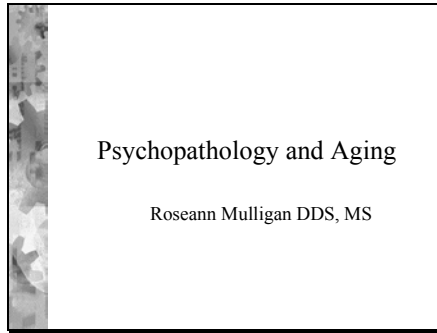


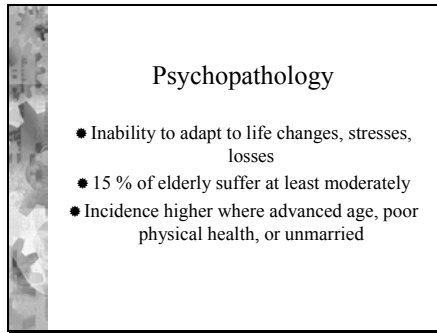
Slide 1



Psychopathology and Aging

Roseann Mulligan DDS, MS

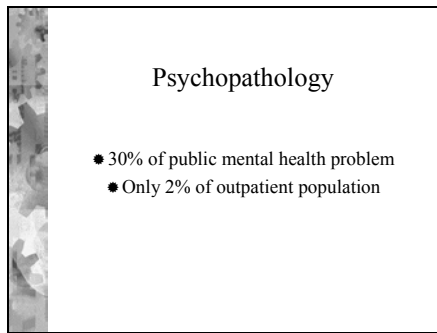
Slide 2



Psychopathology

- Inability to adapt to life changes, stresses, losses
- 15 % of elderly suffer at least moderately
- Incidence higher where advanced age, poor physical health, or unmarried

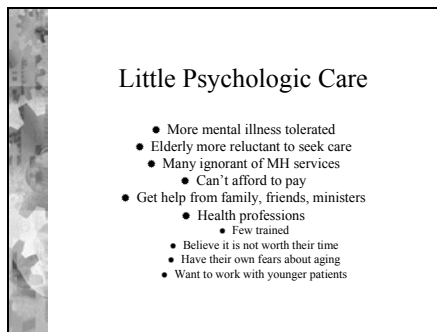
Slide 3



Psychopathology

- 30% of public mental health problem
- Only 2% of outpatient population

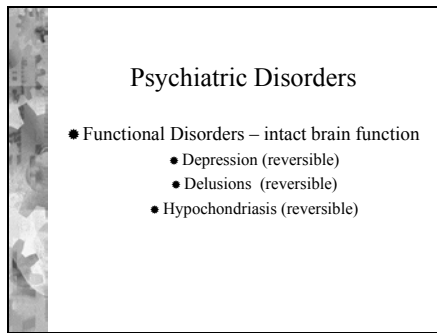
Slide 4



Little Psychologic Care

- More mental illness tolerated
- Elderly more reluctant to seek care
- Many ignorant of MH services
 - Can't afford to pay
- Get help from family, friends, ministers
 - Health professions
 - Few trained
 - Believe it is not worth their time
 - Have their own fears about aging
 - Want to work with younger patients

Slide 5



Psychiatric Disorders

- Functional Disorders – intact brain function
 - Depression (reversible)
 - Delusions (reversible)
 - Hypochondriasis (reversible)

Slide 6

Delusions

- A false belief that is maintained in spite of obvious proof to the contrary

Slide 7

Hypochondriasis

- A morbid concern about one's own health and exaggerated attention to any unusual bodily or mental sensations

Slide 8

Psychiatric Disorders

- Organic disorders (impaired brain function)
 - Senile dementia (irreversible)
 - Vascular dementia (irreversible)
 - Delirium (reversible)

Slide 9

Delirium
or Acute Confusional State
or Acute Brain Syndrome

- Acute mental syndrome
 - Characterized by:
 - decreased ability to maintain attention to external stimuli
 - Disorganized thinking
 - Reduced level of consciousness

Slide 10

Dementia

- Underlying brain disorder
- Results in a decrease of cognitive function
- Most common sign - forgetfulness

Slide 11

Forgetfulness

- Increase occurs with normal aging
- Many assume senility when not necessarily so
- Mild cognitive impairment (MCI) may be precursor of serious late life memory disorders

Slide 12

Reversible Dementia

- K⁺ deficiency
- Hypo or hyperthyroid
- Vitamin deficiency

Slide 13

Irreversible Dementia

- Alzheimer's Disease
- Multi-infarct Dementia

Slide 14

Delirium and Depression

- Mimic dementia

Slide 15

Alzheimer's Disease

- Most common form of dementia
 - 1% chance of developing
- 4 – 5% chance if a close relative has disease
 - 5% > 65 have severe AD
 - 10% > 65% have moderate AD
 - By 2025, 20% >65 will have AD

Slide 16

Morbidity and Mortality

- Main reason for nursing home admissions
- 4th – 5th leading cause of death in the elderly

Slide 17

Initial signs - Alzheimer's Disease

- Signs are subtle
- Forgetfulness and sluggishness
- Trouble finding the right words
- Recent memory incorporation problems
- Interferes with complex work and leisure
- Prefer familiar persons, places, things

Slide 18

Middle Signs – Alzheimer's Disease

- Little interest in personal hygiene
 - Mirror sign is present
- Lack of purposeful movement
 - May not understand speech
 - Partial or total lack of speech
- Disturbance in posture and gait
 - May hoard food in mouth

Slide 19

Late Signs – Alzheimer's Disease

- Cannot read or write
- Very apathetic, disoriented
 - Bed or chair ridden
- Incontinent urine, feces or both
 - Hyper-orality
- Caretaker may be angry

Slide 20

Learned Behaviors

Computational skills

Social skills

Toileting

Talking

Walking

Crawling

Sitting up

Lifting up head

Slide 21

Psychiatric Symptoms

- Irritability
- Emotional lability
- Paranoid delusions
- Hallucinations
- Disorientation
- Apathetic

Slide 22

Cause of Death

- Usually infection
- High rate of accidents, strokes and some cancers such as Hodgkin's Disease

Slide 23

Diagnosis

- By exclusion of all other entities
- Gradual onset of forgetfulness, not enough
 - Autopsy – definitive diagnosis


Slide 24

Findings Upon Autopsy

- Senile plaques and degenerated neurons
 - Neurofibrillary tangles
 - Granulovascular structures

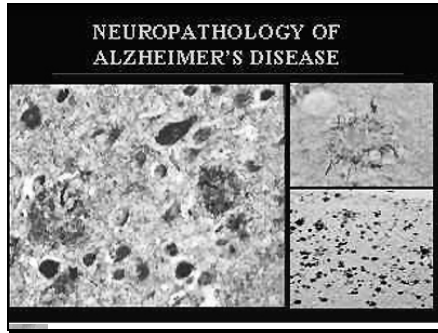
Slide 25

NEUROFIBRILLARY TANGLES IN ALZHEIMER'S DISEASE



A black and white micrograph showing several dark, triangular or spindle-shaped neurofibrillary tangles within neurons. The background is light and granular, representing the surrounding brain tissue. The tangles are prominent and clearly defined against the lighter background.

Slide 26



Slide 27

Theories of Etiology

- Slow virus
- Breakdown of immune system
 - Genetic
- Deficiency of acetyl choline in the brain

Slide 28

Treatment

- Medications: Aricept &/or Vita E
- Symptomatic relief

Slide 29

Pseudodementias

- Depression
- Delirium

Slide 30

Etiology

- Drugs
- Metabolic disorder
- Diseases resulting in low oxygen flow
 - Nutritional disorders
 - Infections
- Anatomical developments

Slide 31

Delirium

- Florid, dramatic symptoms
- Hallucinations

Slide 32

Depression

- Passivity, unresponsiveness
 - Insomnia
- Impression of memory loss
- Antidepressant drugs help

Slide 33

Multi-infarct Dementia

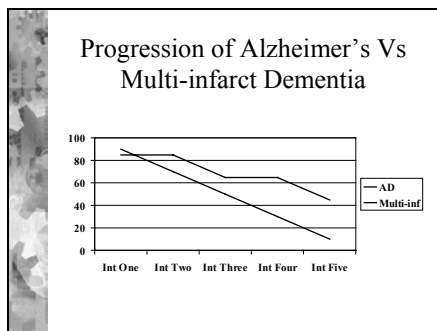
- Second most common cause of dementia
 - 12 – 20% of dementias
- Another 20% have combination multi-infarct and AD

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Etiology

- A series of small strokes
- Resulting in no obvious paresis
- Any motor or sensory symptoms transient
- Memory loss not transient
- Progresses in stair-step fashion
- History of vascular disease and stroke
- Treat by reducing HTN

Slide 35



Slide 36

Dental Treatment

- Medical History Review
 - Other systemic disease
 - Drugs
 - Neuroleptics cause tardive dyskinesias
 - Anticholinergics – xerostomias
 - Other – various side-effects

Slide 37

Dental Treatment

- Dental History Review
 - Reason for patient's visit
 - How does patient communicate
- How does patient demonstrate pain response
 - Does patient allow access to oral cavity

Slide 38

Dental Treatment

- Examination
 - Complete more quickly
- One or two radiographs may be tolerated per visit

Slide 39

Dental Treatment

- Determine the Index of Disease
 - Mild 0 - 3
 - Moderate 4 - 7
 - Severe 8 - 10

Slide 40

Dental Treatment

- Treatment Planning
 - Aggressive Prevention
 - ↑ difficulty with oral hygiene
 - Topical fluoride for home care
 - Daily oral hygiene
 - Teach oral health care to caretakers
 - Anticipate declines
 - Use index
