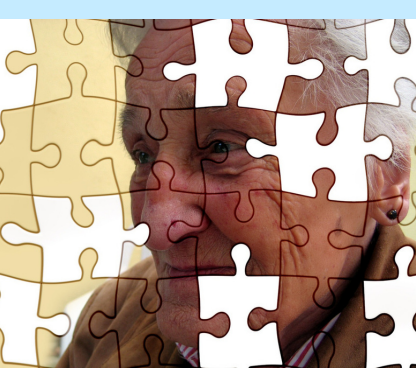




YOUNG ONSET DEMENTIA

Young Onset Dementia is a disease that is not commonly known, and people must be aware of this. Having a book on this topic can be beneficial for teenagers and young adults and even those in mid-age to have access to because they could have some questions that may have been answered by having a read-through of a book and may help them gain more knowledge and understanding of the disease. When the term Dementia is heard, it is easy to link it with older adults not knowing that someone in their 40s can also have it, so having access to information like this is essential.

CHAPTER 1 What is YOD

Dementia is a disease that causes degeneration in the brain that causes people to have a rapid decline in their ability to think, remember, communicate and reason, affecting their personality, mood and behaviour. Young Onset Dementia (YOD) is when symptoms develop before the age of 65 and is usually between 30-65 years of age (DementiaUk, 2021).

CHAPTER 2 Symptoms of YOD

YOD dementia is rare, and early symptoms may be hard to recognise and may not be obvious. However, it can present a wide variety of symptoms, including behavioural, neurological and systemic (Ray and Denning, 2020).

According to the NHS (2020), different types of dementia affect people differently, which will cause everyone to have a different experience of the symptoms. However, there are some common symptoms of YOD that may occur before someone get diagnosed with the disease; these include:

- difficulty concentrating
- impaired memory
- being confused about time and place
- finding it challenging to carry out routine daily tasks, such as shopping and getting confused about the correct change
- alterations in mood
- having difficulty following a conversation or finding the right word

CHAPTER 3 Types of YOD

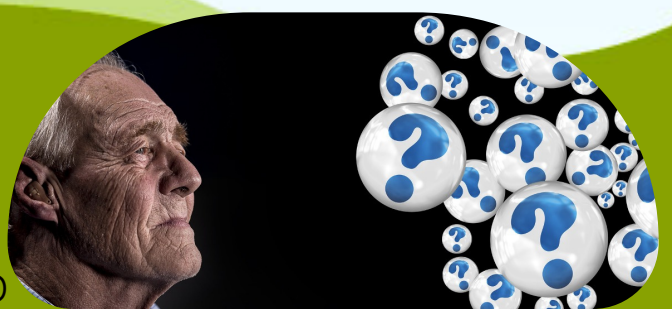
Alzheimer's disease (AD) is the most common type of dementia in YOD; the percentage of people is higher in late-onset dementia (50%-70) than YOD (Draper and Withall, 2016). Frontotemporal dementia and Huntington disease are other types of dementia and are more present in younger people which Lewy bodies and Parkinson dementia are less common. Different types of dementia known as secondary dementia are more common in YOD and have around 20% of cases. This dementia includes alcohol-related dementia, human immunodeficiency virus-related dementia, traumatic brain injury and dementia in multiple sclerosis (Draper and Withall, 2016).

CHAPTER 4 Living/Managing YOD

For many people living with YOD, it can be challenging and disruptive to their lives. The disease can affect a person's identity, derail their life plans, and threaten self-confidence and self-image. According to Johannessen et al. (2018) a longitudinal study was carried out on people with YOD living alone of both sex and found that some can describe their experiences and needs in the long run throughout the progression of their dementia. Their main focus was to preserve and protect their identity and master and control their lives as the disease progresses (Johannessen et al., 2018).

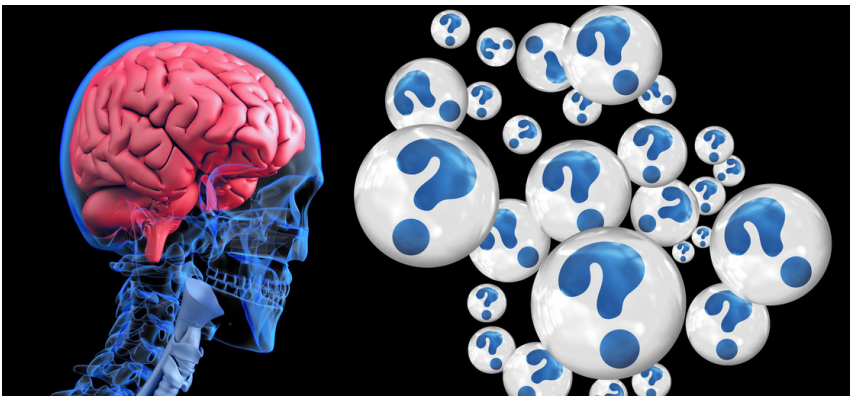
CHAPTER 5 Treating YOD

According to Alzheimer's Society (2021), it was found that dementia cannot be cured, and only treatment and support for managing the disease can be available to someone living with YOD. A non-drug treatment may be open and includes talking to a therapist, which may help with depression or anxiety. Also, treatment such as cognitive stimulation therapy which helps with some of the symptoms may be helpful to non-drugs treatment that may help with changes in behaviour (Alzheimer's Society, 2021).



"Understandably, younger people and their families are very keen to find a disease-modifying treatment and are often disappointed with the lack of currently available options. Many are willing to participate in clinical trials in the hope of improvement" (Draper and Withall, 2016).

Opiate treatments	Holistic treatments
According to Hartmann et al. (2021), people with advanced YOD are classified as having severe cognitive, physical and functional impairment, and most will need 24-hour care. A person with advanced YOD will always be subject to palliative care when treatment aims not to regain cognitive functioning or prolong life but to make them as comfortable as possible. Hartmann et al. (2021) also state that in a study that was carried out, the proportion of person with advanced dementia that was treated with antipsychotics at the time of the assessment was almost 40%. About 35% received antidepressants. Antidementia drugs were prescribed in 27% of the patients. Seven per cent were treated with benzodiazepines. Six per cent had opioids, 16% non-opioid pain medication. There were no significant differences between YOD and LOD about the point prevalence of psychotropic drugs or pain medication.	According to Chang et al. (2016), many people with dementia and their caregivers turn to complementary medicine in the absence of effective pharmacological therapies. Herbal medicine, acupuncture, nutraceuticals, yoga, tai chi, and music therapy are common complementary medicine interventions for dementia and dementia risk reduction. Herbal medicine was used to boost memory function and increase longevity more than 2000 years ago in ancient China, where herbal remedies were used to boost memory function and increase longevity. There is preliminary preclinical and clinical evidence to support herbal medicines for dementia, either as single herbal preparations or as complex herbal formulations (Chang et al., 2016).



(Pixabay, 2021)

CHAPTER 6

Help and Support for YOD

YOD is a disease that impacts the lives of those who suffer from it and those who care for people who have got the disease. These people must not be afraid to ask for help and know how to access services if they need it. Groups and support activities tailored to younger people can be challenging to locate, and what is available will depend on where the person lives. Anyone who needs any question answering or has any concerns about YOD can call the dementia helpline, send an email or even fill out a form on the dementiaUK webpage (DementiaUK, 2021).

Another example that can support people living with dementia is making them feel as normal as possible. An article by Weller (2017) looked at a village in Dutch where people with dementia can lead an everyday life by going to the grocery store, complaining about the weather and playing a bingo game every week. Hogewek disguised their nursing home to look like the outside world, which helps people with mild to severe dementia suffers a little less in their remaining years. The nursing home has a policy that rejects the idea that people with dementia should miss out on the finer things in life, such as wine and beer, Even if they are not associated with the social norms that most other people do (Weller, 2017).



(University of Glasgow, 2021)

REFERENCE

- Alzheimer's Society (2021) Treatment for people with young onset dementia. Available at: <https://www.alzheimers.org.uk/about-dementia/types-dementia/treatment-people-young-onset-dementia#content-start> (Accessed: 9 November 2021).
- Chang, D., Liu, J., Bilinski, K., Xu, L., Steiner, G.Z., Seto, S.W. and Bensoussan, A. (2016) 'Herbal medicine for the treatment of vascular dementia: an overview of scientific evidence', *Evidence-Based Complementary and Alternative Medicine*, 2016, Article ID 7293626, pp. 1-15. DOI: 10.1155/2016/7293626
- Dementia UK (2021) Find young onset dementia support groups and services. Available at: <https://www.dementiauk.org/about-dementia/young-onset-dementia/find-support/> (Accessed: 22 November 2021).
- Dementia UK (2021) What is Young Onset Dementia. Available at: <https://www.dementiauk.org/about-dementia/young-onset-dementia/what-is-young-onset-dementia/> (Accessed: 8 November 2021).
- Draper, B. and Withall, A. (2016) 'Young onset dementia', *Internal Medicine Journal*, 46(7), pp.779-786. DOI:10.1111/imj.13099
- Hartmann, J., Roßmeier, C., Riedl, L., Dorn, B., Fischer, J., Slawik, T., Fleischhaker, M., Hartmann, F., Egert-Schwender, S., Kehl, V. and Haller, B. (2021) 'Quality of Life in Advanced Dementia with Late Onset, Young Onset, and Very Young Onset', *Journal of Alzheimer's Disease*, 80(2021), pp. 283-297. DOI: 10.3233/JAD-201302
- Johannessen, A., Engedal, K., Haugen, P.K., Dourado, M.C.N. and Thorsen, K. (2018) "To be, or not to be: experiencing deterioration among people with young-onset dementia living alone", *International Journal of Qualitative Studies on Health and Well-being*, 13(1), pp.1490620. DOI: 10.1080/17482631.2018.1490620
- National Health Service (2020) Symptoms of Dementia. Available at: <https://www.nhs.uk/conditions/dementia/symptoms/> (Accessed: 23 November 2021).
- Pixabay (2021) Alzheimer's [image]. Available at: <https://pixabay.com/images/search/alzheimer's/> (Accessed: 8 November 2021).
- Ray, M., and Denning, T. (2020) 'Understanding the causes, symptoms and effects of young-onset dementia', *Nursing Standard*, 36(1), pp.43-50. DOI:10.7748/ns.2020.e11620
- University of Glasgow (2021) Signs of Alzheimer's Disease Detectable Before Significant Symptoms Are Obvious [image]. Available at: <https://scitechdaily.com/signs-of-alzheimers-disease-detectable-before-significant-symptoms-are-obvious/> (Accessed: 8 November 2021).
- Weller, C (2017) Inside the Dutch 'dementia village' that offers beer, bingo, and top-notch healthcare. Available at: <https://www.businessinsider.com/inside-hogewey-dementia-village-2017-7?r=US&IR=T> (Accessed: 27 November 2021).