

**Older Adults Suffering from Dementia**

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According to Welch et. al (2022), dementia is a cognitive impairment that is a major issue in older adults. Dementia is known as a brain disease that is characterized by memory loss, behavioral changes, and intellectual functioning. According to Welch et al. & Cummings-Vaughn (2022 & 2023), Dementia affects older adults by affecting their memory, learning and decision-making skills, and concentration. Dementia has an impact on more than just the older adults as it also affects the family members that are around them along with the healthcare workers who are working with them (Welch et al., 2022). Typically, when older adults have dementia, it can affect their ability to live alone (Cumming-Vaughn, 2023). It is important to understand how dementia is diagnosed and how older adults can manage dementia (Arvanitakis et al., 2019). It is also important to know the interventions and care of dementia (Livingston et al., 2020).

It is important to understand the demographics of older adults with dementia as it gives us an idea of those who are affected and what is anticipated for the upcoming years. According to Welch et al. (2022), dementia impacts roughly two-thirds of the American population and 20% of them are older adults. About 40% of primary care visits are made by older adults, and only about 13% of those visits result in a dementia diagnosis (Welch et al., 2022). According to Cummings-Vaughn (2023), there was a study done that shows the incidents of dementia by race and ethnicity among those who are enrolled in the United States Veterans Health Administrations. According to the study, it showed that the highest was African Americans and Hispanic (Cummings-Vaughn, 2023). It also showed that only two percent of the enrollees were women. According to Cummings-Vaughn (2023), there is a prediction of a 6.7% to a 33% increase in the numbers of Americans receiving a dementia diagnosed between 2020 and 2025.

According to Arvanitakis et al. (2019), there are 47 million people living with dementia worldwide and it is expected to increase to 131 million by 2050.

In order to understand dementia, it is important to understand how it is diagnosed and how it can be managed. In order for a neurologist to be able to diagnose dementia, they have to go through their requirements (Arvanitakis et al.,2019). The requirements include a history evaluation of cognitive decline and impairment within daily activities, with corroboration from family members or close friends along with a medical history. (Arvanitakis et al.,2019). The requirement also includes a mental status exam that is examined by the clinician (Arvanitakis et al.,2019). Within the exam, it will test the impairments of the memory, language, attention, visuospatial cognition, executive function, and mood (Arvanitakis et al.,2019). There have been times when the assessment is inconclusive, meaning that the exam came back normal, but the patient is showing symptoms of dementia (Arvanitakis et al.,2019). Typically, when that happens the patient is sent to do a physical examination (Arvanitakis et al.,2019). In order to manage dementia, it is important to reduce the sufferings that dementia causes such as the older adult's mood and behavior (Arvanitakis et al.,2019). In order to manage this, is non-pharmacologic and pharmacologic approaches (Arvanitakis et al.,2019). In non-pharmacologic approaches, the referrals need to be sent to a specialist such as clinician managers, social workers, occupational or speech therapist (Arvanitakis et al.,2019). Within non-pharmacological approaches, there are cognitive trainings and activities that may involve reading and games that involve thinking (Arvanitakis et al.,2019). In the pharmacologic approach, it shows that the Food and Drug Administration have approved drugs that are for dementia (Arvanitakis et al.,2019). The prescription drugs suppress the brain acetylcholinesterase enzyme in the brain, which increase the acetylcholine abundance for cholinergic neurotransmission at the synaptic cleft (Arvanitakis

et al.,2019). Typically, older adults who are prescribed medication improve in their daily activities and their behaviors (Arvanitakis et al.,2019).

It is important to understand the impacts that dementia leaves on an older adult and their families. According to Aggarwal et al. (2022), the primary cause of the disease is abdominal brain changes or brain cell damage, which results in a negative impact on someone's behavior, memory, and the ability to think. According to Aggarwal et al. (2022), loneliness is a major problem for most older adults who have dementia. As loneliness can lead to anxiety and depression, this can have a negative impact on their mental health. Dementia does not only have an impact on the patient, but it also impacts the care providers. Care providers find it challenging to accurately assess the impact on every patient in order to create a person-centered care plan (Aggarwal et al., 2022).

According to Weltch et al. (2022), older adults who have been diagnosed with dementia go through challenges. Most older adults with dementia struggle with their memory, learning, concentration, and decision making (Weltch et al., 2022). The majority of older adults who face memory loss cannot remember short-term things as they can remember more of their long-term. Older adults find it difficult to concentrate, especially when there is a lot going on around them. Older adults may have trouble deciding because they may have not heard what was said or they cannot comprehend the choices that were given. According to Weltch et al. (2022), older adults who face dementia may struggle to describe their symptoms to their healthcare provider which has led to a decrease in care. If older adults are not getting the proper care that they need then that can affect them (Weltch et al., 2022). Not every older adult is going to struggle with the same thing as they are their own person. If older adults are not able to explain their symptoms to their primary doctor then they may not get referred to see a specialist if needed. Older adults may

not get referred to a specialist if needed because their primary doctor may not have enough information for them to be referred (Weltch et al., 2022). Other challenges that older adults with dementia face are operational and financial barriers (Weltch et al., 2022). According to Weltch et al. (2022), an example of an operational barrier is the lack of access to specialists in rural areas or long wait times to see a specialist can increase the burden of care in primary care settings. According to Weltch et al. (2022), older adults have trouble obtaining their care especially if Medicare is not covering and they are having to pay out-of-pocket costs.

Dementia does not only have an affect on older adults as it also affects their family (Cunningham-Vaughn, 2023 & Weltch et al., 2022). It affects family members because it is difficult for them to provide what is needed as they may not know what to expect (Cunningham-Vaughn, 2023). Their family members are usually the first ones that notice symptoms and signs of dementia, so just seeing that can affect their mental health (Cunningham-Vaughn, 2023). According to Cunningham-Vaughn (2023), it is a challenge for relatives to provide the necessary supervision to their family members that are struggling with dementia. Socioeconomic disadvantages can put a burden and strain on their families as their family members may have to take time off of work to supervise (Cunningham-Vaughn, 2023). Another way that dementia can have an affect on families is by communication. Communication is important, but there may be times when the older adult has trouble understanding what is being said to them or trying to state how they feel (Cunningham-Vaughn, 2023). This affects family members because they may be trying to figure out something about that they need to know, but if they cannot then it can lead to stress.

It is important to understand how dementia could be prevented. According to (Livingston et al., 2020), the age-specific cases of dementia have decreased in many countries which may be

because of the improvements in education, nutrition, healthcare, and lifestyle changes. In order to understand the prevention of dementia, it is important to understand the risk factors of dementia. According to Livingston et al. (2020), the common risk factors are less education, smoking, obesity, depression, diabetes, physical inactivity, high alcohol consumption, and low contact with others. If these risk factors can somewhat be prevented and/or changed then that could help prevent dementia. Those who smoke should try to limit themselves or quit all together (Livingston et al., 2020). Those who are heavy drinkers need to limit themselves (Livingston et al., 2020). Children should be provided with primary and secondary education to help (Livingston et al., 2020). Another way to prevent dementia would try to prevent a head injury. It is also important to understand the interventions that go with dementia. Interventions should be for the individual as well as their family carers (Livingston et al., 2020). There are some interventions that can help decrease neuropsychiatric symptoms such as multicomponent interventions (Livingston et al., 2020). One intervention that could be useful is the cognitive intervention which is an intervention that comprises skills to improve general areas of cognition (Livingston et al., 2020).

In conclusion, dementia is one of the most concerning diseases in older adults. Dementia is a disease that affects the brain which then leads into issues for older adults. It is important to understand how dementia is diagnosed and what the signs are, but it is different for each individual. There are a variety of ways that dementia can be managed such as non-pharmacologic and pharmacologic approaches. Dementia does not only affect older adults as it also affects their family members and care providers. Dementia is a very important topic to social workers as social workers do work with individuals with dementia. It is important to social workers because they could receive a referral from a specialist and have to provide services

and/or resources. Social workers need to be mindful that each individual is different, so the services that they are providing needs to correspond to the individual.

## References

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