

What is vascular dementia?



**Alzheimer's
Research
UK**

**The Power
to Defeat
Dementia**



Information in this introductory booklet is for anyone who wants to know more about vascular dementia. This includes people living with vascular dementia, their carers, families and friends. The booklet gives an overview of the causes, symptoms and treatments.

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

The booklet was updated in January 2018 and is due for review in January 2020. Please contact us if you would like a version with references or in a different format.

What is vascular dementia?

The word dementia is used to describe a group of symptoms. These include memory loss, confusion and mood changes and are severe enough to affect day-to-day life.

Dementia is not a disease in itself, but is caused by different diseases, the most common being Alzheimer's. Vascular dementia is the second most common form of dementia, causing up to 20 in every 100 cases.

Vascular dementia occurs when blood vessels in the brain are damaged. This reduces blood flow to brain cells, which affects how they work.

Sometimes this blood vessel damage can cause memory and thinking problems that are not severe enough to be considered dementia. This may be called vascular cognitive impairment.

Some people have both vascular dementia and Alzheimer's disease; this is called mixed dementia.



The most common types of vascular dementia are:

Stroke-related dementia A stroke occurs when blood supply to a part of the brain is suddenly cut off. This may cause problems with movement, coordination, speech or sight depending on the part of the brain affected. If someone has problems with memory and thinking after a stroke, they may be diagnosed with post-stroke dementia. If the problems develop after a number of strokes or mini-strokes (transient ischaemic attacks, or TIAs), it may be described as multi-infarct dementia. Sometimes these mini-strokes are too small for a person to notice.

Subcortical vascular dementia This is caused by changes to very small blood vessels in the brain, often referred to as small vessel disease. The person usually does not notice these changes but they can cause memory and thinking to get worse over time, unlike the sudden change that can happen after a stroke.

Symptoms

Vascular dementia can have symptoms similar to Alzheimer's and other forms of dementia. These may include memory loss, disorientation and problems with communication.



There can also be more specific symptoms and these will differ depending on the area of the brain affected.

These symptoms may include:



Slower thinking

Taking more time to process information and to form thoughts and sentences.



Personality changes

People may become low in mood, more emotional or lose interest in what's happening around them.



Movement problems

Difficulty walking or changes in the way a person walks.



Stability

Unsteadiness and falls.



Bladder problems

Frequent urge to urinate or other bladder symptoms. This can be common in older age, but can be a feature of vascular dementia when seen with other symptoms.

The symptoms of vascular dementia get worse over time. In the later stages the condition affects more aspects of everyday life and people need help eating, dressing and using the toilet.

Vascular dementia normally progresses over several years. However, the speed of change can vary over time and from person to person. There may be a sudden change after an event such as a stroke.

Diagnosis

It is important to get the right diagnosis so that the right treatments and help can be given. If you are worried about your health or someone else's, you should talk to your GP.



If your doctor suspects dementia, you may be referred to a memory clinic or another specialist clinic.



You will be asked about your symptoms and medical history. You may have a physical check-up and some memory and thinking tests.



You may also be sent for other tests including brain scans and blood tests.

Together these tests will help a doctor to identify the problems in memory and thinking and the likely cause.

Brain scans such as CT (computerised tomography) or MRI (magnetic resonance imaging) may be helpful in giving a diagnosis of vascular dementia. This is because they allow doctors to look for changes in blood vessels that are common in this type of dementia. Brain scans also help doctors rule out other conditions that could cause similar symptoms.

Treatments

There are currently no specific treatments for vascular dementia. However a doctor may prescribe medicines to treat other underlying conditions that can damage blood vessels.



These include diabetes, stroke, high blood pressure, high cholesterol and heart problems. A doctor may also advise taking up a healthier lifestyle. This could include stopping smoking, taking more exercise, maintaining a normal weight and eating and drinking healthily.

Some of the symptoms of vascular dementia may be managed by physiotherapy, occupational therapy or speech therapy.

People with vascular dementia may benefit from cognitive therapy. These activities are designed to stimulate thinking skills and engage people. They are often group-based and include games with an emphasis on enjoyment.

For people with vascular dementia and Alzheimer's together (mixed dementia), there are some drugs that may help with the symptoms. You can discuss treatment options with your doctor.

To help relieve symptoms of anxiety, agitation and aggression, a doctor may first assess someone's health and environment. This could help identify any causes or triggers of agitation or aggression. Non-drug approaches such as aromatherapy or music therapy may also be considered. This might depend on a person's preference as well as the availability of treatments.

If someone experiences severe and distressing problems with agitation and aggression that can't be controlled with non-drug approaches or milder medications, then antipsychotic drugs may be considered. However, these can have severe side-effects, and are not suitable for everyone. They should be carefully monitored. Your doctor will consider what may be appropriate.

For detailed information about all the treatments available, ask for our '**Treatments for dementia**' booklet.

Risk factors

A number of factors may increase the likelihood of damage to blood vessels in the brain.

These include smoking, high blood pressure (known as hypertension), high cholesterol, type 2 diabetes, obesity and heart problems. For this reason, all of these factors can increase a person's risk of vascular dementia.

Although some of these risk factors can have a genetic basis, managing high blood pressure and high cholesterol might help to lower the risk of vascular dementia. Some research suggests that regular exercise and a healthy diet, especially in midlife and beyond, might also help to lower our risk.

In exceptionally rare cases, vascular dementia can be caused by an inherited genetic disorder. One disorder is called CADASIL (cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy). People with this disorder often have a family history of vascular problems such as strokes. If you are concerned about rare inherited forms of vascular dementia, you should discuss this with your doctor who may be able to refer you to a specialist clinic.

For good heart health, and to help lower your risk of vascular dementia:



don't smoke



keep active and exercise regularly



maintain a healthy weight



eat a healthy balanced diet



only drink alcohol within Chief Medical Officers' guidelines



keep cholesterol and blood pressure under control.

Maintaining a healthy lifestyle in your forties and fifties seems to be particularly important for helping to lower your risk of dementia. This includes not just staying physically active but also keeping mentally and socially active.

Support

There is a range of support organisations that offer practical and emotional support for people with dementia and those helping to care for them.

These include:

The **Admiral Nurse Dementia Helpline** is provided by Dementia UK. The Helpline is staffed by trained dementia nurses who can give people with dementia and their families practical advice, support and tips. Call **0800 888 6678** or email **helpline@dementiauk.org**

Alzheimer’s Society provides information, help and local support groups. Call **0300 222 1122** or email **enquiries@alzheimers.org.uk**

Alzheimer Scotland offers support services, information and advice to people in Scotland. Call **0808 808 3000** or email **info@alzscot.org**

For more details of these and other organisations, request our booklet **‘Caring for someone with dementia: organisations that can help’** or visit our website at **www.alzheimersresearchuk.org**

You can also speak to your doctor or practice nurse for advice.

Research

Alzheimer’s Research UK has funded more than **£14.7 million** of pioneering research to help advance our understanding of vascular dementia.



Research is looking at how blood vessels can become damaged in the brain and how this damage causes the symptoms seen in vascular dementia. Our scientists are also working to develop new and innovative ways of preventing and treating vascular dementia.

We believe that dementia can only be defeated through research. Thanks to the generosity of our supporters, we will continue to fund pioneering studies into vascular dementia.



Find out more

If you have questions about dementia research or want to find out more about how to get involved in research, contact our **Dementia Research Infoline** on **0300 111 5 111** or email **infoline@alzheimersresearchuk.org**

The Infoline operates 9.00-5.00pm Monday to Friday. Calls cost no more than national rate calls to 01 or 02 numbers and should be included in any free call packages.

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Send me more information

For free information, simply complete this slip. You can drop it straight in a post box or put it in an envelope labelled with the freepost address overleaf. Alternatively, phone us on **0300 111 5555**.

I would like to know more about

Dementia: symptoms, diagnosis, causes and risk reduction (SCIHIAAD)

Treatments for dementia (SCIHITMT)

Caring for someone with dementia: organisations that can help (SCIHCARE)

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 5555** 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.

We are the UK's leading research charity aiming to defeat dementia.

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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