SPOTLIGHT ON ALZHEIMER’S DISEASE

- Alzheimer’s disease is the most common type of dementia and is a devastating condition that results in the loss of memory and other cognitive abilities, and in the ability to care for oneself independently.
- Difficulty remembering names and recent events is often an early clinical symptom; lack of interest and depression are also often an early symptom of Alzheimer’s disease.
- Later symptoms include problems with judgment, disorientation, confusion, behavior changes, and difficulty speaking, swallowing, and walking.
- There is no “typical” patient with Alzheimer’s disease. Symptoms and behaviors vary. As the disease progresses through various stages, the patient loses more and more control over the ability to function mentally and physically.

WHAT YOU WILL LEARN:

- A description of Alzheimer’s Disease
- Symptoms of Alzheimer’s Disease
- Changes in a person’s day to day functioning with Alzheimer’s Disease
- The Volunteer’s role in working with a patient with Alzheimer’s disease

Facts about Alzheimer’s Disease:

- Millions of Americans now have Alzheimer’s disease or another dementia- dementia isn't a specific disease. Instead, dementia describes a group of symptoms affecting intellectual and social abilities severely enough to interfere with daily functioning. Many causes of dementia symptoms exist. Alzheimer's disease is the most common cause of a progressive dementia.
- More women than men have dementia.
- There is not a known cause for Alzheimer’s.
- Physical changes take place in the brain- plaques and tangles form in the brain.
- Brain cells which send messages to each other - called “neurons” cannot relay the messages as well due to the plaques and tangles.

Risk Factors of Alzheimer’s:

- Family history of Alzheimer’s
- Over 65
- History of serious head injury
With Alzheimer’s one’s sense of self is often lost- there must be a give and take in providing care to the patient with Alzheimer’s.

What are ways the Volunteer can provide care?

- Remember - providing care for a person with Alzheimer’s disease isn’t easy
- Respect small choices- does the patient have a favorite book, activity, chair, etc.
- Keep it simple- one thing at a time rather than multiple items at one time- rapid fire sort of requests can be confusing and frustrating for a person with Alzheimer’s.
- Repeat instructions as often as needed. Do not change topics suddenly.
- Find good reasons- give a good reason for specific activities.
- Slow it Down- engage the patient in the task as this may reduce agitation, resistance and combative behavior.
- Don’t overload tasks- if you feel like you need more time or you notice the tasks are overwhelming for the patient, talk with the volunteer coordinator about your observations for possible changes that may be needed.
- Be aware of the patient wandering- particularly in late afternoon and evening.
- Maintain a safe environment- lock doors to unsafe areas, keep doors to outside locked (per care plan instructions).

- Let your coordinator know if the patient appears to be having problems with keeping up with their finances.
- Write reminders on the calendar for the patient.
- Keep a list of important phone numbers near the phone.
- Ask your coordinator if putting pictures or labels on drawers or cabinets would help the patient identify contents.
- Encourage the patient to have a set routine.
- Have the patient write down things they need to remember.
- Encourage the patient to use lists.
- Suggest having a designated place for important objects such as the keys, glasses, remote, etc.
Think about this:

- People with Alzheimer’s can only do one thing at a time.
- People with Alzheimer’s have repetitive behaviors.
- Be sure to keep this in mind while caring for the Alzheimer’s patient- keep the tasks to one at a time for the patient.
- If you notice the patient becoming upset with an activity that may need to be changed, notify the coordinator of your findings.
- If your patient seems agitated, they may have pain that they cannot express: notify your coordinator.

For the person with Alzheimer’s, activities structure the time. Activities also can enhance a person’s sense of dignity and self-esteem by giving purpose and meaning to his or her life. Planning activities should focus on the:

- **Person** - Keep the person's skills and abilities in mind. Be aware of physical problems. Pay special attention to what the person enjoys.
- **Activity** - Well-planned activities can improve the quality of life of those with dementia. Encourage involvement in daily life.
- **Approach** - Offer support and supervision. Be flexible and patient.
- **Place** - Make activities safe. Minimize distractions that can frighten or confuse the person.

A planned day allows you to spend less time and energy trying to figure out what to do from moment to moment.

### Moderate or Mid Stage Alzheimer’s

- Needs help with ADLs
- Needs reminders to eat
- Changes in sleep habits
- Restlessness or wandering
- Getting angry, suspicious, or easily upset
- Trouble recognizing family members
- Difficulty expressing self and understanding others

### Maintaining Good Nutrition:

Provide extra time for eating
Encourage self-feeding; provide finger foods that the patient can handle easily.
Offer foods that are high in protein and complex carbohydrates (fruits, whole grains, and vegetables) for between meal snacks, as indicated on the plan of care.
Give reminders on how to use utensils if needed.
Remind the patient to chew food slowly
Serve foods and liquids that are not too hot or too cold to avoid burns.

### Observe, Record & Report:

- Changes in confusion or wandering
- Changes in ability to perform ADL’s and to communicate
- Signs of infection
- Refusal to take medication

### When approaching a person with dementia-

- Knock- announce yourself
- Greet and smile
- Move slowly- hand offered in handshake position
- Move from the front to the side
- Greet with a handshake and your name
- Slide into hand under hand hold
- Get to the person’s level
- Be friendly- make a “nice” comment or smile
- Give your message- simple, short and friendly

Resources: Alzheimer’s Association; AHHC Caring Connection April 2007; Caring Magazine June 2010; Teepa Snow MS, OT- One Day at a Time Training- September 2012; Mosby’s Textbook for the Home Care Aide- 3rd edition; Mayo Clinic- Dementia.