Tips for Managing Patient with Dementia

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Problems with Cognition

- Disorientation
  - provide only the orientation that the person needs to remain safe in the setting (e.g., person, place, situation
- Learning and retaining new information
  - Patients with dementia have difficulty remembering recent conversations; expect to repeat information often
  - May misplace objects in the room and become fretful
- Handling complex tasks
  - Often have difficulty following complex train of thought; keep things simple and use one-step commands
  - May struggle with task completion; be patient and slow down
- Reasoning ability
  - Become overwhelmed when confronted with too many choices; offer limited choices
  - Have difficulty receiving, processing, and responding to environmental stimuli
- Behavior
  - May be more passive and less responsive
    - may be more irritable than usual
  - May misinterpret visual or auditory stimuli
  - May be noisy and disruptive

Hazards

- Rooms or bays loaded with equipment serve as a source of stimulation
- Proximity to the nursing station for monitoring places the patient close to sources of high levels of noise and activity
- Diagnostic and treatment activity that often involves a lot of testing and interaction contributes to high levels of stimulation
- Unpleasant activity, which is often associated with diagnostic intervention, is also associated with higher levels of agitation
- Providing support to people with functional dependence places care providers at higher risk for injury, especially when it involves support to meet personal cares

Interaction Strategies

- Reorientation efforts must be continuous to be effective
- Focus on critical information in the most basic manner
- What does the patient need to know to be safe?
- Time is relative; focus on relationships to ordinary events when offering orientation cues
- Environmental events are perceived as vague threats
- Information needs to be concrete; avoid slang terms and abstract comparisons (e.g., is it a shooting pain?)
- Excessive use of the word “no” increases resistance, use positive phrases (e.g., you can wait here)
Communication Strategies

- Let the patient know when you need to touch them, tell the patient what you are doing and why
- Tell the patient exactly what you want them to do using one-step commands which are simple, concise, and concrete
- Make eye contact to make sure you have the patient’s attention
- Use other signals besides words to convey what you mean; point, touch or demonstrate; gestures can assist with comprehension
- When you don’t know what they mean, ask the individual to point to it, describe it or show you how it works
- Do not use words such as ‘on’, ‘below’, ‘beside’ or ‘between’ because these words are difficult for the patient with dementia to understand
- Identify the patient’s vocabulary and use it
- Introduce yourself each time you interact
- Use the person’s name, role (e.g., daughter), or object (e.g., pillow) to be more specific
- Speak using a calm, soft slow voice pattern; patient’s respond more to your manner than the actual content of what you say
- Allow more time for the patient to process information; if the patient doesn’t respond to your initial comment or question, repeat it exactly to avoid increased confusion
- Repeat what the patient says and state your response rather than use vague reaffirmations
- If the person is having difficulty finding the right word, supply the word or offer a choice using 2 selections to limit frustration (avoid being intrusive and completing their thoughts)
- In offering choices for action, put the actual choices in the last half of the question (e.g., ‘drink water or milk’ versus ‘water or milk to drink’) to simplify the question
- Avoid arguing or reasoning, these are power struggles that only increase the patient’s anxiety and lack of confidence in navigating the environment
- Patient’s may confuse current information with information from the past (who are they talking about and what is the agenda for that person)

Reduce Stimulation

- Move slowly and avoid overwhelming the patient physically or verbally
- Eliminate other distraction when seeking compliance with specific requests
- Eliminate extraneous and competing noises
- Minimize commotion at change of shift or hand-offs
- One provider talking at a time
- Remember that your emotional response in the interaction can be a source of stimulation