

#### **Clinical trials**

Medications that may help people living with dementia are currently in clinical trials. For additional information about research and clinical trials, visit alzheimer.ca/participateinresearch.

## When considering any treatment, it is important to consult with your health-care provider.

- 1. What are the potential benefits or results of taking this product?
- 2. Is this the best product or approach to achieve these results or are there better alternatives?
- 3. What are the risks associated with taking this product?

Keep communicating with your healthcare provider to find the best treatment options. Discuss side-effects and any issues to ensure that the treatment is effective and appropriate for you or the person with dementia you are caring for.

### Additional information and resources

Available from your local Alzheimer Society or at alzheimer.ca:

- Alzheimer Society of Canada. Medications for Alzheimer's disease: Are they right for you? alzheimer.ca/medications
- Alzheimer Society of Canada. Drug approval process for the treatment of dementia. alzheimer.ca/drugapprovalprocess
- Alzheimer Society of Canada. Living well with dementia. alzheimer.ca/livingwell
- Alzheimer Society of Canada. Dementia treatment options and developments. alzheimer.ca/treatment
- Alzheimer Society of Canada. First steps after diagnosis. alzheimer.ca/firststeps
- Alzheimer Society of Canada. First steps for families. alzheimer.ca/firststepsforfamilies

The Alzheimer Society is Canada's leading nationwide health charity for people living with Alzheimer's disease and other dementias. Active in communities right across Canada, the Society:

- Offers information, support and education programs for people with dementia, their families and caregivers
- Funds research to find a cure and improve the care of people with dementia
- Promotes public education and awareness of dementia to ensure people know where to turn for help
- Influences policy and decision-making to address the needs of people with dementia and their caregivers.

For more information, contact your local Alzheimer Society or visit our website at alzheimer.ca.

## Help for Today. Hope for Tomorrow...®

We thank Dr. Tejal Patel, Clinical Associate Professor, University of Waterloo for her generous contribution to the development of this resource.

# **Alzheimer** *Society*

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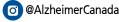
Information and Referrals: 1-855-705-4636 (INFO)





alzheimer.ca





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# **Alzheimer** *Society*

Dementia

# **Treatment options**





## **Treatment options**

Recent research has greatly improved our knowledge of dementia. Treatments are available that may help manage symptoms and maintain a good quality of life.

Advances in dementia research have created optimism that more and better treatments are being developed. The information provided here is a brief overview of the treatments that are currently available.

### Pharmacological treatment

There are a few different drugs available for treating dementia. Each type of dementia may have specific recommendations, so be sure to check with your health-care provider. Although there is currently no cure for irreversible types of dementia, those who respond to medication can experience improvements in their quality of life that may last for several years. It is important to remember that people respond differently to treatments and not everyone will respond equally to these medications. For more information visit alzheimer.ca/treatment.

#### **Cholinesterase inhibitors**

As dementia progresses, nerve cells in the brain do not function as well. Cholinesterase inhibitors aim to preserve the ability of damaged nerve endings to transmit messages from one nerve cell to another.

The following medications are cholinesterase inhibitors:

- Aricept® (also known as donepezil)
- Exelon® (also known as rivastigmine)
- Reminyl ER® (also known as galantamine)

All three medications may be considered for people at the early or middle stages of Alzheimer's disease or Lewy body dementia. Donepezil has also been approved late stage Alzheimer's disease or Lewy body dementia. Rivastigmine may also be considered for people living with Parkinson's disease dementia. Reminyl is often used with all types of dementia except for fronto-temporal dementia. Differences among these medications, along with other factors such as having other conditions or being on other medications, may cause someone to respond to one but not another. Depending on the medication, different side-effects may be experienced. These medications may be helpful for two to three years, possibly longer. Eventually nerve endings become damaged to the point that the medications are no longer helpful.

#### NMDA receptor antagonists

Messages are sent in the brain across nerve cells by neurotransmitters. One neurotransmitter called glutamate stimulates NMDA receptors. When a person has Alzheimer's disease, glutamate stimulates this receptor too much. This causes the nerve cells to become damaged. However, there are drugs known as NMDA receptor antagonists, to help stop this from happening. Memantine, also known as Ebixa®, is the first of these drugs to be approved for people with middle-to-late stage Alzheimer's disease or Lewy body dementia.

Ongoing research suggests that there may be greater benefit to using cholinesterase inhibitors and memantine together. However, more and larger clinical trials are needed to confirm these results.

Medications are also available to help manage other dementia symptoms, one example being sleep distruption. Talk to your health-care provider to determine whether other treatments may be helpful for you or the person you are caring for.

Medications for people living with dementia are only available by prescription to those under the care of a health-care provider.

**Note:** Medication coverage varies depending on your province or territory, and individuals may be required to cover some of the costs associated with these medications. The person must meet specific criteria in their region to be entitled to have the medications paid for by their provincial/territorial medical coverage plan. The medications may also be covered by many private insurance plans.

## Non-pharmacological treatment

Some non-pharmacological therapies (such as music therapy, aromatherapy, pet therapy, and massage therapy) may help people with dementia. Complementary and alternative health care covers a broad range of therapies and healing practices. Acupuncture, chiropractic and naturopathy are some of the

most familiar forms. For more information, visit alzheimer.ca/alternativetreatments.

Therapeutic approaches to treat early to middle stage dementia called "Cognitive Behavioural Therapies," "Cognitive Rehabilitation," or "Behavioural Therapy" use a combination of basic behavioural and cognitive training sessions. These treatments are being increasingly used in combination with cholinesterase inhibitor medications.

A lack of research prevents us from determining the effectiveness of many alternative treatments. The Alzheimer Society is funding projects to identify beneficial therapies for people with dementia.

Some examples of natural health products are probiotics, herbal remedies, vitamins and minerals.

When considering the use of natural health products, think about the following to minimize your risk:

- Don't assume "natural" means "safe."
- Be aware of health-related claims that are not supported by enough evidence.
- Some products can change the way prescription drugs work. Be aware of interactions with other medications and talk to your health-care provider.

