- Alzheimer’s Disease Education and Referral (ADEAR) Center 1-800-438-4380 www.alz.org
- Alzheimer’s Association 1-800-272-3900 www.alz.org
- Alzheimer’s Association 1-800-272-3900 www.alz.org
- Alzheimer’s Association 1-866-232-8484 www.alzfdn.org
- Alzheimer’s Disease Education and Referral 1-800-445-8106 www.caregiver.org

**Sources Consulted**


