Overhead/Handout 1.4. The Progression of Dementia

At the beginning of the disease, people experience memory loss and a lack of spontaneity. They may have a change in language or handwriting or trouble doing mathematics. They lose the ability to make rapid hand and fine motor movements. They may cover up these difficulties, although many become depressed. Individuals may be uncharacteristically moody or exhibit sudden outbursts over trivial issues. They will be able to care for themselves and may be driving a car, cooking meals, or even living alone. The disease may go unrecognized until some event calls attention to the problem: they may get lost coming home from work, be asked to resign from a job, or have a car accident. Some minor additional stressor often precipitates a temporary decline in abilities, so that the individual’s difficulty comes to the attention of others.

As the disease progresses, apraxia (problems carrying out purposeful movement) and aphasia (problems with language) appear and worsen steadily. People will be unable to remember new information for even two or three minutes, but their memory of the past will deteriorate more slowly. These individuals will no longer be able to work or to care for their personal needs independently. Such people cannot be left alone: they do not comprehend their limitations and therefore are at serious risk of accidents. At this point, most are still physically vigorous, and some cause significant problems by trying to walk away from their home or care setting.

During this period, people with dementia may show angry outbursts, sudden shifts of mood, suspicion, fearfulness, or violence. They need help in dressing, in eating, and eventually with using the toilet. Many of these individuals are awake and active at night. They do not recognize their need for care and often vigorously resist help.

The late stages of the disease often begin with the onset of incontinence. Gradually the apraxia progresses until these people are unable to walk without help. Many are bedfast. They will need to be bathed, fed, dressed, and taken to the toilet. They will be essentially mute; language will consist of only one or two words or cries. Behavior problems disappear due to the severity of the overall impairment.

Seizures are common. These people become feeble and emaciated. They may refuse to eat or be unable to swallow without choking, so that artificial feeding may be required. They are at risk of developing bedsores, infections, and pneumonia. Pneumonia is a common cause of death. There is significant variability in the symptoms from person to person, and some symptoms never appear in some individuals.


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