MANAGING MILD COGNITIVE IMPAIRMENT, ALZHEIMER’S DISEASE AND OTHER DEMENTIAS
INFORMATION FOR OLDER ADULTS, FAMILIES, AND CAREGIVERS

READ THIS PAMPHLET TO LEARN:

• What Mild Cognitive Impairment Is and How to Manage It.
• What Dementia, including Alzheimer’s Disease Is and How to Manage It.
• Tips on How to Provide Care To Someone Who Is Living With Dementia

Sinai Health System
HEALTHY AGING AND GERIATRICS
WHAT IS NORMAL AGE-RELATED MEMORY LOSS?

Nearly 40% of older Canadians experience some form of normal age-related memory loss, which is different than experiencing a cognitive impairment or dementia. When there is no underlying medical condition causing the memory loss, and there are no objective findings to suggest that an underlying cognitive impairment is present, a person is said to have normal age-related memory impairment. Some symptoms include:

- Forgetting things and events occasionally
- Occasionally have difficulty finding words in conversation
- Not being able to remember the name of an acquaintance
- Not being able to remember details of a conversation or event that took place a year ago

No treatments are recommended for normal age-related memory loss, although there are strategies to help someone better manage its symptoms.

For more advice on how to improve your memory, see your health care provider and read our pamphlet General Tips for Memory Problems.

WHAT IS MILD COGNITIVE IMPAIRMENT?

Mild Cognitive Impairment (MCI) is a condition in which a person experiences problems with memory, or other higher level cognitive functions, above what is average for their age, though not as severe as dementia. People with MCI can still do all their daily activities, but perhaps with some difficulty.

MCI can present itself in a number of ways. People diagnosed with MCI may

- Forget things more often than usual.
- Repeat themselves more frequently.
- Ask the same questions over and over again.
ARE THERE ANY TREATMENTS OR STRATEGIES FOR MANAGING MILD COGNITIVE IMPAIRMENT?

There is no proven cure for MCI, however, there are some key strategies that may help manage its symptoms. Some of these include:

- Joining a new class such as a language or exercise class.
- Joining a class that helps to train one’s memory.
- Using memory aids such as lists, calendars, and smart phones.
- Doing the same things at the same time every day.

For more advice on how to improve your memory, see your health care provider and read our pamphlet General Tips for Memory Problems.

WHY IS IT IMPORTANT TO DIAGNOSE MILD COGNITIVE IMPAIRMENT EARLY?

People with MCI are at increased risk of developing Alzheimer's Disease and other dementias. When the primary symptoms of MCI involve memory, this is called amnestic MCI. Every year, 10-15% of people with amnestic MCI progress to living with a dementia, meaning they are 3-4 times overall more likely to develop a dementia than people without MCI.

Not everyone with MCI will develop a dementia and there are things people living with MCI can do to lessen their risk of developing a dementia. Pursuing regular exercise and ensuring one’s blood pressure is optimally controlled are currently the personal actions that have been demonstrated to prevent or slow the subsequent development of a dementia.
WHAT IS DEMENTIA?

Dementia is an overall term for diseases whose symptoms affect the brain. Individuals diagnosed with dementia often require increased support with their care. About 20% of older adults receiving home care, and 57% of those receiving long-term care, are diagnosed with dementia.

There are several different types of dementia, including Alzheimer’s Disease, vascular dementia (which is caused by strokes), Lewy Body disease, Parkinson’s disease and Huntington’s disease. Alzheimer’s disease is the most common type and will be the focus of this pamphlet.

WHAT CAUSES ALZHEIMER’S DISEASE?

Alzheimer’s Disease occurs when protein builds up in the brain which causes the nerve cells to either have trouble communicating with other cells or to die early.

We don’t know why this happens. This is an active area of research.

WHAT CAN ALZHEIMER’S DISEASE LOOK LIKE?

Usually, Alzheimer’s disease first affects a person’s memory, presenting as forgetting things more often, repeating oneself, having word-finding difficulties, and misplacing things. As it progresses it can also affect a person’s attention, planning, language and other higher cognitive functions. As the disease advances, the symptoms become more severe and affect the person’s ability to live safely and independently. Individuals with advanced Alzheimer’s disease can:

- Get lost in familiar places.
- Have trouble doing regular activities, such as paying bills, creating a shopping list, managing their finances and medications, cooking meals, and driving.
They also eventually have trouble doing more basic tasks like dressing, bathing, toileting and eating independently. While many of the symptoms of MCI are the same as Alzheimer’s Disease, the difference is that people with MCI can still do all of their daily activities.

WHAT ARE TREATMENTS FOR ALZHEIMER’S DISEASE?

There is no known cure for Alzheimer’s Disease or other dementias. However, like MCI, there are some activities that might help mitigate the symptoms or prevent the disease from progressing. Some strategies include:

- Engaging in social activities and remaining socially connected.
- Following the Mediterranean Diet, which emphasizes nuts, fish, olive oil, and plant-based foods.
- Engaging in regular exercise.
- Managing chronic health conditions, such as high blood pressure and diabetes.
- Abstaining from alcohol and smoking.

Your doctor may also prescribe medications that can slightly delay the loss of brain function in people with mild to moderate Alzheimer’s Disease, but may also cause vomiting, nausea and dizziness.

HOW CAN CAREGIVERS SUPPORT PEOPLE WITH ALZHEIMER’S DISEASE?

Since Alzheimer’s disease can make it unsafe for an individual to perform their daily tasks independently, they often become more reliant on other people to provide them with the necessary care and support needed as the disease progresses. This can become challenging when a person living with Alzheimer’s disease or other dementias also presents with behavioural and psychological symptoms of dementia (BPSDs).
WHAT ARE BPSDs?

BPSDs are a group of symptoms, such as thoughts, moods or behaviours, that often present in people with dementia. Over the course of the disease, individuals diagnosed with dementia may often experience one or more forms of BPSDs. Common types of BPSDs include:

- Aggression
- Agitation
- Anxiety
- Apathy
- Delusions
- Depression
- Hallucinations
- Hoarding
- Repetitive Vocalizations
- Sexual Behaviours or Disrobing
- Sleeping Problems
- Wandering

WHY IS IT IMPORTANT TO MANAGE BPSD?

Managing BPSDs is important because it can lead to increased risk for other complications, such as falls or the person living with dementia or their caregivers or care providers getting hurt. However, supporting a person with Alzheimer’s disease or other dementias to manage BPSD can be challenging and add to caregiver stress that can also result in more frequent visits to emergency departments, hospitalizations and earlier admissions to retirement and nursing home settings.
HOW CAN CAREGIVERS HELP MANAGE BPSDs IN INDIVIDUALS LIVING WITH DEMENTIA?

If you are providing care to someone with Alzheimer’s disease who is experiencing BPSDs, it is important to remain calm, not to argue with them and to keep them engaged with activities. There are some steps you can take to address each of the following symptoms.

**Agitation/Aggression**
- If you are caring for someone who is agitated or physically or verbally aggressive, try to be calm, and soothe or distract them with conversation.
- If possible, give them space and approach them later.

**Apathy**
- If you are caring for someone who is apathetic, try different ways of suggesting activities, such as saying it’s time to do an activity, rather than asking if they want to do it.
- Motivate them with things they still enjoy, such as music, food, movies and grandchildren.

**Delusions/Hallucinations**
- Focus on how the person is feeling, not on what they believe is happening.
- Understand that this is their reality, and do not confront the false belief if harmless.

**Sexual Behaviours/Disrobing**
- Keep an active and regular schedule to avoid boredom.
- If possible, provide personal space, and try to limit triggering activities.

**Wandering**
- If someone with dementia is trying to leave, speak slowly and try to calm them down. Distract them with other activities, if possible and avoid restraining them.
- If the behaviour is persistent, you can consider registering them with the Alzheimer Society’s MedicAlert Safely Home program.
SUGGESTED RESOURCES

ALZHEIMER SOCIETY OF TORONTO

If you are caring for a person with Alzheimer’s disease, the Alzheimer Society of Toronto can provide information, resources and support.

www.alz.to

BAYCREST LEARNING THE ROPES FOR LIVING WITH MCI PROGRAM

Learning the Ropes for Living with MCI is a program focused on optimizing cognitive health through lifestyle choices, memory training, and psychosocial support. It is aimed at older adults and their close family members/friends, who are living in the community, and are experiencing MCI.

Clients aged 50 and over are welcome; however, a physician referral is required. The program costs $150.

www.baycrest.org/Baycrest/Healthcare-Programs-Services/Clinical-Services/Neuropsychology-Cognitive-Health/Neuropsychology-Treatment-Programs/Learning-the-Ropes-for-MCI
THE CYRIL & DOROTHY, JOEL & JILL REITMAN CENTRE FOR ALZHEIMER'S SUPPORT AND TRAINING

The Reitman Centre offers a 10-session group training program for family caregivers which focuses on practical and skills-based tools and emotional supports needed to provide care for family members with dementia.

Programs are run out of the Reitman Centre offices located at Mount Sinai Hospital and are free of charge. Programs can also be accessed via Alzheimer Societies across Ontario.

Caregivers may self-refer or be referred by a health care professional.

www.dementiacarers.ca

DEMENTIA ADVISOR APP

The Dementia Advisor app teaches caregivers how to improve communication and problem solving skills, build resilience and reduce stress through chat-based role playing. The app offers strategies based on the Reitman Centre's CARERS model, and has the potential to monitor and track progress and direct the working caregiver to caregiver-related services.

www.dementiaadvisor.com

TORONTO DEMENTIA NETWORK

The Toronto Dementia Network is a hub of dementia-related supports, services, programs and events in Toronto. It was developed by the Alzheimer Society of Toronto and it collects, organizes and disseminates information from a variety of dementia organizations in Toronto.

https://tdn.alz.to
THE UHN MEMORY CLINIC

The memory clinic at the Krembil Neuroscience Center is made up of a group of health care specialists who support patients with cognitive challenges including disorders of memory, language, thinking or personality. Patients must be referred to the clinic.

www.uhn.ca/KNC/PatientsFamilies/Clinics_Tests/Memory_Clinic/Pages/about_us.aspx
RELEVANT RESOURCES IN OUR SERIES

• Living Longer, Living Well – Your Guide to Healthy Ageing
• How to Prevent and Manage Delirium
• General Tips for Memory Problems
• Managing Caregiver Stress

ADDITIONAL HEALTH RESOURCES IN OUR SERIES:

• Safe Medication Use for Older Adults
• Calcium, Vitamin D and Bone Health
• Preventing Falls at Home
• Recognizing and Managing Hearing Loss
• Managing Constipation
• Improving Urinary Incontinence
• Managing Sleep in Older Adults
• Substitute Decision Makers and Powers of Attorney
• Elder Abuse

ADDITIONAL COMMUNITY RESOURCES IN OUR SERIES:

• Meals on Wheels
• Community Transportation Options
• How to Register for Wheel-Trans
• Driving Assessment Services
• Funding for Mobility Aids from the Assistive Devices Program

Visit www.sinaigeriatrics.ca/healtheducation for additional resources for older adults, families and caregivers.
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