

## Appendix E: Types of Dementia

Dementia describes the symptoms that occur when the brain is affected by certain diseases or conditions. This table outlines some of the most common types of dementia. It is important to remember that the symptoms and progression of dementia can vary greatly among individuals.

TYPE OF DEMENTIA	DESCRIPTION
<b>Alzheimer's disease</b>	<ul style="list-style-type: none"> <li>■ Alzheimer's disease (or Alzheimer's dementia*) is the most common cause of dementia</li> <li>■ Caused by "plaques" and "tangles" formed by buildup of proteins in the brain</li> <li>■ Slowest progression, on average (symptoms are generally mild in the beginning and worsen over time)</li> <li>■ Generally progresses through three stages:               <ul style="list-style-type: none"> <li>□ Early (mild) stage</li> <li>□ Middle (moderate) stage</li> <li>□ Late (severe) stage</li> </ul> </li> <li>■ Early-stage symptoms:               <ul style="list-style-type: none"> <li>□ Short-term memory lapses (e.g., difficulty recalling recent events and learning new information)</li> <li>□ Difficulties with thinking, problem-solving, orientation, and/or language</li> <li>□ Changes in mood (e.g., apathy, depression, irritability)</li> </ul> </li> <li>■ Middle-stage symptoms:               <ul style="list-style-type: none"> <li>□ Increased severity of memory loss, communication difficulties, reasoning problems, and orientation problems</li> <li>□ Decreased awareness of surroundings (may get lost*)</li> <li>□ Increased confusion</li> <li>□ Delusions and/or hallucinations may occur</li> <li>□ Agitation (e.g., restlessness or pacing), calling out, repetition of the same question, and/or disturbed sleep patterns may occur</li> </ul> </li> <li>■ Late-stage symptoms:               <ul style="list-style-type: none"> <li>□ Loss of memory can be very evident (including longer-term memory problems*)</li> <li>□ Increased physical weakness (increased risk of falls*)</li> <li>□ Language deterioration* and loss of speech</li> <li>□ Paranoia may occur*</li> <li>□ Restlessness and agitation may occur</li> </ul> </li> <li>■ Risk factors:               <ul style="list-style-type: none"> <li>□ Age (over 65)</li> <li>□ Gender (female)</li> <li>□ Genetic inheritance (first-degree relatives*)</li> <li>□ Health and lifestyle (e.g., diabetes, stroke, heart problems, high blood pressure, high cholesterol and obesity in mid-life, late-life-onset* depression)</li> </ul> </li> <li>■ On average, people with Alzheimer's disease live for eight to ten years after the first symptoms</li> <li>■ Often, diagnosis is delayed; may take 2–3 years*</li> </ul>

TYPE OF DEMENTIA	DESCRIPTION
<b>Vascular dementia</b>	<ul style="list-style-type: none"> <li>■ Caused by death of brain cells due to lack of oxygen</li> <li>■ Two types: <ul style="list-style-type: none"> <li>□ Subcortical vascular dementia: related to diseases of small blood vessels deep in the brain <ul style="list-style-type: none"> <li>○ usually develops gradually and progresses slowly (similar to Alzheimer’s dementia)</li> </ul> </li> <li>□ Stroke-related dementia: related to/following a stroke (or several small strokes) <ul style="list-style-type: none"> <li>○ can follow a “stepped” progression (particularly as multiple strokes cause further damage to the brain)</li> </ul> </li> </ul> </li> <li>■ Symptoms of vascular dementia are similar to those of Alzheimer’s disease, particularly in the later stages</li> <li>■ Early signs include the following: <ul style="list-style-type: none"> <li>□ Difficulties planning, organizing, or following steps</li> <li>□ Slowed thinking</li> <li>□ Problems concentrating</li> <li>□ Short periods of confusion</li> <li>□ Apathy, mood swings, and more emotional than usual</li> <li>□ Anxiety and depression</li> <li>□ Disinhibition and impulsivity*</li> </ul> </li> <li>■ On average, people with vascular dementia live approximately 5 years after symptoms begin</li> </ul>
<b>Mixed dementia</b>	<ul style="list-style-type: none"> <li>■ More than one type of dementia at the same time</li> <li>■ Most common combination is vascular dementia with Alzheimer’s dementia</li> <li>■ Symptoms can include those from all types of dementia that are present</li> </ul>
<b>Dementia with Lewy bodies</b>	<ul style="list-style-type: none"> <li>■ Caused by protein deposits in the brain (presence of Lewy bodies*), which cause damage and death to nerve cells</li> <li>■ Memory problems develop slowly and progress gradually (similar to Alzheimer’s disease); however, mobility problems usually progress quickly*</li> <li>■ Symptoms: <ul style="list-style-type: none"> <li>□ Varied attention and alertness (from day-to-day or at different times of day; fluctuations may mimic delirium*)</li> <li>□ Recurrent* visual hallucinations, misperceptions, and/or auditory hallucinations</li> <li>□ Movement problems (similar to those in Parkinson’s disease, which is also caused by Lewy bodies)</li> <li>□ Problems with depth perception and balance; syncope and increased risk of falling</li> <li>□ Severe neuroleptic sensitivities with atypical antipsychotics*</li> </ul> </li> <li>■ On average, people with dementia with Lewy bodies live for 6 to 12 years</li> </ul>

TYPE OF DEMENTIA	DESCRIPTION
<b>Frontotemporal dementia (e.g., Pick's disease)</b>	<ul style="list-style-type: none"> <li>■ Caused by severe shrinkage of brain tissue and death of nerve cells in the frontal and/or temporal lobes, which is linked abnormal proteins (e.g., Pick bodies) inside the cells</li> <li>■ Serotonin deficits*</li> <li>■ Diagnosed at higher frequency in younger people than other types of dementia</li> <li>■ Three types:                         <ul style="list-style-type: none"> <li>□ Behavioural variant (more common)</li> <li>□ Language variants:                                 <ul style="list-style-type: none"> <li>○ Progressive, non-fluent aphasia</li> <li>○ Semantic dementia</li> </ul> </li> </ul> </li> <li>■ Behavioural variant symptoms:                         <ul style="list-style-type: none"> <li>□ Loss of inhibitions (e.g., socially inappropriate behaviour, pica may occur)</li> <li>□ Decreased interest and motivation</li> <li>□ Severe depression, apathy, withdrawal*</li> <li>□ Loss of empathy, self-focused behaviour</li> <li>□ Repetitive behaviours, compulsivity</li> </ul> </li> <li>■ Language variant symptoms:                         <ul style="list-style-type: none"> <li>□ Difficulties with language (slow progression)</li> <li>□ Aphasia: difficulty speaking, grammatical errors (e.g., leaving out link words such as 'the'), difficulty understanding sentences (but no difficulty understanding words)</li> <li>□ Semantic dementia: loss of vocabulary and word meaning, difficulty recognizing people or objects</li> <li>□ Memory remains relatively intact in early frontotemporal dementia, as language changes typically occur first*</li> </ul> </li> <li>■ Later stage symptoms:                         <ul style="list-style-type: none"> <li>□ As frontotemporal dementia progresses, people with the different types develop symptoms of the other type (i.e., people with behavioural variant symptoms develop language problems, and people with language variants develop behavioural problems)</li> <li>□ Other symptoms similar to those of the later stages of Alzheimer's disease</li> </ul> </li> <li>■ People with frontotemporal dementia sometimes have motor disorders (stiff muscles, awkward movements, spasticity*)</li> <li>■ May be inherited</li> <li>■ Life expectancy is estimated to be approximately eight years after the onset of symptoms</li> </ul>

Note: Content added by the expert panel is indicated with an asterisk (\*).  
 Source: Adapted from Alzheimer's Society, 2016.