What is Dementia?
Dementia is a general term that describes diseases and conditions that lead to loss of memory/learning skills and abilities to perform everyday activities. There are various types of dementia, for example:

- **Alzheimer’s disease** is the most common form of dementia. Symptoms can include memory loss, confusion, language difficulty, anxiety, and mood changes. Individuals with Down syndrome have increased risk of developing Alzheimer’s disease.

- **Vascular dementia**, also called ‘post-stroke’ dementia. Symptoms can include memory loss, impaired judgment, loss of motivation and planning skills.

- **Lewy Body dementia** involves sleep disruption, memory loss, changes in alertness and hallucinations.

- **Frontotemporal dementia** involves emotional and behavioral changes, with eventual memory or cognitive loss.

The Alzheimer’s Association describes the stages of dementia as the disease progresses from **early to late stages**. Each stage is characterized by progressive loss of functioning and changes in memory, thinking, language, mood and emotions. The timetable will vary from person to person. For individuals with Intellectual and Developmental Disability (IDD), decline may be more rapid.

Diagnosing Dementia
Screening, assessment, and diagnosis are often more difficult in individuals with IDD, especially when they have limited language and adaptive skills. Family and staff who have a long term relationship with the individual are key to identifying changes.

- Individuals served by DDS have access to specialty services to help assess memory concerns. Screening is not diagnostic but is used to identify possible presence of a disease. Your Area Office Nurse can assist with a referral to a geriatrician (a doctor that cares for older people) or a neurologist who specializes in Alzheimer’s disease and related dementias, who will consider the person’s medical history; do a medical exam and review observations of changes that the individual and their caregivers notice.

- A diagnosis is usually made after ruling out other medical conditions that could be causing changes, and by determining what changes are happening in the individual’s brain. Note that conditions such as Alzheimer’s disease cannot be cured. Some medical conditions that cause changes in function may be treatable.

**TAKEN ACTION:**
- Massachusetts DDS has an Aging and Developmental Disabilities Consultation Program. If you have concerns about an individual you care for, review Concepts of Change Related to Aging in this series and contact your Service Coordinator and Area Office (AO) Nurse through your local Area Office, which you can find through the Area Office Locator.
- The AO Nurse will help you complete an intake form to get the referral process going.
- Consult visits are performed by Dr. Julie Moran, a board certified geriatrician/ internist with specialty in older adults with IDD. DDS Aging Clinic Intake Form
- You can also see your own medical provider.
- At the visit, you’ll answer questions about changes you notice and when changes started to occur.
- Even after diagnosis, use logbooks to record changes in behavior and functioning, as well as to communicate among all staff, including medical, nursing and day program. Schedule a meeting with the individual’s health care provider.
- Arrange a team meeting to discuss recommendations and plan for possible lifestyle and program changes.
- DDS Family Support Centers can also help direct you to resources and services or call:
  MA Department of Developmental Services
  Phone: 617.727.5608 | TTY 617.727.9842

Other helpful resources:
- DDS/CDDER Webinars on Dementia and IDD
- Alzheimer’s Association of Massachusetts/New Hampshire
- Alzheimer’s Association Helpline: 800.272.3900
- National Task Group on Intellectual Disabilities and Dementia has a screening tool