NEUROCOGNITIVE DISORDERS

MAJOR AND MILD NEUROCOGNITIVE DISORDERS (DEMENTIA)

What it is:

The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) has replaced the term “dementia” with “major and mild neurocognitive disorders” (NCDs). This was done in an effort to reduce the stigma attached to the term dementia. However many clinicians and organisations will likely continue to use the term dementia as their patients are accustomed to it.

Major and mild neurocognitive disorder sit on a spectrum of cognitive (thought) and functional impairment. NCDs are characterised by a decline in cognitive function from a previous level of performance in one or more areas of an individual’s life. This can include an individual’s memory, language skills, planning, learning, reasoning and judgment abilities. These declines in cognitive function are typically recognised either by the individual themselves, by a loved one or caregiver, or by a medical practitioner. Major NCDs correspond to the condition also known as dementia, with significant cognitive decline present. Mild NCDs have similar symptoms to major NCDs, but the cognitive decline is modest rather than severe.

Common symptoms of major neurocognitive disorder:

1. Significant cognitive decline compared to a previous level of performance in one or more areas such as:
2. Memory loss, difficulty remembering new information
3. Difficulties with abstract thinking
4. Forgets names of everyday objects or familiar people
5. Loss of communication skills
6. Disorientation relating to time and place
7. Problems with physical movement and balance
8. Extreme behavioural changes, for example, dresses inappropriately, speaks about topics that are controversial or offensive without regard for others feelings, makes decisions without regard for personal safety
9. These cognitive impairments interfere with the independence of the individual with relation to everyday activities
Common symptoms of mild neurocognitive disorder:

1. Modest cognitive decline compared to a previous level of performance in one or more areas such as:
2. Difficulty in multitasking or handling more than one task at a time
3. Everyday tasks take longer than normal to complete
4. Difficulty recalling recent events
5. May need to rely on maps or other people for directions when traveling
6. Subtle changes in personality, for example, decreased empathy, decreased inhibition, restlessness, increased extraversion or introversion
7. Has difficulty remembering correct words and names of people
8. The cognitive decline does not interfere with the independence of the individual with relation to everyday activities

Causes:

There are a number of diseases, disorders and illnesses that could cause major and mild neurocognitive disorder. This includes – Alzheimer’s disease, Lewy body disease, vascular disease, Prion disease, Parkinson’s disease, Huntington’s disease, HIV infection, Frontotemporal lobar degeneration and traumatic brain injury. However the strongest risk factor for major and mild NCDs is old age.