

UCSF Weill Institute for Neurosciences

Memory and Aging Center

Managing Dementia-related Behaviors While Sheltering in Place

Family Caregiver Webinar Series –Coping with Dementia Care During the Coronavirus Pandemic

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Who we are

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Dr. De May participates in the multidisciplinary comprehensive evaluation of new patients and research participants, as well as providing ongoing care



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Clinical work and research focuses on behavior symptoms in dementia and strategies for promoting family caregiver health and well-being



Objectives

- Describe the impact of dementia on changes in personality and behavior
- Explore non-pharmacological and pharmacological strategies for managing behaviors such as agitation, resistance to care, delusions, sleep disruption, and wandering while sheltering in place
- Identify community resources that can be helpful to caregivers dealing with challenging behavior symptoms

Patient and Caregiver Example #1

Describe	Investigate
<p>79-year-old man with mild dementia (likely due to strokes and likely Alzheimer's disease) He wakes up at 4 AM and cannot go back to sleep. He wakes up his wife caregiver and wants to get dressed and go out</p>	<p>Patient: Used to attend day program 3 days a week but program has been closed for many weeks due to SIP. Likes to drink beer at 3 PM Goes to bed right after dinner He doesn't take any sleeping medication</p> <p>Caregiver: States she wishes she could sleep through the night</p> <p>Environment: Little structure or activity during the day</p>

Care Planning

Create

- Increase daytime and evening activities
- Consider hiring a caregiver to promote daytime activity
- Change dinner time to later in the evening
- Offer non-alcoholic beer instead (he may not notice it's non-alcoholic)
- Set clocks to an earlier time
- As evening approaches, close the blinds and turn the lights on "Vegas approach"

Evaluate

- Check in with caregiver in a week to assess status
- Consider a trial of melatonin and if that isn't effective consider a sleeping medication such as Trazodone

General Principles

A structured daily routine can be a source of comfort

Lessening the negative impact of the behavior is often the appropriate goal

Acknowledge the person's cognitive and functional abilities and adapt as things change

Communication is a key ingredient

There are going to be good and bad days

Behavior management requires the use of non-pharmacologic strategies

If a medication is warranted, start with one at a time

Sudden and abrupt changes in cognition and function may signal an acute medical condition

Promoting your health and well-being is essential

Tips from the Family Caregiver Alliance

www.caregiver.org



- We cannot change the person: work on accommodating not controlling the behavior
- Check with the doctor regarding behaviors
- Behavior has purpose
- Behavior is often triggered (by disease, the environment, etc)
- What works today, may not tomorrow
- Get support from others

DICE: A model for managing behavioral symptoms



DESCRIBE = BEHAVIOR



**INVESTIGATE = caregiver, environment,
person with dementia**



CREATE THE PLAN = GENERAL PLAN IDEAS



EVALUATE = did it work?

Patient and Caregiver Example #2

Describe	Investigate
<p>85-year old man with Parkinson's disease dementia having multiple falls (1-2 times a day typically when getting up from his chair).</p> <p>He is more impatient, irritable, and verbally lashes out at his wife caregiver more frequently since the shelter-in-place</p>	<p>Patient: He is losing function and trying to keep his independence. He is sensitive to criticism.</p> <p>Caregiver: She is saddened by her husband's irritability and how it is directed at her. She tries to reason with him regarding his need for assistance.</p> <p>Environment: There is a hired caregiver in her 70's who comes 3 days a week. She is unable to help with physical tasks yet serves as a companion to the patient</p>

Care Planning

Create

- Consider support for the wife via an online/telephone support group or individual counseling. Provide her with 24/7 Alzheimer's Association Helpline
- Coach wife on strategies in communication (e.g. avoid reasoning, offer praise)
- Consider having the hired caregiver engage in gentle exercise with patient (Consider Sit and Be Fit)
- See if hired caregiver could come more often

Evaluate

- Contact wife in 2 weeks to assess status.
- Consider whether patient would benefit from an antidepressant

Patient and Caregiver Example #3

Describe	Investigate
<p>69-year-old woman with Alzheimer's disease who has had several episodes of wandering away from home. On one event she was eventually found 20 miles from her home. She has walked into her neighbor's homes. She has a delusion that certain family members are trying to poison her.</p> <p>The patient's son and daughter-in-law are the primary caregivers and other family members are involved.</p>	<p>Patient: forgetful and has delusions that her family is trying to poison her. She skips some of her meals.</p> <p>Caregivers: Son seems depressed and daughter-in-law is frustrated. They express doubt that they can do anything to keep the patient from wandering away from home</p> <p>Environment: The neighbors have expressed concern about the patient's lack of awareness regarding social distancing and some of them find her intimidating. No structured schedule to the day</p>

Care Planning

Create

- Safe Return program along with other tips for quick identification of patient should she wander (e.g. current photo, bright clothing)
- Monitor weight
- Engage patient in meal preparation to help reinforce the food is safe
- Consider an anti-psychotic given the patient's paranoid and distressing delusions.
- Suggest family create a schedule of supervision and structured activities such as walking, playing card games, etc)

Evaluate

- Consider APS referral if family is unable to make any progress toward protecting patient's safety. APS may be able to suggest local services to help family and protect patient's safety

Patient and Caregiver Example #4

Describe	Investigate
<p>78-year-old man with advanced Alzheimer's disease. Is incontinent or urine and wears adult diapers. Used to attend a day program 3 days a week but has been home fulltime during the SIP. Has been pushing wife away and tells her to leave him alone during personal care and bathing.</p>	<p>Patient: Has stopped going into the bathroom and will urinate in his adult diaper.</p> <p>Caregiver: Misses the respite she used to have with the day program. Is considering hiring an aide although worried about potential coronavirus exposure.</p> <p>Environment: Wife sets up activities for her husband to do. Music seems to have a calming effect on him.</p>

Care Planning

Create

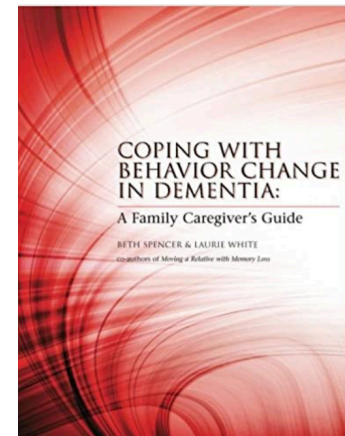
- Consider a toileting schedule
- Try playing music in the bathroom or singing together as a distraction during personal care
- Try placing an extra incontinence pad inside the adult diaper for better absorbent and clothing that is easy to remove such as PJ or sweatpants.
- Ensure the bathroom is warm and all care items are ready and in place for use
- Assess different strategies for communicating with husband during personal care

Evaluate

- Provide linkages to local home care agencies to explore options regarding hiring help in the home

Resources: Behavior Management

- **Alzheimer's Association** 24/7 Helpline 1-800-272-3900
- **UCSF Memory and Aging Center** website:
<https://memory.ucsf.edu/caregiving-support/behavior-personality-changes>
- **Family Caregiver Alliance:** Fact and Tip Sheets:
<https://www.caregiver.org/caregivers-guide-understanding-dementia-behaviors>
- **Coping with Behavior Change in Dementia** by
Beth Spencer & Laurie White



Let's Review

- Behavior has meaning
- Communication is key
- Behavior management requires the use of non-pharmacologic strategies
- Protecting caregiver health and well-being is essential

Please write your questions in the Q&A box at the bottom of your Zoom screen, and share any tips and strategies that have worked for you and your loved one.



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A recording of this webinar can be found on our
website:

<https://memory.ucsf.edu/covid>