SYMPTOM

Memory loss

Memory loss is difficulty recalling information, events, or skills that you previously knew

WHAT IT FEELS LIKE
Forgetting recent conversations, events, names, or familiar tasks

WHERE IT IS FELT
Brain and thinking

MOST COMMON CAUSES
Poor sleep, stress or low mood, medication effects

WHEN IT IS URGENT
Sudden memory loss, confusion, weakness, or trouble speaking

USUALLY LASTS
Minutes to ongoing, depending on the cause

SEE A DOCTOR IF
Memory problems recur, worsen, or disrupt daily life

Overview

Memory loss means having trouble recalling information, events, or learned skills. It is also called amnesia. It can affect recent memories, older memories, or the ability to form new memories.

Occasional forgetfulness is common. You might misplace your keys or briefly forget a name, especially when tired, distracted, or stressed. This is different from repeatedly forgetting recent conversations, getting lost in familiar places, or struggling with tasks you previously managed.

Memory loss is a symptom, not a diagnosis. It has many possible causes. Some are temporary and treatable, while others need longer-term assessment and support.

What it may feel or look like

Memory problems can be noticed by you or by someone close to you. They may appear gradually or begin suddenly.

You might:

Memory is only one part of thinking. Problems with attention, language, planning, or understanding can sometimes feel like memory loss. For example, if poor concentration prevents information from being stored, it may be difficult to remember later.

- Forget recent conversations, appointments, or events
- Ask the same question several times
- Lose objects more often or place them somewhere unusual
- Struggle to remember names or familiar words
- Need more reminders, notes, or help with routine tasks
- Become lost or confused in a familiar place
- Have gaps in your memory around an injury or stressful event

Common causes

Everyday and temporary causes include poor sleep, stress, grief, anxiety, and depression. These can reduce concentration and make it harder to take in new information. Memory often improves when the underlying problem improves.

Alcohol, cannabis, sedatives, and some other substances can affect memory. Several prescription and non-prescription medicines may also contribute, particularly medicines that cause drowsiness or confusion. Taking several medicines can increase this risk.

Normal ageing can make learning new information slower. A name may take longer to come to mind, but it is usually remembered later. Normal ageing does not usually cause major gaps in memory or loss of independence.

Other possible causes include vitamin B12 deficiency, thyroid disorders, sleep apnoea, infections, seizures, migraine, and problems affecting hearing or vision. A previous stroke or head injury can also affect memory.

Mild cognitive impairment causes more difficulty with thinking or memory than expected for age, without severely limiting everyday independence. Some people remain stable or improve, while others develop a condition such as dementia. Dementia is a general term for progressive problems with memory and other thinking skills that interfere with daily life.

Urgent causes include stroke, bleeding or injury in the brain, severe infection, seizures, and delirium. Delirium is a sudden change in attention and awareness, often caused by illness, medication, dehydration, or another medical problem. These conditions usually cause a noticeable, rapid change rather than mild forgetfulness over months.

When to seek medical care

Call emergency services if memory loss or confusion begins suddenly, especially with:

Sudden inability to form new memories also needs immediate assessment, even if the person remains awake and can speak normally. Some temporary memory syndromes are not dangerous, but similar symptoms can occur with stroke or seizures.

Seek urgent same-day care for a rapid change in memory or behaviour, particularly with fever, severe illness, hallucinations, marked drowsiness, or inability to manage basic needs.

Book a routine appointment if memory problems keep returning, are getting worse, concern someone close to you, or affect work, medication use, cooking, driving, finances, or other daily activities.

- Face drooping, arm weakness, numbness, or trouble speaking
- A severe new headache, collapse, or loss of consciousness
- A seizure
- Difficulty walking, seeing, or staying awake
- A recent significant head injury

How the cause is found

A healthcare professional will ask when the problem started, whether it was sudden or gradual, and what kinds of memories are affected. They may ask about sleep, mood, alcohol or drug use, recent illness, injuries, and all medicines or supplements you take.

With your agreement, information from someone who knows you well can help show how your abilities have changed.

You may be given short tasks that check memory, attention, language, and problem-solving. These are screening tools, not pass-or-fail tests.

A physical and neurological examination may be done. Blood tests can look for treatable causes such as thyroid problems, vitamin deficiencies, infection, or changes in body chemistry. Brain imaging, such as a CT or MRI scan, is used when the history or examination suggests it would be helpful.

Treatment and self-care

Treatment depends on the cause. Improving sleep, treating depression or anxiety, correcting a deficiency, or managing another medical condition may improve memory.

A clinician or pharmacist can review your medicines for possible effects on memory. Do not stop a prescribed medicine suddenly unless you have been told how to do so safely.

Helpful practical steps include keeping a regular routine, using calendars or phone reminders, storing important items in the same place, and doing one task at a time. Regular physical activity, social contact, and managing hearing or vision problems can support overall brain health.

If memory problems affect cooking, driving, medication use, or finances, ask for help with those tasks while the cause is being assessed. Memory supplements are not a substitute for assessment, and products marketed for memory may not have good evidence behind them.

What to expect

The outlook depends on why memory loss is happening. Problems related to poor sleep, stress, medication effects, or a temporary illness may improve once the cause is addressed.

Memory changes linked to brain injury or a progressive neurological condition may last longer. Early assessment can identify treatable factors and help you plan support.

Keep track of when symptoms occur and how they affect daily life. Seek another review if they worsen, new symptoms appear, or the level of support you need changes.

Common questions

Is memory loss always dementia?

No. Sleep problems, mood changes, medicines, alcohol, medical conditions, and normal ageing can all affect memory. Dementia is only one possible cause and usually involves progressive changes that interfere with everyday life.

What is the difference between forgetfulness and concerning memory loss?

Occasionally forgetting a name or appointment but remembering it later can be part of normal life. Repeatedly forgetting recent events, becoming lost, or losing the ability to manage familiar tasks deserves medical assessment.

Can stress cause memory gaps?

Stress can interfere with attention and with storing new memories. Severe trauma can sometimes be linked with more significant gaps, but other medical causes should not be

assumed away.

Should I take a memory supplement?

No supplement treats every cause of memory loss. Some can interact with medicines or contain uncertain ingredients. A medical assessment is more useful than starting a product without knowing why the symptom is happening.

Sources

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