



Understanding Dementia

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Welcome to Brahm's Centre's training on Dementia

Training Framework

- ❑ What is Dementia?
- ❑ Statistical facts on dementia in Singapore
- ❑ Types of Dementia
- ❑ 3 stages of dementia
- ❑ Signs & Symptoms
- ❑ DOs & DON'Ts
- ❑ Stemming the Dementia slide
- ❑ Caring tips for caregivers
- ❑ Dementia brochures
 - ❑ Tips, Support services

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Facts on dementia -2016



- The aging population is going to greatly exacerbate the dementia issues in coming years
- There were 22,000 dementia patients over 65 in Singapore in the year 2005 and 40,000 in 2015, the number is expected to increase to 53,000 by 2020 and 187,000 by 2050.
- IWH attributes the rise in prevalence rate to a rapidly aging population and increasing prevalence of stroke, obesity, diabetes and hypertension as risk factors for dementia
- Dementia has proven to become costly to Singapore and the cost is approximately \$SG \$1.4 billion annually
- 10% of people between 40 and 74 years has dementia in Singapore. In 2015, World Health Organization (WHO) survey on aging revealed that in Singapore 20 years ago found that only 3% of people had dementia
- IWH experts attribute the rise in prevalence rate to a rapidly aging population and increasing prevalence of stroke, obesity, diabetes and hypertension that are risk factors for dementia.
- Dementia has proven to become costly to Singapore and the cost is approximately \$SG \$1.4 billion annually



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WHAT IS DEMENTIA ?

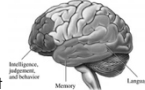

- ▶ A set of symptoms
 - ▶ memory loss
 - ▶ difficulties with thinking, problem-solving or language
- ▶ Changes are often small to start with, but become severe enough to affect daily life. A person with dementia may also experience changes in their mood or behaviour.

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WHAT IS DEMENTIA ?

- ▶ Is caused when the brain is damaged by diseases, such as Alzheimer's disease or a series of strokes.
 - ▶ Alzheimer's disease is the most common cause of dementia, but not the only one
 - ▶ The specific symptoms that someone with dementia experiences will depend on the parts of the brain that are damaged and the disease that is causing the dementia.



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Types of dementia

Alzheimer's disease

Common symptoms:

- ▶ Memory loss
- ▶ Confusion
- ▶ Difficulty communicating
- ▶ Anxiousness
- ▶ Paranoia



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Types of dementia

Vascular Dementia
Vascular dementia is also known as "multi-infarct dementia" or "post-stroke dementia" and is the second most common cause of dementia.

Main symptoms:

- ▶ Memory loss
- ▶ Impaired judgment
- ▶ Decrease ability to plan
- ▶ Loss of motivation

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Types of dementia

Lewy Body Dementia
Lewy body dementia is the third most common cause of dementia, and is called "cortical Lewy body disease" or "diffuse Lewy body disease."

Main symptoms:

- ▶ Sleep problems
- ▶ Memory loss
- ▶ Hallucinations
- ▶ Frequent swings in alertness



Dementia
"Forget me not"





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Types of dementia

Frontotemporal Dementia
Frontotemporal dementia is fairly rare, but believed to be the fourth most common type of dementia - marked more by behavioural and emotional changes than by cognitive impairment. In fact, memory is preserved in people with frontotemporal dementia.

Main symptoms:

- ▶ Decreased inhibition (frequently leading to inappropriate behaviour)
- ▶ Apathy and loss of motivation
- ▶ Decreased empathy
- ▶ Repetitive or compulsive behaviours
- ▶ Anxiety and depression

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SYMPTOMS

- ▶ Each person is unique and will experience dementia in their own way
 - ▶ Different types of dementia affect people differently, especially in the early stages
 - ▶ How well someone can live with dementia include how other people respond to them and the environment around them



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SYMPTOMS

- ▶ A person with dementia will have cognitive symptoms (to do with thinking or memory). Often have problems with some of the following:
 - ▶ Day-to-day memory – for example, difficulty recalling events that happened recently
 - ▶ Concentrating, planning or organising – for example, difficulties making decisions, solving problems or carrying out a sequence of tasks (such as cooking a meal)
 - ▶ Language – for example, difficulties following a conversation or finding the right word for something



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SYMPTOMS

- ▶ Visuospatial skills – for example, problems judging distances (such as on stairs) and seeing objects in three dimensions
- ▶ Orientation – for example, losing track of the day or date, or becoming confused about where they are
- ▶ Will also often have changes in mood
 - ▶ They may become frustrated or irritable, apathetic or withdrawn, anxious
 - ▶ Easily upset or unusually sad
- ▶ With some types of dementia, the person may see things that are not really there (visual hallucinations) or strongly believe things that are not true (delusions).



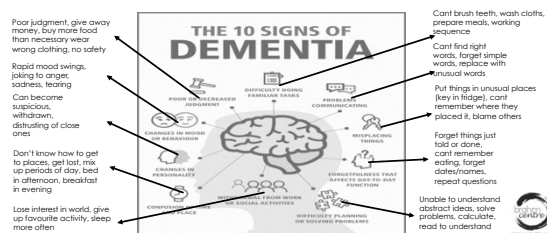
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SYMPTOMS

- Dementia is progressive
 - Symptoms gradually get worse over time. Deterioration varies greatly from person to person.
 - As dementia progresses, the person may develop behaviours that seem unusual or out of character.
 - These behaviours may include asking the same question over and over, pacing, restlessness or agitation.
 - A person with dementia, especially in the later stages, may have physical symptoms such as muscle weakness or weight loss. Changes in sleep pattern and appetite are also common.



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There are 3 stages of dementia

1st stage (mild dementia)

People may still be able to function independently in mild dementia. Common symptoms of mild dementia include:

- Memory loss of recent events
- Personality changes, such as becoming more subdued or withdrawn
- Getting lost or misplacing objects
- Difficulty with problem-solving and complex tasks, such as managing finances
- Trouble organizing or expressing thoughts




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HOW TO DEAL – FIRST STAGE

To help you determine when and how to provide the most appropriate support to a person living in the early stage of dementia consider these tips used by other care partners:

- ▶ **Safety First:** Is there an immediate safety risk for the person with dementia to perform this task alone? If there is no immediate risk of injury or harm, provide encouragement and continue to provide supervision as necessary.
- ▶ **Avoid Stress:** Prioritize tasks or actions that do not cause unnecessary stress for the person with dementia. For example, if you know that grocery shopping will be frustrating for the person with dementia, ask for their participation to outline a weekly menu and organize a grocery list.
- ▶ **Make a positive assumption:** Assume that the person with dementia is capable of completing the task. If you sense frustration, try to identify the cause of the frustration before intervening. Focus on his or her current needs, rather than dwelling on the future.
- ▶ **Create a Help Signal:** Identify a cue or phrase that you can use to confirm if the person with dementia is comfortable receiving support. For example, you may agree to use a phrase like, "Is there anything I can do to help?" or a nod to signal that it's ok to chime in if the person with dementia is having difficulty remembering a word or name.
- ▶ **Take it Over:** The best way to determine how and when to provide support is to ask directly. Ask the person with dementia what they need or the frustrations they may be experiencing. Talk about it, then make a plan.
- ▶ **Work Better Together:** Find activities to do together and keep the conversation going about expectations for how you will provide support. Check in regularly by asking the person with dementia if you are providing a level of assistance that is comfortable or adequate.



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2nd stage (moderate dementia)

People experiencing moderate dementia will likely need more assistance in their daily lives. It becomes harder to perform regular daily activities and self-care as dementia progresses. Common symptoms during this stage include:

- ▶ increasing confusion or poor judgment
- ▶ greater memory loss, including a loss of events in the more distant past
- ▶ needing assistance with tasks, such as getting dressed, bathing, and grooming
- ▶ significant personality and behavior changes, often caused by agitation and unfounded suspicion
- ▶ changes in sleep patterns, such as sleeping during the day and feeling restless at night






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HOW TO DEAL – 2ND STAGE

- ▶ Learn what to expect in the middle stages of the disease so you can be prepared.
- ▶ Use a calm voice when responding to repeated questions.
- ▶ Respond to the emotion, instead of the specific question; the person may simply need reassurance.
- ▶ Use simple written reminders if the person can still read.
- ▶ If you notice changes, check with the doctor to rule out other physical problems or medication side effects.



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3rd Stage (severe dementia)

People will experience further mental decline as well as worsening physical capabilities once the disease progresses to the point of severe dementia. Severe dementia often can cause:

- ▶ a loss of the ability to communicate
- ▶ a need for full-time daily assistance with tasks, such as eating and dressing
- ▶ a loss of physical capabilities, such as walking, sitting, and holding one's head up and, eventually, the ability to swallow, to control the bladder, and bowel function
- ▶ an increased susceptibility to infections, such as pneumonia



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HOW TO DEAL – 3RD STAGE

- ▶ **Make sure the person is in a comfortable, upright position.**
To aid digestion, keep the person upright for 30 minutes after eating.
- ▶ **Adapt foods if swallowing is a problem.**
Choose soft foods that can be chewed and swallowed easily. Thicken liquids such as water, juice, milk and soup by adding cornstarch or unflavored gelatin. You can also buy food thickeners at a pharmacy or health care supply store. Try adding pudding or ice cream, or substitute milk with plain yogurt.
- ▶ **Encourage self-feeding.**
Sometimes a person needs cues to get started. Begin by putting food on a spoon, gently putting his or her hand on the spoon, and guiding it to the person's mouth. Serve finger foods if the person has difficulty using utensils.
- ▶ **Assist the person with feeding, if needed.**
Alternate small bites with fluids. You may need to remind the person to chew or swallow. Make sure all food and fluid is swallowed before continuing on with the next bite.
- ▶ **Encourage fluids.**
The person may not always realize that he or she is thirsty and may forget to drink, which could lead to dehydration. If the person has trouble swallowing water, try fruit juice, gelatin, sherbet or soup. Always check the temperature of warm or hot liquids before serving them.
- ▶ **Monitor weight.**
While weight loss during the end of life is to be expected, it also may be a sign of inadequate nutrition, another illness or medication side effects. See the doctor to have weight loss evaluated.



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DOs & DON'Ts

- ▶ **DO:** Eye contact is vital for them as emotions and facial expressions speak louder than words...
- ▶ **DON'T:** When you get tense and uptight, it makes them feel tense and uptight.
- ▶ **DO:** Introduce yourself – don't assume they remember your name, always say 'hello my name is Joe and you're looking very nice today.'
- ▶ **DO:** Be a good listener and when it's time to say goodbye, say good bye rather than see you later if you're not coming back that day.



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DOs & DON'Ts

- ▶ **DON'T:** Never patronise or ridicule what a person with dementia says because they may forget what you said but they won't forget how you made them feel.
- ▶ **DON'T:** Never assume that they don't understand, even when they appear to lose their ability to communicate, they still understand.
- ▶ **DON'T:** Don't keep correcting them, otherwise we'll just go back into to our own world. Speak clearly and slowly using short sentences and encourage them to try and join in and keep the conversation light and humorous.
- ▶ **DO:** Remember that you'll have to listen to the same stories over and over again but don't say 'you've already said that'.



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DOs & DON'Ts

- ▶ **DO:** Encourage them to join in conversations but please don't keep saying 'do you remember?'...it puts pressure on them. Give them time to respond, if takes them a few seconds more to think things through so don't put pressure on them. If you're in a conversation you're having with the person with dementia and they stop to talk please stop and let them have their say otherwise they may forget.
- ▶ **DO:** Remember that background noise such as TV radio, people talking or traffic etc makes it very difficult for the person with dementia to understand a conversation. Be prepared for when the dementia takes over; there will be days when they are angry and days where they forget where they are in time. The more that you understand that it's not the person with dementia that is angry with you, the more you will bear what is to come.



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DOs & DON'Ts

- ▶ **DO:** Having dementia is like being abroad, you can't read the signs, people don't understand you and you can't understand what they're saying. Try and hang on to every word that the person with dementia is saying and it will help you understand where they are.
- ▶ **DO:** They like people to treat them truthfully and honestly. And if they are going to be in a care home, treat them kindly, and truthfully and as honestly as you can, while maintaining that kindness. Lying doesn't help; if you tell people the truth, they'll come to terms with it eventually.



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Do's and Don'ts of Dementia Communication**Do's**

- ▶ Talk to the person in a tone of voice that conveys respect and dignity
- ▶ Keep your explanations short. Use clear and flexible language.
- ▶ Maintain eye contact by positioning yourself at the person's eye level. Look directly at the person and ensure that you have their attention before you speak. Always begin by identifying yourself and explain what it is you propose to do.
- ▶ Use visual cues whenever possible.
- ▶ Be realistic in expectations



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Do's and Don'ts of Dementia Communication**Do's**

- ▶ Observe and attempt to interpret the person's non-verbal communication.
- ▶ Paraphrase and use a calm and reassuring tone of voice.
- ▶ Speak slowly and say individual words clearly. Use strategies to reduce the effects of hearing impairment.
- ▶ Encourage talk about things that they are familiar with
- ▶ Use touch if appropriate.



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Do's and Don'ts of Dementia Communication**Don'ts**

- ▶ Talk to the person in 'baby talk' or as if you are talking to a child. Use complicated words or phrases and long sentences.
- ▶ Glare at or 'eyeball' the person you are talking to.
- ▶ Begin a task without explaining who you are or what you are about to do.
- ▶ Talk to a person without eye contact, such as while rummaging in a drawer to select clothing.
- ▶ Try and compete with a distracting environment.



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Do's and Don'ts of Dementia Communication

Don'ts

- ▶ Provoke a catastrophic reaction through unrealistic expectations or by asking the person to do more than one task at a time.
- ▶ Disregard your own non-verbal communication.
- ▶ Disregard talk that may seem to be rambling.
- ▶ Shout or talk too fast. Interrupt unless it cannot be helped.
- ▶ Attempt to touch or invade their personal space if they are showing signs of fear or aggression.



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Reducing risks / Stemming the slide *(tips for your caregivers, their recipients, and you)*

- ▶ **Stay mentally stimulated** – read, write, play cards, crosswords or board games, learn a new language or a musical instrument
- ▶ **Maintain an active social life** – meet up for meals and activities with family and friends. Volunteer, join a club, or participate in community events
- ▶ **Eat a healthy diet** – increase intake of fruits and vegetables. Take less sugar, and choose food low in fat and saturated fat. Cook right and eat smart – <https://www.healthhub.sg/programmes/68/healthy-ageing-nutrition>
- ▶ **Keep physically active** – exercise increases blood circulation and may improve brain function. Look up <https://www.healthhub.sg/programmes/71/healthy-ageing-exercise>



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Caring for a loved one with Dementia

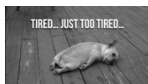
- ▶ Challenging
- ▶ Stressful
- ▶ Take a physical and emotional toll on the caregiver
- ▶ Caregivers must looking after their own health and wellbeing
- ▶ A strong support network really helps too - friends and family, from fellow caregivers in support groups. Support groups provide caregivers a place to share their feelings, gain emotional support and talk to people who they can relate to.
- ▶ List of mental health support services available in Singapore



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Tips for caregivers

- ▶ Attend to your own physical and mental health.
- ▶ Monitor yourself for signs of burnout
- ▶ Try joining a caregiver support group, which can provide education and emotional support
- ▶ Learn as much as you can about the disease as soon as possible.
- ▶ Respect and understand your loved one
- ▶ Be sincere
- ▶ Create a reliable daily routine with small rituals.



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Tips for caregivers

- ▶ Let the loved one do as much as possible
- ▶ Keep physical closeness
- ▶ Allow unusual behaviour
- ▶ Keep the lines of communication open with family, friends, and loved ones. Ask for help when you need it.
- ▶ Make sure legal and financial issues are in order
- ▶ Take an active role in the loved one's health care
- ▶ Plan activities with loved one that you both enjoy
- ▶ Keep the home well-lit




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See Dementia Brochures



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*I Have Dementia.
My eyes do see, My ears do hear
I am still me, So let's be clear
My memory may fade,
My walk may slow
I am ME inside
Don't let me go.*

 www.keepinmindine.com



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Thank You





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Extra slides...



17/4/2017

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Communicating with a dementia person

Identify underlying reasons for challenging behaviours



- ▶ Good to establish underlying needs that he/she could not express. For example, they could be too hot or too tired, or they could need a drink or use the toilet. If they seem uncomfortable, it could be a medical problem.

Enjoy safe, outdoor activities

- ▶ Care needs to be taken to prevent falls when the person with dementia is walking in public spaces – steps, stairs and crowded shopping malls – especially if they have osteoarthritis, heart problems and verbal cues

Keep up with social activities



- ▶ Involvement in physical or social activities would be of benefit
- ▶ Mild to moderate stage of dementia would enjoy being with family and friends in small gatherings
- ▶ Persons with at the severe stage of dementia will more likely to prefer a one to one interaction as they need more visual and verbal cues.

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Communicating with a dementia person

- ❖ To engage meaningfully with people with dementia, we need to respond appropriately to their feelings while respecting and valuing them
- ❖ "Learn to value their underlying needs, ensure the person's safety and provide them with as much dignity and independence as possible," said the Alzheimer's Disease Association (Singapore).

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Communicating with a dementia person

Do not test their memory

- ▶ With dementia, they are unable to remember many and you will frustrate them by asking "Do you remember?"

Simplify activities and communication


- ▶ Break down activity down into simple step by step tasks. Keep your sentences short and simple during communication

Do not argue

- ▶ What they see, hear or recall may not be the same as what you saw, heard or know

Identify and remove triggers to negative behaviour

- ▶ If the person wants to go out of the house each time he sees shoes by the door, keep the shoes out of sight



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Aggressive Speech or Actions

Examples: Statements such as "I don't want to take a shower!" "I want to go home!" or "I don't want to eat that!" may escalate into aggressive behavior.

DO: The key to responding to aggression caused by dementia is to try to identify the cause—what is the person feeling to make them behave aggressively? Once you've made sure they aren't putting themselves (or anyone else) in danger, you can try to shift the focus to something else, speaking in a calm, reassuring manner.

DONT: The worst thing you can do is engage in an argument or force the issue that's creating the aggression. Don't try to forcibly restrain the person unless there is absolutely no choice.



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Confusion About Time or Place

Examples: Statements such as "I want to go home!" "This isn't my house." "When are we leaving?" "Why are we here?"

DO: There are a few possible ways to respond to questions that indicate your loved one is confused about where he or she is. Simple explanations along with photos and other tangible reminders can help. Sometimes, however, it can be better to redirect the person, particularly in cases where you're in the process of moving your loved one to a facility or other location.

DONT: Lengthy explanations or reasons are not the way to go. You can't reason with someone who has Alzheimer's or dementia. It just can't be done. A lot of times we're triggering the response that we're getting because of the questions we're asking.



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Poor Judgment or Cognitive Problems

Examples: Unfounded accusations: "You stole my vacuum cleaner!" Trouble with math or finances: "I'm having trouble with the tip on this restaurant bill." Other examples include unexplained hoarding or stockpiling and repetition of statements or tasks.

DO: First you'll want to assess the extent of the problem. "If you're curious and don't want to ask, take a look at a heating bill," suggests Mariotto. "Sometimes payments are delinquent or bills aren't being paid at all." You can also flip through their checkbook and look at the math, or have them figure out the tip at a restaurant.

DONT: What you shouldn't do in these circumstances is blatantly question the person's ability to handle the situation at hand, or try to argue with them. Any response that can be interpreted as accusatory or doubting the person's ability to handle their own affairs only serves to anger and put them on the defensive.



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