

Non Progressive Alzheimer's Disease

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I had the opportunity to see Sarala over a period of last 2 years as she was admitted to a rehabilitation centre which I visit once every week. As the relatives did not come back after admitting Sarala I had no opportunity to talk to the relatives and get the details about her illness. When I talked to her for the first time I realized that this very calm, quiet and naïve lady of around 70 years of age had a problem with her cognitive functions. She was sitting with a very relaxed and contented look on her face, unaware of the fact that her relatives had left her in this rehabilitation centre for good and had not reported back after admitting her. On asking about her problem, she, without any hesitation, replied that she was fine and she did not have any problem. On further enquiry, it was obvious that she did not remember what she had for breakfast or lunch, nor was she aware about the recent events in the centre. She was living in the present, here and now, least worried about the past or future. Her daily chores included getting up in the morning, taking care of herself like brushing her teeth, bathing and changing her cloths. She would then have her tea and eat whatever that is served to her for the breakfast; she does not make any demand or pass any comment on the quality of breakfast like the other inmates. For most of the time of the day she rests in her bed and from time to time she comes down to the foyer of the centre for a routine check-up, medicines and for some activities conducted by the occupational therapist. She goes to bed by 9.00 pm and then follows the same routine the next day. She does not have any neurological deficit. She does not seem to have any behavioural or psychological problem. Clinically she is a case of Alzheimer's Dementia.

What is striking about her is that over a period of last two years she is just the same. There is no decline in her cognitive abilities which one would have expected. She is on donepezil, memantine, calcium and vitamins, but that probably does not explain status quo of her condition even after two years as most of the patients of Alzheimer's Dementia even on these medicines show a gradual decline in their cognitive abilities and at some point have some psychological and behavioural issues.

One may argue that this may not be a case of Alzheimer's Dementia and may be a case of organic amnesic syndrome which may be a non-progressive disorder. But she never had alcohol or any other substance use disorder or head injury to which organic amnesic syndrome may be attributed.

The other possibility is that being in the same controlled non-stressful environment her cognitive decline is not evident, it is compensated and once she moves out of the centre her cognitive decline may be evident. But there are a number of

patients of Alzheimer's dementia who are in controlled and structured environment and still the cognitive decline is evident either in their day-to-day functioning or in their behaviour.

A similar case of Mr. Tambe, a restaurant owner is under my care for more than a year now. He was brought by his family members with the history of forgetfulness for which he was unaware and least bothered. Based on the detailed interview, blood investigations and neuroimaging he was clinically diagnosed to have Alzheimer's Dementia. He was started on Donepezil and Memantine. Over a period of about a year he has remained more or less the same. There is no further cognitive decline. He continues to get up in the morning, takes self-care and manages cash counter of his restaurant. Though he does not remember about what he ate for his meals, whom did he meet a couple of days back or recent events, he appears to be least affected by it as he is practically completely unaware about his cognitive deficits. One may argue that he may have organic amnesic syndrome of unknown aetiology in view of predominant recent memory deficits and no evidence of head injury or nutritional deficits.

So, though Alzheimer's Dementia leads to progressive decline in cognitive abilities in most of the patients over a period of few years, it is likely that there are individuals like Sarala and Mr. Tambe who may have non-progressive type of Alzheimer's Dementia or very very slowly progressive type of Alzheimer's Dementia or organic amnesic syndrome of unknown aetiology!