Advanced Pharmacology

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**Mr. Akkad’s Case**

The assigned case study reveals the story of an Iranian old man 76 years of age who was brought to the clinic by his family due to strange behavior. His family complained that Akkad’s attitude towards life changed dramatically for the previous two years. He started enjoying the things he used to criticize in the past and started depreciating religious practices. Moreover, he was suffering from dementia. He started forgetting things and names and started showing difficulty to find the right words while communication. The symptoms told by his family shows that he is suffering from Alzheimer’s disease (Landreth, Jiang, Mandrekar, & Heneka, 2008). It is a kind of dementia that causes problems with memory, think and behave. Cynthia Steele writes in her book *Psychiatric Symptoms and Nursing Home Placement of Patients with Alzheimer's disease* than Alzheimer's patients are generally affected after 65 years of age. Akkad is at the typical age when this disease affects people. The clinical interview of the client reveals that he appears to be a kind of frank but confused old man. His behavior is friendly, but an impulsive kind of person (Regland, Lehmann, Abedini, Blennow, Jonsson, Karlsson, & Gottfries, 2001). Mini-Mental State Exam of the patient also reveals normality as he scored 18 out of 30 with primary deficits in orientation, attention, registration, and recall. His son although insisted that the kind of less-serious attitude in talking about things he was showing was not typical to him a few years ago.

**Decisions to Treat Patients**

All the symptoms described in the case study show that Mr. Akkad is suffering from Alzheimer’s disease which is an incurable disease yet, but some important steps taken by a healthcare professional can minimize the level of suffering of the patient and his relatives/friends, and it might also add some years to the age of the patient. Following decisions are important to treat such patients:

1. Exercise and healthful diet
2. Conversation Sessions
3. Routine Check-up and Tours

Mr. Akkad’s case reveals that he has not reached a serious stage of the disease although he is near to that. He has lived a major part of his life, but the case study does not reveal any other health issue with the old man. He might suffer from loneliness and thoughts of the past which makes his mind tired and he turns silly (Mayeux, & Sano, 1999).

The first decision is to engage Mr. Akkad in some productive mental, oral, and physical exercise. Richard Mayeux argues in his journal Treatment of Alzheimer's disease. *New England Journal of Medicine* that Alzheimer's disease damages the human brain, but medical scientists do not know what causes this damage and how this can be stopped. Therefore, they suggest drugs that lessen the pain, but no medicine is available to rebuild the broken brain cells. What we can do is strengthening the immune system of Mr. Akkad rather than any other method (Steele, Rovner, Chase, & Folstein, 1990). Light exercise and conversation sessions with Mr. Akkad can help his mind to become comparatively stronger and brain healthier. I would also ask his family to tolerate his behavior and keep him engaged in productive discussion, mostly which interests him. A healthful diet can also help Mr. Akkad to have a stronger immune system. Although medical scientists have not yet invented a medicine for the disease, natural foods like almonds, nuts, milk, and vegetables in a reasonable amount can empower his body to build a competent defense against the disease (Schelterns, & Feldman, 2003). Mr. Akkad is at the stage where medical check-up becomes necessary for people, and I suggest proper medical and psychological check-ups of Mr. Akkad to prolong the severity of the disease. Finally, I would decide to refer some tours to the patient. Authors of the book *Treatment of Alzheimer’s disease with clioquinol. Dementia and geriatric cognitive disorders* argue that identification of Alzheimer’s disease is the obvious declaration of a person’s death. We might lessen the patient’s pain, but we cannot cure this disease. My decision to suggest the patient tours is intentioned to keep him active and curious about new and charming objects of the world so plaques and tangles would slowdown growing and dentate gyrus would enhance its growth. Plaques and tangles are presumably responsible for Alzheimer’s disease and dentate gyrus enhances curiosity.

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