

Normal Pressure Hydrocephalus Fast Facts

Q: What is Normal Pressure Hydrocephalus?

A: NPH is a neurological disorder that, like other types of hydrocephalus, is characterized by excessive accumulation of cerebral spinal fluid (CSF) in the ventricles of the brain. Affecting adults over 55, it is often misdiagnosed as Alzheimer's or Parkinson's disease. Once diagnosed, NPH is very treatable and the symptoms can often be reversed. Early detection is important.

Q: Who can have NPH?

A: NPH affects more than **1 in every 200 adults over the age of 55**. An estimated 5 to 10% of individuals with symptoms of dementia actually have NPH. The actual tally of North Americans who have NPH is estimated at 1/4 of a million.

Q: What causes NPH?

A: The exact cause can rarely be determined, which is why NPH often goes undiagnosed.

Q: What are the symptoms of NPH?

A: The three primary symptoms typically onset over months to years and may not occur at the same time. They are:

- **Difficulty walking** — from mild imbalance to inability to stand or walk — usually the first symptom;
- **Mild dementia** — such as forgetfulness, loss of interest in daily activities & short-term memory;
- **Impaired bladder control** — frequent and/or urgent need to urinate.

Q: How is NPH diagnosed and treated?

A: Once a physician suspects NPH, tests such as a CT scan and MRI are conducted to confirm the diagnosis and determine the individual's suitability for treatment. It is important that a neurosurgeon or neurologist is part of the medical team to interpret test results and discuss surgery and its risks. The most common treatment is surgical implantation of a shunt to drain extra CSF from the ventricles of the brain to another part of the body where it is reabsorbed.

Q: Can NPH be cured?

A: *No.* NPH is a chronic condition, but with early detection, effective treatment and appropriate interventional services, symptom reversal and a return to a high quality of life is increasingly possible. The future for individuals with NPH is promising.

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