Dementia: your questions answered
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This booklet gives responses to some common questions about Alzheimer’s disease and other types of dementia.

Information in this booklet is for anyone who wants to know more about dementia. This includes people living with the condition, their carers, friends, and families as well as anyone worried about their own health.

If you would like more information about dementia, including diagnosis, symptoms, and treatments, please complete the ordering slip at the back of this booklet or call our Infoline on 0300 111 5 111.

The information here does not replace any advice that doctors, pharmacists, or nurses may give you, but provides some background information that we hope you will find helpful.

This booklet was updated in November 2020 and is due to be reviewed in November 2022.

Please contact us using the details shown on the back cover if you would like a version of this booklet with references.
Introduction

It is normal to have questions about dementia and the diseases that cause it. Here we aim to address some of those questions and hope to challenge some common myths and misconceptions.

The basics

What is the difference between Alzheimer’s and dementia?

The word dementia is used to describe a set of symptoms. Dementia is caused by diseases that affect the brain, and the symptoms of dementia can vary a great deal. They can include problems with memory, decision-making, communication, confusion, changes in mood and behaviour, and hallucinations.

Dementia can be caused by a number of different diseases, with Alzheimer’s disease being the most common. Other causes of dementia include vascular dementia, dementia with Lewy bodies and frontotemporal dementia. In some cases, a person’s dementia is caused by more than one disease, such as Alzheimer’s disease and vascular dementia. This is often called mixed dementia. You can contact us or speak with your doctor for more information about the different causes of dementia.

I keep forgetting things, have I got dementia?

Most of us forget things every day, like people’s names or where we put our keys, but this is not necessarily a sign of dementia. In dementia, memory loss is more serious than forgetting things every now and then. It is memory loss that starts to interfere with everyday life, for example getting lost when going to the local shop.

There are many reasons why people experience memory problems. Some medicines and drugs can affect memory. Depression, anxiety, stress, vitamin deficiency, infections and thyroid problems can also make people forgetful. If you are worried about your memory and it’s getting worse, or getting in the way of everyday life, then you should talk to your doctor.
Does dementia run in the family?
Dementia becomes more common as people get older. Many of us will have a relative living with the condition – but this does not mean we will develop it too. Most of the time the genes passed down from our parents will only have a small effect on our risk of developing dementia. Our likelihood of developing dementia will usually depend on our age and lifestyle, as well as the genes we have.

In rare cases, someone may inherit a gene that directly causes a specific type of dementia. Some rare types of early-onset Alzheimer’s and frontotemporal dementia are caused by faulty genes which run in families. Directly inherited dementia accounts for just 1% of all dementia cases with symptoms often starting in a person’s 40s or 50s. For more information, ask us for our booklet ‘Genes and dementia’.

Is it true that diseases like Alzheimer’s only affect older people?
No, but most people with dementia are over the age of 65. In the UK over 42,000 people with dementia are under 65, around 5% of everyone affected. Many of these people are likely to be in their 50s or early 60s but some rare types of dementia can affect people even younger. This is called early- or young-onset dementia.

Is dementia becoming more common?
Although it may feel more common, the incidence of dementia (number of new cases in the population) is actually falling. This is believed to be due to people leading healthier lifestyles. However, prevalence of dementia (number of people with dementia in the population) is increasing. This is due to a few factors, such as longer life expectancy and a change in attitude and understanding of dementia. This means people may be more likely to go to their doctor about memory problems.

A higher prevalence can make it seem as though dementia is ‘on the rise’ when in fact rates are decreasing. However, due to increased life expectancy and increases in conditions like obesity and diabetes which are risk factors for dementia, it is possible we’ll see an increase in both incidence and prevalence in the future.
Questions about risk

What is a risk factor?
A risk factor is something that increases your likelihood of getting a disease. Your risk can be affected by things you can’t control such as your age and your genetics. However, factors you can change such as how active you are or whether you smoke can also alter your risk.

The biggest risk factor for developing dementia is age. The older you are the more likely you are to develop the condition. Over half of the people with Alzheimer’s disease in the UK are over the age of 90, but it is important to know that dementia is not a normal part of ageing.

Why isn’t there screening for dementia?
At the moment, screening the population for dementia does not happen. This is mainly because there is no simple and accurate way to identify people with early dementia. There is also not enough evidence yet to suggest that screening people who don’t have concerns about their memory is beneficial to them in the long term.

Scientists have found changes in the brain of people with Alzheimer’s disease up to 20 years before symptoms start. Researchers are working hard to find a way to detect these changes to allow for earlier and more accurate diagnosis. Being able to diagnose dementia as early as possible means that new treatments are likely to work more effectively, slowing down the disease progression and helping to preserve people’s memory and function for longer.

Are there more women than men with dementia?
Yes. In the UK, 65% of people with dementia are female and 35% are male. This is mostly because women tend to live longer than men and as dementia becomes more common as we age, there are more women to develop the condition. Research is underway to investigate whether men and women may have different risk factors for the condition.

A person’s risk of developing dementia rises from one in 14 over the age of 65, to one in six over the age of 80.
How can I reduce my risk of developing dementia?
There is currently no known way to prevent dementia. However, we do know some of the risk factors for the condition are within our control. These risk factors are the same as for cardiovascular disease, like heart disease and stroke. By leading a healthy lifestyle and doing regular exercise you will be lowering your risk of cardiovascular disease and you will lower your risk of developing dementia too.

To keep your heart and brain healthy:

- don’t smoke
- keep active and exercise regularly
- maintain a healthy weight
- eat a healthy balanced diet
- drink fewer than 14 units of alcohol per week
- control high blood pressure
- keep cholesterol at a healthy level

Have regular appointments with your doctor or practice nurse to monitor your cholesterol and blood pressure. This is especially important from mid-life onwards.

Research suggests it may be particularly important to keep healthy in mid-life to maintain good brain health and to lower your risk of dementia. For more information, ask us for our booklet ‘Reducing your risk of dementia’.

Questions about diet

What should I eat to keep my brain healthy?
A balanced diet is an important way to keep healthy. This should include eating:

- plenty of fruit and vegetables
- starchy foods like potatoes, pasta, rice, and bread
- some milk and other dairy foods
- some meat, fish, eggs, beans, and other non-dairy sources of protein
- but limiting food that is high in fat and sugar

Eating healthily is also important for people with dementia. Dietary deficiencies and dehydration may worsen a person’s symptoms and contribute to poor health.
Will particular foods help?

There is some growing evidence to suggest that certain diet patterns, such as the Mediterranean diet, may be protective for the brain and reduce the risk of developing dementia. A Mediterranean diet involves lots of fruit, vegetables, oily fish, and nuts. It is low in processed, and red meats, alcohol, and simple carbohydrates like white bread. Research is still ongoing in this area.

Oily fish, which contains omega-3 fatty acids, is an important part of a healthy diet. Some studies have linked higher omega-3 intake with a lower risk of developing dementia. However, current evidence does not support the use of omega-3 supplements to prevent memory and thinking problems.

Are certain fats beneficial?

Saturated fats found in processed meat, dairy and fried foods are linked to poor cardiovascular health. Having poor cardiovascular health increases your risk of developing dementia, and a range of other health conditions.

Fats found in oily fish, nuts, olive oil and avocados are called poly and monounsaturated fats. These can be enjoyed as part of a healthy balanced diet in moderate amounts. However, there is no evidence to suggest that consuming high levels of these fats plays a protective role against the development of dementia.

Can Ginkgo biloba, green tea, or turmeric help people with dementia?

These natural products are believed to have anti-inflammatory properties which may mean they are protective against inflammation in the brain. Research results so far have been mixed. The products are being studied in early-stage research to see if they can help, but there is currently no conclusive evidence that they could prevent or treat dementia.

supplements

there is no current evidence for the use of supplements to prevent or treat dementia
Questions about diet

Does drinking alcohol decrease my risk of developing dementia?
The NHS lower-risk guidelines recommend that both men and women drink no more than 14 units of alcohol a week, spread over three or more days. Regularly drinking more than this increases your risk of developing dementia by around 17% according to recent studies.

Very heavy drinking causes alcohol-related brain damage (ARBD), a group of conditions including Wernicke-Korsakoff syndrome and alcoholic dementia.

The UK Chief Medical Officer advises that even drinking within the recommended limits can cause a low risk of harm to general health, from diseases including cancer, stroke, and liver disease.

Is there any benefit in taking B vitamins to protect against dementia?
High levels of the amino acid homocysteine have been linked to an increased risk of Alzheimer’s disease. Certain B vitamin deficiencies, such as vitamin B12 and folic acid, can cause high homocysteine levels if left untreated.

If you are concerned you have a B vitamin deficiency, which can cause similar symptoms to dementia, you can ask your doctor for a blood test. The latest evidence suggests that while supplements of folic acid and vitamin B12 can reduce homocysteine levels, they do not affect memory and thinking skills in healthy older people.

One study showed that high doses of folic acid and vitamin B12 could slow brain shrinkage in people with early memory problems and high homocysteine, but there is currently not enough evidence to suggest that B vitamin supplements will slow the onset or progression of dementia.
Questions about metals

Can aluminium affect the risk of developing Alzheimer’s?
Despite occasional publicity, there is no convincing evidence that everyday exposure to aluminium increases the risk of developing Alzheimer’s disease or other causes of dementia. During the 1960s and 1970s, aluminium was suspected as a cause of Alzheimer’s, but since then studies have failed to confirm a direct connection. The amount of aluminium we are exposed to on a day-to-day basis is so low, our bodies can safely remove this, and it is not thought to pose any threat.

Is there a link between vaccines and an increased risk of dementia?
Small amounts of metals, including mercury and aluminium are often found in vaccines as an adjuvant. An adjuvant improves how well the vaccine works. There has been extensive research into the safety of these vaccines. There is no evidence to suggest that the trace amount of metals in vaccines have any long-term health effects. Recent research has even found that people who receive the flu vaccine have a lower risk of Alzheimer’s disease.

Questions about keeping active

Why is physical activity important?
Regular physical activity has many health benefits. It helps to lower and maintain healthy blood pressure, which is good for heart health, and reduces the risk of stroke. It also helps you keep your weight in check, which will reduce your risk of type 2 diabetes and other conditions.

While research is underway to investigate a direct effect of exercise on dementia risk, medical conditions like high blood pressure, obesity and diabetes are known risk factors for dementia (see page 08). Therefore, staying active may not only help maintain a healthy body, but has knock-on benefits for our brain health too.

Should I keep my brain active to lower my risk?
Mentally-stimulating activities may include doing crossword puzzles or Sudoku, learning a new skill, or taking up a new hobby. It’s not clear which, of these things could be most beneficial, but it’s a good idea to do things you enjoy to keep your mind active.

Several studies have suggested a link between mentally-stimulating activities and a lower risk of dementia. Other studies have found that spending more time in education is associated with a lower risk. Research is ongoing in these areas to see which activities might be most beneficial.
Can taking statins lower my risk of dementia?
Statins are used to treat high cholesterol. High cholesterol levels have been linked to an increased risk of developing dementia, particularly vascular dementia, and Alzheimer’s. However, recent large trials have not provided evidence that statins could prevent dementia. If you are concerned about high cholesterol, you can discuss with your doctor about having a blood test.

Can certain medications alter our risk of developing dementia?
Anticholinergic drugs are a family of drugs which can be used to treat allergies, bladder disorders, depression and more. Some research has found that taking multiple anticholinergic drugs for a prolonged period, more than three years, may increase someone’s risk of developing dementia. Further research is needed to investigate this relationship, and if you are concerned about the medicines you take, you can speak with a pharmacist or doctor.

Should I take aspirin to prevent Alzheimer’s?
This is not recommended. Medicines known as non-steroidal anti-inflammatory drugs (NSAIDs), which include aspirin and ibuprofen, have been tested to find out whether they could reduce Alzheimer’s risk. Clinical trials have found no evidence that low-dose NSAIDs can prevent dementia. There are also concerns about side-effects, so it is not advised to take these drugs to protect against Alzheimer’s.
Where can I go for help?

If you are worried about your health or memory, you should discuss it with your doctor who will listen to your concerns, organise tests, offer advice and refer you to a specialist if necessary.

For more information about dementia, including symptoms, diagnosis, treatments and causes, contact us using the tear-off slip or visit our website, www.alzheimersresearchuk.org

Our information also includes a list of organisations that can help you with practical and emotional support if you or someone you know is affected by dementia.

Send me more information

For free information, simply complete this slip and drop it straight in a post box. Alternatively, phone us on 0300 111 5 555.

I would like to know more about

- [ ] Dementia: symptoms, diagnosis, causes, prevention and care (SCIHAAD)
- [ ] Treatments for dementia (SCIHTMT)
- [ ] Reducing your risk of dementia (SCIHIRISK)
- [ ] The latest dementia research (SMTTHINK)

Name

Address

Email

We’d like you to be the first to know about the latest research and how your support makes a difference, as well as ways you can get involved and help fund our life-changing work. We’ll keep your information safe and never sell or swap it with anyone.

Let us know how we can contact you (tick below):

- [ ] Post  - [ ] Email  - [ ] Telephone  - [ ] Text message

You can change how we talk to you at any time, by calling 0300 111 5 555 or emailing enquiries@alzheimersresearchuk.org

Our Privacy Notice can be found at www.alzheimersresearchuk.org/privacy-policy and explains how we will use and store your information.
Backed by our passionate scientists and supporters, we’re challenging the way people think about dementia, bringing together the people and organisations who can speed up progress, and investing in research to make breakthroughs possible.

We believe that medical research can and will deliver life-changing preventions, treatments and one day, a cure for dementia.

Find out more
If you would like to be kept up to date with the latest in dementia research, subscribe to our quarterly ‘Think’ newsletter by calling 0300 111 5 555 or using the tear-off slip.
We are the UK’s leading dementia research charity dedicated to making life-changing breakthroughs in diagnosis, prevention, treatment and cure.

We welcome your comments to help us produce the best information for you. You can let us know what you think about this booklet by contacting us using the details below.

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