Dementia Symptoms, Types, and Causes

Suspecting you or a loved one has dementia can be extremely distressing. But the more you understand about the condition, the more you can do to improve the outcome.

What is dementia?

Dementia is a collection of symptoms including memory loss, personality change, and impaired intellectual functions that result from disease or trauma to the brain. These changes are not part of normal aging and are severe enough to impact daily living, independence, and relationships. While Alzheimer’s disease is the most common type of dementia, there are also many other forms, including vascular and mixed dementia.

With dementia, there will likely be noticeable decline in communication, learning, remembering, and problem solving. These changes may occur quickly or very slowly over time. The progression and outcome vary, but are largely determined by the type of dementia and which area of the brain is affected.

Facing up to the possibility of dementia inevitably shifts your perceptions, relationships, and priorities. But experiencing symptoms doesn’t have to mean the end of your normal life. Certain types of dementia can be slowed or even reversed if caught in time. The first step is to understand what distinguishes normal memory loss from dementia symptoms, and how to
identify the different types of dementia. Whatever your diagnosis, though, there can be plenty of things you can do to help slow symptoms and continue to enjoy a full and rewarding life.

**Signs and symptoms of dementia**

As we age, many of us experience lapses in memory. It can be worrying and confusing to realize that something you once took for granted isn’t working as well as it used to. But learning to differentiate the signs of dementia from normal aging can help to either set your mind at rest or encourage you to begin taking steps to slow or reverse the condition.

Common signs and symptoms include:

- Memory loss
- Impaired judgement
- Difficulties with abstract thinking
- Faulty reasoning
- Inappropriate behavior

- Loss of communication skills
- Disorientation to time and place
- Gait, motor, and balance problems
- Neglect of personal care and safety
- Hallucinations, paranoia, agitation

**Someone with dementia symptoms may:**

- repeatedly ask the same questions
- become lost or disoriented in familiar places
- be unable to follow directions
- be disoriented about the date or time of day
- not recognize or be confused about familiar people
- have difficulty with routine tasks such as paying the bills
- neglect personal safety, hygiene, and nutrition
Normal memory changes vs. dementia symptoms

It’s something we all have to face but the inevitable changes of aging can still be both humbling and surprising. But while experiencing wrinkling skin, fading hair color, and mild, short-term memory loss is common as we age, severe and rapid memory loss is definitely NOT a part of normal aging. In fact, many people are able to preserve their brainpower as they get older by staying mentally and physically active and making other healthy lifestyle choices.

Normal memory changes associated with aging may include:

**Slower thinking and problem solving** - The speed of learning slows down; short-term memory takes longer to function; reaction time increases.

**Decreased attention and concentration** - More distractedness. All of the interruptions make learning more difficult.

**Slower recall** - A greater need for hints to jog the memory.

Distinguishing between normal memory loss and dementia symptoms is not an exact science but there are some clues to look for:

Are your memory changes typical aging or symptoms of dementia?

<table>
<thead>
<tr>
<th>Typical aging:</th>
<th>Symptoms of dementia:</th>
</tr>
</thead>
<tbody>
<tr>
<td>You or a loved one complain about memory loss but are able to provide detailed examples of forgetfulness</td>
<td>You complain of memory loss only if asked but are unable to recall specific instances</td>
</tr>
<tr>
<td>You occasionally search for words</td>
<td>You experience frequent word-finding pauses and substitutions</td>
</tr>
<tr>
<td>You may have to pause to remember directions, but don’t get lost in familiar places</td>
<td>You get lost in familiar places and take excessive time to return home</td>
</tr>
<tr>
<td>You remember recent important events and conversations are not impaired</td>
<td>You experience a notable decline in memory for recent events and ability to converse with others</td>
</tr>
<tr>
<td>Your interpersonal social skills are at the same level as they’ve always been</td>
<td>You lose interest in social activities and may behave in socially inappropriate ways</td>
</tr>
</tbody>
</table>

Adapted from: *The American Medical Association*
Dementia causes

In a healthy brain, mass and speed may decline in adulthood, but this miraculous organ continues to form vital connections throughout life. However, when connections are lost through inflammation, disease, or injury, neurons eventually die and dementia can develop. While the prospect of literally losing one’s self can be extremely traumatic, early intervention can dramatically alter the outcome.

In the past 20 years, scientists have greatly demystified the origins of dementia. Genetics may increase your risks, but scientists believe a combination of hereditary, environmental, and lifestyle factors are also at work.

Dementia can be caused by:

**Medical conditions that progressively attack brain cells and connections**, most commonly seen in Alzheimer’s disease, Parkinson’s disease, or Huntington’s disease.

**Medical conditions such as strokes that disrupt oxygen flow and rob the brain of vital nutrients.** Additional strokes may be prevented by reducing high blood pressure, treating heart disease, and quitting smoking.

**Poor nutrition, dehydration, and certain substances, including drugs and alcohol.** Treating conditions such as insulin resistance, metabolic disorders, and vitamin deficiencies may reduce or eliminate symptoms of dementia.

**Single trauma or repeated injuries to the brain.** Depending on the location of the brain injury, cognitive skills and memory may be impaired.

**Infection or illness that affects the central nervous system,** including Creutzfeldt-Jakob disease and HIV. Some conditions are treatable, including liver or kidney disease, depression-induced pseudo dementia, and operable brain tumors.

Types of dementia

All dementias involve cognitive decline that can impact daily living. However, it’s important to pinpoint the specific type of dementia in order to optimize treatment. More than 50 conditions involve dementia, including:
Alzheimer’s disease

This is the most common form of dementia, which according to the Alzheimer’s Association accounts for 60 to 80 percent of all diagnosed cases. The following 10 warning signs may indicate that your dementia symptoms are the result of Alzheimer’s disease:

1. Your memory loss is sufficient to disrupt your daily life. You forget things you’ve recently learned, forget important dates or events, repeatedly ask for the same information, or rely more and more on memory aides or family members.

2. You’re having difficulties with problem-solving. You’re not able to follow plans, work with numbers, follow recipes, or keep track of bills.

3. Having trouble completing daily tasks such as driving to a familiar place, remembering rules to a game, or completing assignments at work.

4. Experiencing confusion over time or place. You lose track of dates, forget where you are or how you got there.

5. Misplacing things. Putting things in strange places, being unable to retrace your steps, perhaps even accusing others of stealing.

6. Developing problems with spoken or written words. You have difficulties following a conversation, often repeat yourself, struggle to find the right word, or call things by the right name.

7. Having difficulty understanding visual images. Trouble reading, judging distances, colors, or contrast, or recognizing your own reflection.

8. Displaying poor judgement. There’s a decline in your decision making, you’re giving away large sums of money, paying less attention to personal grooming.

9. Withdrawing from work or social activities. You have trouble remembering how to complete a work project or favorite hobby, difficulty following sports, withdraw from social events.

10. Exhibiting changes in mood. Becoming confused, depressed, suspicious, fearful, or anxious.

Early diagnosis of Alzheimer’s can help to prolong independence and is the first step
towards treatment, management, and continuing to enjoy a full life.

**Vascular dementia**

Vascular dementia results from a series of small strokes or changes in the brain’s blood supply. A sudden onset of symptoms can indicate vascular dementia, and while it severely impacts memory and cognitive functioning, there are ways to reduce its severity.

**Mixed dementia**

This is a condition in which Alzheimer’s disease and vascular dementia occur simultaneously. The combination of the two types of dementia most commonly occurs in advanced senior years, often indicated by cardiovascular disease and dementia symptoms that get worse slowly over time.

**Less common forms of dementia**

**Pick’s Disease** affects personality, orientation and behavior. It may be more common in women and occurs at an early age.

**Creutzfeldt-Jakob Disease** progresses rapidly along with mental deterioration and involuntary movements.

**Huntington’s Disease** is an inherited, degenerative disease. The disease causes involuntary movement and usually begins during mid-life.

**Parkinson’s Disease Dementia** can develop in the later stages of Parkinson’s disease, a progressive disorder of the central nervous system.

**Lewy Body Dementia** causes symptoms similar to Alzheimer’s disease. People with Lewy Body dementia experience hallucinations and can become fearful.

**Early dementia or mild cognitive impairment (MCI)**

Early dementia, also known as mild cognitive impairment (MCI), involves problems with memory, language, or other cognitive functions. But unlike those with full-blown dementia, people with MCI are still able to function in their daily lives without relying on others.

Many people with MCI eventually develop Alzheimer’s disease or another type of dementia.
However, others plateau at a relatively mild stage of decline and are able to live independently. Some people with mild cognitive impairment even return to normal.

It is not yet fully understood why MCI progresses to Alzheimer’s disease in some, while remaining stable in others. The course is difficult to predict, but in general, the greater the degree of memory impairment, the greater the risk of developing Alzheimer’s down the line. According to the Alzheimer’s Association, roughly 15 to 20 percent of the population over the age of 65 experience some degree of mild cognitive impairment.

Symptoms of MCI include:

- Frequently losing or misplacing things
- Frequently forgetting conversations, appointments, or events
- Difficulty remembering the names of new acquaintances
- Difficulty following the flow of a conversation

**Coping with a dementia diagnosis**

“I thought my life was over. I knew about dementia but I never thought it could happen to me.” This sentiment reflects the fear, disbelief, and dismay many people experience after a dementia diagnosis. It can be a deeply distressing experience—for both you and your loved ones. And while there’s currently no cure for dementia, there are steps you can take to help slow the onset of more debilitating symptoms and preserve your way of life.

**Seek early intervention.** Since dementia symptoms can be caused by any number of conditions, obtaining an early, accurate diagnosis is critical, especially if dementia symptoms appear suddenly. Conditions such as stroke, drug interactions, tumors, and seizures should be treated immediately. Timely intervention may also control or eliminate symptoms from other physical and psychological factors.

**Reach out for support.** As you deal with dementia symptoms, make sure you get the emotional support you need. Turn to close family members and friends, join a dementia support group, or talk to a therapist, counselor, or clergyman.

**Make important decisions early.** Avoid future medical, financial, and legal confusion by communicating your wishes and making a plan. Discuss and document treatment and end-of-life preferences with your doctors and family members and appoint someone you trust to make decisions for you in case you can no longer make them for yourself. Although these
conversations may be difficult, making your wishes known can also be empowering.

**Watch for treatable changes.** Depression, sleep disturbances, and medication interactions can make dementia symptoms worse and limit independence. Treating them may require some experimentation with lifestyle changes and medication, but can be well worth the effort.

**Create a dementia-friendly environment.** You can help preserve your health and autonomy for as long as possible by taking simple actions such as removing tripping hazards, increasing lighting, and organizing a caregiving network. Planning and flexibility can keep you one step ahead of your changing needs.

**Savor positive experiences.** Even when dementia is at an advanced stage and you sense your mind may be half-gone, try to see it as half-present. With appropriate support and understanding, people with dementia are still capable of experiencing and providing enjoyment and connection—even through the final stages of the disease.

**Consider making the following healthy lifestyle changes** that can help slow the onset of more debilitating symptoms:

**Preventing dementia or delaying symptoms**

Recent research suggests that healthy lifestyle habits and mental stimulation may help altogether, delay its onset, or if you’ve already been diagnosed, slow the onset of more debilitating symptoms. In fact, research published in the Journal of the American Medical Association in 2019 concluded that healthy lifestyle changes can reduce the risk of dementia even if you have a genetic predisposition. Just as physical exercise keeps you physically fit, exercising your mind and memory can help you stay mentally sharp, no matter your family history or how old you are. The following strategies can help.

**The 6 pillars of dementia prevention:**

1. **Regular exercise.** Starting a regular exercise routine, including cardio and strength training, may significantly reduce your risk of developing dementia. Aim for 30 minutes of moderate exercise on most days of the week.

2. **Social engagement.** The more socially active you are, the more you connect face-to-face with others, the stronger your memory and cognition is likely to be.
3. **Healthy diet.** Brain-healthy eating habits, such as those promoted in the Mediterranean diet, can help reduce inflammation, protect neurons, and promote better communication between brain cells. Daily servings of fruit and vegetables and weekly servings of fish may help to lower your risk for dementia.

4. **Mental stimulation.** By continuing to learn new things and challenge your brain, you can strengthen your cognitive skills, stay mentally sharp, and may delay or prevent dementia symptoms.

5. **Quality sleep.** Getting quality sleep may help to flush out brain toxins and avoid the build-up of damaging plaques.

6. **Stress management.** Unchecked stress takes a heavy toll on the brain, shrinking a key memory area, hampering nerve cell growth, and worsening dementia symptoms.

To learn more about putting these strategies into action, see Preventing Alzheimer's Disease.

---

**Recommended video**

---

**Other resources**

- **The Dementias: Hope Through Research** - Identification, treatment, types, and prognosis for dementia. (National Institute of Neurological Disorders and Stroke)

- **What is Dementia?** - Symptoms, causes, and treatment. (Alzheimer’s Association)

- **Mild Cognitive Impairment (MCI)** - How it can be diagnosed and handled. (UCSF Memory and Aging Center)
Worldwide support

**Alzheimer’s Associations** — A worldwide directory of Alzheimer’s associations that offer information, advice, and support. (Alzheimer’s Disease International)

**Authors:** Monika White, Ph.D., Jeanne Segal, Ph.D., Lawrence Robinson, and Melinda Smith, M.A. **Last updated:** August 2019.