

ALZHEIMER'S DISEASE

PUBLIC HEALTH BRIEF

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OVERVIEW OF ALZHEIMER'S DISEASE ³

Alzheimer's disease (AD) is a progressive brain disorder that worsens memory and thinking skills, eventually affecting everyday tasks and language. AD is most common in people who are 65 years of age and older. When AD is progressed, individuals have difficulty carrying on conversations, responding to the environment, and completing normal day-to-day tasks.

While the greatest risk factor of AD is older age, it is NOT a normal part of aging. If an individual is showing symptoms of AD before the age of 65, it is considered to be early-onset AD.

There is no known cure for AD but can be treated by medical management and a healthy, well-balanced lifestyle. This combination can improve the quality of life for individuals living with AD. Exercise, a healthy diet, social connections, and intellectual activity are encouraged. It is advised to avoid activities that could cause physical injury, especially to the head.

CAUSES AND DIAGNOSIS ^{6, 7}

There is no clear cause of AD. Scientists believe it is a combination of genetic, environmental, and lifestyle factors.

The functional changes in the brain involve the development of amyloid plaques and neurofibrillary tangles that result in the loss of neuronal connectivity. Over time, this affects a person's ability to think and function independently.

AD can be diagnosed by a healthcare provider by:

- Medical History
- Medication Review
- Family History
- Psychiatric evaluation to determine if depression or any other mental health disorder could be contributing
- Tests on memory, problem-solving, attention, counting, and language
- Blood or urine tests
- Brain Scans (CT, MRI, PET)

Sources:

1. MDH. Maryland Vital Statistics Administration Annual Report. <https://health.maryland.gov/vsa/Pages/reports.aspx>
2. CRISP Reporting Services
3. Alzheimer's Association. What is Alzheimer's Disease? <https://www.alz.org/alzheimers-dementia/what-is-alzheimers>
4. U.S. Department of Health and Human Services. Tips for Caregivers. <https://www.alzheimers.gov/life-with-dementia/tips-caregivers>
5. NCBI. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6938465/>
6. National Institute of Aging. What Causes Alzheimer's? <https://www.nia.nih.gov/health/what-causes-alzheimers-disease>
7. National Institute of Aging. How is Alzheimer's Disease Diagnosed? <https://www.nia.nih.gov/health/how-alzheimers-disease-diagnosed>

HARFORD COUNTY DATA

Deaths Caused by Alzheimer's Disease in Harford County ¹

2018	17.3 deaths per 100,000
2019	12.5 deaths per 100,000
2020	19.9 deaths per 100,000

ED Visits due to Alzheimer's Disease in Harford County ²

2018	362 Visits
2019	364 Visits
2020	272 Visits

SPOTLIGHT: SUBJECTIVE COGNITIVE DECLINE AND CHRONIC DISEASE ⁵

Subjective Cognitive Decline (SCD) is when an individual begins to experience symptoms of confusion or memory loss, frequently, within the past 12 months. This is a self-reported experience that the Centers for Disease Control and Prevention (CDC) has deemed a useful method for determining a change in thinking and memory. SCD can be one of the earliest signs of AD.

The likelihood of developing SCD and one or more chronic diseases increases as individuals age. Recent studies have shown that individuals who have SCD are likely to have two or more chronic diseases, compared to those without SCD. Based on the Behavior Risk Factor Surveillance System (BRFSS), a survey done to analyze the cognitive decline in those 45 years of age and older, more than 1 in 10 adults reported SCD. Of those who had SCD, the prevalence of any chronic disease was about 50% higher than those without SCD. Stroke, a condition that affects the brain and can result in cognitive decline, including Alzheimer's, has the highest prevalence among those who have SCD.

CAREGIVING ⁴

Being a caregiver for someone who has been diagnosed with AD can be tough, both mentally and physically. A caregiver for someone with AD can live with that person, near that person, or even far away. There can be multiple caregivers for that person but in all cases, being a caregiver is a major responsibility. Caregivers may need to feed, bathe, groom, dress, and complete any other day-to-day tasks for another person. This can be challenging especially when the diagnosed individual is upset or does not cooperate when you are trying to help. Here are some tips that can help keep both parties calm and allow the process to go smoothly.

- Keep a routine as best you can
- Help the person write to-do lists, appointments, and events in a notebook or calendar
- Plan activities that you know the person enjoys and be sure to do them around the same time each day
- Use a medication organizer and a way to have reminders to take those medications
- Serve meals consistently, in a familiar place, and at the same time each day
- Buy loose-fitting, comfortable clothing. Avoid zippers, buttons, laces, or buckles
- Use a shower chair
- Allow them to do as many tasks themselves as possible
- Be gentle and respectful