

A Community Care Team Newsletter Fall 2013

Volume 10 Issue 3

Dementia and Memory Related Disorders



Alzheimer's Disease is the fourth leading cause of death in the U.S.

What is Dementia?

Dementia is a gradual decline in cognitive abilities, including memory loss, language, confusion and disorientation. It is characterized by loss of intellectual abilities severe enough to interfere with social and occupational functioning.

Types of Dementias

True dementias are irreversible. They include:

- Alzheimer's Disease
- Vascular/Multi-Infarct Dementia
- Lewy Body with Parkinsonian Symptoms

- Frontotemporal Degeneration/Pick's Disease
- Chronic Encephalopathy (Pugilist Dementia)

The type of dementia a person has is determined by cause (brain injury, stroke etc.), age of onset, and behavioral characteristics. Between 60-80% of all dementia is caused by Alzheimer's Disease.

Warning Signs

- Short term memory loss
- Difficulty performing familiar tasks
- Problems with language
- Disorientation to time and place
- Poor or decreased judgment
- Problems with abstract thinking
- Misplacing things in unusual places
- Changes in mood and behavior
- Changes in personality
- Loss of initiative

Diagnosis

Alzheimer's Disease is diagnosed through a 3 part exam process. First a complete physical exam is performed to determine if there is a physical cause of the dementia or delirium (see box right). Depending on the result, a neurological exam (CAT Scan or MRI) and a neuropsychological evaluation are performed to determine short term memory and cognitive loss. Together, these assessments are 95% accurate in diagnosing Alzheimer's.



Delirium

Delirium is sudden severe confusion and rapid changes in brain function that occur with physical or mental illness and are caused by that physical or mental illness. It is usually temporary and reversible. Many disorders can cause delirium, including conditions that deprive the brain of oxygen or other substances.

Causes include:

- Alcohol or drug withdrawal
- Drug abuse
- Electrolyte unbalance
- Infections, such as urinary tract or pneumonia
 - Poisons
- Surgery
- Hypothyroid
- Depression



Understanding Challenging Behavior

All behavior has meaning: it is a response to unmet physical, emotional, social or environmental needs. Persons with dementia can exhibit challenging and sometimes dangerous behaviors:

•

- Wandering away
- Anxiety/agitation/pacing
- Catastrophic reaction
- Aggression

- Screaming
- Layering or stripping clothing
- Hallucinations/delusions
- Withdrawal/apathy
- Sleep disturbances
- Rummaging
- Sexual behavior (continued page 2)

(page 2)

IN THIS ISSUE:

Dementia Overview	p. 1
Delirium	p. 1
Challenging Behaviors	p. 1-2
Communication	p. 2
Ten Absolutes	p. 2
Resources	p. 2

Caring Hearts/Helping Hands

News You Can Use to Change Your Community
A Community Care Team Newsletter



CONLEY OUTREACH COMMUNITY SERVICES/COMMUNITY CARE TEAM

PO Box 931 Elburn IL 60119 630/365-2880 conleyor@conleyoutreach.org



Ten Absolutes

1. Never argue. **Agree** 2. Never reason. **Divert** 3. Never shame. **Distract** 4. Never lecture. **Reassure**. 5. Never say "remember?" **Reminisce** 6.Never say "I told you". **Repeat** 7. Never say "you can't". **Say "Do what you can."** 8. Never command or demand. **Ask or model**. 9. Never condescend. **Encourage or praise**. 10. Never force. **Reinforce**.

Local Resources

Arden Courts Memory Care Community 630/262-3900 Provena Mercy Behavioral Health Hope Unit 630/801-2657 Alzheimer's Association 800/272-3900 www.alz.org Elderday Center (adult daycare) 630/761-9750

Thanks to Pam Sebern of Arden Courts of Geneva for providing the content for this newsletter

Find back issues of our CCT Newsletters at: www.conleyoutreach.org

Dementia & Communication

Dementia affects communication in a number of ways:

- Difficulty finding the right words
- Repeating familiar words and "cover phrases"
- Inventing new words for familiar objects
- Difficulty understanding and responding appropriately
- Difficulty following directions
- Decreased attention span, losing train of thought
- May be able to read, but not understand
- Reverting back to native language

Tips for communicating with someone with dementia:

- Approach from the front
- Always identify yourself first; use the person's name
- Maintain good eye contact
- Speak and move slowly

- Use familiar words and short simple sentences
- Use specific name of person or object, not it, he or she
- Be patient—Give the person plenty of time to respond
- Ask simple questions, one at a time
- Repeat the question exactly the same way
- Do not argue, confront or correct
- Keep tone of voice low
- Limit distractions—simplify the environment
- Use non-verbal cues; a reassuring touch, model behavior
- Don't test person's memory-"don't you remember"
- Give directions simply and one at a time
- When helping with personal care, tell the person exactly what you are doing each step of the way
- Reassure —remind the person who you are

Challenging Behaviors (cont.) Common triggers for behaviors:

- Inappropriate approach
- Environment
- Physical discomfort
- Unmet needs
- Overstimulation
- Complicated tasks
- Communication difficulties.

Strategies for managing behaviors:

- Change or simplify the environment
- Simplify tasks or routines
- Use appropriate communication
- Validate feelings
- Redirect/distract
- Offer reassurance or praise
- Stay with person until behavior subsides
- Remove individual from situation
- Use lighting to reduce confusion and restlessness at night.

