Dementia

Name

Institution

**Dementia**

Dementia is a neurological impairment intervening memory, learning, organization and planning abilities gravely. Dementia has many symptomatic ramifications—Alzheimer’s disease is one of them. Following ways can be used to manage its cognitive and behavioral consequences (Winblad et. al., 2016).

**Ways to improve health outcomes**

**Health technology**

Unwanted experience of forgetting significant happenings and losing memory progressively brings immense discomfort, fear and anxiety on the part of both client and caregivers. Technological advancements have demonstrated active participation in mitigating its unwanted consequences of dementia encapsulating (Prince et. al., 2016):

1. They usually forget appointments and meetings with family or important phone calls, adaptive telephones are specifically designed for it
2. Formalized electronic clocks are designed for dementia patients because their neurological impairment renders them confused in guessing day, night and timing
3. Tracking devices are used to grab their location instantly because their declining memory leaves them helpless in remembering even familiar places

**Community resources**

Many dementia associations are having online support systems where they offer their services on 24/7 basis concerning the provision of instrumental, social, informational and emotional support to the client. Number of these government and non-government programs are being operated throughout the country providing referral to the resources, professionals and support groups (Winblad et. al., 2016).

**Screening**

 Three types of tests are used for dementia detection; psychometric, neurological and physical. Psychometric tests detect the behavioral abnormalities and thinking patterns attached with the brain functioning e.g., Dementia Rating Scale. Neurological techniques use MRI for brain imaging communicating structural abnormalities in brain. Physical exam helps regulating homeostasis and life style factors (Small, 2016).

**Outreach**

Outreach programs targeted at dementia patients aim at providing training and supervision to the clients based on the evidence-based approaches, widely acknowledged by the researchers, field practitioners and patients. These programs focus more on gaming, reminiscing, effective communication skills—both verbal and non verbal in nature, arts and crafting, gardening and music playing. These activities are highly symptom specific in nature e.g., reminiscing for recalling memories (Winblad et. al., 2016).

**Referral and follow-up**

Dementia can be managed through electronic instruments but some cases are severe enough requiring professional assistance—referral is offered to ease their struggle for finding best suited clinics and professionals—neuropsychologists, psychologists, geriatricians and neurologists. Severity can be estimated through inconclusive diagnosis, behavioral ramifications, atypical presentation and family disputes (Small, 2016).

**References**

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