

Diseases, Disorders and Injuries

Dementia in the Workplace

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What is dementia?

Dementia is a term used to describe a group of symptoms affecting memory, thinking, and social abilities. It is a chronic condition that becomes more severe over time.

Dementia is not one specific disease. There are many different types of dementia. Alzheimer's is the most common. Other types of dementia include Lewy body, frontotemporal, vascular, and many others.

As people age, their risk of dementia increases. However, dementia can be diagnosed at any age. According to Health Canada, young-onset dementia occurs in about 3 percent of all dementia cases. Young-onset dementia is the term used when people are diagnosed between the ages of 18 to 64.

What are the symptoms of dementia?

Dementia includes a range of symptoms. Symptoms do not present the same for everyone.

Cognitive changes may include:

- Memory loss that affects day-to-day abilities
- Difficulty performing familiar tasks

- Difficulty with abstract thinking, reasoning skills, problem-solving, planning, or organizing
- Disorientation in time and space, such as losing track of time, losing their way, or forgetting where they are when in a familiar location
- Decreased focus and attention
- Changes in language, such as struggling to find words or using words that do not make sense
- Misplacing items

Psychological changes include:

- Depression
- Anxiety
- Agitation
- Changes in personality, such as having uncharacteristic or unexplainable behaviours that are not that person's usual character or personality
- Impaired judgment, such as uncharacteristically putting themselves or others at risk by saying or doing things that may affect their physical or mental health. May include walking into or creating hazardous conditions, having verbal outbursts, or overlooking safety protocols.
- Seeing things that are not there (hallucinations)

What is the difference between age-related memory loss and dementia?

Forgetting meetings or appointments, losing track of time, misplacing things, struggling to find words, or mood changes can be a part of aging, a result of stress, or signs of depression. It is important to discuss your situation with your medical professional.

While memory loss may be frustrating, it should not affect your ability to:

- Complete tasks
- Follow procedures or requirements of the job
- Learn and remember new things
- Build and maintain healthy relationships

When memory loss becomes more severe, it may:

- Affect daily life and the ability to have a normal routine.

- Become difficult to learn new things.
- Become difficult to complete tasks a person is familiar with or they will make uncharacteristic mistakes.
- Result in others noticing changes in your abilities.

These issues may cause the individual to feel distressed, embarrassed, or experience a loss of confidence.

Younger individuals may experience changes in their personality, behaviour, or social functioning rather than have memory issues.

How is dementia diagnosed?

The only way to know for sure if a person has dementia is to be tested. A medical professional will conduct a range of cognitive and neuropsychological tests, neurological evaluations, brain scans, laboratory tests, and psychiatric evaluations.

What causes dementia?

Dementia is the result of damage to or loss of nerve cells and how they connect to the brain. Symptoms depend on the area of the brain that is damaged.

The exact causes of all forms of dementia are not known. It is known that certain risk factors and underlying medical conditions, such as diabetes and stroke, can increase the risk of dementia. Health Canada states that researchers suspect some causes may be abnormal proteins in the brain, reduced blood supply to the brain, and nerve cells in the brain that stop working properly.

Most cases of dementia are not linked to genetics. For young-onset dementia, the Alzheimer's Society of Canada states that some forms have genetic links, such as being related to Down Syndrome or Huntington's disease dementias. Some genetic links have also been found for certain kinds of frontotemporal dementia.

Note that dementia-like symptoms may also be caused by:

- Infections and immune disorders: Some symptoms may result from infection. Conditions that cause the body to attack nerve cells, such as multiple sclerosis, may also be a factor.
- Metabolic or endocrine issues: Thyroid issues or low blood sugar can develop dementia-like symptoms or personality changes.
- Low levels of certain nutrients: Possible lack of nutrients such as thiamin (vitamin B-1), vitamin B-6, vitamin B-12, copper or vitamin E.

- Dehydration.
 - Medicine side effects: Some medications have side effects or may interact with other medications to have effects similar to dementia.
 - Brain issues: Issues such as subdural bleeding (bleeding between the surface of the brain and the covering of the brain), tumours, or hydrocephalus (buildup of fluid in the brain) can play a role.
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Can dementia be treated?

Most types of dementia cannot be cured. Some medications that can temporarily improve the symptoms include cholinesterase inhibitors, memantine, and others.

Some causes of dementia-like symptoms may be treatable.

Can dementia be prevented?

Health Canada states that a healthy lifestyle can lower the chance of developing dementia and delay symptoms. Preventing or managing other chronic conditions (such as diabetes, depression, high blood pressure, or high cholesterol levels) that are linked to a greater chance of developing dementia is also important.

To reduce the risk of dementia, try to:

- Maintain a healthy weight.
 - Reduce hearing loss, including wearing hearing aids, or using hearing protection when exposed to excessive noise.
 - Socialize often with friends or within your community.
 - Protect your head from injury, such as wearing a hard hat or helmet.
 - Challenge yourself to learn new skills or activities.
 - Be physically active.
 - Limit alcohol intake.
 - Quit smoking.
 - Take steps to encourage quality sleep.
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How can a workplace help a worker who is showing signs of dementia?

It is important to understand that some warning signs of dementia are often confused with performance issues. The worker may forget meetings, lose track of time, misplace items, or forget how to do familiar tasks. The worker may not be aware that these issues are occurring, or they may feel confused and try to hide the issues. When more than one sign is noted, the workplace should encourage the worker to consult a medical professional.

When speaking with the individual, try to:

- Meet in a location that is familiar, private, and quiet.
- Allow for an appropriate amount of time to meet.
- Ask how the worker is feeling and if they have noticed any differences in their work lately.
- Share observations without judgment.
- Encourage the worker to consult with a medical professional.
- Emphasize that the request is made because the workplace cares and wants to support the worker.
- Ask them if they would like to speak again.
- Be empathetic and compassionate.

It is not the workplace's role to diagnose a worker's condition. These conversations may not be successful the first time, but continual follow-up and discussion should build trust and empathy so the worker feels comfortable sharing if something is affecting their performance.

Can a worker diagnosed with dementia continue to work?

An inclusive workplace is one in which employers respect the unique needs and potential of all people. Dementia is a progressive disease and is considered a disability. Disabilities are covered by human rights and as such, the workplace must accommodate workers with this disability (to the point of undue hardship). Depending on the individual's symptoms, rate of progression, and the type of work they do, it may be possible to stay at work.

Having a diagnosis of dementia will be part of a health leave or accommodation process. The individual may want to remain at work for a time, or they may need to leave the workplace. Ask the individual if they can gather information from their medical professional to inform the workplace about any restrictions and limitations related to job tasks. Ask the individual if they would like their caregiver or a trusted person to attend meetings where important decisions may be made.

Discussing accommodation options is a cooperative process and involves the worker with input from their health care professional. Sharing completed physical demands descriptions with the health care professional can help determine the best "fit to work" status. Remember that diagnosis or details of treatment do not need to be disclosed.

Always consider the safety of the individual and co-workers when deciding on tasks.

It is important to work collaboratively to determine suitable work and accommodations for the individual, the situation, the team, and the workplace involved. Focus on the individual's current abilities and functionality as well as the needs of the organization. Understand that the arrangement may need to be modified as the condition progresses.

The following steps may help a worker living with dementia remain in the workplace:

- Make changes to the environment, such as reducing clutter and noise can make it easier for a person to focus and function.
- Use mindful communication techniques. Maintain eye contact, do not overcomplicate the message, and do not rush the response.
- Focus on activities that can be done successfully.
- Present one task, idea, or instruction at a time.
- Break tasks into easier steps.
- Create structure and routine - for example, schedule a daily meeting at the same time and location each day.
- Use technology with reminder alerts to keep a calendar of activities and events with reminder alerts.
- Provide additional training when needed, such as when there are changes to procedures.
- Adjust or remove tasks to reduce risks, such as safety-sensitive tasks and driving.
- Offer a flexible schedule, change the schedule, or allow working from home to help with fatigue and facilitate a quieter environment.
- Encourage being both physically and socially active. There is growing evidence that making brain-healthy choices can lower the risk.
- Educate co-workers to address stigma, and so that they feel supported and can be supportive.
- Use person-first language, such as addressing the individual directly. Use terms such as "person living with dementia".

In some circumstances, workplace accommodations may require the individual to change their work hours and routines, learn to use new equipment, or take on a new job role. Provide time and training to the worker as they adapt to these adjustments.

What other steps can a workplace take to support individuals living with dementia?

Develop a [carer policy and program](#) to help workers who are providing care to others with dementia.

Become a dementia-friendly environment. Steps include:

- Post signs that are clear and simple, in large print, and placed at eye level.
- Use graphics for essential information.
- Make sure the entrance is clearly visible and well-lit.
- Keep sidewalks and aisles clear and unobstructed.
- Keep background noise at a low level.
- Provide a quiet space for a person to rest.
- Consider relocating mirrors (some individuals will not recognize their reflection and become distressed) and removing black mats (some individuals may perceive it as a large hole and may not want to step on it).
- If aggressive behaviour happens, look for an immediate cause, such as a noise source (e.g., a television). Take steps to remove the cause or reduce the effects.

If working with a person who is experiencing with dementia:

- Be supportive when issues occur.
- Help them remember appointments.
- Help talk through decisions without being overbearing.
- Be patient if the person is having difficulties communicating or learning.
- Offer space and privacy if that is what they need.

Sometimes, a person living with dementia may express themselves physically (by biting, hitting, pushing or kicking) or verbally (by shouting and name-calling). If your safety is threatened, leave. Remember, it is the disease, not the person, that is causing the behaviour.

Fact sheet first published: 2024-12-17

Fact sheet last revised: 2024-12-17

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