





Don't Jump to Conclusions!

When an older person seems to be losing their life skills, what should you do?

WARNING SIGNS:

- ✓ Decreased activity level
- ✓ Sleeping in daytime
- ✓ Not participating in usual activities
- ✓ Poor appetite
- ✓ Weight loss
- ✓ Loss of mobility skills
- ✓ Unable to do things they used to be able to do
- ✓ Aggressive behaviors
- ✓ Self-injurious behaviors
- ✓ Onset of seizures

All of these symptoms may be associated with dementia... BUT...

they are also symptoms that may be caused or made worse by one or more OTHER problems such as:

- ✓ Thyroid problems
- ✓ Sleep apnea
- ✓ Heart problems
- ✓ A specific vitamin deficiency
- ✓ Pressure on the spinal cord
- ✓ Depression
- ✓ Diabetes
- ✓ Medication side effects
- ✓ Vision or hearing problems

Individuals who have Down Syndrome are at higher risk for these problems. It is very important that other problems be ruled out before we assume the person has dementia!

DOWN SYNDROME and ALZHEIMER'S DEMENTIA

Because people who have Down Syndrome have a higher rate of getting Alzheimer's Dementia, it is easy to assume that any symptoms must be Alzheimer's.

Don't jump to conclusions!

Make sure the person has a formal medical evaluation to diagnose the problem. Be sure to:

- ✓ Have a familiar advocate attend the appointment to describe the problem and answer questions.
- ✓ Take a copy of the person's health history, including complete medication list, and records of any seizures or problem behaviors.
- Bring documentation of the person's normal level of function and how this has changed over time.

If you feel the health care provider hasn't addressed all the possibilities, ask for help from the person's DDD Case Resource Manager.

BE PREPARED:

For all the people you support who are age 50 or older, document their baseline or normal level of function. If abilities are lost gradually, it may be hard to remember exactly what a person used to be able to do, or how long it has been different.

One way to document a person's baseline level of function is to make a videotape record (you obtain their consent first, of course) of current abilities and skills in each major area:



MOBILITY: How they get around in their home and community
DEXTERITY: How they function with manipulative hand skills, such as eating and/or grooming
COMMUNICATION: How they are able to speak, understand, and

follow instructions, answer questions, and/or use a communication device **ADLs:** How they are able to take care of personal needs, such as dressing, brushing teeth, preparing food, eating, etc.

Make a written list of what the videotape includes and tape the same activities every 1 to 2 years for comparison. Keep a separate tape for each person (don't forget to date it!). The tape can then follow the person if they move.

