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978-1-107-64826-5 - Physical Comorbidities of Dementia  
Susan Kurrle, Henry Brodaty and Roseanne Hogarth  
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## Susan Kurrle

Curran Chair in Health Care of Older People, The Faculty of Medicine,  
University of Sydney, Sydney, and Geriatrician and Clinical Director,  
Division of Rehabilitation and Aged Care, Hornsby Ku-ring-gai Health Service,  
Hornsby, NSW, Australia

## Henry Brodaty

Scientia Professor of Ageing and Mental Health and Director,  
The Dementia Collaborative Research Centre,  
University of New South Wales, Sydney, NSW, and Director,  
Aged Care Psychiatry at Prince of Wales Hospital, Randwick,  
Sydney, NSW, Australia

## Roseanne Hogarth

Clinical Nurse Consultant in Dementia,  
Hornsby Ku-ring-gai Hospital, Sydney,  
NSW, Australia



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## Foreword

Less than a third of people over the age of 55 years suffer from only one disease when ill; two-thirds will have at least one other disease. Comorbidity – particularly in advanced age – is becoming the rule rather than the exception. And yet, health systems, even in highly developed countries, are not organized in a manner that would provide appropriate care for people with more than one illness. This is particularly true for the comorbidity of mental and physical illness, but it also holds for the care of people with more than one physical illness, who receive suboptimal care in health systems that are increasingly often fragmented into superspecialties. The neglect of comorbidity leads to higher levels of disability and poorer prognosis for the comorbid conditions. The cost of care when only one of the comorbid conditions is given attention is much higher, mainly because of complications that could have been avoided if all comorbid conditions had been treated at the same time. In developing countries the situation is even worse, partly because of restricted resources but also because of the lesser competence of dealing with mental disorders consequent to the low priority given to mental disorders and psychiatry in the education of health personnel.

These considerations have led the Association for the Improvement of Mental Health (AMH) Programme to initiate several projects aiming to increase the awareness of all concerned about the high prevalence of comorbidity and about the importance of making arrangements that will allow its appropriate management. One of these projects aims to provide reviews of evidence and experience about comorbidity. This book, *Physical Comorbidities of Dementia* is the most recent of the reviews whose production the Association has stimulated – the previous reviews dealt with physical illness and schizophrenia (Leucht et al.), intellectual disability and ill Health (O'Hara, McCarthy and Bouras) and physical illness and drugs of abuse (Gordon). We hope that these books will be read widely, and we plan to have them translated and published in languages other than English.

I am delighted to see this book in print, because I believe that it will help to give the problem of comorbidity of dementia and physical illness the attention that it deserves. The way in which the authors approached this issue is innovative

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and different from the approaches that were used in the other reviews mentioned above: rather than presenting the comorbidity between diseases the book examines the impact that a particular feature of several other diseases might have on care that should be offered to people with dementia. This way of approaching the problem will be very useful to the specialists in geriatrics and psychiatry, to general practitioners, nurses, and other personnel, as well as to nonprofessional carers: it is, however, also a novel way of approaching issues related to care and might therefore be of interest and applicable in the development of reviews and guidelines concerning comorbidity. I take pleasure in recommending this book to all those concerned with the care of older people.

Professor Norman Sartorius  
President  
Association for the Improvement of Mental Health Programmes (AMH)  
14 chemin Colladon  
1209 Geneva  
Switzerland

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## Preface

This book began life as a brief literature review after two of the authors had a discussion about the physical conditions that are more commonly seen in people with dementia than in the general population. It was aided in its development by patients and carers who reported unusual symptoms that were not adequately explained by conventional knowledge on dementia. These symptoms included seizures masquerading as falls, distorted vision, and difficulty recognizing familiar objects, as well as unexplained weight loss despite eating well. A wide-ranging review of the literature uncovered nine physical conditions that occur more often in people with dementia. When the authors were invited by Professor Norman Sartorius to contribute a book to the series on comorbidity of mental and physical illness that his Association was organizing, they turned their review into the book that is presented here.

Of concern to the authors is that despite the increasing numbers of people with dementia, a lack of knowledge exists about the health conditions, such as epilepsy, that occur more commonly in people with dementia. While there has been a great deal of focus on the cognitive and behavioral symptoms of dementia and their management, the physical comorbidities of dementia have been neglected. These comorbidities, which include delirium, seizures, visual dysfunction, incontinence, and sleep disorders, are common and impact greatly on the care and quality of life of the person with dementia, their caregivers, and family members. As many of these physical conditions are treatable, appropriate recognition and treatment are likely to reduce disability and improve quality of life.

This book is designed for medical practitioners, nurses, and allied health staff working with people with dementia. It fills a major gap in knowledge by providing a comprehensive overview of the health-related scientific literature on many of the physical conditions that accompany and complicate dementia. It describes how these conditions may present, and what the underlying pathology is likely to be, and gives detailed information and evidence-based recommendations on how to recognize and manage these conditions. The book aims to provide practical explanations and suggestions on improving care for people with dementia.

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The literature review was funded by the Australian Government through the Dementia Collaborative Research Centre program, and by the Curran Ageing Research Unit at Hornsby Ku-ring-gai Hospital, Sydney. The authors wish to thank Jennifer Hill for her work in searching the literature and developing outlines for several of the chapters, and Racheal de Gabriele for her initial assistance in reviewing the literature. Professor Norman Sartorius provided encouragement and advice in developing this book, and his assistance is gratefully acknowledged. Finally our patients and their carers deserve special thanks for providing the inspiration and the impetus for this book.