

Dementia

Information on Dementia

▶ **Dementia: Chronic brain syndrome; Lewy body dementia; DLB; Vascular dementia; Mild cognitive impairment; MCI > Introduction >> Definition. Dementia is a loss of brain function that occurs with certain diseases. It affects memory, thinking, language, judgment, and behavior. Dementia is a neurodegenerative condition of the brain in which there is a progressive and permanent loss of cognitive and mental performance.** This includes loss of memory and impairment of brain function in such areas as language, intellect, judgement, and behavior. Dementia is common in the elderly and is a very common cause of disability, institutionalization, and death in this population.

Dementia isn't a specific disease. Instead, dementia describes a group of symptoms affecting thinking and social abilities severely enough to interfere with daily functioning. Many causes of dementia symptoms exist. Alzheimer's disease is the most common cause of a progressive dementia.

Memory loss generally occurs in dementia. However, memory loss alone doesn't mean you have dementia. Dementia indicates problems with at least two brain functions, such as memory loss and impaired judgment or language, and the inability to perform some daily activities such as paying bills or becoming lost driving. Dementia can make you confused and unable to remember people and names. You also may experience changes in personality and social behavior. However, some causes of dementia are treatable and even reversible.

▶ **Info on Alzheimer disease, Dementia from Michigan Medical Marijuana Services | Agitation of (due to) Alzheimer's Disease > Alzheimer's Disease (AD), also called Alzheimer disease, Senile Dementia of the Alzheimer Type (SDAT) or simply Alzheimer's, is the most common form of dementia. This incurable, degenerative, and terminal disease was first described by German psychiatrist and neuropathologist Alois Alzheimer in 1906 and was named after him. Generally it is diagnosed in people over 65 years of age, although the less-prevalent early-onset Alzheimer's can occur much earlier. An estimated 26.6 million people worldwide had**

Alzheimer's in 2006; this number may quadruple by 2050. Although each sufferer experiences Alzheimer's in a unique way, there are many common symptoms. The earliest observable symptoms are often mistakenly thought to be 'age-related' concerns, or manifestations of stress. In the early stages, the most commonly recognised symptom is memory loss, such as difficulty in remembering recently learned facts. When a doctor or physician has been notified, and AD is suspected, the diagnosis is usually confirmed with behavioral assessments and cognitive tests, often followed by a brain scan if available. As the disease advances, symptoms include confusion, irritability and aggression, mood swings, language breakdown, long-term memory loss, and the general withdrawal of the sufferer as their senses decline.

Gradually, bodily functions are lost, ultimately leading to death. Individual prognosis is difficult to assess, as the duration of the disease varies. AD develops for an indeterminate period of time before becoming fully apparent, and it can progress undiagnosed for years. The mean life expectancy following diagnosis is approximately seven years. Fewer than three percent of individuals live more than fourteen years after diagnosis.

The active ingredient in marijuana may stall decline from Alzheimer's disease, research suggests. Scientists showed a synthetic version of the compound may reduce inflammation associated with Alzheimer's and thus help to prevent mental decline. They hope the cannabinoid may be used to developed new drug therapies. The research, by Madrid's Complutense University and the Cajal Institute, is published in the Journal of Neuroscience. [Read more >>](#)

www.michiganmedicalmarijuanacertification.com/faqs/conditions/agitation-alzheimers-disease/ << See more on [Cannabis and Dementia](#), below.

▶ **Causes, incidence, and risk factors. | Dementia usually occurs in older age. It is rare in people under age 60. The risk of dementia increases as a person gets older. Most types of dementia are nonreversible (degenerative). Nonreversible means the changes in the brain that are causing the dementia cannot be stopped or turned back.** Alzheimer's disease is the most common type of dementia. Lewy body disease is a leading cause of dementia the elderly. People with this condition have abnormal protein structures in certain areas of the brain. Dementia also can be due to many small strokes. This is called vascular dementia.

more on Causes | Dementia involves damage of nerve cells in the brain, which may occur in several areas of the brain. Dementia may affect people differently depending on the area of the brain

affected. Dementias can be classified in a variety of ways and are often grouped by what they have in common, such as what part of the brain is affected, or whether they worsen over time (progressive dementias). Some dementias, such as those caused by a reaction to medications or an infection, are reversible with treatment.

Progressive dementias; These types of dementias that worsen over time include:

- **Alzheimer's disease | In people age 65 and older, Alzheimer's disease is the most common cause of dementia. People generally may develop symptoms after age 60, but some people may have early-onset forms of the disease, often as the result of a defective gene. Although in most cases the exact cause of Alzheimer's disease isn't known, plaques and tangles are often found in the brains of people with Alzheimer's. Plaques are clumps of a protein called beta-amyloid, and tangles are fibrous tangles made up of tau protein.**

Certain genetic factors also may make it more likely that people will develop Alzheimer's. Alzheimer's disease usually progresses slowly over seven to 10 years. Your cognitive abilities slowly decline. Eventually, the affected areas of your brain don't work properly, including parts of your brain that control memory, language, judgment and spatial abilities.

- **Lewy body dementia | Lewy body dementia affects approximately 10 to 22 percent of people with dementia, making it one of the most common types of dementia. Lewy body dementia becomes more common with age. Lewy bodies are abnormal clumps of protein that have been found in the brains of people with Lewy body dementia, Alzheimer's disease and Parkinson's disease.**

Lewy body dementia symptoms are similar to symptoms of Alzheimer's disease. Its unique features include fluctuations between confusion and clear thinking (lucidity), visual hallucinations, and tremor and rigidity (parkinsonism). People with Lewy body dementia often have a condition called rapid eye movement (REM) sleep behavior disorder that involves acting out dreams.

- **Vascular dementia. Vascular dementia, the second most common type of dementia, occurs as a result of brain damage due to reduced or blocked blood flow in blood vessels leading to your brain. Blood vessel problems may be caused by**

stroke, infection of a heart valve (endocarditis) or other blood vessel (vascular) conditions.

Symptoms usually start suddenly and often occur in people with high blood pressure or people who have had strokes or heart attacks in the past. Several different types of vascular dementia exist, and the types have different causes and symptoms. Alzheimer's disease and other dementias also may be present at the same time as this dementia.

- **Frontotemporal dementia. This less common cause of dementia tends to occur at a younger age than does Alzheimer's disease, generally between the ages of 40 and 65. This is a group of diseases characterized by the breakdown (degeneration) of nerve cells in the frontal and temporal lobes of the brain, the areas generally associated with personality, behavior and language.**

Signs and symptoms of frontotemporal dementia can include inappropriate behaviors, language problems, difficulty with thinking and concentration, and movement problems. As with other dementias, the cause isn't known, although in some cases this dementia is related to certain genetic mutations.

Other disorders linked to dementia - The following medical conditions can also lead to dementia:

- **Huntington's disease | This inherited disease causes certain nerve cells in your brain and spinal cord to waste away.** Signs and symptoms usually appear during your 30s or 40s. People may experience personality changes, such as irritability or anxiety. The condition causes a severe decline in thinking (cognitive) skills over time. Huntington's disease also causes weakness and difficulty with walking and movement.
- **Brain injury | Traumatic brain injury. This condition is caused by repetitive head trauma, such as experienced by boxers, football players or soldiers. Depending on the part of the brain injured, this condition can cause dementia signs and symptoms such as uncoordinated movement and impaired speech, as well as slow movement, tremors and rigidity (parkinsonism).** Symptoms may not appear until many years after the actual trauma. A person who has experienced a single traumatic head injury could develop a similar condition called post-traumatic dementia which may cause symptoms such as long-term memory

problems.

- **Creutzfeldt-Jakob disease** | This rare brain disorder usually occurs in people without risk factors. This condition may be due to an abnormal form of a protein. Creutzfeldt-Jakob disease sometimes may be inherited or caused by exposure to diseased brain or nervous system tissue. Signs and symptoms of this fatal condition usually appear around age 60 and initially include problems with coordination, memory, thinking and vision. Symptoms worsen over time and may include the inability to move or talk, blindness, or infections.
- **Multiple sclerosis** | Conditions such as multiple sclerosis that arise from the body's immune system attacking nerve cells also can cause dementia.
- **Infections that can affect the brain, such as HIV /AIDS, syphilis, and Lyme disease**

HIV-associated dementia. | Infection with the human immunodeficiency virus (HIV), which causes AIDS, destroys brain matter and may cause memory problems, withdrawal from social situations, concentration problems or movement problems.

- **Parkinson disease | Secondary dementias.** People with movement disorders and other conditions may develop dementia. For example, many people with Parkinson's disease eventually develop dementia symptoms (Parkinson's disease dementia).

The relationship between these disorders and dementia isn't completely understood.

- **Pick disease**
- **Progressive supranuclear palsy**

more Info on Dementia

Dementia causes that can be reversed | Some causes of dementia may be stopped or reversed if they are found soon enough. Your doctor may identify and treat these causes:

- **Infections and immune disorders.** Dementia can result from fever or other side effects of your body's attempt to fight off an infection. People may develop dementia or

thinking difficulties if they have brain infections like meningitis and encephalitis, untreated syphilis, Lyme disease, or conditions that cause a completely compromised immune system, such as leukemia.

- **Metabolic problems and endocrine abnormalities.** People with thyroid problems, too little sugar in the bloodstream (hypoglycemia), too low or too high amounts of sodium or calcium, or an impaired ability to absorb vitamin B-12 may develop dementia or other personality changes.
- **Nutritional deficiencies.** Dementia symptoms can occur as a result of not drinking enough liquids (dehydration); not having enough thiamine (vitamin B-1), a condition common in people with chronic alcoholism; and not having enough vitamins B-6 and B-12 in your diet.
- **Reactions to medications.** Dementia may occur as a reaction to a single medication or because of an interaction of several medications.
- **Subdural hematomas. Subdural hematomas are caused by bleeding between the surface of the brain and the covering over the brain.** They can cause symptoms similar to dementia.
- **Poisoning. Dementia symptoms can occur as a result of exposure to heavy metals, such as lead, and other poisons, such as pesticides. Dementia symptoms also may occur in some people who have abused alcohol or recreational drugs.** Symptoms may disappear after treatment, but in some cases symptoms may still be present after treatment.
- **Brain tumors.** Dementia rarely can result from damage caused by a brain tumor.
- **Anoxia. This condition, also called hypoxia, occurs when organ tissues aren't getting enough oxygen. Anoxia may occur due to severe asthma, heart attack, carbon monoxide poisoning or other causes.** If you've experienced a severe lack of oxygen, recovery may take longer. Symptoms, such as memory problems or confusion, may occur during recovery.
- **Heart and lung problems.** Your brain can't survive without oxygen. Dementia symptoms may occur in people with chronic

lung problems or a heart condition that deprives the brain of the oxygen it needs.

- **Normal-pressure hydrocephalus. Sometimes people have normal-pressure hydrocephalus, a condition caused by enlarged ventricles in the brain.** This condition can cause walking problems, urinary difficulty and memory loss. Shunt surgery, which delivers cerebrospinal fluid from the head to the abdomen or heart, may help these symptoms.
- **Brain injury**
- **Brain tumors**
- **Chronic alcohol abuse**
- **Changes in blood sugar, sodium, and calcium levels (dementia due to metabolic causes)**
- **Low vitamin B12 level**
- **Normal pressure hydrocephalus**
- **Use of certain medicines, including cimetidine and some cholesterol drugs**

Learn more >> <http://www.mayoclinic.org/diseases-conditions/dementia/basics/causes/con-20034399>

Risk factors | Many factors can eventually lead to dementia. Some factors, such as age, can't be changed. Others can be addressed to reduce your risk.

Risk factors that can't be changed

- **Age. As you age, the risk of Alzheimer's disease, vascular dementia and several other dementias greatly increases, especially after age 65.** However, dementia isn't a normal part of aging, and dementia can occur in younger people.
- **Family history.** If you have a family history of dementia, you're at greater risk of developing the condition. However, many people with a family history never develop symptoms, and many people without a family history do. If you have specific genetic mutations, you're at significantly greater risk of developing certain types of dementia.

Tests to determine whether you have certain genetic mutations are available, but doctors don't generally recommend testing because the tests aren't always accurate.

- Down syndrome. By middle age, many people with Down syndrome develop the plaques and tangles in the brain that are associated with Alzheimer's disease. Some may develop dementia.

Risk factors you can change | You may be able to take steps to control the following risk factors of dementia.

- **Alcohol use. People who consume large amounts of alcohol may have a higher risk of dementia.** Although studies have shown that moderate amounts of alcohol may have a protective effect, abuse of alcohol increases your risk of developing dementia.
- Atherosclerosis. This buildup of fats and other substances in and on your artery walls (plaques) can reduce the blood flow to your brain and lead to stroke. Reduced blood flow to your brain can also cause vascular dementia. Some research shows there may be an association between blood vessel (vascular) conditions and Alzheimer's disease. Blood pressure. Several studies show high or low blood pressure may increase your risk of developing dementia.
- Cholesterol. If you have high levels of low-density lipoprotein (LDL) cholesterol, you may have an increased risk of developing vascular dementia or Alzheimer's disease. Researchers continue to study how cholesterol may affect dementia.
- Depression. Although not yet well understood, late-life depression, especially in men, may be an indication for the development of Alzheimer's-related dementia.
- Diabetes. If you have diabetes, you may have an increased risk of developing Alzheimer's disease and vascular dementia.
- High estrogen levels. Women taking estrogen and progesterone years after menopause are at greater risk of developing dementia. Homocysteine blood levels. Elevated blood levels of homocysteine, a type of amino acid produced by your body, may increase your risk of developing vascular dementia. However, studies have had varying results in determining whether elevated homocysteine levels are a risk factor of dementia.
- Obesity. Being overweight or obese during the middle of your life may increase your risk of developing dementia when you're older.

- Smoking. Smoking may increase your risk of developing dementia and blood vessel (vascular) diseases.

Learn more >> www.mayoclinic.org/diseases-conditions/dementia/basics/risk-factors/con-20034399

► **Symptoms.** Dementia symptoms vary depending on the cause, but common signs and symptoms include:

- Memory loss
- Difficulty communicating
- Difficulty with complex tasks
- Difficulty with planning and organizing
- Difficulty with coordination and motor functions
- Problems with disorientation, such as getting lost
- Personality changes
- Inability to reason
- Inappropriate behavior
- Paranoia
- Agitation
- Hallucinations

more on Symptoms | Dementia symptoms include difficulty with many areas of mental function, including:

- Emotional behavior or personality
- Language
- Memory
- Perception
- Thinking and judgment (cognitive skills)
- Dementia usually first appears as forgetfulness.
- Mild cognitive impairment (MCI) is the stage between normal forgetfulness due to aging and the development of dementia. People with MCI have mild problems with thinking and memory

that do not interfere with daily activities. They are often aware of the forgetfulness. Not everyone with MCI develops dementia.

Symptoms of MCI include:

- Difficulty doing more than one task at a time
- Difficulty solving problems or making decisions
- Forgetting recent events or conversations
- Taking longer to do more difficult mental activities

Early symptoms of dementia can include:

- Difficulty with tasks that take some thought, but that used to come easily, such as balancing a checkbook, playing games (such as bridge), and learning new information or routines
- Getting lost on familiar routes
- Language problems, such as trouble with the names of familiar objects
- Losing interest in things previously enjoyed, flat mood
- Misplacing items
- Personality changes and loss of social skills, which can lead to inappropriate behaviors

As dementia becomes worse, symptoms are more obvious and interfere with the ability to take care of oneself. Symptoms may include:

- Change in sleep patterns, often waking up at night
- Difficulty with basic tasks, such as preparing meals, choosing proper clothing, or driving
- Forgetting details about current events
- Forgetting events in one's own life history, losing self-awareness
- Having hallucinations, arguments, striking out, and violent behavior
- Having delusions, depression, agitation
- More difficulty reading or writing
- Poor judgment and loss of ability to recognize danger

- Using the wrong word, not pronouncing words correctly, speaking in confusing sentences
- Withdrawing from social contact

People with severe dementia can no longer:

- Perform basic activities of daily living, such as eating, dressing, and bathing
- Recognize family members
- Understand language

Other symptoms that may occur with dementia:

- Incontinence
- Swallowing problems

When to see a doctor | See a doctor if you or a loved one experiences memory problems or other dementia symptoms.

Some treatable medical conditions can cause dementia symptoms, so it's important that a doctor determine the underlying cause. See more [Provider info](#), below.

Alzheimer's disease and several other types of dementia worsen over time. Early diagnosis gives you time to plan for the future while you can participate in making decisions.

▶ **Diagnosis** | Memory loss and other dementia symptoms have many causes, so diagnosing dementia and other related conditions can be challenging and may require several appointments.

To diagnose your condition, your doctor will review your medical history and symptoms and conduct a physical examination. Doctors may order a number of tests to diagnose dementia and rule out other conditions.

- Cognitive and neuropsychological tests | In these tests, doctors will evaluate your thinking (cognitive) function. A number of tests measure thinking skills such as memory, orientation, reasoning and judgment, language skills, and attention. Doctors use these tests to determine whether you have dementia, how severe it is and what part of your brain is affected.

- Neurological evaluation | In a neurological evaluation, doctors will evaluate your movement, senses, balance, reflexes and other areas. Doctors may use the neurological evaluation to diagnose other conditions.
- Brain scans | Doctors may order brain scans, such as a CT or MRI scan, to check for evidence of stroke or bleeding and to rule out the possibility of a tumor.
- Laboratory tests | Simple blood tests can rule out physical problems that can affect brain function, such as vitamin B-12 deficiency or an underactive thyroid gland.
- Psychiatric evaluation | You may meet with a mental health specialist (psychologist or psychiatrist) who may evaluate whether depression or another psychological condition may be causing your symptoms.

Learn more >> www.mayoclinic.org/diseases-conditions/dementia/basics/tests-diagnosis/con-20034399

Misdiagnosis of Dementia | A diagnosis of dementia may be delayed or missed because early symptoms develop gradually and are often associated with the normal aging process. In addition, symptoms of dementia can mimic symptoms of a variety of diseases, disorders or conditions, such as depression, TIA, stroke, psychosis, and delirium, which can all accompany dementia or can be distinct and separate diagnoses not related to dementia. In addition, a misdiagnosis of the underlying cause of dementia is possible because there are many possible causes, some of which can be difficult to diagnose. These include vascular dementia, Alzheimer's disease, Creutzfeldt-Jacob disease, bovine spongiform encephalopathy, frontotemporal dementia, thyroid diseases, brain tumor, and vitamin B deficiency. Other causes include AIDS, syphilis, alcoholism, hydrocephalus, depression, and chronic subdural hematoma ... Learn more >> www.rightdiagnosis.com/d/dementia/misdiag.htm

► **Signs and tests.** A skilled health care provider can often diagnose dementia with the following steps:

- Complete physical exam, including nervous system exam
- Asking about the person's medical history and symptoms
- Mental function tests (mental status examination)

Other tests may be ordered to find out if other problems may be causing dementia or making it worse. These conditions include:

- Anemia
- Brain tumor
- Chronic infection
- Intoxication from medications
- Severe depression
- Thyroid disease
- Vitamin deficiency

The following tests and procedures may be done:

- B12 level
- Blood ammonia levels
- Blood chemistry (chem-20)
- Blood gas analysis
- Cerebrospinal fluid (CSF) analysis
- Drug or alcohol levels (toxicology screen)
- Electroencephalograph (EEG)
- Head CT
- Mental status test
- MRI of head
- Thyroid function tests
- Thyroid stimulating hormone level
- Urinalysis

Learn more >> www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001748/

Home Diagnostic Testing | These home medical diagnostic tests may be relevant to Dementia:

- Child Behavior: Home Testing

- ADHD -- Home Test Kits
 - Concentration -- Home Testing
- Mental Health (Adults): Home Testing
 - Adult ADHD -- Home Testing
 - Concentration -- Home Tests
- Mental Health: Home Testing:
 - Home Emotional Stress Tests
 - ADHD -- Home Testing
 - Concentration -- Home Test Kits
- Nerve Neuropathy: Related Home Testing:
 - Home Diabetes Test Kits
 - Home Blood Glucose Testing Kits
- Brain & Neurological Disorders: Related Home Testing:
 - ADHD -- Home Tests
 - Drug Screening Kits

Learn more >> www.rightdiagnosis.com/d/dementia/home-testing.htm

► **Treatment of Dementia.** Treatment depends on the condition causing the dementia. Some people may need to stay in the hospital for a short time. << See [Cannabis Treatment information](#), below.

- Stopping or changing medicines that make confusion worse may improve brain function.
- Some kinds of mental exercises can help dementia.
- Treating conditions that can lead to confusion often greatly improve mental functioning. Such conditions include:
 - Anemia
 - Congestive heart failure
 - Decreased blood oxygen (hypoxia)
 - Depression
 - Heart failure
 - Infections
 - Nutritional disorders

- Thyroid disorders

more on Treatments and drugs | Most types of dementia can't be cured. However, doctors will help you manage your symptoms. Treatment of dementia symptoms may help slow or minimize the development of symptoms.

- Cholinesterase inhibitors. These medications — including donepezil (Aricept), rivastigmine (Exelon) and galantamine (Razadyne) — work by boosting levels of a chemical messenger involved in memory and judgment.

Side effects can include nausea, vomiting and diarrhea. Although primarily used to treat Alzheimer's disease, these medications may also treat vascular dementia, Parkinson's disease dementia and Lewy body dementia.

- Memantine. Memantine (Namenda) works by regulating the activity of glutamate. Glutamate is another chemical messenger involved in brain functions, such as learning and memory. A common side effect of memantine is dizziness. Some research has shown that combining memantine with a cholinesterase inhibitor may have beneficial results.
- Other medications. Your doctor may prescribe other medications to treat other symptoms or conditions, such as a sleep disorder.
- Occupational therapy. Your doctor may suggest occupational therapy to help you adjust to living with dementia. Therapists may teach you coping behaviors and ways to adapt movements and daily living activities as your condition changes.

Also, Medicines may be used to:

- Slow the rate at which symptoms worsen, though improvement with these drugs may be small
- Control problems with behavior such as loss of judgment or confusion

Therapies | Several dementia symptoms and behavior problems may be treated initially using nondrug approaches, such as:

- Modifying the environment. Reducing clutter and distracting noise can make it easier for someone with dementia to focus and function. It also may reduce confusion and frustration.

- Modifying your responses. A caregiver's response to a behavior can make the behavior, such as agitation, worse. It's best to avoid correcting and quizzing a person with dementia. Reassuring the person and validating his or her concerns can defuse most situations.
- Modifying tasks. Break tasks into easier steps and focus on success, not failure. Structure and routine during the day also help reduce confusion in people with dementia.

Alternative medicine | Several dietary supplements, herbal remedies and therapies have been studied for people with dementia. Some may be beneficial.

Dietary supplements, vitamins and herbal remedies | Use caution when considering dietary supplements, vitamins or herbal remedies to slow the progress of dementia, especially if you're taking other medications. Dietary supplements, vitamins and herbal remedies aren't regulated, and claims about their benefits aren't always based on scientific research. Some alternative medicine options for Alzheimer's disease and other forms of dementia that have been studied include:

- Vitamin E. Some studies have shown that vitamin E may slow the progression of Alzheimer's disease. Doctors warn against taking large doses of vitamin E because it may have a higher risk of mortality, especially in people with heart disease.
- Omega-3 fatty acids. Omega-3s, a type of polyunsaturated fatty acid found in fish and nuts, may reduce the risk of heart disease, stroke and mild cognitive impairment. However, in studies, omega-3 fatty acids haven't significantly slowed cognitive decline in mild to moderate Alzheimer's disease. More research is needed to understand whether omega-3 fatty acids benefit people with Alzheimer's and other types of dementia.
- Coenzyme Q10. This antioxidant occurs naturally in your body. It's also necessary for normal cell reactions. A synthetic version of this compound, called idebenone, showed some positive results in testing for Alzheimer's disease. More studies are needed to determine safe dosages and potential benefits of coenzyme Q10.
- Ginkgo. Extracts from the leaves of the Ginkgo biloba tree have antioxidant and anti-inflammatory properties that may protect cells in your brain from breaking down. Some studies have

shown that ginkgo may slow the progression of memory problems in people with Alzheimer's or other types of dementia. Other studies have found that ginkgo doesn't slow or delay the onset of dementia.

Lifestyle and home remedies | People with dementia will experience progression of their symptoms and behavior problems over time. Caregivers may need to adapt the following suggestions to individual situations:

- Enhance communication. When talking with your loved one, maintain eye contact. Speak slowly in simple sentences, and don't rush the response. Present only one idea or instruction at a time. Use gestures and cues, such as pointing to objects.
- Encourage exercise. Exercise benefits everyone, including people with dementia. The main benefits of exercise include improved strength and cardiovascular health. Some research also shows physical activity may slow the progression of impaired thinking (cognitive) function in people with dementia. Exercise can also lessen symptoms of depression, help retain motor skills and create a calming effect.
- Encourage participation in games and thinking activities. Participating in games, crossword puzzles and other activities in which people are using thinking (cognitive) skills may help slow mental decline in people with dementia.
- Establish a nighttime ritual. Behavior is often worse at night. Try to establish going-to-bed rituals that are calming and away from the noise of television, meal cleanup and active family members. Leave night lights on to prevent disorientation. Limiting caffeine during the day, discouraging daytime napping and offering opportunities for exercise during the day may help prevent nighttime restlessness.
- Encourage keeping a calendar. Keeping a reminder calendar may help your loved one remember upcoming events, daily activities and medication schedules. Consider sharing a calendar with your loved one. Plan for the future. Develop a plan with your loved one that identifies goals for care in the future. Several support groups, legal advisers, family members and others can help you. You'll need to consider financial and legal issues, safety and daily living concerns, and long-term care options.

Other therapies | People with dementia often experience worse symptoms when they're frustrated or anxious. The following techniques may help reduce agitation and promote relaxation in people with dementia.

- Music therapy, which involves listening to soothing music
- Pet therapy, which involves use of animals, such as visits from dogs, to promote improved moods and behaviors in people with dementia
- Aromatherapy, which uses fragrant plant oils
- Massage therapy

Learn more >> <http://www.mayoclinic.org/diseases-conditions/dementia/basics/treatment/con-20034399>

▶ **Coping and support | Receiving a diagnosis of dementia can be devastating to you and your loved ones.** Many details need to be considered to ensure that you and those around you are as prepared as possible for dealing with a condition that's unpredictable and continually changing.

Care and support for the person with the disease | Throughout the disease, you may experience a wide range of feelings. Here are some suggestions you can try to help yourself cope:

- Learn as much as you can about memory loss, dementia and Alzheimer's disease.
- Write about your feelings about having dementia in a journal.
- Join a local support group.
- Get individual or family counseling.
- Talk to a member of your church or another person who can help you with your spiritual needs.
- Stay active and involved, volunteer, exercise, and participate in activities for people with memory loss.
- Maintain contact and spend time with friends and family.
- Participate in an online community of people who are having similar experiences.
- Find new ways to express yourself, such as through painting, singing or writing.
- Delegate help with decision making to someone you trust.

- Be patient with yourself.

Helping someone with dementia | You can help a person cope with the disease by listening, reassuring the person that he or she still can enjoy life, being supportive and positive, and doing your best to help the person retain dignity and self-respect.

Caregiver support | Providing care for a person with dementia is physically and emotionally demanding. Often the primary caregiver is a spouse or other family member. Feelings of anger and guilt, frustration and discouragement, worry, grief, and social isolation are common. If you're a caregiver for someone with dementia:

- Ask friends or other family members for help when you need it
- Take care of your physical, emotional and spiritual health
- Learn as much about the disease as you can
- Ask questions of doctors, social workers and others involved in the care of your loved one

Joining a support group | Find out about supportive services in your community, such as respite care or adult day care, which can provide you with a break from caregiving at scheduled times during the week

Learn more >> www.mayoclinic.org/diseases-conditions/dementia/basics/alternative-medicine/con-20034399 <<
See more [Cannabis Treatment information](#), below.

▶ **Expectations (Outlook, Prognosis) for Dementia.** People with mild cognitive impairment do not always develop dementia. When dementia does occur, it usually gets worse and often decreases quality of life and lifespan. Families will likely need to plan for their loved one's future care.

▶ **Complications of Dementia.** Dementia can affect the functioning of many body systems and, therefore, the ability to carry out day-to-day tasks. Dementia may lead to several problems, including:

- Inadequate nutrition. Many people with dementia will eventually reduce or stop eating and drinking. They may forget to eat or think they've already eaten. Changes in meal times or noise distractions in their environment may affect whether they eat.

Often, advanced dementia causes you to lose control of the muscles used to chew and swallow. This may put you at risk of choking or aspirating food in your lungs. If this happens, it can block breathing and cause pneumonia. You also lose the feeling of hunger and, with it, the desire to eat.

Depression, side effects of medications, constipation and other conditions also can decrease your interest in food.

- Reduced hygiene. In moderate to severe stages of dementia, you'll eventually lose the ability to independently complete daily living tasks. You may no longer be able to bathe, dress, brush your hair or teeth, or use the toilet on your own.
- Difficulty taking medications. Because your memory is affected, remembering to take the correct amount of medications at the right time can be challenging.
- Deterioration of emotional health. Dementia changes behaviors and personality. Some of the changes may be caused by the actual deterioration happening in your brain, while other behavioral and personality changes may be emotional reactions to coping with the changes in your brain.

Dementia may lead to depression, aggression, confusion, frustration, anxiety, a lack of inhibition and disorientation.

- Difficulty communicating. As dementia progresses, you may lose the ability to remember the names of people and things. You may have trouble communicating with others or understanding others. Difficulty communicating can lead to feelings of agitation, isolation and depression.
- Delusions and hallucinations. You may experience delusions in which you have false ideas about another person or situation. Some people, especially those with Lewy body dementia, may have visual hallucinations.
- Sleep difficulties. You may experience sleep difficulties, such as waking up very early in the morning. Some people with dementia may have restless legs syndrome or rapid eye movement sleep behavior disorder, which also can interfere with sleep.
- Personal safety challenges. Because of a reduced capacity for decision making and problem-solving, some day-to-day situations can present safety issues for people with dementia.

These include driving, cooking, falling, getting lost and negotiating obstacles.

Learn more >> www.mayoclinic.org/diseases-conditions/dementia/basics/complications/con-20034399

▶ **Calling your health care provider. and Support Groups for Dementia | The stress of illness can often be helped by joining support groups where members share common experiences and problems. See Dementia -> [support groups](#), et al.**

When to Contact a Medical Professional | Call your health care provider if:

- **Dementia develops or a sudden change in mental status occurs**
- **The condition of a person with dementia gets worse**
- **You are unable to care for a person with dementia at home**
- **or side effects from medication - such as recurrent thoughts, irritability, and problems with sleep. Go to the emergency room or call the local emergency number (such as 911) if you have breathing difficulty or swallowing problems.**

▶ **Prevention of Dementia? | There's no sure way to prevent dementia, Most causes of dementia are not preventable. But there are steps you can take that might help. More research is needed, but it may be beneficial to do the following:**

- **Keep your mind active. Mentally stimulating activities, such as puzzles and word games, and memory training may delay the onset of dementia and help decrease its effects.**
- **Be physically and socially active. Physical activity and social interaction may delay the onset of dementia and reduce its symptoms.**
- **Pursue education. People who have spent more time in formal education appear to have a lower incidence of mental decline, even when they have brain abnormalities. Researchers believe that education may help your brain**

develop a strong nerve cell network that compensates for nerve cell damage caused by Alzheimer's disease.

- Specifically, Risk of vascular dementia may be reduced by:
 - Eating healthy foods. Maintaining a healthy diet is important for many reasons, but a diet rich in fruits, vegetables and omega-3 fatty acids, commonly found in certain fish and nuts, may promote overall health and lower your risk of developing dementia.
 - Exercising
 - Quit smoking. Some studies have shown smoking in middle age and older may increase your risk of dementia and blood vessel (vascular) conditions. Quitting smoking may reduce your risk.
 - Controlling high blood pressure. High blood pressure may lead to a higher risk of some types of dementia. More research is needed to determine whether treating high blood pressure may reduce the risk of dementia.
 - Managing diabetes

Learn more, here >> www.mayoclinic.org/diseases-conditions/dementia/basics/prevention/con-20034399 <<
and here >>
www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001748/

SOURCES: (1) Mayo Clinic (BIZ) Dementia Definition - Diseases and Conditions | Definition; Symptoms; Causes; Risk factors; Tests and diagnosis; Many causes of dementia symptoms exist; click >> [here](#) << for more. (2) National Library of Medicine - PubMed Health (INF) Dementia - Symptoms. Most causes of dementia are not preventable. Risk, diagnosis, more; click >> [here](#) << for more. (3) ALZ.org (ORG) Dementia – Signs, Symptoms, Causes, Tests, Treatment, Care | Tour, Risk Factors, Diagnosis, Treatments, Myths, Clinical info; click >> [here](#) << for more. (4) RightDiagnosis.com (INF) Symptoms of Dementia | correct diagnosis for Dementia signs or Dementia, Tests to determine if these are the symptoms of, Underlying causes of Dementia; Risk factors for Dementia including risk behaviors, Diagnostic Tests for Dementia; Symptoms; Types; Causes; Tests; click >> [here](#) << for more. (5) medicinenet.com (INF) Dementia: Get the Facts on Staging and Symptoms | Introduction to dementia, What is dementia? What are the different kinds of dementia? What other conditions can cause dementia? What conditions are not dementia? What causes dementia? What are the risk factors for dementia? How is dementia diagnosed? Is there any treatment for dementia? Can dementia be prevented? What kind of care does a person with dementia need? What

research is being done? How can I help research? Where can I get more information? Dementia Slideshow Pictures, Alzheimer's Disease Slideshow Pictures, Take the Alzheimer's Quiz, Dementia facts, Risk factors for dementia ... Hypercalcemia is a condition in ... Alzheimer's disease is a common cause of dementia. Symptoms and warning signs of; click >> [here](#) << for more. (6) National Library of Medicine (INF) Dementia: MedlinePlus Medical Encyclopedia | history and symptoms; Mental function tests, on the condition causing the dementia. Causes of dementia are not preventable. Risk of vascular; click >> [here](#) << for more.

[Links on Condition](#)

▶ [Healthline.com - Connect to Better Health > Dementia Symptoms | \(INF\) Get More Info On Causes, Symptoms, Treatments & Doctors At Healthline - Symptom Search | Treatment Search | Doctor Search | Drug Search Sign in|Join Now|Feedback Healthy Living Check Your Symptoms, Drugs & Treatments, Find A Doctor for ... Dementia: Taking Control of Your Treatment >> Click -> \[here\]\(#\) <- for more.](#)

[Info on Dementia and Medical Cannabis](#)

▶ [Next Avenue > Can Marijuana Prevent Alzheimer's? > As researchers seek treatments to combat Alzheimer's and dementia, cannabis gains attention | Cognitive decline is the No. 1 fear among Americans older than 50, but while we know that exercise, proper diet and social and educational engagement can help maintain brain health, there is as yet no intervention that can fully prevent the onset of dementia or Alzheimer's disease. If no such development occurs, the number of Americans with Alzheimer's disease is expected to triple in the next 50 years. And while there has been hope that natural remedies could have an impact, none has been shown to be effective so far. When a study released last month proved that ginkgo biloba could not prevent Alzheimer's, one researcher called it the "nail in the coffin" for that theory. Could marijuana be the answer? | Cannabinoids, the active chemical components of marijuana, can regulate inflammation in the brain and promote neurogenesis — the growth of new neural pathways — even in cells damaged by age or trauma. As more research has indicated that brain inflammation appears to be a cause of several degenerative diseases, marijuana has been getting a closer look as a potential preventive medication. Read more >> \[www.nextavenue.org/article/2012-10/can-marijuana-save-aging-brain\]\(http://www.nextavenue.org/article/2012-10/can-marijuana-save-aging-brain\)](#)

▶ **Marijuana cannabinoids slow brain degradation and aging, reverse dementia: here's how | (NaturalNews)** The human brain contains an extensive network of special receptor sites that modulate nervous system function only when activated by the appropriate cannabinoid compounds, many of which are found in abundance in the marijuana plant. And emerging research continues to uncover the unique role these cannabinoids play in protecting brain function, which in turn helps deter the aging process and even reverse the damaging effects of Alzheimer's disease and other forms of dementia and cognitive abnormality. One of the latest discoveries concerning cannabinoids involves their ability to act as antioxidants in the brain. Researchers from Germany found that the brain's cannabinoid system is fully capable of not only cleansing damaged brain cells from the brain, but also triggering the production of new brain cells within the brain, a concept that contradicts years of conventional thinking about how the brain works. Cannabinoids also supercharge mitochondria in the brain, which are the powerhouses of energy that maintain proper cell function.

Published in the journal *Philosophical Transactions of the Royal Society B*, these discoveries shed new insight on how natural marijuana cannabinoids hold the capacity to literally quell the brain inflammation responsible for causing cognitive decline, neural failure, and brain degeneration. By supplying these receptor sites with cannabinoids, patients may be able to overcome brain conditions like Alzheimer's disease, Parkinson's disease, Huntington's disease, and many other conditions, not to mention premature brain aging, all conditions for which modern science has failed to find real solutions. "I've been trying to find a drug that will reduce brain inflammation and restore cognitive function in rats for over 25 years; cannabinoids are the first and only class of drugs that have ever been effective," said Gary Wenk, a professor of neuroscience, immunology and medical genetics at Ohio State University (OSU) who helped with the research. "I think that the perception about this drug is changing and in the future people will be less fearful," he added, referencing the fact that marijuana is still viewed mostly negatively by many people. ... reverse dementia: here ... available and relevant science on marijuana's medical uses for the purpose of ... Bloomberg declares medical marijuana a ... Read more >>

naturalnews.com/040456_marijuana_cannabinoids_dementia.html

▶ **Healthy Curiosity: Marijuana and Dementia |** Over the years there have been multiple studies indicating the potential of cannabinoids across a wide range of conditions. This latest study provides further weight as to the therapeutic potential of cannabinoids. It is high time that the public was made aware of the considerable therapeutic potential of these compounds. As for the psychosis\schizophrenia risk, that has been too much overblown and the risk is virtually negligible post 21 years of age. The reasons for this therapeutic potential are:

The two principal cannabinoids, THC and cannabidiol, have very strong antioxidant capacity. These two compounds are lipophilic, that is lipid soluble, hence will remain in the body for extended periods. For pot smokers, typical wash out periods are 90% after one week, though this can greatly vary. Both of these compounds target specific receptors. THC will target CB1 and to a lesser extent CB2(controversial), while cannabidiol is very specific for CB2 and hence is non-psychoactive. Both compounds will bind to the anion site of AChE, an enzyme that breaks down acetylcholine. This neurotransmitter is markedly reduced in some dementias, particularly Alzheimers. AChE is also strongly implicated in amyloid production, both cannabinoids reduce the production of amyloid, an early step in Alzheimers because this production seems contingent on the anion site. Activation of the CB2 receptor limits the expression of pro-inflammatory cytokines, excess production of these cytokines being implicated in everything from atherosclerosis to cancer to dementia. Read more >>

healthycuriosity.blogspot.com/2008/11/marijuana-and-dementia.html

▶ **Complications from Cannabis, Cannabis and Condition, Cannabis and Other Medications.**

▶ **Medical Marijuana and Alzheimer's Disease |** When it comes to using marijuana to treat the effects of Alzheimer's disease, the most common form of dementia, which affects more than 24.3 million people around the world, the jury is still out.

Benefits of Cannabinoids | Among the benefits of cannabis-based treatments, which are chiefly defended by scientists in Spain and Israel, is a possible improvement in memory loss. In 2008, the Royal Pharmaceutical Society of Great Britain (RPSGB) hosted a symposium of cannabis experts, where it was revealed that one of the compounds present in cannabis significantly slows memory loss. This is just one of the results from research protocols launched twelve years ago by the RPSGB designed specifically for the exploration of cannabis as a treatment option for patients with severe pain, or multiple sclerosis. The use of cannabis to treat memory loss was tested successfully in laboratory mice, and scientists want to continue the trials with human subjects, in spite of the fact that there is some concern about possible harmful mind-altering effects caused by the compound in question, cannabidiol, although researchers stress that this compound is not a hallucinogen.

Risks of Cannabis Use by Alzheimer's Disease Patients | The problem with recommending cannabis for Alzheimer's disease patients is that cannabidiol is not the only compound found in marijuana. There is another -THC, or Tetrahydrocannabinol - which is the source of cannabis's psychoactivity. While THC has been proven to be beneficial in increasing the appetites of AIDS and cancer chemotherapy patients who tend to literally waste away, it is also suspected to have damaging effects on memory, and therefore should not be used on patients who already have memory disorders. Pro-cannabis researchers point out that clinical trials would use only the non-psychoactive components of cannabis, and that such treatments are not at all similar to recreational use of marijuana. [Read more >> www.cannabiseearch.com/medical_benefits/alzheimer](http://www.cannabiseearch.com/medical_benefits/alzheimer)

► Marijuana Toxicity - Mar Vista Animal Medical Center | (BIZ) Jan 26, 2011 ... Dementia ? Cat Neonatal Isoerythrolysis ... done with humans can be done in dogs to make the diagnosis of marijuana intoxication. ... Marijuana, known by many names, needs very little introduction; we all know it is a popular recreational drug smoked illegally by millions of people worldwide. Its psychoactive ingredient is delta 9-tetrahydrocannabinol,

more commonly called "THC." Regular marijuana is typically 1-8% THC while hashish, made from the flowering tops of the plant and their resins, can contain up to 10% THC. Other properties of THC give it controversial medicinal properties: appetite stimulation and nausea control. Visit - http://www.marvistavet.com/html/body_marijuana_toxicity.html - WHAT YOU NEED TO KNOW TO UNDERSTAND THIS DISEASE ... Dementia is a disease which interrupts the way nerves communicate with muscles. In order to understand this disease, you must have some understanding of how things work in the normal situation. Visit - http://www.marvistavet.com/html/body_myasthenia_gravis.html - for more.

► **Marijuana ineffective as an Alzheimer's treatment -- ScienceDaily | The benefits of marijuana in tempering or reversing the effects of Alzheimer's disease have been challenged in a new study. The benefits of marijuana in tempering or reversing the effects of Alzheimer's disease have been challenged in a new study by researchers at the University of British Columbia and Vancouver Coastal Health Research Institute. The findings, published in the current issue of the journal Current Alzheimer Research, could lower expectations about the benefits of medical marijuana in combating various cognitive diseases and help redirect future research to more promising therapeutics. Previous studies using animal models showed that HU210, a synthetic form of the compounds found in marijuana, reduced the toxicity of plaques and promoted the growth of new neurons. Those studies used rats carrying amyloid protein, the toxin that forms plaques in the brains of Alzheimer's victims. The new study, led by Dr. Weihong Song, Canada Research Chair in Alzheimer's Disease and a professor of psychiatry in the UBC Faculty of Medicine, was the first to test those findings using mice carrying human genetic mutations that cause Alzheimer's disease -- widely considered to be a more accurate model for the disease in humans. "As scientists, we begin every study hoping to be able to confirm beneficial effects of potential therapies, and we hoped to confirm this for the use of medical marijuana in treating Alzheimer's disease," says Song, a member of the**

Brain Research Centre at UBC and VCH Research Institute and Director of Townsend Family Laboratories at UBC. "But we didn't see any benefit at all. Instead, our study pointed to some detrimental effects." Over a period of several weeks, some of the Alzheimer's-afflicted mice were given varying doses of HU210 -- also known as cannabinoids -- which is 100 to 800 times more potent than the marijuana compounds. Their memory was then tested. The mice treated with HU210 did no better than untreated mice, with those given low doses of HU210 performing the worst. The researchers also found that HU210-treated mice had just as much plaque formation and the same density of neurons as the control group. The group given higher doses actually had fewer brain cells. "Our study shows that HU210 has no biological or behavioural effect on the established Alzheimer's disease model," says Song, the Jack Brown and Family Professor and Chair in Alzheimer's Disease. "More studies should be done before we place much hope in marijuana's benefits for Alzheimer's patients." Read more >> www.sciencedaily.com/releases/2010/02/100208091926.htm

▶ **Erowid Experience Vaults: Cannabis - Dementia >> Visit - www.erowid.org/experiences/**

▶ **Tetrahydrocannabinol - Wikipedia, the free encyclopedia | (INF) Tetrahydrocannabinol (THC), also known as delta-9-tetrahydrocannabinol (Delta9-THC), Delta1-THC (using an older chemical nomenclature), or dronabinol, is the main psychoactive substance found in the cannabis plant. ... Two studies indicate that THC also has an anticholinesterase action[16][17] which may implicate it as a potential treatment for Alzheimer's and Dementia. Visit - <http://en.wikipedia.org/wiki/Tetrahydrocannabinol> - for more.**

▶ **Medical Marijuana Treatments | Cannabis Symptom Relief > Treatments with medical marijuana and cannabis, research information. >> Visit - medicalmarijuana.com/medical-marijuana-treatments-cannabis-uses -and- <http://medicalmarijuana.com/treatments-with-medical-marijuana-cannabis>**

▶ **Marijuana: 1276 user reviews - DailyStrength | (INF) Treatment Success Rates ... Top 5 Communities; Condition, Members, Success - Chronic Pain, 684, 86%; Depression, 55 96%; Bipolar Disorder, 44, 95%; Anxiety, 32 94%; Fibromyalgia, 26, 100%; Overall, 90% (1106 Members) - find Marijuana helpful Visit - <http://www.dailystrength.org/treatments/Marijuana> - for more.**

▶ **RxMarihuana.com: Index of Medical Conditions | (INF) Marijuana: The Forbidden Medicine. Index of Medical Conditions Addressed We will soon ... MUSCLE SPASM Dementia MYOFASCIAL PAIN SYNDROME N NARCOLEPSY ... and more. Visit - http://rxmarijuana.com/medical_conditions.htm - for more.**

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Medical marijuana to treat your condition, what strains will be most beneficial and we'll even help you connect with other folks with the same condition. with no harmful side effects. >> Visit - medicalmarijuana.com/treatments-with-medical-marijuana-cannabis

see more Forums > [here](#) <

▶ **Medicinal Marijuana Uses | (ORG) ... Sclerosis - Muscle Spasm - Dementia - Myofascial Pain Syndrome ... Who approves of Medical Marijuana -. While the prohibition of cannabis is ... to Contact: visit - [http://alluseismedicinal.org/Medicinal Marijuana Uses.html](http://alluseismedicinal.org/Medicinal_Marijuana_Uses.html)**

▶ **Helping Doctors Helping Marijuana Patients and Caregivers | (ORG) Legal Users Guide to the Michigan Medical Marijuana Act; a Resource for Legal and Medical Professionals Qualifying Patients and CareGivers ... HELP FOR PHYSICIANS HELP FOR PATIENTS HELP FOR CAREGIVERS HELP FOR LAWYERS LAW & AGENCY RULES FORMS BANK SCHMID LAW Make a General Inquiry: Ask Here ... Menstrual Bleeding), Migraine, general Muscle Spasm, Dementia ... to Contact: visit - <http://qualifyingpatient.com/>**

▶ **California Cannabis Research Medical Group (CCRMG). * (ORG, inf) Winter/Spring 2005 - O'Shaughnessy's; Journal of the California Cannabis Research Medical Group. Letter from a Soldier - "Is Cannabis Recommended for Dementia?" - "Hello Dr. Mikuriya, I have recently returned home from Iraq. This was my second tour. I only had about 4 months between the two tours. I ... am at a high state of alertness and I startle at certain noises. My tolerance is also very low, I get angry very easily. Not violent, I still have control but very agitated. I also have trouble sleeping and sometimes I have to take a sleeping pill or Nyquil to go to sleep. I went to my doctors and they sent me to a place on base that helps with Dementia." ... Cannabis would indeed be useful in managing symptoms of Dementia. This has been known for over a century in the medical profession but forgotten because of its ... visit: www.ccrDementia.org/journal/05spr/opinion.html**

FORUMs Section

▶ dementia and marijuana? | Marijuana.com > my dad has dementia and has bad anxiety. I was wondering if smoking a little bud would chill him out? Is there a certain one I should keep to like indica or sativa? ... Cannabis has shown to be of benefit in calming people with Alzheimer's. I'd definitely go with the Indica. ... Dementia is a horrible thing to witness. I'm sorry your family is going through that. If you can get him on board, go with some indica for sure. Sativa may make him more anxious. ... medicinal marijuana for dementia, medical marijuana dementia, Read more >> marijuana.com/community/threads/dementia-and-marijuana.289535/

▶ other Viable Forums, Bulletin Boards, Chat rooms and other such online resources will be listed here as we learn about them. Got one? [Post It!](#) and let everybody know ...

NEWS Section

▶ < use. its authorize that states the of 13 in patients Alzheimer's to available currently is cannabis Medical decision. final have will Health Secretary The Program. Cannabis for eligible conditions medical list disease including dementia neurodegenerative add unanimously voted Wednesday on Board Advisory Program's Mexico New | Disease Access Can Patients Where States Other Join Would Health, Dept. by Approved If - For Marijuana Allowing Recommends Mexico:> The Drug Policy Alliance filed the petition on behalf of all New Mexicans who suffer from Alzheimer's disease. Although Alzheimer's disease was specifically petitioned for,

the board chose to expand their recommendation to include all types of neurodegenerative dementia.

"The Medical Cannabis Advisory Board's action not only recognizes the debilitating impact neurodegenerative diseases have on New Mexico's increasing elderly population, it recognizes that medical cannabis should be part of a larger comprehensive approach to support our elders' quality of life," stated Emily Kaltenbach, director of the Drug Policy Alliance's New Mexico office. "New Mexico has a long history of respecting our elders and the Board's compassionate recommendation to add these conditions is clearly rooted in the great values of our state." Alzheimer's disease, similar to many of the conditions presently included in New Mexico's Compassionate Use Act, is a neurologic disease and has no known cure. Existing medications provide only temporary relief, without stopping the progression of the disease. Santa Fe resident and local radio show host, Larry Love, is a caregiver and legal guardian for his mother who suffers from cognitive impairment, a condition often seen before the onset of Alzheimer's disease.

"My mother became part of the medical cannabis program because she has a lot of physical pain, and it helps her with that. Medical cannabis also helps increase her appetite and desire to eat as well as calms and soothes her and allows her to have restful sleep," said Love. "Other people who suffer from dementia and conditions like Alzheimer's should be able to participate in New Mexico's medical cannabis program too," he said. "This medicine can improve the quality of life and lessen the suffering of thousands of New Mexican elders." Peer-reviewed studies suggest that medical cannabis may improve symptoms related to Alzheimer's disease and support the pharmacological and physiological benefits seen in the use of cannabinoid compounds and whole plant medicine on general symptoms of neurodegeneration. "Medical cannabis studies have shown that people suffering from Alzheimer's disease related anorexia and nighttime agitation, increase their body mass and have improved sleep patterns," said Jessica Gelay, policy coordinator for the Drug Policy Alliance. "Additionally, emerging evidence suggests potential for cannabis to be beneficial in reducing inflammation in the brain, a factor that can lead to the onset of Alzheimer's disease."

Professor Gary Wenk, of Ohio State University, whose research focuses on chronic brain inflammation and Alzheimer's began studying cannabis compounds after other pharmaceuticals he studied "consistently failed to reduce inflammation in the brain." Wenk's animal study results show cannabis to be "the most potent brain anti-inflammatory available." More than 30,000 New Mexicans are currently living with Alzheimer's disease, and the number is expected to increase to more than 40,000 by 2025. It is the leading cause of dementia among the elderly and is estimated to affect approximately one in nine people of the population over 65 years of age. Read more >> hemp.org/news/content/new-mexico-board-recommends-allowing-medical-marijuana-alzheimer%E2%80%99s-disease

► Medical Marijuana for Alzheimers and Dementia | Watch the video Medical Marijuana for Alzheimers and Dementia on Yahoo News . Medical Marijuana for

Alzheimers and Dementia KOAT - Albuquerque > Videos > 2:10 mins Medical Marijuana for Alzheimers and Dementia Read more >> news.yahoo.com/video/medical-marijuana-alzheimer

▶ Medical Marijuana for Alzheimer s and Dementia | KOAT 7 Action News, Albuquerque, reports on medical marijuana for Alzheimer s and Dementia. Read more >> weedmd.com/resource-center/Medical-Marijuana-Videos/Medical-Marijuana-for-Alzheimer-s-and-Dementia_51/

▶ Marijuana for Alzheimers - blogspot.com > Research Study Says Cannabis May Help Reverse Dementia From Alzheimer's | The IOM panel's call for changes in federal policy on medical marijuana echoed ... and long-term use of smoked marijuana (medical ... All lived in a dementia ... A team from Neuroscience Research Australia is in the early stages of research examining if one of the main active ingredients in cannabis (cannabidiol), can reverse some of the symptoms of memory loss in animals. Tim Karl, a senior research fellow with the group, said cannabidiol has been found to have anti-inflammatory, antioxidant plus other effects that could be beneficial for the brain. His study involved injecting cannabidiol into mice that had symptoms similar to those seen in Alzheimer's.

Dr Karl found that when the mice were given the cannabidiol, they showed drastic improvement on parts of the tests that were related to recognizing and remembering objects and other mice. According to Dr. Karl: "You could say it cured them." There have been reports in the medical literature that some marijuana smokers who had developed Alzheimer's disease, indicated their smoking seemed to relieve some of their symptoms. This clinical research presents some intriguing findings and will be an interesting area of research to keep an eye on over the next few years, as more research is conducted on the effects of marijuana and cannabis on Alzheimer's disease. Read more >> marijuanaforalzheimers.blogspot.com

Cannabis as Medicine

▶ RxMarijuana.com | Marijuana: The Forbidden Medicine. (ORG, inf, Book) Featured Medical Marijuana Patient Accounts * to share website visitors' medical marijuana histories to provide insight into uses for this medicine which are not widely known. ... If you wish to send us a personal account of your medical marijuana experiences, ... Cannabis and Dementia by Michael McKenna ... visit: www.rxmarihuana.com/shared.htm

▶ Medical-101.com (web-ring / link-list) * Your starting point for the best medical info. Free Medical Cannabis info Find what you're looking for! Visit: www.medical-101.com/s/medical_cannabis

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