

A Care Partner's Guide to the Stages of Dementia

The chart below **summarizes** the characteristics of the progression of dementia. These stages only provide a **general guide** – the stages and progression vary depending on the underlying cause. Some stages may overlap, and the time spent in each stage varies greatly from individual to individual. **However, understanding the general characteristics of each stage can help the care partner(s) better anticipate and address needs throughout the course of the disease process.**

Early/Mild (about 2 years)	Middle/Moderate (8 – 20 years)
 Still can function independently for activities such as dining, dressing/grooming, personal hygiene. Social skills still in tact. Memory lapses; decline in communication abilities. May have difficulty learning new things and following conversations. Minor personality changes. Symptoms may not be apparent to others, but family may notice changes. CARE PARTNER ROLE: Simple reminders and occasional prompting. Encourage independence and sense of identity. Offer assistance with tasks such as financial and legal matters, medication management, shopping, etc. 	 Significant memory deficits and confusion – may forget address or phone number, time of day, location; difficulty staying on task, sequencing (ex. clothing in correct order). Easily frustrated, angry. May behave in ways that are out of character; loss of social filter. Begins to exhibit dementia-related behaviors such as wandering, agitation, sundowning, paranoia. CARE PARTNER ROLE: More frequent prompting and reminding. Simplify meal process & other self-care tasks. Encourage use of remaining abilities. Reassure. Provide transportation (should no longer drive).
Late/Advanced/Moderately Severe (several weeks to several years)	End-Stage/Severe (6-7 years)
 Little memory of recent events; may begin to forget names of close family members. Great difficulty communicating; primarily communicates through behaviors. May experience loss of bowel/bladder control. Personality changes. Changes in physical abilities: walking, sitting, swallowing; fall risk. 	 Wheelchair and/or bed bound. Loss of ability to communicate verbally. Not oriented with regard to time or place. Progressive loss of abilities to walk, sit up, smile, hold up head. Difficulty chewing and swallowing. Vulnerable to infections like pneumonia.
 CARE PARTNER ROLE: Usually requires 24/7 assistance to carry out ADL's (dressing, bathing, toileting, etc.). Provide physical prompts and cues. Maintain safe environment. Focus on sensory input: touch, taste, smell, vision, hearing (music). 	 CARE PARTNER ROLE: Requires 24/7 assistance with all activities. Provide comfort. Help to maintain dignity. Focus on sensory stimulation.