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## What Is Dementia?

### *How Is It Different from Just Getting Older?*

**D**ementia is a broad name for a group of diseases that cause people to lose their memory and thinking ability. Once people have dementia, it tends to get worse over time; it can eventually become fatal because the brain loses the ability to manage the various bodily functions that keep us alive. In some cases, the process can be slowed down or alleviated, but for right now there is no cure.

What a terrible and uniquely scary problem this is!

There are certainly many other awful illnesses in the world—diabetes, heart disease, kidney failure, and so on—but dementia is different because we don't tend to *identify* with our kidneys or our pancreas. We think of them as a part of our body of course, but we don't consider them to be essential to what makes us who we are. If we received a kidney transplant, we'd still think we were the same person, just with a different kidney. But take away our memory—or, if it were possible, imagine receiving a memory transplant—and we'd feel like we were no longer there at all. Our memory is, in a very large sense, our identity. It's who we are. Dementia doesn't just attack our bodies; it tries to erase our very selves.

And our memory represents our identity for other people too. When people with dementia lose their memory, their family members often remark, "They're no longer the same person they used to be."

Of course a lot of people tend to become more forgetful as they get older, and this forgetfulness can be a normal part of the aging process—the memory function of the brain can slow down in much the same way as other parts of the body do.

But there's a big difference between this "normal" slowing down that often occurs with age and dementia, which is a disease process. In exactly the same way, there's a big difference between naturally becoming less physically active as you get older and developing a disease, such as rheumatism, that damages your muscles or joints.

In the very early stages of dementia though, it can be hard to tell the difference. Dementia can actually start years before it becomes noticeable to other people, even close family members. In fact it can be a very long time before dementia sufferers themselves begin to realize that anything is wrong. Early on, the forgetfulness of dementia may not hinder people's lives very much and can seem like a normal part of getting older.

## How You Can Tell

Nevertheless, if you look closer, it's often possible to distinguish between normal aging and early dementia. Dementia affects the brain in a different and characteristic way. The types of things that people tend to forget, along with the ways in which they behave regarding them, often provide critical clues.

Perhaps the best way to explain the difference is with a side-by-side comparison. The list below through page 12 should help give you a sense of the difference between occasional age-related forgetfulness and a cognitive problem caused by a disorder in the brain.

Of course this chart is neither exhaustive nor conclusive. Making a few mistakes of the sort described in the right column doesn't amount to proof that someone is a dementia sufferer. However, the comparison is a good way to demonstrate the types of cognitive mistakes that are most typical of dementia.

### *More likely to be normal aging*

Not being able to remember a conversation or a decision that took place a year ago.

Forgetting the name of a recent or casual acquaintance.

### *More likely to be dementia*

Not being able to remember a conversation or a decision that took place a day or two ago.

Forgetting the name of an old friend or family member.

**More likely to be normal aging**

Forgetting the date or the day of the week.

Occasionally losing things, such as a wallet or car keys.

Forgetting something and asking someone about it.

Forgetting things but being able to remember them with a prompt or clue.

Occasionally getting confused by a device such as a phone, TV remote, or microwave.

Sometimes having trouble finding the right word.

Sometimes forgetting what one was about to say.

Occasionally forgetting an appointment.

**More likely to be dementia**

Forgetting the year or the month or what season it is. Also being confused about the passage of time.

Losing things in unusual places, such as putting a wallet in the refrigerator or car keys in the medicine cabinet. Also losing things and being unable to retrace one's steps.

Asking the same question over and over.

Forgetting things and being unable to remember them even with a prompt or clue.

Being unable to remember how to get to a familiar location or the rules of a favorite game.

Calling things by the wrong name or by a description ("that thing that tells the time") or simply pointing to an object and saying "that thing."

Losing the thread of a conversation, suddenly changing the subject, or repeating oneself.

Being highly dependent on written appointment reminders or other memory aids.

**More likely to be normal aging**

Making a mistake in balancing a checkbook.

Developing particular ways of doing things and disliking changes in routine.

Misty or foggy vision.

Making mistakes and being conscious of them.

**More likely to be dementia**

Using poorer judgment about money in general.

Larger mood and personality changes, including becoming depressed, suspicious, anxious, or easily upset.

Having trouble judging distances or misinterpreting patterns on a carpet or reflections in a mirror.

Making mistakes and not realizing it.

While this list may be helpful, it doesn't substitute for a doctor's diagnosis of dementia. As you'll see in the following chapter, it can be very useful to get a medical diagnosis—particularly because a significant number of cases that *appear* to be dementia in fact have other causes and can be treated or cured.

## A Hidden Disease

Older people and their families are often slow to identify dementia early on because it can seem like normal aging, but there are two other reasons dementia frequently goes unrecognized for a long time. (As you'll soon see, these two reasons are also a big part of what makes taking care of a parent with dementia so extraordinarily difficult.)

The first reason is that *the nature of the disease process itself* often causes dementia sufferers to be unaware of the cognitive deficits they're developing. They literally lose the ability to know what they don't know and to remember that they're not remembering things.

The second factor is that dementia sufferers are often in *denial*. Denial is a psychological defense mechanism in which the brain deals with a terrible event or piece of news that would otherwise cause trauma by simply not recognizing or processing it. And of course the idea that

you're developing dementia—that you're literally losing your mind—is about as traumatic an idea as one could experience.

A certain amount of denial can be healthy. Denial exists to protect us from experiences that would otherwise be a terrible shock to our psychological and emotional well-being and to allow us to come to terms with traumatic situations in a gradual way, rather than in a sudden and debilitating way.

With dementia, however, a very common result is that people who might otherwise perceive that they're developing memory problems simply begin lying to themselves about it. And they lie to others too or at least unintentionally mislead them, which is a necessary step in remaining in denial.

The way this plays out is that many people in the early stages of dementia engage in elaborate compensations—a kind of “cover-up.” They laugh off memory lapses as harmless “senior moments” or instances of just getting older. They may retire from their jobs, not because they're otherwise ready to retire but because they're finding them too difficult. They may gradually let others take on responsibilities, such as paying bills or reconciling bank statements, by saying that they find them unpleasant. They may isolate themselves and avoid new situations that they would experience as challenging. They may claim to no longer like foods that are in fact just complicated to prepare. They may fall back on stock phrases in conversations or consistently turn the topic toward long-term memories or other subjects that they find easier to discuss.

Although family members may develop suspicions, this sort of cover-up can often be successful for an extended period of time. Many people in the early stages of dementia retain a lot of social graces, for instance, and can effectively engage in casual interactions that don't require deep thought or dealing with anything complicated or unusual.

The slow-developing nature of the disease also makes the cover-up harder to spot, especially for spouses who live with the person every day and thus are less apt to notice gradual changes than an adult child who doesn't see the person as frequently.

It's also the case that family members can be in denial themselves. This tends to be especially true of spouses, who often have a very hard time admitting that the person they have loved and lived with for many years is in a process of cognitive decline.

Frequently the way that family members finally realize what's going on is that there's an unusual event or a crisis that puts the person in a

situation that can't be handled through the familiar adaptations. The death of a spouse is an extreme example, but the triggering event could be far less dramatic—a family vacation, or the other spouse developing an illness, or some other circumstance in which the person is suddenly forced to handle unexpected responsibilities. All of a sudden it becomes clear that what had previously been passing for normal aging is in fact a brain disease.

Of course waiting for a crisis is never ideal. The sooner you can recognize the disease and begin to plan for it, the better off everyone will be. The next chapter provides some further guidance on how to tell if the changes you're noticing are in fact dementia or have some other cause.

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