



## How to Choose Memory Support Services

Dementia is a brain/memory disorder that seriously affects a person's job or lifestyle, including difficulty doing familiar tasks such as cooking, driving and paying bills on time. There may be a change in personality, problems with language, forgetting common words, or disorientation and frequently getting lost.

Alzheimer's Disease (AD) is the most common form of dementia among older people; it involves the part of the brain that controls thought, memory and language. It is progressive and degenerative. The disease usually begins after age 60, risk goes up with age, and nearly half of those over 85 have symptoms. However, researchers remind us that AD is "not a normal part of aging."

It is named after a German doctor, Dr. Alois Alzheimer, who in 1906 found abnormal clumps and tangled bundles of fiber in the brain of a woman who had died of an unusual mental illness. Scientists have also discovered that in people with AD, nerve cells die in the areas of the brain relating to memory. This affects cognitive functioning and lowers levels of the chemicals that carry messages back and forth between nerve cells. Research has not fully disclosed the causes of AD.

### Knowing What to Look For

When you see a loved one only on holidays and special occasions, it may be harder to detect problems. Couples often cover for one another, and when the family visits irregularly it is easy to miss the changes. Mental deterioration has "patterns of consistent neglect," according to *The Complete Eldercare Planner*.

Things to watch for in your loved one include:

- Are there problems with walking, talking, eating, dressing, managing medications?
- Has their appearance become sloppy?
- Have they quit bathing or cleaning their teeth?
- Are there stacks of mail around?

### Further information is available online at:

[www.alzheimers.org](http://www.alzheimers.org), Alzheimer's Disease Education & Referral (ADEAR) Center  
[www.alzfdn.org](http://www.alzfdn.org), Alzheimer's Foundation of America  
[www.alfa.org](http://www.alfa.org), Assisted Living Federation of America  
[www.seniorresource.com](http://www.seniorresource.com), The "E-cyclopedia" of housing options and information for retirement, finance, insurance and care

- Have the bills been paid? (If you call and the phone has been disconnected, go at once!)
- Are there changes in appetite?
- Curtains drawn all the time?
- Lack of interest in friends or activities?
- Depression?
- Abuse of alcohol?
- Loss of reasoning skills?
- Loss of short-term memory?
- Forgetting how to do simple things?
- Wandering?
- Incontinence?
- Sleeplessness?

Experts suggest you seek help, but not jump to conclusions. If several of these things are going on with your loved one, you might make an appointment and talk to their doctor to see if medications or a medical condition might be causing the unusual behavior. Dementia may be caused by stress, depression, nutritional deficiencies, Parkinson's disease or other illnesses. When help is clearly needed, go with your loved one to seek a professional evaluation.

## Adding Memory Support or AD to the Caregiver's Job

If you choose to care for your loved one with memory loss or AD at home, there are a number of issues to consider:

- Can you make the home secure and safe?
- Can you hire nurses, home health aides or companions to come into your home to help and provide respite care for you, the caregiver?
- Is there a nearby adult day care center for memory-impaired seniors?
- Are there opportunities for interaction with others, and mental stimulation for the AD patient?
- Is off-site respite care for the patient available?

In the early stages of dementia-related diseases, home care may be the best option. As driving ceases and other losses of independence occur in the progression of the memory loss, the caregiver may have to look into a special memory care or Alzheimer's residence, assisted living or skilled care.

## Practical Tips for Caring for People with Memory Loss or AD

- Talk with family and friends as soon as you know the diagnosis and continue to communicate.
- Ask for and accept practical help.
- Try to keep a balanced schedule for you and your family member.
- Learn everything you can about the disease.
- Simplify the environment for your loved one.
- Do things slowly for the affected person.
- Distract if there's confusion.
- Acknowledge the disability.
- Treat the person with dignity.
- Praise the person for what they can do.
- Avoid confrontation.
- Be sure the person has something to do.
- Keep your sense of humor intact.
- Acknowledge the person's feelings.
- Don't threaten abandonment.
- Reassure if the person shows fear.
- Use lots of physical contact – touching, hugs – to show things are okay.
- Know that fantasy may be a coping device.
- Use person's name when speaking to them.
- Avoid memory questions to limit frustration.
- Approach the person from the front to avoid surprise or fear.
- Use repetition.
- Use statements instead of questions.

- Make positive statements unless it's a safety issue.
- Use specifics like chair and table, instead of it or there.
- Break tasks into smaller parts.
- Allow time for a damaged brain to understand and process information.

## Choosing a Special Care Community

When you choose a new environment for your family member, whether it's at a continuing care retirement community, free-standing assisted living community, skilled care or specific memory care and Alzheimer's community, there are a number of questions to ask:

- Is it specifically designed for memory care and Alzheimer's patients?
- Does it provide for safe wandering indoors and out?
- Is the overall lighting even?
- Are there personal private areas?
- Are there colors or other cues to define areas?
- Are the bathrooms identifiable and safe?
- Do the furniture arrangements encourage interaction?
- Are there private places for the family to interact with the patient?
- Are there opportunities for nurturing?
- Is it comfortable and clean?
- Is the location convenient for you and your family?
- Who does the initial assessment of your family member?
- How often are subsequent assessments done?
- Are behaviors accommodated without the use of restraints?
- Is there a full daily schedule for residents?
- Are current residents active?
- What's the philosophy of care?
- What training does the staff receive?

Unless the community has specialized memory loss and/or Alzheimer's facilities, transfer to another unit or facility as the disease progresses will be required. Federal regulations require any long-term care home or community to provide 30 days' written notice and an appropriate discharge plan. They cannot just tell you verbally you must relocate your loved one.

An individual with Alzheimer's disease or a related memory loss may no longer have the capabilities to initiate or manage important legal documents such as a living will or health care proxy. You may want to talk to your legal advisor about becoming your loved one's guardian.

*Resources: Web sites listed in article; "A Practical Guide for Caregivers of People with Dementia, a Dean's Scholar Project (2004-2005)" by Sara Price and Louisa Young, under the direction of Dr. Nancy Pachana (Australia); Loverde, Joy. The Complete Eldercare Planner, Updated and Revised, 2009, Random House; "How To Say It To Seniors: Closing the Communication Gap with Our Elders" by David Solie, M.S., P.A.*

