

Three Stages of Alzheimer's Disease and Its Symptoms and Signs

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ABOUT THE STUDY

A neurological illness known as Alzheimer's Disease (AD) normally appears gradually and deteriorates over time. 60%-70% of dementia cases have it as their underlying cause. The most common initial symptom is difficulty remembering recent events. Behaviour issues, linguistic challenges, disorientation (including a propensity to get lost easily), mood swings, a lack of drive, and self-neglect may be symptoms as the condition advances. An individual's tendency to withdraw from friends and family when their health deteriorates is common. As body functions gradually decline, death is the end result. Depending on the disease, the life expectancy after diagnosis can range from three to nine years.

It is unclear what causes Alzheimer's disease. There are numerous genetic and environmental risk factors connected to its development. The most potent genetic risk factor originates from an APOE allele. A history of head trauma, severe depression, and high blood pressure are additional risk factors. Amyloid plaques, neurofibrillary tangles, and the loss of neuronal connections in the brain are substantially linked to the disease process. Based on the patient's medical history, cognitive testing, imaging studies, and blood tests to rule out other potential reasons, a probable diagnosis is made. Initial symptoms are frequently confused with ageing of the brain. Although some treatments could momentarily lessen symptoms, none can stop or reverse the disease's course. Affected individuals depend on others for help more and more, which is often difficult for the career.

Exercise regimens may be advantageous in terms of daily activities and may even increase results. Antipsychotics are frequently used to treat behavioural issues or psychosis brought on by dementia, but this is rarely advised due

to the limited benefits and increased risk of premature death. Social, psychological, physical, and economic factors can all play a role in the stress.

Signs and symptoms

The progression of cognitive and functional deterioration is often defined as occurring in three stages during the course of Alzheimer's. Early or mild, middle or moderate, and late or severe are terms used to define the three stages. The early signs of memory loss are caused by the disease's recognised targeting of the hippocampus, which is connected to memory. The severity of memory loss increases as the illness worsens [1].

The initial signs are frequently wrongly attributed to stress or ageing. Up to eight years before a person meets the clinical requirements for an Alzheimer's disease diagnosis, thorough neuropsychological testing can identify modest cognitive impairments. Even the most complicated daily routines might be impacted by these early symptoms. The most obvious memory impairment is short-term memory loss, which manifests as difficulties recalling previously learned material and a failure to learn new knowledge [2].

The early stages of Alzheimer's disease can also be characterised by subtle difficulties with executive processes such as flexibility, planning, attention, and abstract thought, as well as impairments in semantic memory (memory of meanings and idea links). At this stage, apathy and despair are visible, with apathy continuing to be the disease's most enduring symptom. It is frequently discovered that Mild Cognitive Impairment (MCI) occurs as a step between healthy ageing and dementia. Memory loss is the most common symptom of MCI, which is known as amnesic MCI. This condition is generally thought of as the prodromal stage of Alzheimer's disease. More than 90% of the time, amnesic MCI is connected to Alzheimer's [3].

Early stage

A definitive diagnosis of Alzheimer's disease is made as a result of the disease's victims' increasing loss of learning and memory. In a small percentage of people, memory problems are less frequent than difficulties with language, executive functioning, perception (agnosia), or movement execution (apraxia). Alzheimer's disease does not necessarily have a negative impact on all memory abilities. The body's recall of how to carry out acts, such as eating with a fork or drinking from a glass, is affected less than new information or memories, including episodic memory, semantic memory, and implicit memory [4].

Language impairment is primarily distinguished by a loss of vocabulary and a decline in word fluency, which impoverishes both spoken and written language in general. The Alzheimer's patient is typically able to appropriately communicate fundamental thoughts at this stage. Certain movement coordination and planning issues (apraxia) may be evident while executing fine motor tasks like writing, sketching, or dressing, although they are frequently overlooked. People with Alzheimer's disease can frequently continue to complete many chores on their own as the condition develops, although they may require support or supervision with the most cognitively demanding activities.

Middle stage

Independence is eventually hampered by progressive deterioration, with people unable to carry out the majority of routine everyday tasks. Speech problems become obvious as a result of poor vocabulary recall, which causes frequent word substitutions that are wrong (paraphasias). Additionally, writing and reading abilities deteriorate over time. As time goes on and Alzheimer's disease worsens, complex motor sequences become less coordinated, which raises the chance of falling. Memory issues deteriorate throughout this stage, and the person could not recognise close family. Prior to this, one's long-term memory was unimpaired.

Changes in behaviour and neuropsychiatry become more common. Wandering, irritation, and emotional instability are common symptoms and might cause sobbing, irrational anger, or reluctance to caregiving. The sun setting can also be seen. About 30% of Alzheimer's patients experience delusional symptoms including illusionary misidentifications. Additionally, the subjects lose awareness of their limitations and disease process (anosognosia). Moving the patient from home care to other long-term care facilities might ease the burden these symptoms cause for family members and careers.

Late stage

The ultimate stage also referred to as the late stage or severe stage is characterised by total reliance on careers. Language is gradually limited to short sentences or even single syllables, which results in total mutism. Even when verbal language skills are lost, people can frequently understand and respond to emotional messages. Even while aggression is still a possibility, excessive apathy and fatigue are far more frequent signs. The muscular mass and mobility of people with Alzheimer's disease eventually degrade to the point that they are bedridden and unable to feed themselves, rendering them incapable of carrying out even the most basic duties on their own. The condition itself is typically not the cause of mortality, but rather an external issue like pneumonia or pressure ulcer infection [5].

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