

Table 2: Differential Diagnosis of Dementia

Alzheimer's Disease (AD)	<ol style="list-style-type: none">1. Slow progressive onset2. Multiple cognitive deficits manifested by both:<ul style="list-style-type: none">• Memory impairment• One or more additional cognitive deficits such as aphasia, apraxia, agnosia, disturbance in executive functioning3. Associated significant functional decline4. Not explained by other neurologic or systemic disorders
Vascular Dementia (VaD)	<ol style="list-style-type: none">1. A number of syndromes typically associated with cerebrovascular disease2. Look for abrupt onset, step-wise decline and a temporal relationship between the vascular insult and the cognitive change3. Impaired executive functioning and early development of a gait disturbance are added features4. Clinical and neuroimaging evidence supports the diagnosis5. Commonly see periventricular and deep white matter changes, however they may also be seen in other types of dementia and in otherwise healthy individuals (use caution)
Mixed AD/VaD	The degenerative changes of AD and the vascular changes of VaD commonly co-exist. Presentation more commonly of AD pattern with significant vascular risk factors +/- small vascular events
Dementia With Lewy Bodies (DLB)	<ol style="list-style-type: none">1. Core features:<ul style="list-style-type: none">• Fluctuating cognition with pronounced variation in attention and alertness (memory decline may not be an early feature)• Recurrent visual hallucinations that are well formed and detailed• Spontaneous motor features of Parkinsonism2. Features supportive of diagnosis:<ul style="list-style-type: none">• Repeated falls• Syncope or transient loss of consciousness• Hypersensitivity to antipsychotics (typical and atypical)• Systematized delusions; non-visual hallucinations3. DLB has reduced prevalence of resting tremor and reduced response to L-dopa compared to idiopathic PDD4. Presence of REM sleep disorder in the setting of a dementia suggests DLB & related conditions5. DLB should occur before or concurrently with onset of Parkinsonism
Parkinson's Disease Dementia (PDD)	<ol style="list-style-type: none">1. The cognitive features may appear similar to DLB (deficits in attention and alertness)2. Look for motor Parkinsonian symptoms that typically are present many years before the onset of the dementia for PDD
Fronto-Temporal Dementia	<ol style="list-style-type: none">1. Insidious onset and gradual progression; tends to present in middle-aged patients2. Character changes present early and include apathy, disinhibition, executive failure alone or in combination3. Relatively preserved memory, perception, spatial skills and praxis4. Behavioural disorder supportive of diagnosis: decline in hygiene, mental rigidity, distractibility, hyperorality, perseveration5. Prominent language changes frequently occur with reduction in verbal output
