

痴呆症診斷

CANTONESE | ENGLISH

本須知單提供了有關痴呆症的早期症狀及其診斷方法的資料，並且強調了及早正確診斷的重要性。

痴呆症有甚麼早期體徵？

造成痴呆症的疾病是逐漸發展的，因此痴呆症的早期體徵非常細微，可能不會馬上察覺。早期症狀還取決於痴呆症的類型，因人而異，大有不同。

常見的早期症狀包括：

- 記憶問題，特別是難以記住最近發生的事
- 越來越糊塗
- 注意力下降
- 性格或行為變化
- 無動於衷，離群索居
- 失去處理日常事務的能力

有時候人們認識不到這些症狀表明出現了問題。他們可能誤以為這類行為是老年化的一個正常部分，症狀也可能逐漸發展，以至於很長時間都沒有注意到。有時候，人們即使知道出現了問題，也可能不情願採取行動。

對於出現這些症狀的人來說，由於大腦內部發生的這些變化，他們可能無法認識到這些變化。

徵兆

這是一份痴呆症常見症狀的檢核清單。請查閱整份清單並勾選已有的症狀。如果勾選了數項，請找醫生做全面檢查。

記憶力喪失影響日常功能

偶爾忘記預約，稍後又記起，這是很正常的。但患有痴呆症的人士可能更健忘，或者根本就記不起來。

處理熟悉的事務出現困難

人們可能時常會分神，可能會忘記把一部分飯菜端上桌。但患有痴呆症的人士可能會在準備膳食的所有步驟都碰到困難。

搞不清時間和地點

患有痴呆症的人士可能找到去熟悉地方的路都有困難，搞不清自己在哪里，或者以為自己回到了過去。

語言方面的問題

每個人偶爾都會碰到找不到合適詞語的情況，但患有痴呆症的人士可能會把簡單的詞語都忘記或者換用不恰當的詞語，使其表達難以理解。他們也可能難以理解他人。

抽象思維方面的問題

對於任何人來說，管理財務都可能是一件難事，但患有痴呆症的人士可能不知道這些數字的含意，或者不知道怎麼處理這些數字。

判斷力變差或下降

許多活動都要求有良好的判斷力。在這種能力受到痴呆症影響時，病人可能難以做出適當的決定，如冷天穿甚麼衣服。

空間技能方面的問題

患有痴呆症的人士駕車時可能難以判斷距離或方向。

記不起東西放在哪里

任何人都可能暫時想不起錢包或鑰匙放在哪裡了。而患有痴呆症的人士可能經常把東西放錯地方。

情緒、性格或行為變化

每個人偶爾都會感到難過或鬱悶。患有痴呆症的人士的情緒可能會變得反復而且沒有明顯理由。他們可能變得糊塗、多疑或孤僻。有些人可能會失去約束，或者變得更外向。

失去主動性

人們對一些活動感到厭倦，這很正常。但痴呆症可導致病人對以前喜愛的活動失去興趣。

National Dementia Helpline 1800 100 500

dementia.org.au

本資料單張由澳洲政府提供資金

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可能不是痴呆症

請記住：許多疾病的症狀與痴呆症相似，因此不要祇因為有上述一些症狀，就以為某人患有痴呆症。中風、抑鬱、酗酒、感染、荷爾蒙紊亂、營養缺乏和腦瘤都可能產生與痴呆症相似的症狀。在這些疾病中，許多都能治療。

正確診斷非常重要

及早看醫生非常關鍵。只有醫生才能診斷痴呆症。全面醫療評估可能會找出能夠治療的疾病，確保對其進行正確的治療，或者可能對痴呆症做出確診。

評估可能包括以下方面：

- 病史 - 醫生會詢問過去和現在的病症、家族病史、所服用的任何藥物以及令人擔憂的記憶力、思維或行為問題。醫生還可能想跟能夠幫助提供所有必要信息的近親家庭成員談談。
- 體檢 - 這可能包括檢測感覺和運動功能以及心肺功能，幫助排除其它病症。
- 實驗室檢驗 - 包括各種驗血和驗尿，以確定可能造成這些症狀的任何疾病。在一些情況下，可能會採集一個較小的脊液樣本來進行檢驗。
- 神經心理或認知檢測 - 利用各種檢測來評估思維能力，包括記憶力、語言能力、注意力以及解決問題的能力。這可能有助於找出特定的問題領域，進而幫助找出潛在的原因或痴呆症類型。
- 腦造影 - 有些掃描檢查大腦結構，用於排除症狀是腦瘤或大腦血栓造成的，並且檢測腦組織損失模式，這可以用於區分不同類型的痴呆症。其它掃描檢查大腦某些部分的活躍程度，也可以幫助區分痴呆症的類型。
- 精神病評估 - 確定抑鬱症之類的可治療病症，控制可能與痴呆症一同產生的焦慮或妄想等任何精神病症狀。

從哪里開始

一開始最好找病人的醫生。醫生在考慮症狀及安排篩檢測試後，可做出初步診斷，最好將病人轉診給神經病專家、老年病專家或精神病醫師等專科醫生。

有些人可能對看醫生有抵觸心理。有時候，人們沒有意識到自己出現問題，這是因為痴呆症造成的大腦變化影響了辨認或意識到所發生變化的能力。其他人即使確實對自己的病況有所覺察，也可能害怕自己擔心的情況得到證實。另找一個看醫生的理由，這是克服這一問題的最有效方法之一。也許可以提議做一次血壓檢查，或者對長期病症或藥物進行復查。另一種方法就是提議你們兩人都做一次體檢。在這種時候，保持平靜態度，可幫助病人克服憂慮和擔心。

如果病人還是不願看醫生：

- 向病人的醫生諮詢
- 通過My Aged Care與當地的老年護理評估小組 (ACAT) 聯絡查詢，電話：**1800 200 422**
- 致電全國痴呆症幫助熱線**1800 100 500**

如果你覺得醫生沒有把你的顧慮當回事，不妨尋求第二意見。

有關癡呆症早期體徵及尋求醫生幫助的詳情，請從澳洲癡呆症協會網站下載《擔心你的記憶力問題？》手冊，或者致電全國癡呆症幫助熱線預訂一份手冊。

詳情

澳洲癡呆症協會提供支持、資訊、教育和輔導。請聯絡全國痴呆症幫助熱線：**1800 100 500**，或瀏覽我們的網站：dementia.org.au。



Interpreter

若需要語言方面的幫助，請致電口筆譯服務處電話：**131 450**。

Diagnosing dementia

This Help Sheet provides information about the early signs of dementia, the techniques used to diagnose dementia and the importance of an early and correct diagnosis.

What are the early signs of dementia?

Because the diseases that cause dementia develop gradually, the early signs may be very subtle and not immediately obvious. Early symptoms also depend on the type of dementia and vary a great deal from person to person.

Common early symptoms include:

- Memory problems, particularly remembering recent events
- Increasing confusion
- Reduced concentration
- Personality or behaviour changes
- Apathy and withdrawal or depression
- Loss of ability to do everyday tasks

Sometimes people fail to recognise that these symptoms indicate that something is wrong. They may mistakenly assume that such behaviour is a normal part of ageing, or symptoms may develop so gradually they go unnoticed for a long time. Sometimes people may be reluctant to act even when they know something is wrong.

For the person experiencing the symptoms, the very nature of these changes within the brain may mean that the person is unable to recognise that there are changes.

Warning signs

This is a checklist of common symptoms of dementia. Go through the list and tick any symptoms that are present. If there are several ticks, consult a doctor for a complete assessment.

Memory loss that affects day-to-day function

It's normal to occasionally forget appointments and remember them later. A person with dementia may forget things more often or not remember them at all.

Difficulty performing familiar tasks

People can get distracted and they may forget to serve part of a meal. A person with dementia may have trouble with all the steps involved in preparing a meal.

Disorientation to time and place

A person with dementia may have difficulty finding their way to a familiar place, or feel confused about where they are, or think they are back in some past time of their life.

Problems with language

Everyone has trouble finding the right word sometimes, but a person with dementia may forget simple words or substitute inappropriate words, making them difficult to understand. They might also have trouble understanding others.

Problems with abstract thinking

Managing finances can be difficult for anyone, but a person with dementia may have trouble knowing what the numbers mean or what to do with them.

Poor or decreased judgement

Many activities require good judgement. When this ability is affected by dementia, the person may have difficulty making appropriate decisions, such as what to wear in cold weather.

Problems with spatial skills

A person with dementia may have difficulty judging distance or direction when driving a car.

Problems misplacing things

Anyone can temporarily misplace a wallet or keys. A person with dementia may often put things in inappropriate places.

Changes in mood, personality or behaviour

Everyone becomes sad or moody from time to time. Someone with dementia can exhibit rapid mood swings for no apparent reason. They can become confused, suspicious or withdrawn. Some can become disinhibited or more outgoing.

A loss of initiative

It's normal to tire of some activities. However, dementia may cause a person to lose interest in previously enjoyed activities.

National Dementia Helpline 1800 100 500

dementia.org.au

This help sheet is funded by the Australian Government

It may not be dementia

Remember that many conditions have symptoms similar to dementia, so do not assume that someone has dementia just because some of the above symptoms are present. Strokes, depression, alcoholism, infections, hormone disorders, nutritional deficiencies and brain tumours can all cause dementia-like symptoms. Many of these conditions can be treated.

A correct diagnosis is important

Consulting a doctor at an early stage is critical. Only a medical practitioner can diagnose dementia. A complete medical assessment may identify a treatable condition and ensure that it is treated correctly, or it might confirm the presence of dementia.

An assessment may include the following:

- Medical history – the doctor will ask about past and current medical problems, family medical history, any medications being taken, and the problems with memory, thinking or behaviour that are causing concern. The doctor may also wish to speak to a close family member who can help provide all the necessary information.
- Physical examination – this may include tests of the senses and movement function, as well as heart and lung function, to help rule out other conditions.
- Laboratory tests – will include a variety of blood and urine tests to identify any possible illness which could be responsible for the symptoms. In some cases, a small sample of spinal fluid may be collected for testing.
- Neuropsychological or cognitive testing – a variety of tests are used to assess thinking abilities including memory, language, attention and problem solving. This can help identify specific problem areas, which in turn helps identify the underlying cause or the type of dementia.
- Brain imaging – there are certain scans that look at the structure of the brain and are used to rule out brain tumours or blood clots in the brain as the reason for symptoms, and to detect patterns of brain tissue loss that can differentiate between different types of dementia. Other scans look at how active certain parts of the brain are and can also help discriminate the type of dementia.
- Psychiatric assessment – to identify treatable disorders such as depression, and to manage any psychiatric symptoms such as anxiety or delusions which may occur alongside dementia

Where to begin

The best place to start is with the person's doctor. After considering the symptoms and ordering screening tests, the doctor may offer a preliminary diagnosis and will, ideally, refer the person to a medical specialist such as a neurologist, geriatrician or psychiatrist.

Some people may be resistant to the idea of visiting a doctor. Sometimes people do not realise that there is anything wrong with them because the brain changes that occur with dementia interfere with the ability to recognise or appreciate the changes occurring. Others, who do have insight into their condition, may be afraid of having their fears confirmed. One of the best ways to overcome this problem is to find another reason to visit the doctor. Perhaps suggest a blood pressure check or a review of a long-term condition or medication. Another way is to suggest that it is time for both of you to have a physical check-up. A calm attitude at this time can help overcome the person's worries and fears.

If the person still will not visit the doctor:

- Talk to the person's doctor for advice
- Contact your local Aged Care Assessment Team (ACAT) via My Aged Care on **1800 200 422** for information
- Call the National Dementia Helpline on **1800 100 500**

If you feel your doctor is not taking your concerns seriously, consider seeking a second opinion.

For more detailed information about the early signs of dementia and seeking help from a doctor, download the **Worried About Your Memory?** booklet from the Dementia Australia website or call the National Dementia Helpline to order a copy.

FURTHER INFORMATION

Dementia Australia offers support, information, education and counselling. Contact the National Dementia Helpline on **1800 100 500**, or visit our website at dementia.org.au



For language assistance phone the Translating and Interpreting Service on **131 450**