

Adaptability is critical when working with people with dementia, because every person's and temperament and personal history is unique. However, there are some typical challenges that people with Alzheimer's and their caregivers experience. While not every problem has a simple, one-step solution, here are some reliable solutions to common problems.

## General:

- Respond to outbursts, accusations, or other dementia-related behavior by reassuring the person and redirecting their attention onto something else.
- Keep in mind that dementia-related behavior isn't arbitrary, and is often an indication of an unmet need of the person's. They may be hungry, bored, distressed, in pain, or confused. Rather than respond to the behavior itself, try to determine the cause.
- Give multiple cues before performing an activity for a person. Tell them the action you want them to take, model the action for them, and if needed, initiate the activity with them using hand over hand guidance.
- When giving instructions, simplify each step as needed for the person. Rather than say, "make a sandwich," ask them to open the bag, grab two pieces of bread, put the bread on a plate, etc.
- Be aware of your own emotional state and take steps to ease frustration before it affects the tone of your interaction with the person, and the quality of your work.

## Driving

- Employ a "therapeutic fib" and use the person's memory loss to your advantage. Some examples:
  - A son, daughter, or friend had to borrow the car for an errand, keep extending the period of time that it's needed.
  - Disable the car by removing the battery or starter, and say the mechanic was too busy to make it out to the house this week.
- Park the car around the corner from the house so it's out of view of the person with dementia.
- If the person's reasoning abilities are still mostly intact but they insist on continuing to drive, consider having a representative from your car insurance company explain that, given that the person has a DX of Alzheimer's and was told not to drive, the company wouldn't be liable for any damages or injury the person with dementia causes in an accident. Find the authority they respect, whether it's a doctor's orders, law enforcement, or the opinion of a close family member or friend other than their caregiver, and have them reinforce your position.
- Involve them in the conversation about retiring from driving, if they have the reasoning ability and self-control to participate in such a discussion. Ask them the places they currently need a car to access, and make a calendar for who will take them in the coming month. Set up a system where rides are arranged in advance, and the person doesn't have to ask for help.
- Even after the person has stopped driving, prepare a set of blank keys from a hardware store for the person to carry with them – especially for older men, this can be a powerful sensory anchor.

## Home Safety

- Put clear packaging tape over stove knobs to prevent the PWD from turning on the stove without supervision, or remove them altogether
- Install automatic shutoffs and temperature controls on appliances.
- Take fall-proofing measures like: removing throw rugs or unnecessary clutter in walkways, installing hand rails and grab bars, keeping frequently used items within easy reach, keeping the home evenly lit, and if needed, restricting access to areas with stairs or uneven flooring.
- Use night lights to keep walkways well-lit for a person who gets up and walks around at night.

- Store medications out of sight, keeping out only the prepared doses for the week. Consider using a weekly chart or calendar where the person can mark when they've taken their medications so they don't skip or duplicate doses.
- Keep copies of important documents where they can be easily accessed in case of an emergency trip to the hospital. Keep medical directives on the refrigerator door or in a place where EMTs or paramedics can easily find them.
- Take measures to prevent the person from wandering outside the home
  - Install locks on exterior doors either high enough to be out of reach for the person, or low to the ground where they wouldn't think to look.
  - Paint or wallpaper doors and door frames to match surrounding wall.
  - Place black or dark colored floor mats in front of exterior doors; impairment of the person's visual processing may cause them to perceive it as a hole, and they won't walk over it.
  - If the person does get lost outside the home, keep in mind that they may be driven to an obligation from earlier in life, like a workplace, school, store, etc. Also keep in mind that people tend to wander in the direction of their dominant hand.

### **Coping with Cognitive Decline**

- Put a white board in a central location with important information or answers to repeated questions: meal times, the date, reminders about medications and appointments, notes about where you've gone and when you'll return if leaving the person unattended.
- Put masking tape over all non-essential buttons on remote control to help the person operate it more easily.
- Keep pen and paper on all telephones, nightstands, kitchen tables, and side tables.
- Remove objects from the house that may exacerbate confusion. Plastic, decorative fruit, for instance, may be confusing for the person, and mirrors in common areas may give the person the sense that an intruder is in the home.
- Make work and activity spaces as calm and quiet as possible, without distracting noises or other sensory stimuli.
- Lay out the materials the person will need for an activity or task ahead of time.
- Simplify whenever possible. Give limited options to make decision-making easier. Don't supply the person with unnecessary information, or information that isn't relevant to the task at hand.
- The person will likely ask the same question repeatedly. Consider the following:
  - Avoid asking "don't you remember?" or reminding the person that they've already asked the question.
  - Keep in mind that the person with Alzheimer's still has a need for companionship. They may be trying to engage you by asking you questions. The questioning may stop if you involve them in whatever you're doing, or get them started on an engaging activity.
  - Don't correct the person if they make a mistaken assumption, or forget a piece of information. It doesn't help them remember, and only makes them feel more confused. Don't quiz them or confront them about their memory loss – the part of their brain responsible for forming short term memories is being damaged, they're not just being careless.

### **Sleeping and Sundowning**

- Try to keep bedtime and waking time as consistent as possible so the body can develop a natural rhythm.
- Try to avoid letting the person take long naps during the day.
- Plan a day full of stimulating activities for the person, ideally incorporating some exercise, so the person is tired at the end of the day.
- Don't read, watch TV, or do anything in bed but sleep if possible.
- Establish a bedtime routine so the person has many cues that it's time for sleeping. Their sense of time is impaired, and may need some context to remember that it's approaching bedtime.
- Help the person get some exposure to natural sunlight, which may help regulate their circadian rhythms.
- Don't have too large of a meal close to bedtime, and avoid caffeine or sugar before bed.

- “Sundowning,” or increased agitation and confusion in the evening, can be caused by many different factors. Try the following to minimize this symptom:
  - Keep the house well-lit in the night time to avoid confusion due to vision problems.
  - This is often a busy time in the household, try to find a calm, quiet place where the person can wind down from the day.
  - Avoid complicated activities like bathing during this time. Simplify bedtime tasks as much as possible, the person will be mentally fatigued from the day and more likely to become frustrated with a challenging task.

### **Eating and Preparing Meals**

- Put bread in the toaster, melt some butter in a skillet, or perform some other inexpensive but fragrant food preparation to stimulate their appetite.
- Eat side-by-side with the person so they can imitate your movements and actions.
- The person will lose their sensitivity to taste, but the flavor of sweetness is the last to be lost. Talk to the person’s doctor to determine priorities for nutrition, but consider sweetening foods or liquids to make them more appetizing.
- Add starch or other thickening agents to liquids to make them easier to swallow.
- Make food easier to see by serving it on a plate that is a stark color contrast with the table it sits on. For the same reason, don’t serve clear liquids in translucent plastic or glass.
- Cut and season the food before serving it to the person. Consider serving food that can be eaten by hand.
- Serve only one dish at a time, and don’t put any non-essential items – including utensils – on the table while the person is trying to eat.
- If eating a full meal is a challenge for the person, encourage them to eat smaller snacks throughout the day.

### **Grooming and Personal Care**

- Promote independence in toileting by clearly labelling the bathroom door with a picture of a toilet, or leaving the light on and door open at all times.
- Familiarize yourself with the person’s toileting schedule. Provide reminders to avoid accidents.
- Make toilet seat easy to see by painting the seat a color that stands out. Avoid toilets that don’t contrast with the color of the wall, as the person may have a fall when trying to sit down.
- Install a raised seat to make it easier to sit down and stand up from the toilet.
- Consider purchasing a bedside commode to make toileting at night easier and reduce the risk of falls or wandering.
- If a personal care aide is needed, introduce them as a “housekeeper” to prevent an argument about the need for care. Consider introducing them as a friend of yours, and have the aide visit with you and your loved one before leaving the two alone together.
- Consider having a doctor write a “prescription” for a bath or shower twice a week.
- Involve the person in the activity of bathing by allowing them to test the water for temperature, hold a washcloth while being bathed, and by talking them through the process as you perform each step. Introduce what you’re going to do next, and make sure you’re understood before proceeding.
- Consider purchasing a modesty garment that can be worn in showers to keep a person warm and help them feel less exposed while being bathed.
- Try to maintain their bathing preferences and routines from earlier in life. If they always showered first thing in the morning, you may encounter resistance if you ask them to take a bath right before bed.
- Introduce the idea of providing assistance with grooming as “having a spa day.” Encourage friends and family to compliment the person on their appearance after they’ve bathed.
- Allow lots of time for showering and changing.
- Keep duplicates of favorite clothes on hand.
- Limit clothing choices. Lay outfits out with clothes stacked in the order they’ll be put on.

*Education programs for caregivers, professionals, and the public; caregiver support groups; respite care network; 24/7 caregiver helpline; care consultations; early stage programs*