



MANAGING BEHAVIORS IN PERSONS WITH ALZHEIMER'S DISEASE OR DEMENTIA

SPEAKER:
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Home Instead
SENIOR CARE®

To us, it's personal.

DEMENTIA

Dementia is an umbrella term that describes a collection of symptoms that are caused by disorders affecting the brain. It is not one specific disease. Dementia affects thinking, behaviour and the ability to perform every day tasks, and brain function is affected enough to interfere with the person's normal social or working life. The most common type of dementia is Alzheimer's disease.

Alzheimer's Disease

Alzheimer's disease is the most common type of dementia accounting for approximately 40-70% of all dementias.

Vascular Dementias

Vascular dementia is the second most common type of dementia, accounting for approximately 15-25% of all dementias.

Lewy Body Dementia

Lewy Body dementia accounts for approximately 2-20% of all dementias.

Fronto Temporal Dementias

Fronto Temporal Dementia accounts for approximately 2-4% of all dementia.

Other Dementias

Include dementia associated with Parkinson's disease, Huntington's disease, head trauma, human immunodeficiency virus (HIV), alcohol related dementia, Crutzfeldt-Jakob Disease, corticobasal degeneration and progressive supranuclear palsy.

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DEMENTIA UMBRELLA

DEFINING BEHAVIORS THAT NEED TO BE MANAGED



- ❖ Nonverbal communication
 - ❖ Need to be on the lookout for nonverbal clues to how the patient is feeling or what she is thinking
 - ❖ A patient may still be able to smile to show happiness, frown to show frustration, pace if she has to use the bathroom or grimace if she is in pain
- ❖ Behaviors that need to be managed are ones that put you or your patient's physical and emotional well being at risk.

❖ WHAT ARE THE RISKS?

PHYSICAL RISKS

- ❖ Refusing to drink water
- ❖ Not taking showers or baths
- ❖ Refusing to take medications
- ❖ Eating unhealthy foods
- ❖ Striking out, pushing or getting into altercations
- ❖ Going outside without proper clothing on
- ❖ Not wanting to exercise or stay active

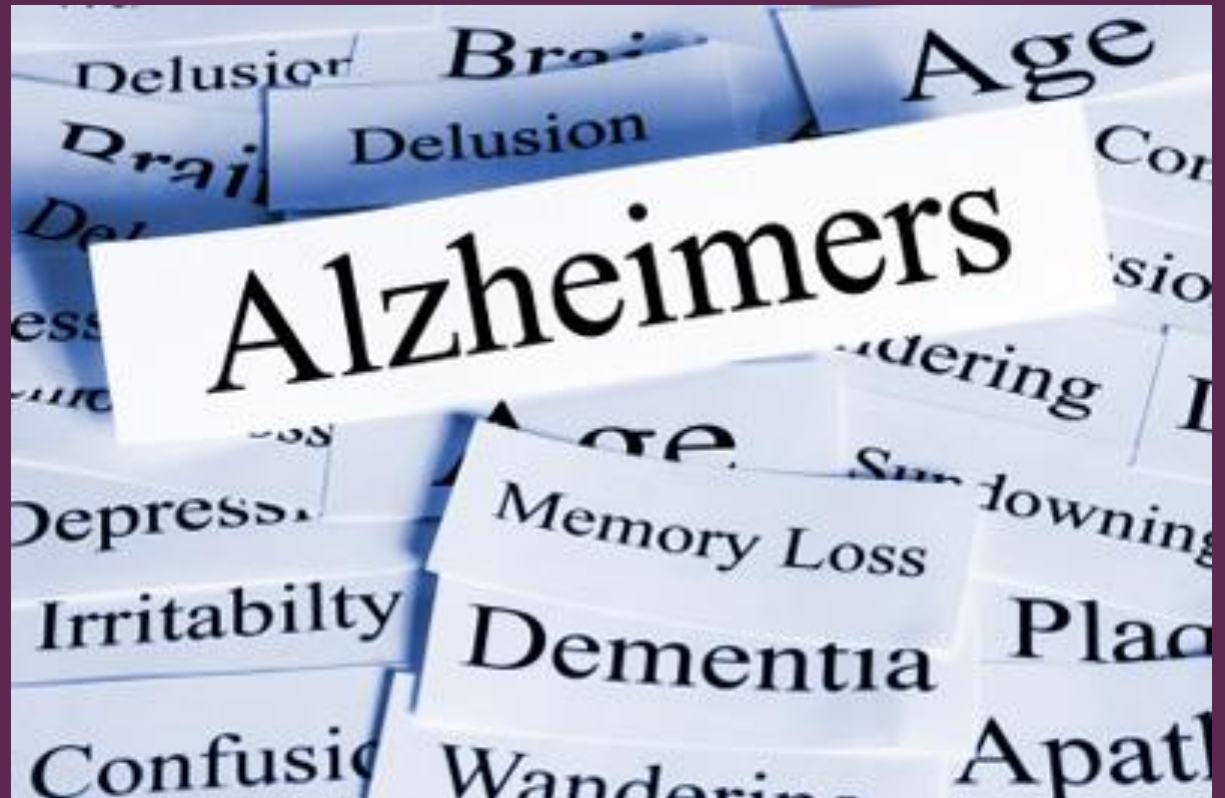
EMOTIONAL RISKS

- ❖ Feeling embarrassed
- ❖ Withdrawing from social situations
- ❖ Refusing to participate in activities to stimulate the brain
- ❖ Doing things that scare or confuse others leading to isolation



BEHAVIORS YOU MAY ENCOUNTER...

- ❖ Wandering
- ❖ Delusion/Hallucination
- ❖ Refusal/Withdrawal
- ❖ Aggression
- ❖ Repetition
- ❖ Agitation
- ❖ Sexual inappropriateness
- ❖ False accusations
- ❖ Confabulation



FOUR TECHNIQUES

USED TO MANAGE BEHAVIOR FOR SOMEONE WITH ALZHEIMER'S DISEASE OR OTHER DEMENTIAS

- ❖ Give simple choices
- ❖ Apologize or take the blame for the situation
- ❖ Redirect
- ❖ Physically remove items or your patient from the environment

TECHNIQUES TO MANAGE BEHAVIOR

GIVE SIMPLE CHOICES

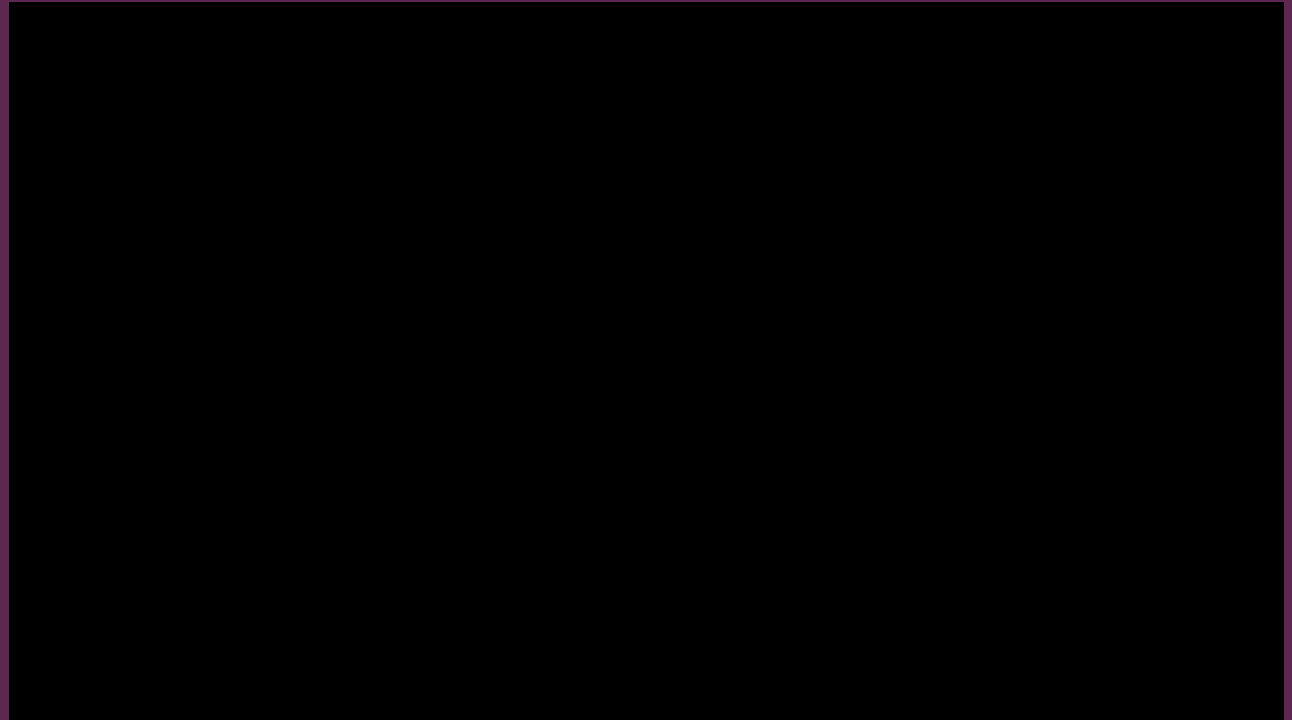
- ❖ Offering simple choices:
 - ❖ Helps a patient feel in control
 - ❖ Helps a patient calm down
- ❖ Assume your patient will be doing a task, but give choices/options of how, when and where she will be doing it
- ❖ Do not use phrases like “do this” or “do that.” These are directions, not choices.



TECHNIQUES TO MANAGE BEHAVIOR

APOLOGIZE OR TAKE THE BLAME FOR THE SITUATION

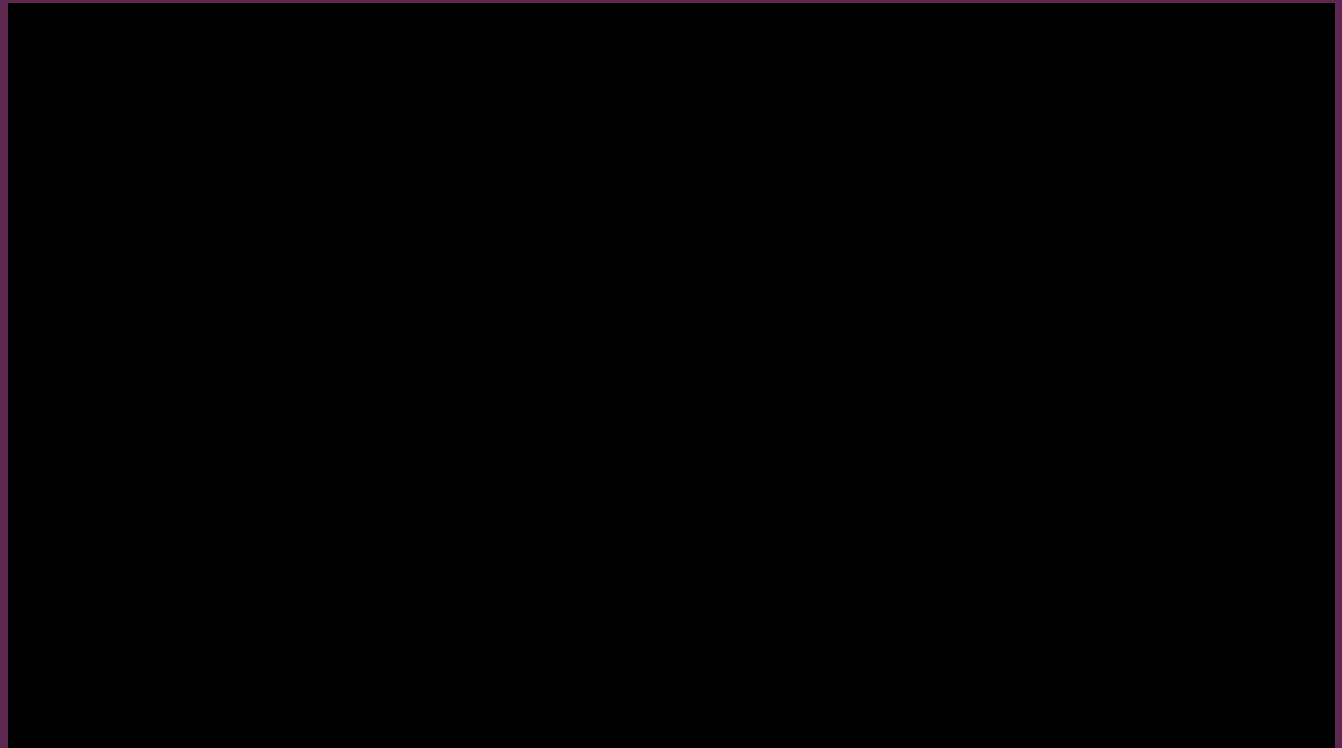
- ❖ Even when it is not your fault, an apology sometimes solves the problem
- ❖ Apologizing takes the attention off the patient
 - ❖ He may calm down if he believes the situation is not his fault
- ❖ Offer a simple apology, “I’m sorry, I must have misunderstood you.”
- ❖ NOTE: Use for minor issues (ex. Response to complaint) not for major allegations (ex. Theft).



TECHNIQUES TO MANAGE BEHAVIOR

REDIRECT

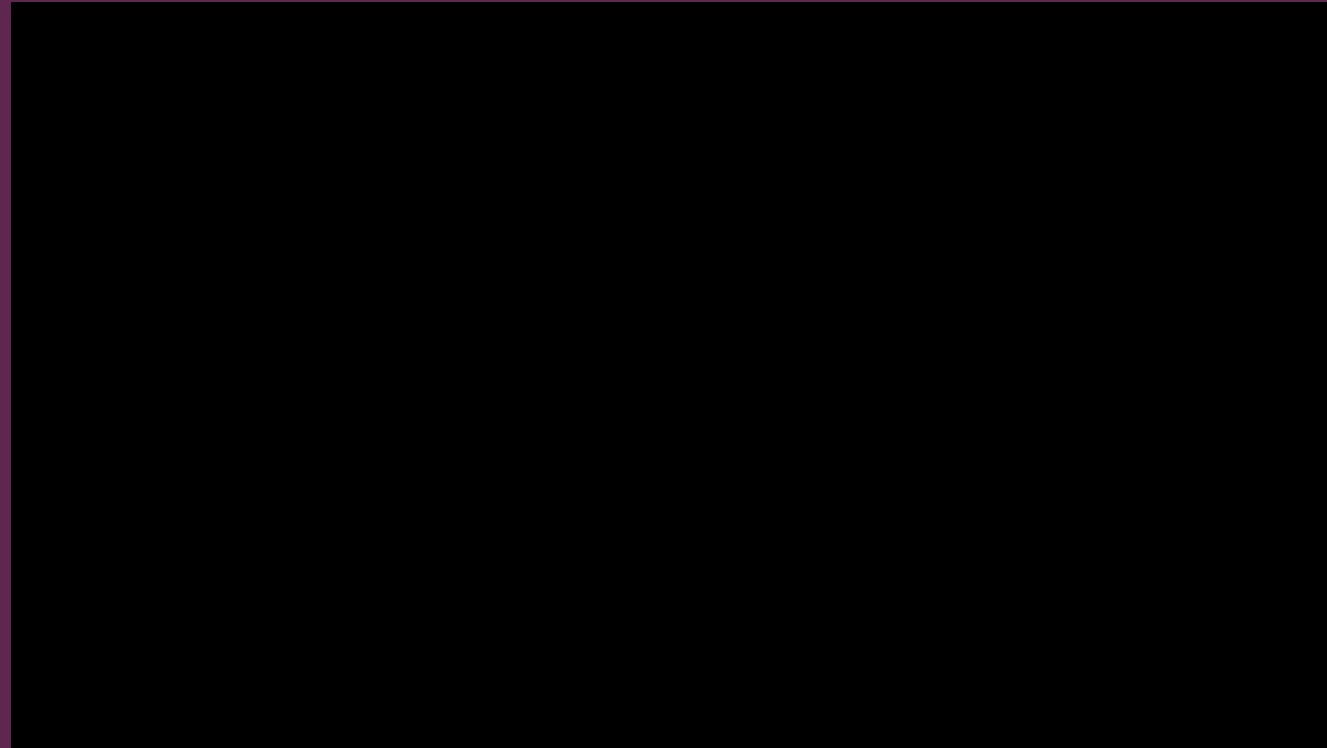
- ❖ Changing the topic or focus
- ❖ Changing the mood from bad to good
- ❖ Creating a more positive and safe result



TECHNIQUES TO MANAGE BEHAVIOR

PHYSICALLY REMOVE ITEMS OR YOUR PATIENT FROM THE ENVIRONMENT

- ❖ Patients can become agitated or aggressive because of something that is in or happening in their environment
 - ❖ A book out of place
 - ❖ Someone in their yard



NEVER...

INSTEAD...

REASON

DIVERT!

SHAME

DISTRACT!

LECTURE

REASSURE!

SAY "REMEMBER"

REMINISCE!

SAY "I TOLD YOU"

REPEAT AND REGROUP!

SAY "YOU CAN'T"

FIND OUT WHAT THEY CAN DO!

COMMAND OR DEMAND

ASK AND MODEL!

CONDESCEND

ENCOURAGE AND PRAISE!

FORCE

REINFORCE



ONE TECHNIQUE MAY WORK ONE TIME BUT NOT THE NEXT AND YOU MAY HAVE TO TRY SEVERAL TECHNIQUES TO HELP MANAGE YOUR PATIENT'S BEHAVIOR BEFORE GETTING THE RESULT YOU WANT

**TRY 3 TIMES
3 DIFFERENT WAYS**

SUMMARY

- ❖ Give simple choices
- ❖ Apologize or take the blame for the situation
- ❖ Redirect
- ❖ Physically remove items or your client from the environment
- ❖ You may need to use the techniques in combination and more than one time
- ❖ Trying three times, three different ways incorporates all of the techniques
- ❖ **Try 3 Times/3 Different Ways... and give it a rest between tries!!! 😊**

THE LONG GOODBYE



DEEP WITHIN THAT HOLLOW STARE,
OF OUR PRESENCE THEY'RE UNAWARE OF.
A LIFE THAT IS FADING AWAY,
IN SPITE OF THINGS WE TRY TO CONVEY.
MEMORIES LOCKED UP IN THEIR MIND,
AND THERE THEY'RE KEPT ALL CONFINED.
GOOD TIMES SPENT LONG AGO,
AND ALL THEIR LOVE THEY DID BESTOW.
FOR THESE MOMENTS WILL LIVE FOREVER,
AND OUR PRIDE IN THEM WILL ENDEAVOUR.
SEEING THEM LYING THERE WE KNOW WHY,
ALZHEIMERS IS CALLED THE LONG GOOD-BYE

BERNARD HOWE

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QUESTIONS??

