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Ongoing communication with your healthcare professional will help you find the best treatment options, discuss side-effects and other issues, and ensure that the treatment is effective and appropriate for you or the person with Alzheimer’s disease you support.

Additional information and resources:
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Charitable registration number: 11878 4925 RR0001
Recent research has greatly improved our knowledge of Alzheimer's disease. Treatments for the disease are now available that may help to alleviate some of the symptoms.

The tremendous advances in Alzheimer research have created optimism that more and better treatments are on the horizon. The information provided here is a brief overview of the treatments that are currently available.

The following medications are cholinesterase inhibitors:
- Aricept® (also known as donepezil)
- Rivastigmine (also known as Exelon®)
- Reminyl® ER (also known as extended release galantamine hydrobromide)

These medications may be considered for people whose symptoms are early to middle stage and Aricept® has been approved for treatment of early, middle and late stage Alzheimer's disease. Differences among these 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 degenerate to the point that the medications are no longer helpful.

Memantine hydrochloride
Neurotransmitters send messages across the space between nerve cells. As Alzheimer's disease progresses, the neurotransmitter glutamate leaks out of nerve cells and is re-absorbed at levels that are toxic to the cell.

Memantine hydrochloride, known by the trade name Ebixa®, works by blocking the re-absorption of glutamate into nerve cells. It is the first drug therapy approved for individuals whose symptoms are middle to late stage.

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

Medications are also available to help manage symptoms such as sleep disruption. Talk to your doctor to determine whether other treatments may be helpful for you or the person you are caring for.

Medications for people diagnosed with Alzheimer's disease are only available by prescription to those under the care of a doctor.

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

Non-pharmacological treatment
Treatments for early to middle stage called “Cognitive Behavioural Therapies,” “Cognitive Rehabilitation,” or “Behavioural Therapy” are therapeutic approaches which use a combination of basic behavioural and cognitive training sessions. These treatments are being increasingly used in combination with cholinesterase inhibitor medications.

Complementary and alternative healthcare covers a broad range of therapies and healing practices. Acupuncture, chiropractic and naturopathy are some of the most familiar forms.

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Clinical trials
Medications that may stop the progression of Alzheimer's disease are currently in clinical trials. For additional information on research and clinical trials please see the resource list on the reverse of this brochure.

Pharmacological treatment
Several medications are available that can help with some of the symptoms of Alzheimer’s disease such as decline in memory, language, thinking abilities and motor skills. Although there is currently no cure for the disease, 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 to these medications.

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In Alzheimer's disease, nerve cells in the brain become damaged. Cholinesterase inhibitors aim to preserve the ability of damaged nerve endings to transmit messages from one nerve cell to another.
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