

Caregiver Assistance News

“Caring for You - Caring for Others”

Area Agency on Aging District 7, Inc.

*Serving Adams, Brown, Gallia, Highland, Jackson, Lawrence, Pike,
Ross, Scioto and Vinton Counties in Ohio*

www.aaa7.org **Helping You Age Better!**



MAY 2013

Understanding Difficult and Combative Behavior *Behaviors Caregivers Find Especially Difficult*

There are some behaviors that caregivers find especially difficult. Not all people with Alzheimer’s disease (AD) have these behaviors; however, it is likely that the person in your care will have one or more of these problems during the middle stage of AD. It is important to try to understand why the person may be behaving in ways you find difficult, and learn how to avoid making them worse.

Agitation

The term “agitation” covers a group of different, but related, behaviors. Very mild agitation may seem like a personality change in which a person acts in ways that are uncharacteristic or inappropriate for them, such as being very stubborn, worried or nervous. More severe agitation can be disruptive or even dangerous. Agitated behavior can start in the early stage and grow worse in the middle stage of the illness.

An agitated person may seem to be uneasy and become irritable, anxious and moody. The person may be unable to sleep, pace constantly, move around restlessly

checking on doors and tearing paper, or even curse or use threatening language.

If a person with dementia has recently become agitated for the first time or acts unlike their usual self, the first thing to check for is a medical or physical problem.

People with dementia are very sensitive to the environment they live in. They are less able to handle changes, uncertainty, and other situations that they could manage when they were well. Being in a strange place may cause agitation. Even a positive event, such as a wedding, can feel overwhelming to a person with AD and can lead to agitation. If the person in your care has had a recent hospitalization or other major life change, expect to see some agitation or other expressions of stress. It is important to evaluate the person’s environment to see if it is causing problems that may be adding to the agitation.

Note

Don’t forget that what used to bother the person in your care



probably still will. While agitation may be a symptom of the illness, remember that you may have done something to offend the person that would have been distressing even before they became ill with Alzheimer’s. If you realize you did something that has upset them, apologize.

Note - Rough Language

Sometimes, people with AD use offensive language, which they never would have used before they became ill. Don’t be offended - it is the disease speaking. Try to remind yourself that these embarrassing behaviors are symptoms of the illness. If the person with AD understood what they were doing, they wouldn’t do it.

Loneliness, Not *Being Alone*, Linked to Dementia Risk

Feelings of loneliness in the elderly are associated with a big increase in the risk of dementia.

A number of factors have been linked to Alzheimer’s disease and other forms of dementia, including advanced age and depression. To determine the role of social isolation, researchers studied participants in the Amsterdam Study of the Elderly for three years. They found that social isolation was not linked to dementia; however, feelings of loneliness were linked to dementia.

People who said they felt lonely were 64 percent more likely to be diagnosed with dementia three years after initial assessment. The scientists suggest several possible explanations for their findings; for example, feelings of loneliness could be an early warning sign of preclinical dementia, or loneliness could itself affect mental processes, including memory.

Source: *Journal of Neurology, Neurosurgery and Psychiatry, December 10, 2012*

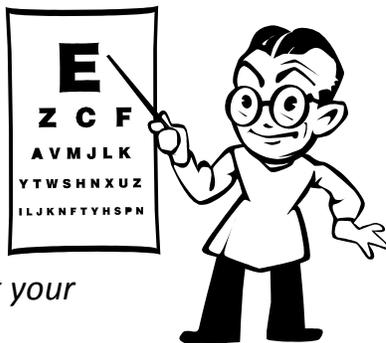
Paranoia

Paranoia in people with Alzheimer’s disease appears as unrealistic beliefs, usually of someone seeking to do them harm. They may hoard or hide things because they believe someone is trying to take their possessions. These symptoms can be very distressing both for the person with AD and their caregiver. Remember, what the person is experiencing is very real to them. It is best not to argue or disagree and try not to take it personally. In this situation, it is best to offer to help the person find the missing item. It will not be helpful to try to convince them that their explanation is wrong or based on their poor memory.

When these behaviors do not respond to supportive caregiving techniques, it may be necessary to consider medication, especially if the person is very upset or places themselves or others in danger because of their symptoms. These symptoms are sometimes caused by depression, which often accompanies Alzheimer’s disease. Consult with the physician.

Don’t Fall - Be Safe! **May is Eye Health Month**

Aging is associated with some forms of vision loss that increase the risk of falling and injury. People with vision problems are more than twice as likely to fall as those without visual impairment. Have your eyes checked at least once a year and update your eyeglasses. For those with low vision, there are programs and assistive devices that can help. Ask your optometrist for a referral.



Have You Had a Change of Address or Change in Your Phone Number within the Past Few Years?

If so...please contact us to make sure we have your correct and updated information on file.

Please call Vicki Woyan with the AAA7 Caregiver Support Program at 1-800-582-7277, extension 215, or e-mail vwoyan@aaa7.org.



“Be as much about what you ignore, as what you adore.”

Taking Care of Yourself

Coping with Caregiver Stress

Stress occurs as a result of too many pressures that demand too much of you. The stress of caregiving can be overwhelming when you feel you have too many responsibilities and not enough support. If you feel very guilty, resentful, sad and frightened, or just in over your head all the time, your stress level will be high.

It is natural for caregivers to experience these feelings from time to time. If you develop ways of coping with the demands of caregiving, and are aware of your level of stress, you will know when to seek more help, information, or time off. When you do not pay attention to your level of stress, you may ask more of yourself than you can give. If this “wear and tear” continues, you may become depressed, ill, isolated, and unable to provide care for the person with dementia or yourself.

Call your local Area Agency on Aging at 1-800-582-7277 and ask about the Family Caregiver Support Program.



Upcoming Alzheimer's Association Workshops

Understanding and Dealing with Alzheimer's Disease or Another Dementia

alzheimer's
association®

These programs will provide an opportunity for families and caregivers to learn and ask questions about Alzheimer's disease and dementia, while receiving support from others in similar situations. You are invited to attend any or all of the programs listed below. Programs are free of charge. No registration required.

Scioto County - Best Care Nursing and Rehab in Wheelersburg from 2:00 pm - 3:30 pm

Remaining Topics: June 11th - Dealing with Behavioral Challenges • August 13th - Caregiver/Family Stress and Grief
October 8th - Safety Considerations • December 10th - Activities and Interaction

Gallia County - 2881 SR 160 (HMC Thaler Building) in Gallipolis from 1:00 pm - 2:30 pm

Remaining Topics: May 21st - Communication • July 23rd - Dealing with Behavioral Challenges
September 24th - Caregiver/Family Stress and Grief • November 19th - Safety Considerations
January 28, 2014 - Activities and Interaction

What Families Need to Know...When the Diagnosis is Alzheimer's or Related Dementia

This series of educational sessions provides an opportunity for families to learn and share together in an informal setting. Topics are presented by experts in their fields, including physicians, nurses, social workers and attorneys. Session topics include: The Nature and Progression of the Disease, Changes in Communications and Behavior, Legal Planning for Families, and Family Coping Strategies and Community Resources. The two-part series is free of charge, but reservations must be made in advance. Please call the number listed at the bottom of this box.

Adams – August 19 and 26 from 1:00 pm - 4:00 pm at Adams County Regional Medical Center in Seaman

Highland – September 23 and 30 from 5:30 pm - 8:30 pm at Highland District Hospital in Hillsboro

Jackson (for Gallia/Jackson/Vinton Counties) – July 10 and 17 from 12:30 pm - 3:30 pm at Holzer Medical Center - Jackson

Scioto – August 14 and 21 from 1:00 pm - 4:00 pm at the Vern Riffe Community Center in New Boston

For more information about these programs and other similar programs available in or near your community, or for assistance with registering, please call Melissa Dever, LSW, from the Alzheimer's Association, at (740) 710-1821.



Area Agency on Aging District 7, Inc.

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Website: www.aaa7.org • E-Mail: info@aaa7.org • Facebook: www.facebook.com/AreaAgencyOnAgingDistrict7

Your local Area Agency on Aging District 7, Inc. serves the following counties in Ohio: Adams, Brown, Gallia, Highland, Jackson, Lawrence, Pike, Ross, Scioto and Vinton. Services are rendered on a non-discriminatory basis. Those interested in learning more about the services provided through the Area Agency on Aging District 7 can call toll-free at 1-800-582-7277. Here, individuals can talk directly with a nurse or social worker who will assist them with information surrounding the programs and services that are available to best serve their needs. The Agency can also be reached via e-mail at info@aaa7.org.

Dementia Care - Time to Stop Driving? _____

Signs that a person is no longer a safe driver include:

- Braking often for no apparent reason
- Missing signs and signals and becoming angry easily
- Swerving in and out of lanes and becoming lost in familiar places
- Crashes or dents on car
- Not reacting to traffic signs or driving too fast or too slow
- Turning around to talk to the person in the back seat and forgetting that they are driving.



If the person with Alzheimer's is unwilling to stop driving when it is apparent to others that it is necessary, then someone needs to step in and make the decision for them. It is generally more emotionally difficult for men to stop driving than for women.

It may be easier for a respected professional, such as the doctor, or family friend, to inform the person about the end of their driving. This may feel more comfortable to the family who will be the receivers of the feelings of anger, loss, and even betrayal from the person with dementia. If necessary, the family may have to hide the keys and disable, or even sell, the car to prevent the person from driving.