



Assessment 1

Supporting Paper for Vascular Dementia PowerPoint Presentation.

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Contents

Table of Contents

Introduction	3
What is vascular dementia?.....	3
Classification of Vascular Dementia episode within ICD-10.	3
Types of Vascular Dementia.	3
Causes of Vascular Dementia/Aetiology.....	3
Vascular Dementia Symptoms/Signs.	4
Vascular Dementia Diagnosis.....	4
Vascular Dementia Historical View.....	4
Case Study.....	5
Professional principle when working with vascular dementia patients.	5
Mental capacity Act 2005, for this Act:.....	5
Current Treatment of Vascular Dementia.	5
Managing the Stigma.	6
Recommendation for Improvement.	6
Conclusion:.....	6
References	6
References	7
Appendix.....	8-14

Introduction

This assignment is going to give a general overview and historical perspectives of vascular dementia and current treatment. In this report we still move on to discuss its classification within the ICD-10 manual and went on to focus on vascular dementia, signs, symptoms, the process of diagnosis, current treatment and as well as historical treatment, and professional guidelines when working with patients that are suffering from vascular dementia will surely be included in this report.

What is vascular dementia?

Paras Healthcare (2019) stated that vascular dementia can be referred to as a set of symptoms that result in a decline of cognitive skills of a person that can include, loss of memory and difficulty in reasoning, judgment, communication, and problem-solving. All these will occur when the brain cell is damaged due to a lack of blood flow to the brain that deprives the brain of much-needed oxygen. (Paras Healthcare, 2019) see PowerPoint slide1 in the appendix for the diagram.

Age over sixty-five and above is more likely and is the second most popular type of dementia after Alzheimer's disease, and it is estimated it affects about 150,000 people in the UK, according to a study conducted by Dementiauk (2022) as highlighted, 17% to 20% of about 850,000 dementia diagnoses in this country have vascular dementia (Dementiauk, 2022).

Classification of Vascular Dementia episode within ICD-10.

Dementia disorder [F00-F03]

Vascular dementia episodes [F01]

And this section included disorders because of disease of the brain, due to progressive nature of which there is kind of disturbance of various cortical functions, including learning, language, judgment and memory capacity. (WHO, 2010).

Types of Vascular Dementia.

There are various types of vascular dementia according to Alzheimer's (2020), although they differ in the reason for the harm and what part of the brain is being affected, and these are some of them.

- stroke-related dementia: In almost all strokes, the blood vessel that is in the brain becomes little and has been deprived by a clot.
- post-stroke dementia: this is when someone suffers a stroke more than once, then the possibility of the person developing this type of dementia might be higher.
- multi-infarct and single-infarct dementia: this vascular dementia occurs to someone when one or a lot of smaller strokes happen to the same person.
- Subcortical dementia: this is due to the disordered of the very few blood vessels that lie deep inside the brain.
- Mixed dementia (Alzheimer's disease and Vascular dementia): this is when the cause of the dementia is thought to be a combination of both Vascular dementia and Alzheimer's disease (Alzheimers, 2022).

Causes of Vascular Dementia/Aetiology.

- A stroke: this is a situation, where the blood that runs to part of the brain is accidentally cut off as demonstrated by NHS (2020).
- Blockage and narrowing of a few blood vessels within the brain.
- Lots of mini-strokes (TIAs, or transient ischaemic attacks) can lead to very small but widespread harm to the brain.

And in most cases, all these problems might be connected to an underlying issue such as diabetes, high blood pressure, and some lifestyle risk factors that can contribute as well, such as being overweight, drinking, smoking, an unhealthy diet, age, family history, and ethnicity. (NHS, 2020) see PowerPoint slide6 in the appendix for the diagram.

Vascular Dementia Symptoms/Signs.

For example, someone with vascular dementia according to NIH (2021) may start experiencing,

- Delusions or hallucinations: this is the time when they believed the unreal is real.
- Transform personality, mood, and behavior such as anger, agitation, and depression.
- Poor judgment and deprived capacity to perceive problems.
- Lost interest in humans or things.
- Find it difficult in writing or reading.
- Changes in the way and time they used to sleep.
- Have difficulty with language in finding the right word at times.
- Always misplacing things.
- Forgetting past or current events.
- They find it difficult in carrying out work that used to be easy in the past, like paying bills.
- They find it difficult to learn new information and routines or follow guidelines (NIH, 2021).

Vascular Dementia Diagnosis.

No one test can establish that you are suffering from vascular dementia as it is being quoted by Mayo Clinic (2021). Your doctor will always make conclusions based on the information you provide about your medical history.

- Lab test: Cholesterol, Blood sugar, and Blood pressure to also rule out possible causes of confusion and memory loss, Vitamin deficiencies, and Thyroid disorders test may be ordered.
- Neurological examination: Your doctor will test your ability to walk around the room, balance, sense of sight and touch, reflexes, coordination, strength, and muscle tone.
- Brain imaging: This is an investigation to assist your doctor to zero his mind in on other possibilities for the likely cause of the symptoms.
- (MRI) Magnetic resonance imaging: this machine used a strong magnetic field and radio waves to generate a detailed diagram of your brain. See PowerPoint slide8 in the appendix.
- Computerized tomography scan (CT): This type of scan can give information about the way your brain is structured and passed a judgment in case there is a change in tumors or blood vessels or see evidence of ministroke (TIAs or transient ischemic attacks) or a stroke.
- Neuropsychological test: This assesses your capacity to remember and learn information, or to write, speak, and understand language, working with numbers and problems solving tests. (Mayo Clinic, 2021)

Vascular Dementia Historical View.

According to Roman (2003) vascular dementia can be referred to as the time of cases of dementia postapoplexy explained in 1672 by Thomas Willis. And for most of the 18 century and the beginning of 19 century, “brain congestion” (reach all likelihood to the impact of untreated high blood pressure) this is most usual way at that time, to diagnose sickness starting from cognitive decline to stroke and anxiety and the most common therapy at that time is bloodletting.

But not until 1894, with the help of Alois Alzheimer and Otto Binswanger who differentiated vascular dementia from paralytic dementia as a result of neurosyphilis. And during the 1960s, the clinical research and seminal neuropathological of New Castle school in the UK established the current era of vascular dementia (Roman, 2003).

Case Study.

68 years old Sean Warner is a retired structural engineer who has been having difficulty with his short-term memory, although his relative had dismissed his experiences and attributed them to old age. As time goes on the family noticed some changes in his ways of life like finding it difficult to do daily basic tasks and increased confusion this sign triggered a visit to the GP, who then confirmed Mr. Warner to be having dementia due to Alzheimer's disease. At 45 years old Mr. Warner suffer a minor stroke and since then he has been on 75mg of aspirin daily, he has been advised to stop smoking and has not done so, although is otherwise in very good health (BNF, 2017).

This has shown that when the disease is been spotted early and with the help of quick diagnosis and treatment it can be of a good positive impact on the patient as has been seen in this case study.

Professional principle when working with vascular dementia patients.

Referencing a NICE guideline that was published in 2017, it recommended some professional principles when working with someone as described by NICE (2017).

- And 1.1.1 of the articles says, always enable and encourage patients to provide their own opinions and views about their care.
- Also, 1.1.3 of the guidelines emphasizes that when working with patients, remember to use some structured tool to know their personal history, routines as well as what they like and dislike (NICE, 2017)

Mental capacity Act 2005, for this Act:

- You must assume that someone has the capacity unless it has been confirmed and established by the relevant authority that the person lack capacity.
- Any decision made or an act done for or on behave of patients should be made or done in the best interest of the patients (Legislation, 2005).

Current Treatment of Vascular Dementia.

Konno et al., (2012) highlighted that vascular dementia has no cure but most importantly before commencing the treatment, it is very important to investigate and establish the pathogenetic type of vascular dementia that is affecting the patient. And this may involve preventing any of the risk factors that are within. Moreover, early intervention and effective cure for stroke risk factors are possible to bring to an end repeatedly cerebral infarctions that can lead to high cerebral perfusion with improvement and stabilization of someone's cognitive decline, according to the finding and it also suggested that 325mg of aspirin a day together with stroke risk factors management have proved beneficial as well, (Konno et al., 2012).

- Treatment to manage cholesterol, diabetes, triglycerides, and Aspirin to inhibit clot formation issues. Atenolol and Adiponectin for high blood pressure and Metformin for diabetes.
- Lifestyle modifications: involved in physical activity, following a healthy diet routine reducing smoking or quitting alcohol consumption.

- Routine to make a better blood flow to the brain e.g., angioplasty, carotid endarterectomy, and stenting; the carotid arteries are found in the neck that organized blood circulation from the heart down to the brain.
- Medications: to treat the advancement of dementia such as cholinesterase inhibitors.
- Therapy: Patient/career education: advising both caregiver and the patient to help manage the condition (Stanford Health Care, 2021).

Managing the Stigma.

- Dementia-friendly community: this is a village, city, or town where dementia patients are understood to be respected and supported as a way of coping with the stigma of the disease and reducing the stigma that is associated with dementia.
- Dementia Action Alliance: this is a global network of various charities willing to promote international action on dementia (Local Government Association, 2015).
- Dementia Friend: this was originated by Alzheimer's Society to change the narratives about the way people talk, act and think about dementia patients so that they can have confidence in themselves, as this has helped to prevent some of the stigmas that come with it by building awareness around the subject and helping them to involve in community life (Health Awareness, 2019).

Recommendation for Improvement.

Patients suffering from vascular dementia should be encouraged to participate and select from various activities that are structured to their lifestyle so that well-being can be encouraged as quoted by the British Geriatrics Society (2019). And before someone goes through, a pharmacological or non-pharmacological cure for the distress, it will be a good practice to always have a structure evaluation (British Geriatrics Society, 2019).

A finding carried out by Kerkar et al., (2019) suggested that music can be used to control someone's state of mind, because this will use different music and sounds that will play for 30 minutes that can make an impact in enhancing the patient's state of mind when the condition starts agitating, (Kerkar et al., 2019) and Acupuncture therapy also uncover the energy by way of targeting on the specific channels or meridians of energy flow and bring back it's functioning.

Conclusion:

My conclusion will be, that vascular dementia within the population has become a vital health problem, regarding the number of people that is been affected and the financial stress placed on society and family members. The UK government should try and focus more on research, also more training for caregivers, and awareness for family and members of the public so that the moment someone starts showing symptoms they will know how to spot it early and report it to the appropriate authority.

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Appendix

PowerPoint Class Presentation Slide (Week8)

Slide1

Vascular Dementia

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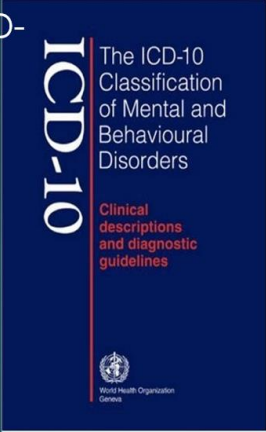
Presentation Date: 05/04/2022.



Slide2

Classification of Vascular Dementia episode within ICD-10

- Dementia disorder (F00-F03)
- Vascular dementia episodes F01
- This section contains disorders due to disease of the brain, usually of progressive nature in which there are sort of disturbance of difference higher cortical functions, including thinking, memory capacity, learning, judgement and language.

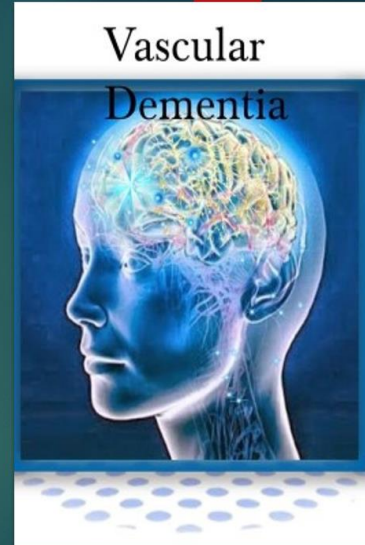


(WHO, 2010)

Slide3

What is Vascular Dementia?

- Basically, vascular dementia is a group of conditions that result in a decline of cognitive skills of a person, the people suffering from this find difficulty, in reasoning, judgment, as well as memory.
- It is mainly caused by a blockage or even the lack of blood flow to the brain. This in return reduced blood flow and deprives the brain of much-needed oxygen. (Paras Healthcare, 2019).



(Bing.com)

Slide4

Who is affected by Vascular Dementia.

Is the second most common type of dementia, it is estimated it affects about 150,000 people in the UK.

Around 17% to 20% of people diagnosed with dementia will have vascular dementia.

Age over 65 years and above, is the second most common form of dementia in this group (Dementiauk, 2022)

Vascular dysfunction and ischaemic damage in the major neurological complication associated with Covid-19.

Vascular dementia patients are more at risk of covid-19.
(Miners et al., 2020)



(Istockphoto.com)

Slide5

Types of vascular dementia.

Stroke-related dementia: in most strokes, a blood vessel in the brain becomes narrowed and is blocked by a clot.

Post-stroke dementia: A person who has a stroke is then at increased risk of having further strokes. If this happens, the risk of developing dementia is higher.

Single-infarct and multi-infarct dementia: These types of vascular dementia are caused by one or more smaller strokes.

Subcortical dementia: Subcortical vascular dementia is caused by diseases of the very small blood vessels that lie deep in the brain.

Mixed dementia (vascular dementia and Alzheimer's disease), generally means that both Alzheimer's disease and vascular dementia are thought to have caused dementia.

(Alzheimer's, 2022)

An Australian Government Initiative

BRIGHTwater
Brightwater Care Group (Inc)

WA DTSC
Dementia Training Support Centre

Different Types Of Vascular Dementia

1. Mild vascular cognitive impairment
2. **Multi-infarct dementia**
3. Vascular dementia due to a strategic single infarct.
4. Vascular dementia due to lacunar lesions
5. Vascular dementia due to haemorrhagic lesions
6. **Binswanger disease**
7. Subcortical vascular dementia
8. **Mixed dementia (combination of AD and Vascular)**

Article by Kannayiram Alagiakrishnam

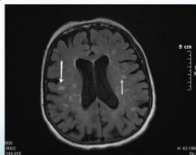
Training to care for people with dementia

(Bing.com)

Slide6

Causes of Dementia

- Vascular dementia
- Second most common type of dementia
- Caused by small strokes
- Areas of brain that have stopped getting oxygen and die
- The strokes might not have other symptoms
- Strokes happen suddenly and cause sudden worsening of memory



(Bing.com)

Causes of Vascular Dementia/Risk Factor.

- ▶ Vascular dementia disease, is caused by less blood flow to the brain, which damage and eventually kill the brain cells, and this is usually due to:
 - ▶ A stroke, a situation where the blood supply to part of the brain is suddenly cut off, usually because of a blood clot.
 - ▶ Narrowing of the small blood vessels deep inside the brain.
 - ▶ Lot of mini strokes, also know as (TIAs or transient ischaemic attacks)
 - ▶ Mixed dementia.

Risk Factor/ drinking, hypertension, smoking, obesity, diabetes, atrial fibrillation, unhealthy diet, high blood cholesterol.

Risk Factor, that cannot change / Your age, ethnicity, family history.

(NHS, 2020)

Slide7

Vascular Dementia Symptoms/sign.

People with vascular dementia may experience:

1. Find it difficult to perform every day tasks.
2. Forgetting past or current events.
3. Difficult following instructions or learning new information.
4. Changes in personality, mood and behaviour.
5. Delusions or hallucinations.
6. Lost of ability to perceive danger and poor judgment.
7. Problems with language.
8. Change in sleep patterns.

(NIH, 2021)



(Istockphoto.com)

Slide8

Vascular Dementia Diagnosis.

- your doctor will decide if vascular dementia is the most likely cause of your based on the information you provide.

Lab tests: blood pressure, cholesterol, and blood sugar.

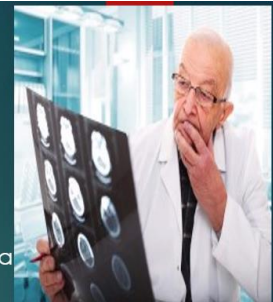
Neurological exam: a sense of sight or touch, balance, coordination, ability to walk

Neuropsychological tests: understand language, remember information, write, speak and problem-solving skills.

Magnetic resonance imaging (MRI)

Computerized tomography (CT) scan.

(Mayo Clinic, 2021)



(Istockphoto.com)

Slide9

Vascular Dementia Historical View:

► The historical view of vascular dementia can be traced back to the case of dementia postapoplexy described by Thomas Willis in 1672.

The modern history of this disease began in 1894 with the help of Alois Alzheimer's and Otto Binswanger who separated vascular dementia from dementia paralytica is caused by neurosyphilis (Roman, 2003).

Case Study.

Mr. Sean Warner, a 68-year-old retired structural engineer that is Experiencing issues with his short-term memory (BNF, 2017).



(Thespiritsbusiness.com)

Slide10

Professional principles when working with a vascular dementia patient.

Person-centered care:

1. Always encourage and allow people living with vascular dementia to give their own opinions and view about their care.
2. Always try to provide vascular dementia patients and their families as well as carers with appropriate information that is relevant to their circumstances. (NICE, 2018).

Mental Capacity Act 2005.

3. You must assume someone has the capacity unless it has been confirmed that the person lack capacity.
4. Any decision made, or an act done for or on behalf of vascular dementia patients, must be made or done in his or her best interest. (Legislation, 2005)

NICE
National Institute for
Health and Care Excellence

(Arthritisaction.org.uk)

Slide11

Vascular Dementia Current Treatment.

Basically, this disease can not be cured. The primary objective is to treat the main condition that interrupts the blood flow to the brain.

Low- 325-mg of aspirin, together with stroke risk factor control, and 250-mg twice daily of ticlopidine (Konno et al., 2012).

Mild- CAM Therapies may have good effects on symptoms, and Ginkgo biloba is also an effective treatment. (Psychiatric Times, 2022).

Medication to manage the conditions:

Atenolol and Adiponectin- in controlling hypertension.

Metformin- for controlling diabetes.

Aspirin- inhibit clot formation.

Therapy: patient/career education.

(Stanford Health Care, 2021).



(Getty Images, 2022).

Slide12

1. Dementia-friendly community initiatives- by building awareness and challenging the stigma, and ensuring early diagnosis. (Local Government Association, 2015).

2. Dementia Action Alliance is an international network of different charities helping to champion global action on dementia.

3. Dementia Friend- started by Alzheimer's Society to change the narratives of the way people talk, act and think about dementia. (Health Awareness, 2019).

60%



More than 60 per cent of people with mental health problems and mental illness won't seek the help they need; stigma is one of the main reasons.

(Mentalhealthcommission.ca)

Slide13

Recommendation for improvement.

1. Patients need to select from different activities, that are structured to their lifestyle to encourage wellbeing.
2. Patients should have a structured assessment before going through pharmacological or non-pharmacological cured for distress. (British Geriatrics Society, 2019).
3. Acupuncture therapy: unblocks the energy by targeting the specific channel or meridian of the energy flow to restore its functioning.
4. Music therapy: can be used to control the mind.
5. Aromatherapy: by involving the use of different important oil, that are taken from plants (Kerkar et al., 2019).



(Clipground.com)

Slide14

CONCLUSION:

My conclusion will be, vascular dementia within the elderly are vital, in regard to the number of people affected and the financial burdens placed on society and family member, my advice is for the government to invest in more research and more awareness among family members so that they will know when to spot the symptoms early.