

4 March 2025

# Health Spotlight: Dementia

## Key statistics

Based on the latest data from the Australian Bureau of Statistics, dementia, including Alzheimer's disease, was the third leading cause of death in Australia in 2023, following cancer and cardiovascular diseases.

- **Mortality:** There were 17,800 deaths attributed to dementia in Australia in 2023.
- **Prevalence:** Approximately 472,000 Australians are living with dementia.
- **Age factor:** The risk of dementia increases with age, with around 9% of people aged 65 and over, and 30% of people aged 85 and over, affected by dementia. Although, dementia can affect people as young as 30 years old.
- **Caregivers:** Around 1.7 million Australians provide unpaid care for someone with dementia.<sup>1</sup>

## What is dementia?

Dementia is a broad term for a decline in cognitive function severe enough to interfere with daily life, affecting memory, thinking, reasoning, and the ability to perform everyday tasks. It is not a specific disease, but a collection of symptoms associated with various brain disorders. Alzheimer's disease is the most common cause, but other types include vascular dementia, Lewy body dementia, and frontotemporal dementia.

People with dementia may experience a range of symptoms, such as:

- Memory loss
- Difficulty with communication and language
- Impaired judgment and reasoning
- Changes in mood and behaviour
- Difficulty with coordination and motor functions

Dementia is often progressive, meaning it worsens over time. While there is no cure for most types, treatments and support can help manage symptoms and improve quality of life.<sup>2</sup>

## What are symptoms of dementia to watch out for?

Here are some general symptoms to look out for in yourself or others:

- **Memory loss:** Especially short-term memory.
- **Difficulty communicating:** Struggling to find the right words.
- **Disorientation:** Confusion about time or place.
- **Difficulty with tasks:** Trouble completing familiar tasks or handling complex activities.
- **Poor judgment:** Making decisions that are out of character or risky.
- **Mood changes:** Increased anxiety, depression, or irritability.
- **Apathy:** Loss of interest in activities or social interactions.
- **Personality changes:** Noticeable shifts in behaviour or personality.
- **Hallucinations:** Seeing or hearing things that aren't there.<sup>3</sup>

## How is dementia diagnosed?

Doctors use several steps to figure out if someone has dementia:



### **Medical history and check-up:**

The doctor asks about your health and symptoms. They might also talk to a family member or friend.



### **Brain and nerve check:**

The doctor looks at how your brain and nerves are working, including your memory, balance, and reflexes.



### **Thinking and memory tests:**

These tests check how well you remember things, solve problems, and use language.



### **Mental health check:**

A specialist checks if depression or other mental health issues are affecting your symptoms.<sup>4</sup>



### **Brain scans:**

- **CT or MRI:** These scans look for problems like strokes or tumours.
- **PET scans:** These show how active different parts of your brain are and can spot signs of Alzheimer's.



### **Blood tests:**

These tests check for issues like low vitamin B-12 or thyroid problems. Sometimes, they test spinal fluid for infections or other diseases.

This process helps doctors understand what's happening and how to help.

## Types of dementia: Causes, risk, treatment and support

Understanding the various types of dementia, their causes, associated risks, and available treatments is crucial for providing effective care and support. Each type of dementia presents unique challenges, necessitating a personalised approach to treatment and management.

### **Medications to treat dementia**

While there is no cure for dementia, certain medications can temporarily alleviate some symptoms. Additionally, doctors may prescribe other medications to address issues related to dementia, such as depression, sleep disturbances, or irritability.

According to the Australian Bureau of Statistics, there were 183,131 deaths registered in Australia in 2023. The table on the following pages references 2023 figures.

Dementia Types <sup>5</sup>	Key Symptoms <sup>6</sup>	No. of Deaths (2023) <sup>7</sup>	Prevalence (2023) <sup>8</sup>	Causes <sup>9</sup>	Risk <sup>10</sup>	Therapy and Support <sup>11</sup>
<p><b>1 Alzheimer's Disease:</b></p> <p>The most common cause of dementia, characterised by progressive memory loss, confusion, and cognitive decline.</p>	<ul style="list-style-type: none"> <li>• Memory loss: Especially recent memories.</li> <li>• Difficulty with planning and performing familiar tasks.</li> <li>• Confusion about time and place.</li> <li>• Changes in mood and personality.</li> </ul>	17,800	246,660 to 287,770	Primarily caused by the buildup of amyloid plaques and tau tangles in the brain.	Age, family history, genetics, and lifestyle factors such as poor diet and lack of exercise.	<p><b>Therapies:</b> Cognitive and behavioural therapies to support memory and daily functioning.</p> <p><b>Supportive care:</b> Assistance with daily activities, creating a safe environment, and providing emotional support.</p>
<p><b>2 Vascular Dementia:</b></p> <p>Caused by problems with the blood supply to the brain, often due to strokes or other vascular conditions.</p>	<ul style="list-style-type: none"> <li>• Impaired judgment and decision-making.</li> <li>• Difficulty with motor skills and balance.</li> <li>• Sudden or stepwise progression of symptoms.</li> </ul>	3,000	82,220	Caused by conditions that block or reduce blood flow to the brain, such as strokes.	High blood pressure, diabetes, smoking, and heart disease.	<p><b>Therapies:</b> Physical and occupational therapy to improve mobility and daily functioning.</p> <p><b>Lifestyle changes:</b> Adopting a heart-healthy diet, regular exercise, and quitting smoking.</p>
<p><b>3 Lewy Body Dementia:</b></p> <p>Associated with abnormal deposits of a protein called alpha-synuclein in the brain, leading to symptoms such as visual hallucinations, sleep disturbances, and Parkinson's-like symptoms.</p>	<ul style="list-style-type: none"> <li>• Visual hallucinations.</li> <li>• Movement disorders: Like Parkinson's disease.</li> <li>• Fluctuations in attention and alertness.</li> </ul>	1,000	20,555 to 41,110	Caused by abnormal deposits of alpha-synuclein protein in the brain.	Age, genetics, and possibly a history of Parkinson's disease.	<p><b>Therapies:</b> Physical, occupational, and speech therapy to address motor and communication issues.</p> <p><b>Supportive care:</b> Providing a structured environment and managing sleep disturbances.</p>
<p><b>4 Frontotemporal Dementia:</b></p> <p>Involves the degeneration of nerve cells in the frontal and temporal lobes of the brain, affecting personality, behaviour, and language.</p>	<ul style="list-style-type: none"> <li>• Changes in personality and behaviour.</li> <li>• Language difficulties: Problems with speaking or understanding.</li> <li>• Movement disorders: Less common but can occur.</li> </ul>	500	8,222 to 20,555	Caused by the degeneration of nerve cells in the frontal and temporal lobes of the brain.	Genetics and family history.	<p><b>Medications:</b> Antidepressants and antipsychotics to manage behavioural symptoms.</p> <p><b>Therapies:</b> Speech and language therapy to help with communication difficulties.</p> <p><b>Supportive care:</b> Providing emotional support and creating a safe environment.</p>

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<p><b>5 Mixed Dementia:</b></p> <p>Mixed dementia occurs when a person has brain changes from multiple types of dementia, commonly Alzheimer's disease and vascular dementia. This combination can result in a wider array of symptoms and a more pronounced effect on cognitive abilities.</p>	<ul style="list-style-type: none"> <li>Combination of symptoms: Overlapping symptoms of Alzheimer's and vascular dementia.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>		<p>Dependent on dementia type identified.</p>	
<p><b>6 Alcohol-Related Dementia:</b></p> <p>A type of dementia caused by long-term, excessive alcohol consumption, leading to brain damage and cognitive impairment.</p>	<ul style="list-style-type: none"> <li>Severe memory problems: Especially short-term memory.</li> <li>Confabulation: Making up stories to fill memory gaps.</li> <li>Coordination problems.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>	<p>Chronic alcohol abuse resulting in neurological damage.</p>	<p>Long-term heavy drinking, poor nutrition, and vitamin deficiencies (especially thiamine).</p>	<p><b>Therapies:</b> Cognitive rehabilitation, physical therapy. <b>Supportive care:</b> Abstinence from alcohol, nutritional support, and counselling.</p>
<p><b>7 Parkinson's Disease Dementia:</b></p> <p>A decline in thinking and reasoning skills that develops in some people with Parkinson's disease, typically years after the initial diagnosis.</p>	<ul style="list-style-type: none"> <li>Movement symptoms: Tremors, stiffness, and slow movement.</li> <li>Cognitive decline: Similar to Alzheimer's but occurs later in the disease progression.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>	<p>The progression of Parkinson's disease, which affects brain areas responsible for cognitive functions.</p>	<p>Age, duration of Parkinson's disease, and severity of motor symptoms.</p>	<p><b>Therapies:</b> Physical therapy, occupational therapy. <b>Supportive care:</b> Cognitive training, supportive care for daily activities.</p>
<p><b>8 Korsakoff Syndrome:</b></p> <p>A chronic memory disorder caused by severe deficiency of thiamine (vitamin B1), often associated with alcohol misuse.</p>	<ul style="list-style-type: none"> <li>Severe memory problems: Especially short-term memory loss.</li> <li>Confabulation: Making up stories to fill memory gaps.</li> <li>Coordination problems: Difficulty with movement and balance.</li> <li>Hallucinations: Seeing or hearing things that aren't there.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>	<p>Severe thiamine deficiency, often due to chronic alcohol abuse or malnutrition.</p>	<p>Chronic alcohol use, malnutrition, and conditions that affect nutrient absorption.</p>	<p><b>Therapies:</b> Cognitive rehabilitation. <b>Supportive care:</b> Abstinence from alcohol, nutritional support, and counselling.</p>

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<p><b>9 Creutzfeldt-Jakob Disease:</b></p> <p>A rare, degenerative brain disorder caused by abnormal prion proteins, leading to rapid mental deterioration.</p>	<ul style="list-style-type: none"> <li>Rapid progression: Symptoms worsen quickly.</li> <li>Severe mental deterioration: Memory loss, personality changes, and hallucinations.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>	<p>Abnormal prion proteins that cause brain cell death.</p>	<p>Age (typically affects older adults), genetic mutations, and exposure to contaminated tissue.</p>	<p><b>Therapies:</b> None specific; focus is on symptom management.</p> <p><b>Supportive care:</b> Palliative care to improve quality of life.</p>
<p><b>10 Normal Pressure Hydrocephalus:</b></p> <p>A condition characterised by the buildup of cerebrospinal fluid in the brain's ventricles, causing symptoms similar to dementia.</p>	<ul style="list-style-type: none"> <li>Gait disturbances: Difficulty walking.</li> <li>Urinary incontinence.</li> <li>Cognitive impairment: Memory loss and difficulty thinking.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>	<p>Blockage of cerebrospinal fluid flow, often due to head injury, bleeding, infection, brain tumor, or unknown reasons.</p>	<p>Increasing age (most common in people over 65).</p>	<p><b>Therapies:</b> Physical therapy to improve mobility.</p> <p><b>Supportive care:</b> Surgical implantation of a shunt to drain excess fluid.</p>
<p><b>11 Posterior Cortical Atrophy:</b></p> <p>A rare, progressive neurodegenerative disorder affecting the posterior part of the brain, leading to visual and spatial processing difficulties.</p>	<ul style="list-style-type: none"> <li>Visual processing problems: Difficulty with spatial awareness and visual tasks.</li> <li>Reading difficulties.</li> <li>Coordination issues.</li> </ul>	<p>Not reported but are included in the overall dementia death statistics.</p>	<p>Specific prevalence rates are not always reported separately.</p>	<p>Often associated with atypical Alzheimer's disease, but can also be due to other neurological conditions like Lewy body dementia.</p>	<p>Like those for Alzheimer's disease, though specific risk factors for PCA are still being studied.</p>	<p><b>Therapies:</b> Occupational therapy, vision therapy.</p> <p><b>Supportive care:</b> Supportive care for daily activities and cognitive training.</p>

## Prevention

Effective dementia prevention includes both general lifestyle choices and specific measures to address underlying risk factors.

- **General prevention:** Maintaining a healthy lifestyle with regular exercise, a balanced diet, mental stimulation, and social engagement can help reduce the risk of dementia.
- **Specific prevention:** Managing cardiovascular risk factors (e.g., controlling blood pressure and cholesterol) can help prevent vascular dementia. Avoiding smoking and reducing alcohol consumption can also lower the risk.<sup>12</sup>

## General support

Supporting individuals with dementia involves a range of strategies, including caregiver education, access to community services, and promoting a healthy lifestyle.



### Caregiver support:

Education and resources for caregivers to manage the challenges of dementia care.



### Community services:

Access to support groups, respite care, and other community resources.



### Healthy lifestyle:

Encouraging a balanced diet, regular exercise, and mental stimulation.<sup>13</sup>

Dementia is a complex and progressive condition that significantly impacts individuals and their families. While there is currently no cure, early diagnosis, effective management, and comprehensive support can greatly improve the quality of life for those affected.

By promoting awareness, advancing research, and fostering supportive communities, we can work towards better outcomes and hope for future advancements in dementia care and prevention.

## Resources

### Dementia Australia:

Provides information, support, and resources for people living with dementia, their families, and carers. They offer helplines, support groups, and educational materials. Access their 'Dementia Guide' [here](#).

### Alzheimer's Australia:

Offers support services, information, and advocacy for people affected by Alzheimer's disease and other dementias.

### National Dementia Helpline:

A free service providing information and support for people with dementia, their families, and carers. Call 1800 100 500.

## References

- 1 [Causes of Death, Australia](#). Australian Bureau of Statistics, October 2024
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- 4 [Dementia - Diagnosis and treatment](#). Mayo Clinic
- 5 [Different types of dementia](#). Dementia Australia, February 2025
- 6 [Dementia - Symptoms and causes](#). Mayo Clinic
- 7 [Dementia in Australia, Data > Data tables: S3. Mortality Data XLSX](#). Australian Institute of Health and Welfare, September 2024; [Provisional Mortality Statistics, Jan - Sep 2024](#). Australian Bureau of Statistics, December 2024
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