

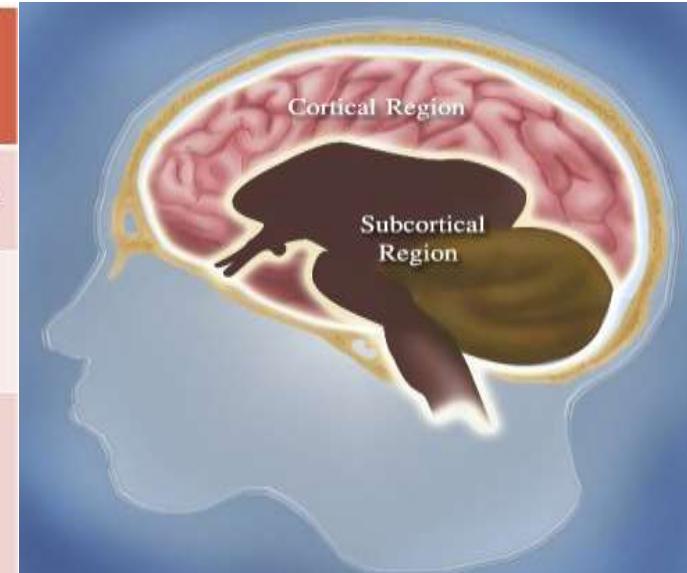
Dementia

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Types of dementia

- Reversible Vs irreversible
- Cortical Vs sub-cortical
- Degenerative Vs Non-degenerative

| CORTICAL | SUBCORTICAL | MIXED |
|-------------------------|-------------------------------|--------------------|
| Alzheimer's | Parkinson's | Vascular Dementia |
| Frontotemporal Dementia | Huntington's disease | Lewy body dementia |
| CJD | Normal pressure hydrocephalus | Neurosyphilis |



Cortical Vs Sub-cortical dementia

| Feature | CORTICAL | SUBCORTICAL |
|-------------------------|----------|-------------|
| Memory Impairment | Present | Minimal |
| Language deficits | Present | Absent |
| Speech | Normal | Dysarthria |
| Apraxia / Agnosia | Present | Absent |
| Psychomotor retardation | Absent | Present |
| Movement Disorder | Absent | Present |
| Gait / Coordination | Normal | Impaired |
| Apathy / Inertia | - | Present |
| Depression | - | + |

Clinical subtypes of dementia

- Alzheimer's disease
- Vascular dementia
- Parkinson's disease
- Pick's disease
- Lewy body dementia
- CJD
- Dementia pugilistica



Degenerative Dementias

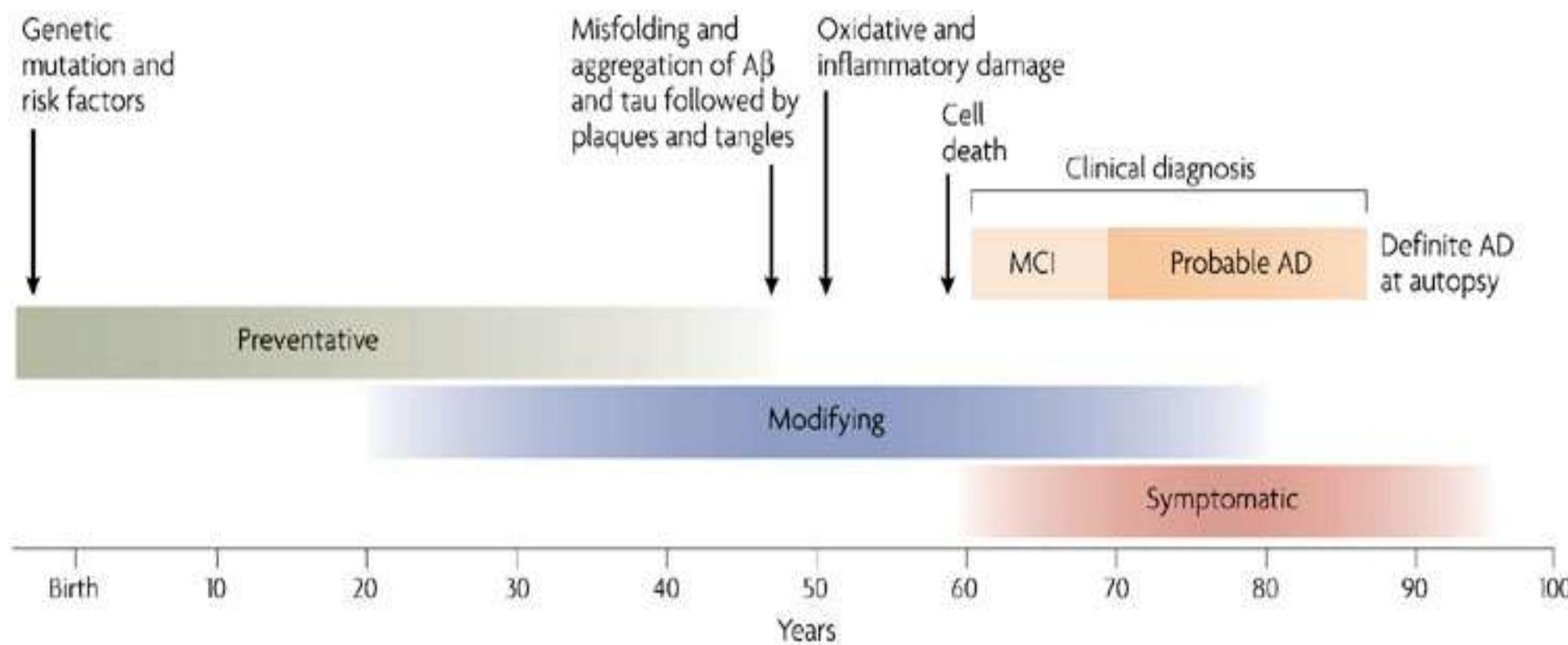
| Disorder | Pathology |
|--|---------------------------|
| Alzheimer's disease | Amyloid/tau pathology |
| Dementia with Lewy bodies | Alpha-synuclein pathology |
| Parkinson's dementia | |
| Multisystem atrophy | |
| Frontotemporal dementia | Tau pathology |
| Progressive supranuclear palsy | |
| Corticobasilar degeneration | |
| Huntington's disease | Trinucleotide repeat |
| Spinocerebellar ataxia | |
| Wilson's disease (copper) | Toxic/metabolic |
| Hallervorden–Spatz disease (iron) | |
| Metachromatic leukodystrophy | Leukodystrophy |
| Creutzfeldt–Jakob disease | Prion-related |
| Variant Creutzfeldt–Jakob disease (bovine spongiform encephalopathy) | dementias |
| Gerstmann–Sträussler–Scheinker disease | |
| Fatal familial insomnia (thalamic dementia) | |

Non-Degenerative

Dementias

| Broad category | Examples |
|--------------------------|---|
| Vascular | MID, Small vessel disease etc |
| Infectious | HIV, Syphilis, Prog. Multifocal Leucoencephalopathy, TB |
| Demyelinating | MS |
| Endocrine | Hypothyroidism, Hypo/Hyperparathyroidism, Cushing's Syn |
| Brain injury | TBI, HIE, Post-encephalitis |
| Vitamin deficiency | B12, B1, Folate, Niacin |
| Vasculitis /vasculitides | SLE, Sjogren's disease |
| Toxicities | Heavy metal, Alcohol, Pesticides |
| Organ failures | Hepatic/renal/pulmonary insufficiency |
| Others | NPH, Porphyria, Pseudodementia |

Course of Dementia

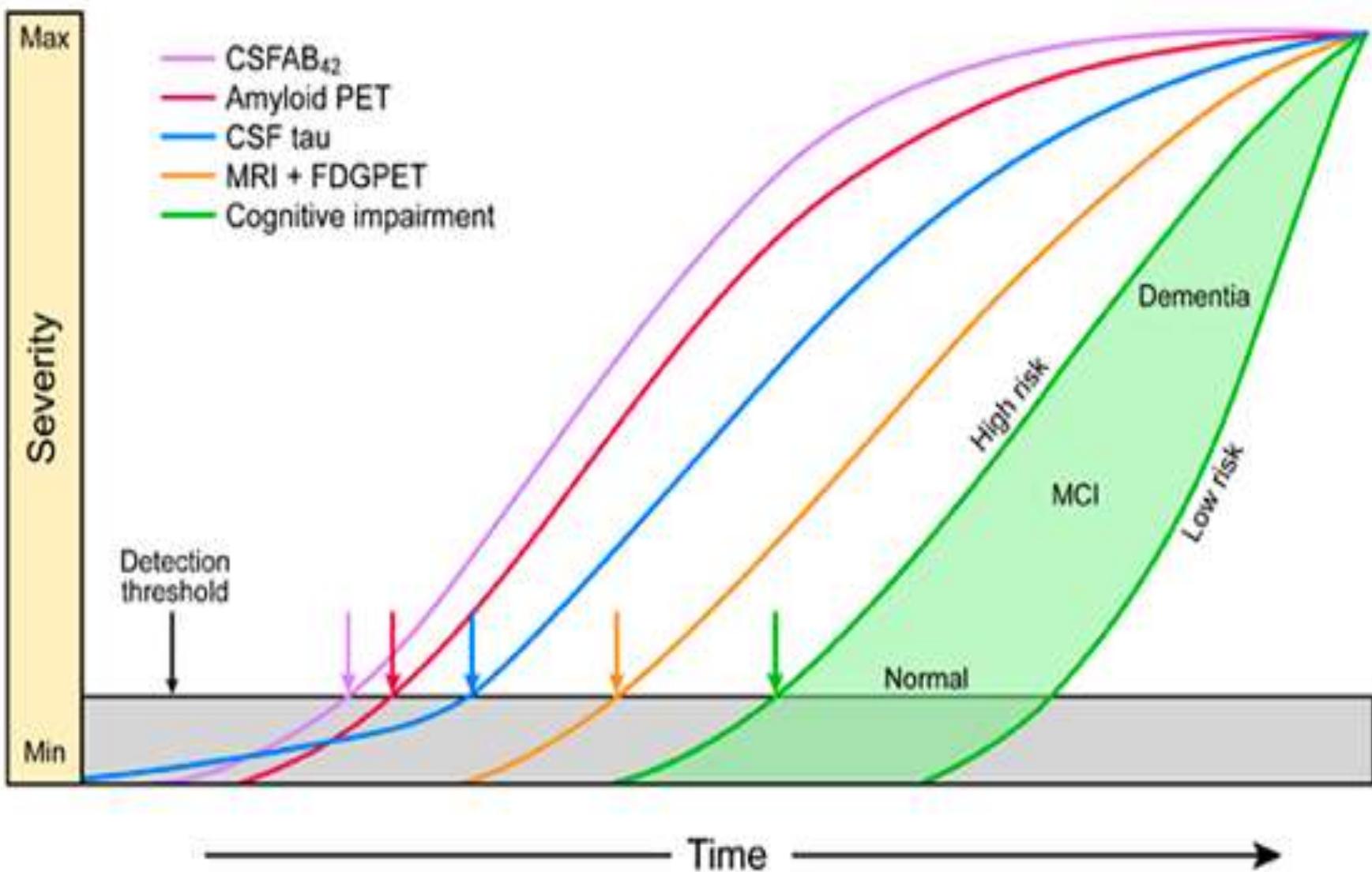


Degenerative Dementias

Biological Markers

| Disorder | Pathology |
|---|-------------------------|
| Alzheimer's disease | Aβ pathology |
| Dementia with Lewy bodies | α-synuclein pathology |
| Parkinson's disease | α-synuclein pathology |
| Multisystemic degeneration | Tau pathology |
| Friedreich's ataxia | Sugar palsy |
| Huntington's disease | Trinucleotide repeat |
| Spinocerebellar ataxia | Trinucleotide repeat |
| Wilson's disease (copper) | Toxic/metabolic |
| Hallervorden–Spatz disease (iron) | Toxic/metabolic |
| Metachromatic leukodystrophy | Leukodystrophy |
| Creutzfeldt–Jakob disease | Prion-related dementias |
| Variant Creutzfeldt–Jakob disease (bovine spongiform encephalopathy) | Prion-related dementias |
| Gerstmann–Sträussler–Scheinker disease | Prion-related dementias |
| Fatal familial insomnia (thalamic dementia) | Prion-related dementias |

Biomarkers



Biomarkers

At least one neuronal
injury biomarker positive

MCI τ +

All biomarkers negative

MCI $\text{Non-}\tau$

β -amyloid 1-42 and one
marker of neuronal injury
positive

MCI $\beta+\tau$

All biomarkers positive

MCI All+

Only β -amyloid 1-42
positive

MCI $\beta+$

Risk for progression to dementia due to AD

Assessment of Cognition in Dementia

- MMSE (Folstein et al. 1975)
- Cognitive Ability Screening Instrument (CASI)
- Dementia rating scale (DRS)
- Animal Naming task
- Clock drawing task

MMSE

- High false positive
- Score of 23 or less: Impairment
- Now--- Age specific norms developed
- Not specific of Alz. Disease
- In AD;
 - Delayed recall, Copying pentagon – IMPAIRED
- Not a sensitive tool for executive and psychomotor changes
- Less useful in FTD, Subcortical dementia

- BPSD

Management of dementia

Activities of daily living

Behavioral control

Cognitive remediation

Drugs – Antidementia drugs

Environmental measures



Pro-cognitive Medications

- ACEIs
- Antiglutamatergic agents
- Others



Thank You

