



Dementia Risks, Signs and Symptoms

IDD and Dementia Fact Sheet #2

Even though dementia is not a normal part of the aging process, getting older increases dementia risk. Because of this, all people—including those with and without intellectual and developmental disabilities (IDD)—are more likely to develop dementia the older they are. Since people living with IDD are living longer, more are experiencing dementia.

People living with most types of IDD have the same or somewhat greater risk of developing dementia compared to people without IDD. However, people living with Down syndrome (DS) have a much higher risk of developing dementia. According to the National Down Syndrome Society, dementia affects about 30% of people living with DS in their 50's and about half of people living with DS in their 60's. People living with DS can start experiencing signs and symptoms of dementia in their 30's and 40's.

People with and without IDD experience symptoms that include memory loss, problems doing usual activities, and getting lost in familiar places. Early signs and symptoms of dementia that are more common among people living with IDD include:

- Developing seizures for the first time as an adult
- Problems walking
- Personality changes
- New problems finding the right words

Dementia affects people in different ways; and not everyone experiences the same symptoms or behaviors. Dementia *may* cause people to ask the same questions over and over, hoard, become suspicious of other people, see, or hear things that do not exist, resist taking a bath or shower, wander, yell, become physically aggressive, and act in other ways that are out of character.

If your family member is showing significant changes in health, behavior, or personality, it is important to see a primary care provider (PCP) and determine the cause. Let the PCP know what's normal for your family member and be specific about changes you've noticed. Consider using the National Task Group Early Detection Screening Tool, available at: [Early Detection Tool](#)

The PCP should do tests to see if changes may be caused by conditions like depression, thyroid problems, diabetes, hearing loss, vision loss, medication interactions, and vitamin deficiencies. All these conditions are treatable, but they have to be diagnosed before they can be treated.





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Making a diagnosis of dementia is a process of eliminating other causes. To get started, the PCP should listen carefully as you explain any changes you've noticed, do a physical exam, and order lab work.

Doctors who are neurologists and geriatricians have gotten special training in diagnosing dementia. However, primary care doctors may be able to diagnose dementia. Ask your family member's doctor if he/she feels comfortable diagnosing dementia. If not, ask for a referral to another doctor.

These fact sheets were created by Dementia Friendly North Central/East Texas. For more information, go to: [Dementia Friendly](#)

Resources for people with memory loss and their family caregivers are available at: [Resources](#)

Resources include the following fact sheets on IDD and dementia:

1. *Health and Healthcare*
2. *Dementia Risks, Signs, and Symptoms*
3. *Stages of Dementia*
4. *Planning for the Future*
5. *Getting Help*
6. *Making Home Age- and Dementia Friendly*
7. *Failure-Free Activities*
8. *Responding to Behaviors*

You can get resource information mailed to you by calling 682-433-0375.

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