

Caregiver Assistance News

“CARING FOR YOU... CARING FOR OTHERS”

Health Care for the Person with Alzheimer’s Disease

Alzheimer’s disease (AD) may not make people feel physically ill, but AD does get in the way of them keeping themselves healthy. That is why they must rely on their caregivers to help them to eat a balanced diet, take their medications correctly, visit the doctor, and take care of all the details that are involved in staying in good physical and emotional health. Even at the very beginning of the illness, a person with Alzheimer’s will need help to manage the self-care that is needed to stay as fit as his age allows.

Regular Check-Ups

People with Alzheimer’s disease are elderly, so it is not surprising that they may need glasses, hearing aids, or dentures, just like other older adults. It is important to be sure that all of these aids that help a person to interact with other people, and to enjoy the simple pleasures of eating, reading, and taking part in social activities are in good condition and are checked regularly. When a person with AD does not see or hear well, she may be even more confused and be left out of activities she still might be able to enjoy. In addition to AD, the person may also have other illnesses such as high blood pressure, diabetes, and cancer, which also need to be treated.

Even if the person with AD seems to be feeling well, it is important for the doctor to examine him. A condition the person with dementia was unable to tell you about may be found and treated before it becomes more serious.



Ensure—

- annual complete check-ups
- flu and pneumonia vaccinations
- screening for other medical conditions, as recommended by the doctor

It may be useful for the person to be seen by a *geriatric* psychiatrist in addition to medical doctors to get a complete picture of his physical and emotional health.

A person with Alzheimer’s may have difficulty cooperating with certain treatments because he may not understand why they are necessary. If the person is in the early stage, see if the treatment plan can be explained in a way the person will understand so that he can voice his opinions. Even if the person forgets what he said he would like or not like to have done, at least you will know. Ideally, the person has already completed the health care documents, called **Advance Directives** and **Health Care Proxy** so that you will know how the person would like to be medically treated.

Article continues
on page 2

Early-Stage Routine Health Care

In the early stage of AD you will—

- need to remind the person to take his medication at the right time
- reorder medications when necessary
- make appointments with doctors for him
- accompany the person with AD to the doctor
- bring lists of medications he is taking
- be prepared to give the doctor a medical health history
- describe his symptoms



Middle-Stage Routine Health Care

When the person advances to the middle stage of dementia, you will have more to do. He may be less able to cooperate with you, may refuse to take necessary medications or eat regularly or do other activities necessary to stay healthy. These behaviors sometimes are called *resistance to care*. They are the challenging behaviors for which medications are often recommended so the person may be less upset, angry, or difficult for the caregiver to manage. However, these medications can have serious side effects and are usually not as helpful as expected.

Some of the symptoms at this stage, such as hallucinations, delusions, and paranoia, are similar to those of people who have a mental illness. Although AD is not a mental illness, some of the same medications are prescribed. As mentioned above, while these drugs may be helpful, like all drugs, they must be used with caution, in the lowest possible doses, and checked often to see if they are working. Ask the doctor what side effects to look out for. If problems occur, ask if the person should switch to another medication or stop taking them.

Late-Stage Routine Health Care

In the late stage of Alzheimer's disease, you will have to speak for the person with dementia and tell medical providers what type of care the person had said he wanted when he could still communicate his wishes.

Taking Care of Yourself — Why Laughter is Important for Good Health

Laughter is considered therapeutic medicine that gives many benefits:

- ✓ Stress release
- ✓ Strengthened immune system
- ✓ Improved sleep and pain reduction

In recent times, a worldwide phenomenon has risen. Clubs offer **laughter yoga**, which is a combination of yogic breathing and laughter, as a body mind approach to health and wellness.

Laughing, tied to human physiology, is a natural cleansing process. You don't have to be genuinely happy to reap the physical and psychological benefits of laughter. Even in the saddest situations, it will enable the body to deal with emotional pain better because unexpressed emotions are released, rather than keeping it bottled up inside. Visit, www.laughteryoga.org.



NOTE

Alzheimer's disease is the sixth-leading cause of death in the United States and the only cause of death among the top 10 in the United States that cannot be prevented, cured or even slowed.

Source: Alzheimer's Association www.alz.org

Live Life Laughing!

Now that I am older I believe in the hereafter.

I know I'm here, but I can't remember what I'm after.



Inspiration

Blessed are the flexible, for they shall not be bent out of shape.

Don't Fall – Be Safe

Use assistive devices or mobility aids *when and how* you should. Tips or falls in wheelchairs account for many fall-related injuries for wheelchair users.

The Comfort of Home®

Our Purpose

To provide caregivers with critical information enabling them to do their job with confidence, pride, and competence.

Ordering Info

From the publishers of

The Comfort of Home®

Caregiver Series

available from...

CareTrust Publications LLC

PO Box 10283, Portland, OR 97296

800-565-1533

or www.comfortofhome.com

Comments and suggestions welcome.

©2015 CareTrust Publications LLC.

All rights reserved. Reproduction of any component of this publication is forbidden without a license from the publisher.

Some content in this publication is excerpted from *The Comfort of Home: Caregivers Series*. It is for informational use and not health advice. It is not meant to replace medical care but to supplement it. The publisher assumes no liability with respect to the accuracy, completeness or application of information presented or the reader's misunderstanding of the text.

***SAFETY TIPS*—Alzheimer's Safety**

Remember, a person with AD may not be able to tell you he is sick but may *show* you instead. Increased confusion, listlessness, change in walking, being less attentive, and loss of interest in eating may signal a *physical* illness.

If the behavior of a person with Alzheimer's disease changes suddenly or if a symptom appears that usually occurs much later in the illness **THINK MEDICAL ILLNESS** and call the doctor. Alzheimer's disease progresses slowly and any sudden change in behavior probably happened because the person is sick.

Common causes of these sudden behavior changes are:

- ★ infection, such as a urinary tract infection
- ★ dehydration
- ★ constipation or diarrhea
- ★ a broken bone
- ★ Be sure shots for tetanus, flu, and pneumonia are up-to-date. For those on Medicare, flu and pneumonia shots are covered.

NEXT ISSUE...RESOLVING DISPUTES—COMMUNICATION WHEN PROVIDING CARE