

Understanding Changing Behaviours in Dementia

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Objectives

- ❖ Have an understanding of the communication changes in dementia and how those changes affect behaviour.
- ❖ Other reasons for behaviour
- ❖ Discuss sundowning, restlessness, wandering, repetition, suspicion, anger and physical outbursts
- ❖ Positive physical approach
- ❖ Questions

Dementia



**Alzheimer's disease
(AD)**

**Lewy Body Dementia
(LBD)**

Vascular Dementia (VaD)

**Fronto-temporal Dementia
(FTD)**

Understanding changing behaviours in Dementia

When trying to understand your friend or family member's behaviour , keep in mind:

- All words, gestures and actions communicate meanings, needs and concerns.

Communication

Early Stage Weaknesses

- Takes longer to process information.
- Thoughts may wander from the conversation/difficulty staying on track.
- Problems recalling names of people, places and things - 'Tip of the tongue' feeling.
- May repeat words and phrases.
- Difficulty with pronouns (he, she, they).
- Comprehension of complex written material.
- Difficulty with abstract/complex concepts.

Communication – Early Stage Relative Strengths

- Grammar, articulation and voice quality.
- Most conversational skills.
- Understand 1 and 2 part questions and directions.
- Memories in the remote past are accessible.
- Comprehension of short written passages.
- Nonverbal communication skills generally intact.

Communication

Mid Stage Weaknesses

- Increased word retrieval problems.
- Increased generalizations.
- Fragmented sentences; grammatical errors.
- Greater reliance on social phrases.
- Reduced verbal output .
- Difficulties in following verbal and written instructions.
- Difficulty remembering recent events.
- Less initiation of conversation.

Communication

Mid Stage Relative Strengths

- Have a simple conversation, with appropriate support.
- Reminisce about the past, particularly positive life events and relationships.
- Read aloud words, short phrases or sentences.
- Recognize pictures, signs and people.
- Sing, play a musical instrument.
- Engage in well-known routines and habits.
- Understand and respond to nonverbal communication.

Communication

Late Stage Weaknesses

- Communication is severely compromised.
- Limited initiation of conversations.
- Non-verbal sounds.
- Reading and writing are nonfunctional.
- Comprehension of language is limited to simple familiar phrases and words.
- Speech - single words and sentence fragments.
- Communication as a whole is largely non-verbal.

Communication

Late Stage Relative Strengths

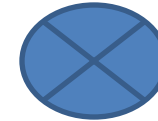
- Can send and receive messages through non-verbal communication.
- Use of gesture, non-verbal sounds.
- Recognize others' tone of voice.
- Recognize body position, posture and gestures.
- Respond to touch.
- Respond to changes in the environment.
- Respond to music.

Communication

✓ Do

- Introduce yourself.
- Use humour and smile.
- Go at their pace.
- Use visual cues and gestures for directions.
- Accept inappropriate answers or nonsense words.

Don't



- Argue.
- Say “Don’t you remember”.
- Correct their ideas or scold them.

Why do behaviours happen?

- **Physical:** Do they seem to have discomfort or pain?
- **Intellectual:** Have they experienced memory changes?
- **Emotional:** Do they seem lonely or have they acted in unusual ways like being suspicious of others, hearing or seeing things we don't?
- **Capabilities:** Can they do more than you realize?
- **Environment:** Is there too much noise or too large a crowd nearby?
- **Social:** Does their childhood, prior employment or early adulthood offer any clues?

Things to think about Responsive Behaviours

- Be aware of potential triggers and try to avoid them.
- Adapt verbal and nonverbal communication skills to the needs of the person.
- Engage the person in meaningful through such outlets as familiar activities, support groups and day programs.
- Maintain a daily routine.

Sundowning

- Sundowning is not a disease.
- It is a collection of symptoms that tend to occur at the end of the day and into the night.
- It might become increasingly common as their dementia progresses.

Why does it happen?

- Is the person physically or mentally exhausted?
- Are you as the caregiver physically or mentally exhausted?
- Is there a particular event that seems to trigger it?
- Is the person napping during the day?
- Does the person seem lost in thought?

Responding to Sundowning

- Energy level for the person with dementia and the caregiver.
- See if the behaviour is being caused by discomfort (hunger, need to use the toilet, pain).
- Allow for rest and naps between activities.
- Avoid making appointments, bathing, or other potentially stressful activities in the late afternoon or evening.
- Prevent over-stimulation from the television or radio, which can lead to increased confusion.

Responding to Sundowning

- Provide adequate lighting to lessen shadows when it begins to get dark.
- A rocking chair can provide stimulation while having a calming effect.
- Brisk walks or other forms of physical activity throughout the day may reduce restlessness or the need to wander later.
- Keep them active and distracted when sundowning may occur (for example, preparing dinner, setting the table).

Responding to Sundowning

- Restrict the amount of caffeine and sugar they have in the morning.
- Maintain a regular eating and sleep schedule as much as possible.
- It may be helpful to keep a daily journal to pinpoint the causes of sundowning symptoms and see which strategies help.

Responding to Sundowning

- Familiar routines may help them feel more secure. They can include readying the home for evening (closing curtains, turning on lights) or bedtime routines that include warm milk and soft music.
- Change sleeping arrangements, for example, adding a comfortable chair to the room, a night light, or leaving a door open.

Restlessness (Agitation)

- Pain or discomfort.
- A medical reason.
- A basic need.
- A feeling.
- Communication problems.
- The environment.



Responding to Restlessness

- Get health check up
- Set up daily Routine
- Provide activities
- Exercise
- Check regarding bathroom issues



Wandering

- Is more common in the middle or later stages of dementia, although it can occur at any point during the disease.
- Can cause a person with dementia to become confused and disoriented, even when they are in a familiar place.

Responding to Wandering

- Look for an immediate cause.
- Reassure the person and distract him with another activity.
- Move locks on the outside doors out of reach.
- Disguise doors with paint or wallpaper.

Responding to Wandering

- Ensure regular walks and exercise.
- Put reminders (i.e., coat, hat) out of sight and reach.
- Inform neighbours.
- Register with MedicAlert® Safely Home®.
- <https://alzheimer.ca/en/bc/Living-with-dementia/Caring-for-someone/Understanding-symptoms/Wandering/Safely-Home>

Repetition

Some reasons why a person with dementia may repeat themselves:

- The person's short-term memory is impaired and they have no recollection of having already said or asked something.

Repetition

- The person's repetitive questions may suggest both a need for information and an emotional need. Repeated stories often represent highly significant memories.
- The person may repeat themselves because they want to communicate and cannot find anything else to say.
- The person might have become 'stuck' on a particular word, phrase or action.

Responding to Repetition

- Memory aids.
- Gently helping the person get unstuck.
- Keeping the person active and occupied.
- Life story work.



“People with dementia often have fascinating stories to tell, and we can learn much about the past.”



Suspicion, Delusions, Hallucinations

- Delusions are false beliefs. Even if you give evidence about something to the person with dementia, the person will not change their belief.



Suspicion, Delusions, Hallucinations

- Hallucinations are incorrect perceptions of objects or events involving the senses.
- They seem real to the person experiencing them but cannot be verified by anyone else.



Responding to delusions and hallucinations

- Try to determine if the person has any difficulty with hearing or vision.
- Make sure that lighting is adequate.
- Try to make the environment comfortable.
- Respond to the feelings and not to the issue. Rather than contradict them, acknowledge their concern.

Responding to delusions and hallucinations

- Do not get angry with them, and avoid arguing with them. You will not win an argument with a person who is having a hallucination or delusion.
- Remember, the hallucinations and delusions are very real to the person.

Anger and Agitation (Emotional)

- Physical discomfort.
- Environmental factors.
- Frightened, frustrated or embarrassed
- Poor communication.
- Loss of control.

Anger and Agitation

- Loss of filter – Teepa Snow
- <https://www.youtube.com/watch?v=S-Wd8wh1XEg&t=2s>
- <https://www.dementiacarecentral.com/video/swearing/>

Responding to Anger and Agitation

- Give Space
- Don't argue.
- Give time
- Use distraction.
- Try to determine the cause.
- Look for patterns on timing

Physical Outbursts

- Fear
- Environmental stressors
- Confusion

Responding to Physical Outbursts

- Avoid the triggers if possible.
- Give space.
- Give time.
- Be calm and reassuring.

Responding to Physical Outbursts

- Look for an immediate cause.
- Give them space to cool down.
- Distract them.
- If your safety is threatened, leave.

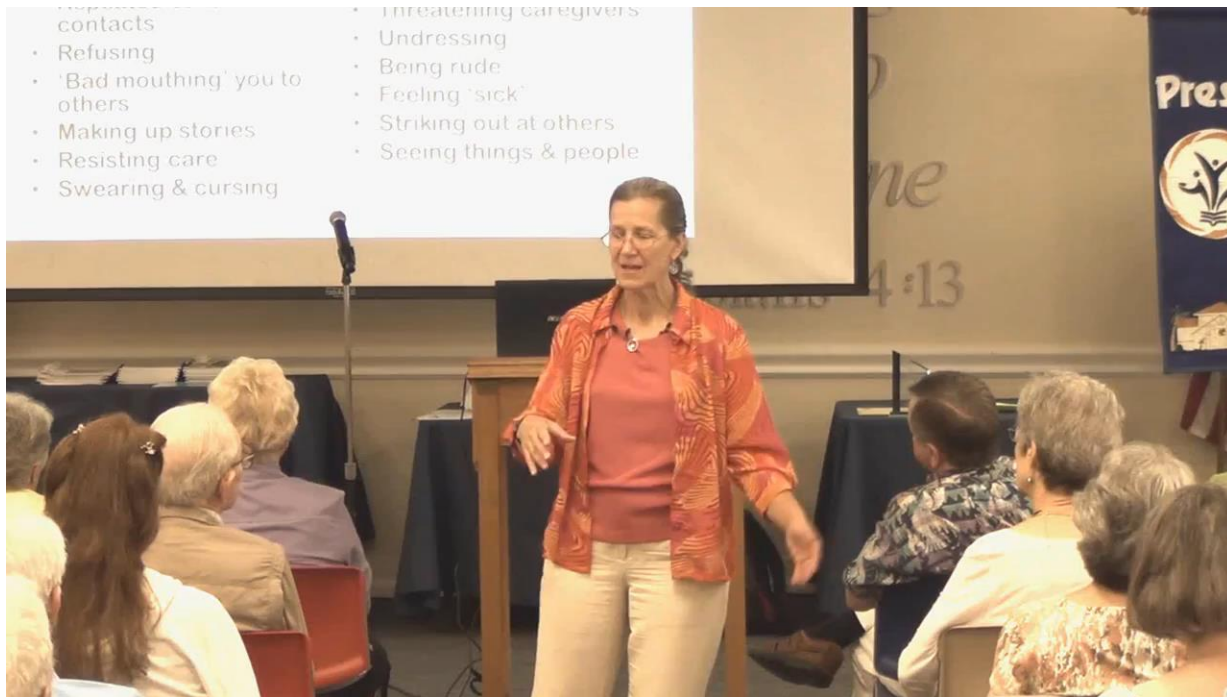
Approach to Responsive Behaviours

- Positive physical approach. – Teepa Snow
- Orient the person to the topic or what you want to do.

Teepa Snow

- <https://www.youtube.com/watch?v=gCAAy53cZDQ>

cZDQ



Your Approach



- Use a consistent positive physical approach
 - pause at edge of public space – 6 ft out
 - gesture & greet by name – open palm by face
 - offer your hand & make eye contact
 - approach slowly within visual range – hand out
 - shake hands & maintain hand-under-hand
 - move to the side
 - get to eye level & respect intimate space (arm's length)
 - wait for acknowledgement

- “The very biggest lesson I’ve learned is to see things through my husband’s perspective, not my own.”

- Judy Southon , Family Care Partner



- Questions



Robotic Cats & Dogs

- [Amazon Canada](#)
- https://www.amazon.ca/Joy-All-Black-White-Tuxedo/dp/B078FFX7Q8/ref=asc_df_B078FFX7Q8/?tag=googleshopc0c-20&linkCode=df0&hvadid=292997020056&hvp0s=1o3&hvnetw=g&hvrnd=140257396068

Night Lights

- [Amazon Canada](#)
- https://www.amazon.ca/Sleep-Musical-Soother-Lights-Bluetooth/dp/B016NWSJU6/ref=sr_1_10?keywords=glow+worm+light&qid=1573153055&sr=8-10

Weighted blankets

- <https://dailycaring.com/weighted-blankets-in-dementia-care-reduce-anxiety-and-improve-sleep/>
- <https://www.alzstore.com/sensory-weighted-blanket-adult-anxiety-alzheimers-p/m006.htm>