Caring for persons affected by dementia
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Health and Social Policies General Management - Service for the Planning and Development of the Social and Healthcare Services - Area for the Elderly and Disabled Persons as part of the integrated project services supporting the regularisation and qualification of domestic caregivers of the elderly and the disabled

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Alzheimer’s Disease is the most frequent form of dementia in industrialized nations. This disease (malattia) causes a slow, but progressive deterioration of an elderly person’s cognitive functions and physical capacities, including the loss of memory (memoria), reasoning, language skills, the sense of orientation, the ability to carry out routine daily activities such as managing a household, grocery shopping, selecting clothing and dressing, etc.

The memory of a person affected by Alzheimer’s is severely impaired. These individuals do not remember things and even the simplest actions become difficult. They sometimes repeat the same questions continuously and they may not even recognize their own relatives or close friends.

There are evident changes in the patient’s behaviour (comportamento). Family members or close friends may occasionally note something in these patients that seems strange to them, with behaviour that is inappropriate in situations or circumstances (because the dementia patient confuses persons or places and exhibits embarrassing behaviour). The patient may also display nervousness, restlessness or aggressiveness for no apparent reason.

Recognizing the early signals of this disease in a member of the family is a difficult matter, as is acceptance of the diagnosis. This is also because it is commonly thought that natural aging inevitably leads to the loss of many functions, including physical and mental skills. Actually, the deterioration of cognitive skills, which part of our culture continues to consider as a natural event, is in fact more often than we believe caused by various degenerative diseases, among which Alzheimer’s also figures. Family members are faced with a long and difficult road ahead, as changes in personality (indifference, lack of interest, irritability, mistrust, social isolation and depression) and cognitive impairment are the symptoms (sintomi) that are the hardest for family members to accept - it is painful not to be recognized by loved ones and to accept this situation. Over time, Alzheimer patients require constant assistance.
in personal hygiene, to dress, eat, go outdoors and in moving about their own homes. Learning and staying informed about the disease and its future course is very important for understanding the patient’s behaviour, for it makes it possible to identify the real problem and to understand what to do to help (aiuto) the elderly patient. Communication and empathy at the affective level (love, gentleness, caring, affection, smiles and kindness) are essential for a supportive relationship with the patient. Unfortunately, there are no pharmaceutical drugs that serve for complete recovery in the case of Alzheimer’s disease. However, there are drugs that can slow down the progressive course of the disease and reduce some of the symptoms, such as aggressiveness (aggressività), anxiety, delusions and hallucinations (allucinazioni), depression and problems with sleeping.

How you can help an elderly person who is suffering from loss of memory

Elderly persons with Alzheimer’s tend to remember things that happened many years ago, but they forget things that have happened recently, just a few days or hours before. For example, they may not remember whether they have eaten, get upset because they cannot remember the name of their caregiver, worry because they do not remember where the house keys are, or they may not remember what day, month or year it is.

In such cases, the caregiver should:

• Always respect the elderly person, remember that he/she is suffering from Alzheimer’s
• Be calm and reassuring; do not lose your patience (pazienza)
• Suggest that the family contact a dementia care centre, if the patient can no longer be managed alone
• The care given must be of a practical nature. In other words, the caregiver should intervene with the aim of helping the elderly patient carry out daily activities, without taking over completely if the patient is still able to do (in grado di fare) something on his/her own.
Talking and communicating with elderly Alzheimer patients

Alzheimer patients gradually lose the ability to understand spoken and written language. They have trouble finding the right **words** (parole), make mistakes and mix words up. These problems make communication difficult. The caregiver must try to understand their **needs** (bisogni) and desires and to help them converse, the caregiver should:

- Stay calm, relaxed and cheerful
- Sit down facing the patient and try to understand what he/she is trying to say
- Do not criticize or ridicule the patient if he/she makes mistakes
- Look directly into the patient’s eyes
- Check for any physical problems, example: a need to go to the bathroom to urinate
- Do not shout or raise your voice because it could frighten the patient
- Try to understand even on the basis of the elderly person’s gestures
- Try to understand the elderly person based on his/her facial expressions: Is he/she **sad**? (triste) Angry? Worried? Feeling **pain**? (dolore)

The behaviour of the elderly individual with this disease can sometimes make him/her seem like a young child in need of attention and reassuring tender loving care. Some patients may like physical contact and thus holding the patient’s hand or a reassuring pat could be of help in caring for the patient. However, some patients may not appreciate contact of this sort. Therefore, thorough preliminary information about this aspect is required and can often be supplied by the family member who is closest to the patient.
How to approach personal hygiene with the patient

The patient has an increasing need for assistance with personal hygiene. He/she may have problems holding a bar of soap or remembering what the soap is used for. The patient may not understand what a faucet is or how to open it and also lose interest in taking care of themselves and their personal hygiene. When an elderly person has to bathe, there may be a fear of water or of falling in the tub.

The caregiver should:

• be relaxed and cheerful
• make the room where the elderly person bathes safe
• use water that is not too hot
• make the bathing routine pleasant, without forcing the patient because he/she could get angry - do not scold the patient
• use a mild, scented soap (sapone)
• use a soft towel and gently dry the skin without rubbing because elderly persons have very delicate and sensitive skin
• always check and clean fingernails and toenails (unghie) and remember to trim them.

It is not always easy for Alzheimer patients to dress themselves because of their loss of memory. They may not remember how to put on their clothes or how to button them. The caregiver should always check to ensure that the elderly patient looks tidy and well groomed - this can help to make the person feel better about him/herself.
How to approach diet and eating issues

Mealtimes can become difficult because the patient may not remember to eat or drink. The patient may not recall previous meals because of memory loss and ask to eat constantly. Some patients may not be able to hold or use a fork or spoon. If the case is severe, the patient may have problems chewing (masticare) and may keep food in his/her mouth without swallowing it.

The caregiver can follow these recommendations:

• prepare foods that the elderly person likes
• have the patient sit correctly - the patient should be comfortable and at ease
• let the patient eat with his/her hands if he/she wants to
• place a napkin on the patient’s lap
• do not scold the elderly patient if he/she gets dirty or if food falls on the floor
• remember to give the patient at least 8 glasses of water per day, tea (very little) and chamomile tea because the elderly tend to forget to drink
• cut the food up if the patient is unable to do so alone

Advice and suggestions for caregivers

• Some elderly persons affected by dementia may not recognize where they are, places such as their own home and the street where they live. They may walk for hours, wander for miles and get lost, without being able to remember their own address. For these reasons, the caregiver must be very watchful to prevent a patient from leaving home, as he/she may not be able to remember where he/she lives or how to return (strada) home.
• Some elderly dementia patients are unable to sleep (dormire) at night and remain awake. They become restless and get up from bed. It can help to offer some milk, let them move about and check to ensure there is no risk of falling or tripping, have them go to the bathroom and avoid naps during the day. Some patients are unable to distinguish daytime from night-time. Do not force the
Where am I?
elderly patient to stay in bed because this could make him/her angry and upset, and calming him/her down could become difficult. The doctor can be called if the patient is not sleeping well or not sleeping at all.

- As the disease progresses, the dementia patient may also suffer from urinary incontinence (incontinenza) (the patient does not feel as if he/she has to urinate (pipi) or no longer understands when, is unable to verbalize it, or can no longer find the toilet). Help the patient change clothes if he/she wets him/herself. Do not scold the patient because he/she needs help and may feel embarrassed and ashamed.

- It is important to monitor the elderly person’s bowel movements for regularity because he/she may be suffering from constipation (stitichezza). This problem can cause stomach aches and loss of appetite. If the problem persists, the doctor must be contacted.

- Call the doctor immediately and notify members of the family if you realize that the elderly patient is feeling ill, has a fever, has fallen and is moaning with pain, or is delirious.

**Daytime activities with the elderly patient**

The caregiver can keep the elderly patient company and help him/her to perform small tasks to keep him/her from feeling sad or bored.

Elderly persons may still be capable of:

- Taking walks (passeggiate)
- Folding laundry and dusting furniture
- Doing gardening if there is a garden
- Listening to music
- Keeping their hands busy with yarn, winding it into balls
- Sharing photographs
- If the patient has a cat, he/she can continue to keep the cat in the home; elderly persons like to pat pets.

The elderly deserve care and respect and the work of caregivers is considered to be very important in making elderly persons feel good in their own homes.