NON-ALZHEIMER DEMENTIAS: THE OTHER DEMENTIAS

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This project is/was supported by funds from the Bureau of Health Professions (BHPr), Health Resources and Services Administration (HRSA), Department of Health and Human Services (DHHS) under grant UB4HP19059 Geriatric Education Centers, New Jersey Geriatric Education Center, for $42,222. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by the BHPr, HRSA, DHHS or the U.S. Government.
Learning Objectives

- To recognize different clinical features of Non-Alzheimer dementias
- To list management options for vascular dementia
- To describe evidence-based treatment for frontotemporal dementia
Dementias

- Described for over a century
- Decade of the Brain 1990-1999
- Research has not yet yielded effective treatments
1912

- William Taft was President
- Woodrow Wilson won the election that Nov.
- New Mexico becomes the 47th State
- Alaska officially becomes a territory
- The Titanic sinks
- The Girl Scouts are formed
- Boston Red Sox win the World Series
Alzheimer’s Dementia

- Insidious cognitive decline
- Alzheimer first described in 1912
- 2/3 of cases have concomitant pathology.
  - Vascular Lesions
  - Lewy Body Disease
  - Frontotemporal Dementia

The Other Dementias

- Vascular Dementia
- Frontal Temporal Dementia (Pick's Disease)
- Lewy Body Dementia
- Dementias due to:
  - Parkinson’s Disease
  - Traumatic Brain Injury
  - Infectious Etiologies
1899

- 11 years before Alzheimer describes his patient
- 4 years before the first World Series
- William McKinley is President
- Bayer patents Aspirin
- Brooklyn Superbas won the National League Pennant
The Other Dementias

- Willis described dementia after stroke in 1899
- Vascular Dementia is the second most common type.
- Depression is a common feature in nearly 70% of cases.

Roamine GC, Vascular dementia a historical perspective, International Psychogeriatrics 15 S1-13, 2003
Vascular Dementia

Clinical Features

- Note vascular risk factors
- Abrupt in onset
- Stepwise progression
- Psychomotor slowing
- Depressive features
- Focal neurologic symptoms
- Urinary incontinence
- Preserved awareness of surroundings
- Gait disturbance
- Depression
- Psychosis

Treatment Options

- No approved medications
- Management of risk factors to prevent stroke:
  - Lifestyle counseling
  - Treating hyperlipidemia
  - Treating hypertension
  - Treating diabetes
  - Diet management
1892

- 20 years before Alzheimer describes his patient
- Benjamin Harrison is President
- Grover Cleveland wins the election in Nov.
- John Muir forms the Sierra Club
- The Nutcracker Ballet premiers
- JRR Tolkien is born
- Boston Beaneaters won the National League Pennant.
Frontotemporal Dementia

- First described by Arnold Pick 1892
- Most common dementia to affect people in their 50’s.
- Onset before 65 is one of the diagnostic criteria.

Frontotemporal Dementia

- Behavioral changes
- Clinical Features
  - Disinhibition
  - Impulsivity
  - Intrusiveness
  - Non-fluent aphasia
  - Difficulty in naming and understanding meaning of words.
- Executive dysfunction
- Judgment changes
- Anomia
- Aphasia

Treatment

- SSRI’s may be effective in decreasing behaviors.
- Studies suggest Trazodone effective in decreasing agitation, irritability, depressive symptoms and eating disorders.
- Acetylcholine Agents:
  - Not a disease of choline deficiency
  - donepezil worsened symptoms

Lewy Body Dementia

- Second most common type of neurodegenerative dementia
- In one study nearly 40% of patients with dementia had Lewy Bodies at autopsy.
Lewy Body Dementia (LBD)

- **Clinical Features**
  - Sleep disturbance
  - Auditory hallucinations
  - Visual hallucinations
  - Masked face
  - Rigidity
  - Parkinsonism
  - Symptoms worsen with antipsychotics

Treatment

- Approximately 60% are sensitive to antipsychotics.
- Autonomic dysfunction, particularly orthostasis is seen in 15% of patients.
- Patients may have a better response to cholinesterase inhibitors.

14% of affected people over age 70 will develop at least a mild dementia.

Psychiatric symptoms are common

Visual hallucinations are a predictor of dementia

Bradykinesia, rigidity, and postural instability also predict dementia

Dementia due to Parkinson’s Disease

- Clinical Features
  - Apathy/depression
  - Psychomotor slowing
  - Gait disturbance
  - Visual hallucination
    - Typically small animals or human forms
  - Delusions

Traumatic Brain Injury

- Occurs with Moderate to Severe Injury
- Static Dementia, does not change with time.
- May be a risk factor for Alzheimer Disease later in life.
- Once the brain is injured it becomes more susceptible to injury later in life.

Infections Etiologies

- **HIV**
  - Most common cause of dementia for people in their 40s
  - 35% mild forgetfulness, tremor, decreased attention

- **Hepatitis C**
  - 30% experience some cognitive decline.

- **West Nile Virus**
  - Cognitive impairment data is incomplete

- **Syphilis**
  - 30% will develop tertiary syphilis – delirium and dementia

- **Lyme Disease**
  - Encephalitis is rarely seen.

Is the dementia reversible?

- 0.29% are partially reversible
- 0.31% are fully reversible
- Some reversible causes include: medication, infection, tumors, normal pressure hydrocephalus, nutritional deficiencies, hypothyroidism and hypoglycemia
- 50-60% of dementias are of the Alzheimer’s type which is the most common form of dementia
- Almost 50% of people in their 80s will develop some type of cognitive disorder

Pearls

- Not all dementias are of the Alzheimer’s Type
- Non-Alzheimer’s Dementias may present more treatment challenges for the provider
- Full clinical workup is key to identifying etiology
- No clear best treatment currently exists for any type of dementia.