Dementia with Lewy Bodies (DLB) is one of the more common types of dementia in people over 65. Unfortunately, DLB is frequently MISDIAGNOSED as Alzheimer’s disease (AD). Accurate diagnosis is important for improving disease management.

The UCSD Shiley-Marcos Alzheimer’s Disease Research Center is conducting studies to improve diagnostic accuracy and track disease progression in anticipation of future clinical treatment studies.

Researchers are making progress in understanding this disease, but we need your help to continue making advances. Please call (858) 622-5803 to learn more about our program.

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The Dementia with Lewy Bodies Program at the UCSD Shiley-Marcos Alzheimer’s Disease Research Center SEEKS VOLUNTEERS

Joanne Hamilton, PhD
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**What is DLB?**

Dementia with Lewy bodies (or Lewy body disease) can be confusing to understand because it shares features with both Alzheimer’s disease and Parkinson’s disease. DLB refers to a disease that produces abnormal structures, called Lewy bodies, in the brain. The presence of Lewy bodies is related to specific changes in a person’s behavior and thinking.

**THE CORE FEATURES OF DLB INCLUDE:**

- **Dementia** - Dementia refers to a condition in which a person has trouble with normal daily activities because his thinking is not as clear as it used to be. There are many types of dementia. DLB is one type.

- **Parkinsonism** - Many people with DLB have trouble with their movement like stiffness, slowness, shakiness, and balance problems.

- **Visual hallucinations** - Many people with DLB see things that others cannot see. These experiences are often dramatic and detailed, almost like a waking dream.

- **Fluctuations** - Many people with DLB can seem very confused one day and very sharp the next.

**What should I know?**

- Dementia with Lewy bodies (DLB) can cause dangerous reactions to some of the medication used to treat hallucinations and delusions. These medications are called neuroleptics or antipsychotics. You should discuss the pros and cons of taking these types of medication with your physician.

- Falls can be common in DLB because patients may lose their balance easily, have problems seeing their environment accurately, or have very low blood pressure when they stand. Try to keep pathways clear and remove rugs, cords, and clutter to reduce the chance of falls.

- Some people with DLB have a sleep disorder called REM sleep behavior disorder (RBD). This disorder causes them to act out their dreams. They might thrash around in their sleep or strike out at their partners. Sometimes this happens years before DLB develops. Discuss this symptom with your doctor for treatment recommendations.

**What can I do?**

CALL (858) 622-5803 to learn more about our research opportunities that include:

- **Tests of Visual Perception**  
  Simple paper-pencil and computerized tests measure changes in visual thinking.

- **Evaluation of Memory**  
  Tests of memory and other thinking skills monitor disease progression.

- **Neuroimaging of Brain Structure and Function**  
  MRI, fMRI, and ultrasound quickly and painlessly capture your brain’s structure and functioning.

**How do I benefit?**

- You will have access to a wealth of information about DLB from leading researchers and health professionals.

- You will be updated about new treatment trials.

- You will receive copies of your brain images and cognitive evaluations at no cost to you.

**We need your help to continue making advances in the treatment of this disease.**