

The added burden of young onset Alzheimer's disease

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People diagnosed with Alzheimer's disease at a younger age will experience faster symptom progression than their older counterparts, a new study has found, potentially causing their support systems to fall behind.

The study, published in the *Journal of Alzheimer's Disease* and led by Flinders University, sought to understand how the age when someone's

dementia symptoms began have an impact on the disease's overall progression.

Alzheimer's disease is the most common cause of dementia, alongside [vascular dementia](#) and [frontotemporal dementia](#), which together account for more than 92% of cases worldwide.

"The more we know about how the disease will progress and at what rate symptoms will manifest, the better we can assist with prognosis and care planning," says study author Dr. Monica Cations, a psychology registrar and epidemiologist from the College of Education, Psychology and Social Work.

"We already know there are several differences with young-onset Alzheimer's, usually classified as occurring before the age of 65. This includes patients being much more likely to present with atypical symptoms and less likely to report memory loss."

The researchers looked at 30 existing studies that had investigated the relationship of age of symptom onset with the dementia's effect on cognition, function, or behavioral symptoms.

The analysis shows that [younger people](#) with Alzheimer's disease experience faster symptom progression on average than [older people](#), with their memory, executive function and other important brain functions deteriorating more quickly.

The authors say the data can be used for clinical planning and suggest that younger people with Alzheimer's will likely require more frequent review over the course of their illness, along with more rapid access to support services.

"Younger people with dementia already experience higher burden and

stress because their symptom onset usually occurs at a time of high financial, occupational and familial responsibility—and this faster decline could therefore add even more distress," says Dr. Cations.

"In Australia, young people with Alzheimer's disease receive services via the NDIS, which usually only reviews their needs and funding annually. This may prove to be insufficient if symptoms worsen more quickly and support is likely to fall behind the needs of the patient."

While the study has limitations, and more research is needed on vascular and frontotemporal dementia, the authors say the study still has implications for researchers, clinicians and policy-makers.

"One of the best things we can do is address the [modifiable risk factors](#) for dementia to potentially delay symptom onset," says Dr. Cations.

"Evidence shows that undertaking [physical activity](#), controlling vascular risk factors such as [high blood pressure](#) and smoking, avoiding head injury and hearing loss, as well minimizing social isolation, all help to reduce the risk of dementia.

"Any delay could have a potentially big impact on overall quality of life in the long run."

More information: Sally Day et al, Age of Symptom Onset and Longitudinal Course of Sporadic Alzheimer's Disease, Frontotemporal Dementia, and Vascular Dementia: A Systematic Review and Meta-Analysis, *Journal of Alzheimer's Disease* (2021). [DOI: 10.3233/JAD-215360](#)

Provided by Flinders University

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