

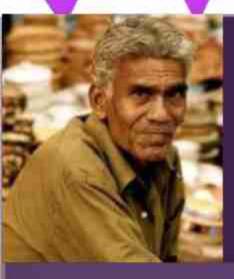






Understanding

Izheimers



#knowdementia #knowAlzheimer's





CENTRAL HEALTH EDUCATION BUREAU
DIRECTORATE GENERAL OF HEALTH SERVICES
MINISTRY OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF INDIA





Objective

The purpose of this booklet is to raise awareness among general public about the Alzheimer's disease. This booklet will help in identifying signs & symptoms at early stage and guide family/ care givers/friends/relatives of the people with Alzheimer's disease.

This booklet will help to learn about Alzheimer's Disease:

- 1. What is Alzheimer's disease?
- 2. What are the signs and symptoms of the disease?
- 3. Difference between normal aging and Alzheimer's disease?
- 4. When to see a Doctor?
- 5. How is Alzheimer's disease treated?
- 6. How to care for a person with Alzheimer's disease?



Someone in the world develops

Dementia

The most common cause for impaired ability to remember, think, or make decisions, that interferes with everyday activities is due to Alzheimer's Disease



2 out of 3 people globally have little or no understanding of

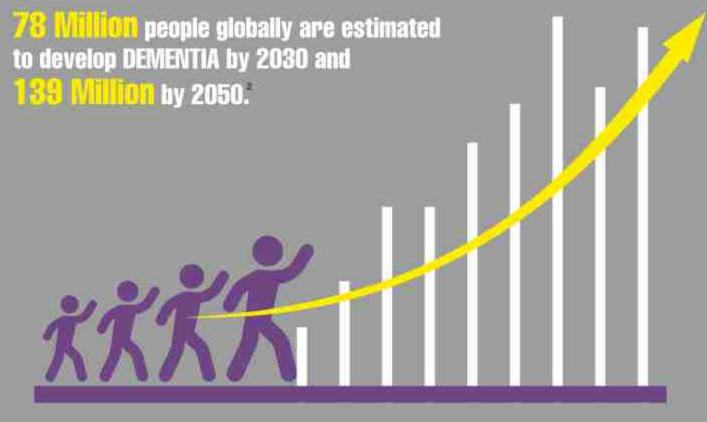
Dementia



The prevalence of Dementia in India is 2.7% and it affects nearly 20% of Indian aged 80 years or more.

Currently more than 55 Million people live with dementia worldwide and there are nearly 10 Million new cases every year.

Of these, 60 to 70% have Alzheimer's Disease.



Seek Help Take Control Plan Ahead

1 National Health Fortal (minusevan)

(Attps://www.hmit.gov.IIV/displies-hardiplops-st/dentertio)

(Attack) www.min.gov.lh/diseases harrisopp.av.dementa)

2. World Realth Organisation - Demands (Attack) www.who.int/let/nosroom/fact sheets/octal/demands)

What is Alzheimer's disease?

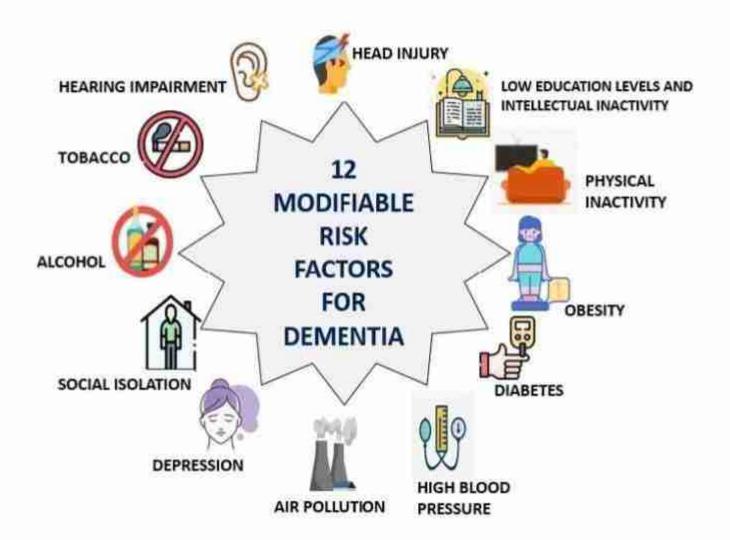
- Alzheimer's disease is a progressive neurologic disorder that causes the brain to shrink (atrophy) and brain cells to die.
- Alzheimer's disease is the most common cause of dementia. Dementia is continuous decline in thinking, behavioral and social skills that affects a person's ability to function independently.
- The causes of the Alzheimer's disease are multifactoral.
- Alzheimer's disease usually develops after the age of 60 years. However, it can develop before 60 years, when it is called early onset dementia.
- Alzheimer's disease often starts slowly. In fact, some people don't realize.
 They blame their forgetfulness on old age. However, overtime, their memory problems get more serious.
- Persons with Alzheimer's disease have difficulty with memory, language (speaking, naming, word finding and comprehending others), attention, concentration, planning, decision making and social relatedness. These difficulties impact their day to day activities.
- 7. Day to day activities can be classified as Activities of Daily Living (ADL), (simple activities like eating, bathing, dressing etc.) and Instrumental Activities of Daily Living (IADL) like preparation of meals, housekeeping chores, travel, shopping, running errands, managing finances, using telephone and managing medications. In early stages, IADL are impacted while in advanced stages, even ADLs cannot be performed.
- Patients may experience sleep disturbance, impaired appetite, sadness, anxiety, agitation and may become aggressive at times.
- As the illness gets worse, most people with Alzheimer's disease need someone to take care of all their needs, including dressing, eating and bathing.
- Some people with Alzheimer's disease live at home with caregiver & others with the disease live in assisted living or a nursing home.
- Proper care, medications with counseling techniques like Cognitive Stimulation Therapy (CST), people with Alzheimer's can lead a meaningful and comfortable life.

Activities of Daily Living (ADL) & Instrumental Activities of Daily Living (IADL)

Activities of Daily Living (ADL)	Instrumental Activities of Daily Living (IADL)		
Bathing- Bathes self completely	Ability to use Telephone		
Dressing- Gets clothes from closest and drawers	Takes care of all shopping needs independently		
Toileting- Goes toilet without help Transferring- Moves in and out of	Ability to plan, prepare and serve adequate meals independently		
bed or chair unassisted	Ability to maintain house alone		
Continence- Exercises complete self-control over urination and defecation	Ability to do personal laundry completely		
Feeding- Gets food from plate into mouth without help	Travels independently on public transport or drives own car		
	Responsibility for own medication in correct doses at correct time		
	Ability to handle finances		
Source: Katz ADL	Source: THE LAWTON IADL Scale		

Risk factors of Alzheimer's disease

Modifiable Risk Factors



Non Modifiable Risk Factors

ETHNICITY

AGE

GENDER

FAMILY HISTORY

Preventing or treating the above modifiable risk factors can reduce the risk of Dementia by 40%

Differences between Alzheimer's disease and normal aging

Use the chart below to understand the differences between Alzheimer's disease and the normal signs of aging

Normal Aging	Alzheimer's Disease	
Losing things from time to time	Unable to find things often	
Sometimes forgetting which word to use	Trouble having a conversation	
Forgetting which day it is and remembering it later	Losing track of the date or time of year	
Making a wrong decision once in a while	Making poor judgments & decisions often	
Missing a monthly payment	Problems in taking care of monthly bills	
The impairments does not impact day to day functioning	The impairments impact day to day functioning significantly	

What are the early and later presentation of Alzheimer's disease?

It's important to know the early and later presentation of Alzheimer's disease to get help right away. Some are listed here:

Early presentation

- Finding it hard to remember things
- Asking the same questions over and over
- Having trouble in calculating, shopping for daily needs or solving simple math problems
- · Forgetting routes and getting lost even in the neighbourhood
- Losing things or putting them in odd places
- Difficulty in doing familiar tasks
- Poor judgement and impaired decision making
- Withdrawal from the work and social activities

Later presentation

- · Forgetting how to brush or comb
- Being confused about time, people and places
- For getting the names of common things such as a table, glasses, house/street or of familiar persons like family members, maids and support staff etc.
- Inability to follow through a conversation
- · Wandering away from home
- Inability to maintain self-care and hygiene





08

07

Changes in mood and behaviour Misplacin things

Difficulty

performing familiar tasks

03



Problems with Language



NIAM\NC TOMS & GNS



Poor or decreased judgement



g



Problems keeping track of things



When should you see your doctor?

If you or someone in your family thinks your forgetfulness is getting in the way of your normal routine, it's time to see your doctor.

Visiting the doctor when you first start having memory problems can help in early diagnosis of forgetfulness.

Your doctor or a specialist may do the following things to find out if you have Alzheimer's disease:

- Give you a medical check-up
- Ask questions about your family's health
- Ask how well you can do every day things like driving, shopping for food,
 & paying bills
- Talk with someone in your family about your memory problems
- Test your memory, problem-solving, counting, and language skills and ask for blood and urine investigations & advice a city scan/MRI brain

Early diagnosis of Alzheimer's disease gives you and your family members more time to plan for treatment and care.



How is Alzheimer's Disease treated?

There's no cure for Alzheimer's disease, but there are treatments that may change disease progression.

Medicines and other forms of treatment may reduce symptoms and make the disease more manageable.

Understanding available options can help individuals living with the disease and their caregivers to cope with symptoms and improve quality of life.

1. Medicines

A number of medicines may be prescribed for Alzheimer's disease to help address various symptoms and signs. Some commonly used medicines are Donepezil, Galantamine, Rivastigmine and Memantine.

Depending on the nature of behavioral and psychological symptoms, low dose psychotropic medications like anti-depressants, anxiolytics, antipsychotics and sedatives may be prescribed by a trained doctor for brief durations as required. These agents help to calm down the patient, reduce caregiver distress and help improve quality of life of both the patient and caregivers.

A specialist may prescribe risperidone or haloperidol and other antipsychotic medicines, for those showing persistent aggression or extreme distress.

Antidepressants may sometimes be given if depression is suspected as an underlying cause of anxiety.

Therapies and activities

Medicines for Alzheimer's disease symptoms are only one part of the care for the person with dementia. Other treatments, activities and support – for the carer, too – are just as important in helping people live well with dementia.

Cognitive stimulation therapy (Cognitive Stimulation Therapy (cstdementia.com)

Cognitive stimulation therapy (CST) is evidence based therapy for Dementia. It involves taking part in group activities and exercises designed to improve memory and problem-solving skills. The exercises include physical games, sound, remembering childhood events, food items, current affairs, reminiscing faces / scenes, word association exercises, creative exercises, categorising objects, orientation, exercise on using money, games involving numbers and words.

Cognitive rehabilitation

This technique involves working with a trained professional, such as an occupational therapist, and a relative or friend to achieve a personal goal, such as re-learning to use a mobile phone or other everyday tasks. Cognitive rehabilitation works by getting you to use the parts of your brain that are working to help the parts that are not.

Reminiscence and life story work

Reminiscence work involves talking about things and events from your past by family care givers/friends. It usually involves using props such as photos, favourite possessions or music. Life story work involves a compilation of photos, notes and keepsakes from your childhood to the present day. It can be either a physical book or a digital version.

These approaches are sometimes combined. Evidence shows that can improve mood and well being.

Lifestyle and home remedies

Exercise - like daily walks, chair exercises and yoga

Nutrition-favourite healthy foods that are easy to eat, water, healthy beverages and high calorie shakes with protein supplementation especially when eating becomes restricted.

Social engagement and activities- listening to music, reading or listening to books, gardening or crafts, planned activities with children.

If you suspect- you/someone you know has Alzheimer's disease, Don't wait.

1. SEEK HELP from

- Medical Professionals
- · Association working on the issue
- Caregivers/friends/relatives

PLAN AHEAD

- · Proper Routine food, exercise, medicine, counselling etc.
- Modification in house-bed, corners, stairs, washroom
- Help in case of emergency (ICE) numbers- doctor, caregivers, friends, relatives etc.

TAKE CONTROL

- · Scheduled meal time, activities etc.
- Ensure daily out door, social activities, interaction etc.
- Regular medical/psychological checkups

4. Use wrist band or ID card with following information

- . Name of the Patient
- · Contact/phone numbers
- Address of the home
- · Any identity proof

Use of assistive devices



6. Ensure patient makes and registers his/her will when he/she is still aware of their assets and responsibilities. The patient may also decide to award Power of Attorney and nominate representative to take decisions on his/her behalf as per Mental Health Care Act 2017.

(MHCA 2017 CHAPTER IV: NOMINATED REPRESENTATIVE)

The patient can also utilize the Advanced Directive provision of MHCA 2017.

Take exira care for someone who always cared for you;



Simultaneously take care of yourself too

Coping as a caregiver

Caregivers could be family members/relatives/professional/paid caregiver

If you are caring for someone with Alzheimer's disease, you may have many different feelings. Sometimes, taking care of the person with Alzheimer's makes you feel good because you are providing love and comfort. At other times, it can be overwhelming. You may see changes in the person cared for that are hard to understand and cope with.

Each day brings new challenges. You may find yourself dealing with problem behavior, so just try to get through the day. You may not even realize how much you have taken on because the changes can happen slowly overtime.

Take care of yourself

Taking care of your self is one of the most important things you can do as a caregiver. You could:

Ask friends and family to help out to

- Do things you enjoy and spend time with friends
- Take short breaks
- · Eat healthy foods and get exercise

Taking these actions can bring you some relief. It also may help keep you from getting ill or depressed.

Family and professional Caregivers

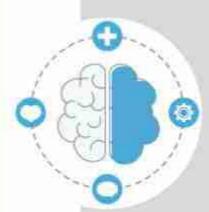
Identify feeling of stress, depressive symptoms, anxiety symptoms, sleep issue and impaired appetite, If these persist for more than 2 weeks, seek help from your doctors.

Prevention of Alzheimer's disease



Regular Exercise-important to warm-up before exercising and to cool down after exercising

- · Aerobic activities: brisk walking, water aerobics, dancing, garden work, bicycling and yega.
- Muscle-strengthening activities: use of exercise bands, hand-held weights or weight machines, body weight exercises (e.g. push-ups, chin-ups).
- . Balance: standing on one fcot, walking heel-to toe, toe raises.
- . Stretching exercises to ensure flexibility and suppleness like Yoga Asans



Practice Mental Activities

- Continue to do all activities that you can do for as long as you can like managing finances, taxes, household chores; craft activities like knitting, sewing, crochet etc.
- . Daily meditation and mindfulness
- Toy puzzles.
- . Play cards, carom, board games
- . Build vocabulary.
- . Dance and music (singing and listening)
- · Language skill



Healthy Diet

- *Take vegetables, fruits, whole grains, low-fat dairy products and lean protein foods
- Limit foods with high saturated fat and cholesterol. Some fat is essential for health but not all fats are equal
- · Limit foods with high sodium and use less salt.
- . Ensure food diversity
- . Supplements as advised by the doctor



Avoiding risk factor

- Regular checkup for early identification of High Blood Pressure and Sugar
- Timely Aids/Applitances for hearing and visual impairment as per doctor advice
- · Avoid Smoking and alcohol



Checklist

If you or someone you care about is experiencing any of the below 10 warning signs please consult a nueorophysician/ psychiatrist/ Geriatrician to find the cause and treat the illness.

		Yes	No
1.	Memory loss that disrupt daily life		
2.	Challenges in planning or solving problems		
3.	Difficulty completing the familiar tasks		
4.	Confusion with time and place		
5.	Trouble understanding visual images and		
	spatial relationship		
6.	Language difficulties like for naming, word finding		
	or comprehending		
7.	Misplacing things and losing the ability to retrace steps		
8.	Impaired planning, decision making or poor judgement		
9.	Changes in the mood and the personality		
10.	Withdrawal from work or social activities		



Dr. Gowri Nambiar Sengupta DDG (PH) & Director (CHEB, New Delhi)



Prof. Dr. Atul Goel DGHS (MoHFW, New Delbi)



Dr. G. Kausalya Director RHTC, (Najalgarh, New Delhi)



Dr. (Prof.) Jugal Kishore HoD CM, (SJH & VMMC, New Delhi)

Contributors



Prof. (Dr.) B.K. Bajaj HoD Deptt, of Neurology (ABVIMS & Dr. RML Hospital, New Delhi)



Prof. (Dr.) Mina Chandra
Psychiatry (ABVIMS &
Dr. RML Hospital, New Delhi)



Dr. Mujtaba Waris MD Geriatric Medicine (AIIMS New Delhi)



Sh.Shashi Kant Yadav Consultant-Social Science (CHEB, New Delhi)



Dr. Pooja Garg Resident, MD (CHA), (NIHFW, New Delhi)



Dr. Roopesh Gupta
Resident, MD (CHA),
(NIHEW, New Dolln)



Dr. Shyam Sunder Durgam Resident, MD (CHA). (NIHFW, New Delhi)



Memory loss is not normal aging. It may be Alzheimer's disease.

NATIONAL - SENIOR HELPLINE IS TOLL FREE AND AVAILABLE AT: (14567)
NATIONAL PSYCHO-SOCIAL TOLL FREE HELPLINE: (080-46110007)

#knowdementia #knowAlzheimer's



CENTRAL HEALTH EDUCATION BUREAU 5, KOTLA ROAD, NEW DELHI

