Criminals Diagnose Dementia Faster Than Doctors Do!

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Objectives

1. Define early onset dementia and how to identify it in your clients
2. Understand why increased risk of fraud before diagnosis
3. Specific steps to address abuse
What is Dementia?

• Decline of brain function impairing IADLs.
• Loss of
  • Memory (but not required),
  • Judgment
  • Language
  • Complex motor skills

May be only loss of risk assessment.
Dementia

Alzheimer's Disease
- Early Onset
- Late Onset

Lewy-Body Dementia

Vascular Dementias
(Multi-infarct)

Fronto-Temporal Lobe Dementias

Other Dementias:
- Geriatric Syndromes
- Metabolic
- ET0H related
- Drugs/toxins
- White matter diseases
- Mass effect
- Depression or other mental conditions
- Infections
- Parkinson's
- Creutzfeldt-Jakob Disease (CJD)
- Huntington's Disease
- Normal Pressure Hydrocephalus
- Wernicke-Korsakoff Syndrome
Intelligence, judgement, and behavior

Memory

Language
How to Diagnose Dementia:

• Mini-Mental Status Exam (MMSE)

• Montreal Cognitive Assessment (MOCA)

• Neuropsychological Testing
How is dementia manifested in behaviors?

- Apathy
- Irritability
- Disinhibition
- Forgetting appointments, medications
- A personality change
- Unusual increase in risk taking
What is capacity?

The ability to understand risks and benefits of a proposed intervention and to make a reasoned decision

Evidence of incapacity:

- Deficit in at least one mental function
- Deficit must impact ability to act
- Isolated incidents are not enough
- Doctor’s opinion alone is not sufficient
Different standards for capacity:

- Financial
- Durable Power of Attorney
- Marriage
- Testamentary
- Medical
Do you recognize these people?

Clint Eastwood at Republican National Convention 2012

Helen Thomas

Madame Liliane Bettencourt of L’Oreal
Types of financial elder abusers

- Family members
- Caregivers
- Professionals
- Scams/frauds
Frauds and Scams

- Telemarketing
- Internet
- Investments
- Charities
- Grandchildren in distress

- Prizes
- Free vacations
- Lottery & Sweepstakes
- Contractors (today only!)
- Veterans Benefit fraud
How do Criminals ‘diagnose’ dementia so quickly?

• Loneliness
• Know how to solicit their pity for their ‘plight’
• Wide net, and once the elder responds then that name is placed on a list that is sold
• Nigerian Bank scam… Says Nigerian to weed out skeptics
• Undue influence
What to do?

• Determine capacity
  Likely need neuro-psychological testing
• Determine undue influence
  Who benefits from the decisions
• Address vulnerability, independence
Case Study 1

- 85 year old woman
- Brought to ER for an ALC
- She has not paid her health insurance for months
- Resident ordered a head CT and an MRI
Case Study 2

- 83 year old man with DM, s/p CABG with resulting poor short term memory
- He is moved to a SNF
- His MMSE is 16
- Two MDs say he has medical decision making capacity
- RN says that he understands what he is doing when she speaks with him
Case Study 3

74 year old AM with diabetes, prostate cancer

- He fled his daughter’s home to be with siblings, does not trust her.

- Evaluation: he is aware of his medical condition, trusts his siblings. Cannot determine 25% of $22.50.

- PMD determined dementia, Dtr sent him to AL 40 miles away from her or family, cheaper...
Case Study 4

• 72 year old man was a successful hedge fund manager, supports his parents
• For last 2 years he has made very poor financial judgments, unlike his work before
• His neuropsychological testing is ‘normal’
• Iowa Gambler’s Task
Case Study 5

- 84 year old WM with Parkinson’s Disease
- Given Seroquel 200 mg at dinner, unresponsive...
- Isolated in Board/Care, able to communicate in the morning.
Case Study 6

• 86 yo WF with HTN and caregiver taken over her financials. Pt denies any medical issues or medications. CG using her money to rehab a house to make into a board/care

Undue influence
Summary

• Criminals cast a wide net; telephone, online, in person...
• More access now to elders
• MMSE poor screen, MoCA better
• Neuropsychological testing best
• Undue influence
Questions? Comments?

• Visit our website: elderconsult.com
• Follow us on Facebook: fb.com/elderconsult
• Call us directly: 650-357-8834

Thank you,
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