People living with dementia need person centered care, focusing on the whole person rather than the disease will help to achieve this.

Everyone with a diagnosis is different, even with the same type of dementia each person will be impacted in a different way. Similarly for the people caring for them, no two unpaid carers are the same either.

These hints and tips have been collated through many interactions with people living with dementia and their unpaid carer. Hopefully these will help to understand and increase knowledge on the dementia journey.

**Facts**

Dementia is the umbrella term for several diseases affecting the brain. Dementia is a disease, just like any other, *it is not a normal part of growing old*. Dementia can affect younger people i.e. those under 65. There are currently over 100 known types of dementia. Not everyone has or goes through the same symptoms.

*Alzheimer’s* is the most prevalent, followed by *Vascular*, then there are others such as *Lewy Bodies, Picks, Korsakoffs and Posterior Cortical Atrophy*.

Around 40% of those with dementia are not diagnosed. Around 65% of all diagnosed are female. In Great Britain 1 person is diagnosed every 3 minute. Currently worldwide,1 person is diagnosed every 3 seconds.

**Spatial Awareness** can be a challenge for some people living with dementia. Some helpful tips are:

* Different floor coverings may cause issues. For example, walking on a floor where a carpet changes colour may be seen as a barrier, and the person with dementia may hesitate to cross over.
* Carpets with patterns can cause “fears” to arise. Carpets with swirls may be seen as snakes, and large flowery patterns could be insects or animals.
* Walking from one type of flooring to another may again cause issues, such as carpet to laminate or tiles, again it becomes a barrier.
* Black mats in supermarkets and shops, could be seen as a black hole, and the person with dementia may walk around rather than across.
* Shiny floors may be taken as water or ice.
* Hatched areas, such as in disabled parking areas may be seen as nets, and the person will be reluctant to walk there in fear of falling through.
* Tiles can be misread as steps or gaps, resulting in the person wanting to “step over” the gaps.
* White crockery blends into a “ball” of white, therefore very difficult to distinguish between cups, plates, tables. In later stages coloured crockery is useful, but total colour not plates which have a coloured ring, as this is seen as a hole, and they would feel that food/they would fall through.

**Communication**

* Always speak to the person from the front, even though you may have just spoken to them, they will probably have forgotten, try not to speak from behind them or from the side, this can startle them.
* Use short simple statements, in a childlike, but not childish, way. Sometimes using body language can help, as it is not always the case that they would understand your words.
* At times you may need to be assertive, but again short statements.
* Offer limited choices in closed questions, for example if you know they like tea, instead of asking what would you like to drink? Ask do you want a cup of tea?
* Remember that it is the short-term memory that has disappeared. Long term memory, events and history are stored in the brain differently so people living with dementia can recall historical memories better than short term information.
* Try not to dispute any questions, statements or information that are incorrect as this will cause confusion, try to go along with the conversation, or divert, or change the subject. Correcting the person living with dementia may cause distress, if you can be present in their world because that is what they know and believe to be correct.

**Hearing**

It may appear at times that the person with dementia is deaf, this may be the case, but sometimes it is the dementia making it appear that deafness is an issue.

It may mean that the person needs extra time to understand a question or statement, then a few seconds more to think of an answer, plus even more time then to put the answer into words. If you think a person has dementia do not bombard them with repeated questions. Sometimes hearing could be hyper sensitive so loud noises become even louder.

At parties and other occasions such as Christmas and weddings, always try to have a quiet area available. Try to have a timetable, or a rota for relatives to visit, as too many all at once can cause agitation and confusion. Always make sure that anyone visiting are aware of the problems. Also be aware that noise such as loud music can have a profound effect, as can flashing and/or bright lights.

**Eating and drinking**

* It may be that the person will eat whatever is available, simply because they have forgotten they have eaten. Even after a meal they may want to eat another person's food. It can also be the opposite, someone has forgotten to eat, or thinks they have already eaten. Neither is easy. One tip could be to offer small meals, finger food, such as small sandwiches, pieces of fruit etc.
* There may also be a possibility of “cramming” which happens when the person has “lost” the ability to chew and/or swallow, and simply fills the mouth with food. When this situation arises don’t leave them alone as there is the possibility of choking (make sure you know what to do if this happens). Try small meals and if possible liquidise.
* Drinking is very important as being dehydrated can cause other medical problems and can also offer symptoms of delirium and confusion.

**Sequencing, familiarity and routine**

To make a cup of tea sounds simple right? When you think about it, there are many steps to this “simple” operation, and if one of the parts is missing the cup of tea will not happen. For instance not putting water in the kettle, not switching it on, no tea bag in the cup, not putting milk in the tea. This sequencing applies to almost everything we do walking, eating, dressing, speaking, so it is very important that we all understand that simple things can soon turn into the most difficult.

If you have plain cupboard doors in the kitchen, they may blend into the walls if similar colours. It could help to take a photo of the inside, print it out and put it on the cupboard door so the person living with dementia knows which cupboard it is.

It is equally important that a routine is in place, offering the same things at the same time every day, even visitors if possible. Having items in the same place such as furniture, ornaments, books etc wherever possible will help the person living with dementia. Moving things around feels like a major disturbance and change is difficult to cope with.

**Washing and dressing**

Personal hygiene, including shaving, can become a problem, usually the answer is best applied by a stranger or visitor, by way of suggestion. Never “force” the issue as this can increase agitation.

Regarding change of clothes, familiarity and the “comfort blanket” are common, with people wearing the same clothes for some time, usually because they feel comfortable, easy to put on, easy fasteners etc, A great tip is to buy several items the same, so that they are unaware of any changes.

**Socialising**

It is really positive for the person living with dementia and the person providing their care to have a social life. This will help both to avoid becoming isolated and withdrawn.

Peer support is really valuable, if you can find a local group go along. Both will benefit from being with other people in a similar position. There are plenty of local, regional and national groups available.

**People from the past**

Sometimes conversations can be about those who have passed away. Never tell someone that a relative/friend has passed away, as each time you do the grieving process will begin. They will still be thinking of them as being alive, and their mental picture is of a different age, possibly from when they were much younger. If they want to know where they are tell them that they are working on holiday or unable to find transport.

Photographs are an excellent distraction, but remember older photos, not current as they may not recognise the person as they are now.

**Triggers**

Sometimes problems, agitation, aggression, upset, are caused by “triggers”. These triggers could be created by smells, sounds, visitors, certain foods. When there are problems, it is best to try to keep a diary of what happened shortly before an episode, including the conversation, what had just been eaten or drunk, who was in the house etc. After a while it will be easier to work out the trigger.

**Behaviour**

We all have our own standards and sometimes the person with dementia can step over their own, and your boundaries. If this happens the best solution is to ignore whatever has happened and continue as normal without commenting as this can cause distress later. This is due to the brain storing different information in different places. For example the person living with dementia may have never been heard to say a swear word but does since having dementia.

**Pain**

Pain isn't always easy to distinguish, especially as the person living with dementia may not be able to communicate, they are in pain, or feel pain as we do. You can usually sense the problem from facial expressions, eating habits, plus they may say they feel ill, odd, strange, not well, but may not be able to tell where the pain is. Remembering long term memory, you can always ask where it hurts rather than where the pain is.

**Incontinence**

If incontinence becomes an issue, please contact your GP to request a referral to the continence team. It can be difficult to cope with so please ensure you are supported.

**Other issues**

* Mirrors can be a problem as the person does not recognise themselves, as they “see” themselves from years ago and this is the image they expect to see, not a “stranger”. This has been seen as having someone else in the house, burglars, strangers, even accusing partners of having affairs, and it has been known for the police to be called several times owing to being “broken in”, especially when items have been moved by the person and they have forgotten where it is.
* Never argue with the person, always “go with the flow”, any questions they pose will quickly be forgotten, and if disputed will cause confusion or possibly aggression. If agitation or aggression rises, try not to let the situation escalate, try to change the subject, or if necessary, walk away into another room for a few minutes.
* Toilets can cause problems, especially public toilets. If the toilet facilities are all white, this will be tricky. Men may try to find the corner rather than use a urinal.
* Many toilets have entry signs, but hardly any have exit/way out signs, which can cause panic and disorientation. Always a good idea to obtain a radar key for the disabled toilets.
* Signs can be difficult, black print on white is hard to read. Black text on a coloured background (yellow is great) works better. If you can consider using lower case letters not capitals, remember we began with lower case at school.
* Using arts, crafts, books, puzzles etc are all good for short term concentration. Ensure there are different things to do, a bit of a pick and mix. Sometimes reverting to simple games can help even using things like picture dominoes rather than the numbers.
* **Aphasia -** This is the disability of understanding speech and the spoken word, sometimes different words may be used for items/objects, or even the ability to speak may disappear.
* **Dyspraxia -** This affects the “motor” movements such as walking and arm movements, owing to problems within the brain the messages are simply not getting through.
* **Body temperature -** Dementia makes the brain works very differently. You may come across someone on a very hot day wearing an overcoat, scarf, gloves and hat, because they are cold. The messages are telling them that they are cold, but in fact are very warm. In these cases make sure that they have plenty of cold drinks, rest and fresh air. Try to advise on reducing clothing but never force the issue. In cold weather the opposite may happen, again the reverse of the above, by ensuring that they have sufficient clothing to keep warm.