



Understanding Dementia Impact on Elders

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Description

People who have been diagnosed with dementia experience cognitive impairment, which is a decline in cognitive function of brain. The specific challenges and limitations of cognitive functioning faced by people with dementia include memory loss, language and communication difficulties, impaired thinking and problem-solving skills, and altered perception and judgment. The impact of dementia on cognitive performance addresses these disorders in the context of dementia care.

Cognitive deficits refer to impairments or difficulties in various cognitive domains, including memory, attention, language, executive function, perceptual skills, and problem-solving. These deficits can have a significant impact on an individual's ability to think, reason, learn, and perform everyday tasks. Cognitive deficits can occur due to various factors, including neurological conditions, brain injuries, mental health disorders, developmental disorders, and age-related cognitive decline. One notable condition associated with cognitive deficits is dementia, which is characterized by progressive and widespread cognitive decline that interferes with daily functioning.

Causes

Cognitive impairment can be caused by a variety of factors, including environmental factors, brain injuries (such as traumatic brain injury) neurological disorders, and psychiatric disorders. Although it is more common in older people, not all older people experience cognitive impairment. Known causes of cognitive impairment, which are more common in young people include: Chromosomal abnormalities or genetic syndromes are the cause for teratogens or birth defects in utero malnutrition and autism.

Causes in older people include: Stroke, dementia, psychiatric disorders such as depression or schizophrenia, drug, substance or alcohol abuse, brain tumors, malnutrition, brain injury, hormonal imbalances, or other chronic illnesses. Cognitive impairment can also be caused by brain pathologies. Examples include Alzheimer's disease, Parkinson's disease, HIV-induced dementia, body dementia, and Huntington's disease.

Treatment

Determining appropriate treatment for a person with cognitive decline involves the diagnosis (the specific cognitive problem) the person's symptoms and other patient factors, including the person's expectations. Clinical treatment is required based on the prior approach. Common cognitive deficits observed in individuals with cognitive impairment or dementia includes:

Memory impairment: Difficulty with acquiring, retaining, and retrieving information.

Attention and concentration difficulties: Trouble focusing, sustaining attention, and easily becoming distracted.

Language and communication problems: Challenges in finding words, understanding and expressing ideas, and following conversations.

Executive function impairments: Difficulties with planning, organizing, initiating tasks, problem-solving, and decision-making.

Visuospatial deficits: Trouble with perceiving and interpreting visual information, navigating spaces, and judging distances.

Processing speed reduction: Slower information processing and response times.

Primary care physicians often base their diagnosis of cognitive impairment on clinical judgment in addition to various cognitive tests. The clinical evaluation is ideally combined with additional tests that allow the physician to confirm the diagnosis or confirm the absence of a diagnosis. Clinical judgment in such cases also helps in the selection of additional tests.

Cognitive deficits can have significant functional and quality-of-life implications for individuals, impacting their independence, ability to work, relationships, and overall well-being. Proper assessment, diagnosis, and management of cognitive deficits are essential to provide appropriate support, interventions, and care to individuals experiencing these challenges. This may involve cognitive rehabilitation, medication, behavioral strategies, and environmental modifications to optimize functioning and quality of life.

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