

Module 3: Maintaining Health and Function

Purpose: To provide patients and caregivers who are in the earliest stages of dementia positive information regarding things they can do to help maintain their health and function

Intended use: Patients with stages 2-3 dementia

Introduction:

While no one knows exactly what causes Alzheimer's disease or many other dementias, research suggests that maintaining good overall health may forestall symptom onset and perhaps slow disease progression. Healthful activities, exercise, good management of other diseases, and prevention of infections may help the person with dementia stay active and functioning longer. It therefore is very important the person with dementia and their family pay special attention to routine healthcare and exercise.

- **Key factors in maintaining health**
 - **Exercise** - Exercise is a key component in any program for healthy living.
 - Research shows that people who exercise at least 20 minutes a minimum of three times a week have better intellectual functioning, improved balance, fewer falls, and actually increase the amount of brain mass.
 - Research shows that age does not limit our ability to benefit from exercise. People can benefit from regular exercise well into their 90's and show improvement in heart function.
 - It is recommended that people – even those with dementia – participating in aerobic exercise a minimum of three days a week.
 - Aerobic exercises include walking; gardening; mowing the yard, vacuuming, dusting, dancing, swimming, and other activities that get the body moving.
 - Lifting weights and stretching exercises have not been found to have similar benefits.
 - **Pleasurable Activities** – People who remain active and engaged tend to be functional longer, have less depression, and fewer problems with behavioral symptoms
 - **Activities are thought to be the most important aspect of care for people with dementia!**
 - A variety of activities is important, however they must be activities enjoyed by the person with dementia. This may include mildly challenging activities such as those listed below:
 - Puzzles and other intellectually stimulating activities ;
 - Music activities;
 - Social interaction consistent with the person's pre-illness lifestyle;

- Particular hobbies or skills;
 - Home-making activities;
 - Intergenerational activities; and
 - Artistic activities.
 - Attending theater or concerts;
 - Going to flea markets;
 - Adapted travel*
- If an activity is enjoyable, holds the person's attention, and is safe, it should be encouraged
 - If the patient's favorite activities become too difficult, the family needs to find help with either simplifying the cherished activity or finding new ones to take their place. Occupational therapists, recreational therapists, and adult day programs can be sources of help in modifying or finding new activities the person with dementia might enjoy.
 - Watching television, movies, or DVD's are not always considered to be a meaningful activity and in *mid-stages* of the disease may actually cause illusions and misperceptions of the environment.
 - Use television in moderation for those programs that are special or appealing such as a favorite soap opera, sporting events, comedies, game shows or dramas.
 - Renting movies or having DVDs of old favorite shows can be an excellent source of entertainment. Those "I Love "I Love Lucy"" folks; maybe there's a way to say this efficiently)
 - The person with mid-stage dementia might think that things he/she saw on television happened in their home. A good "rule" for determining what is appropriate is to avoid programs with people you would never consider having to your home for dinner.
 - Later in the disease television images may actually produce the illusions of "children" or "intruders" in the house due to changes in visual perception
- **Preventive care and immunizations** –One of the first signs of illness in someone with any memory loss is often a condition called "delirium." Delirium is a sudden change in mental status where the person will change dramatically becoming more confused and the symptoms. Common causes of delirium are infections, medication reactions, sudden illnesses, pain, and poorly controlled chronic/ongoing illnesses. Episodes of sudden confusion can be frightening for both the person and their caregivers. If sudden confusion occurs, consider it a medical illness and seek a physician as soon as possible. Sudden onset confusion is serious and should not be allowed to continue.
 - One of the more common types of infections that cause sudden confusion is of the urinary tract. Often people with dementia do not drink enough fluid, or may not be able to cleanse themselves

adequately following toilet use. Urinary tract infection should always be ruled out when there is a sudden onset of confusion.

- One of the best preventions for common infections is immunizations. You should ask your family doctor about the following ones:
 - Influenza – Flu shots are given every year to prevent infection by the most common strains of flu virus. They are routinely recommended for people over age 65 and for those with chronic illnesses. Flu shots are recommended for people with dementia, especially those who may not wash their hands as often as possible or who participate in social or day care activities with other frail people.
 - Pneumonia – Given about every 6 years to prevent a common type of pneumonia
 - Tetanus - Immunizations should be updated every 8-10 years. People who are elderly often forget about risks associated with tetanus, however people with dementia may fall or have be more prone to accidents doing home repair, gardening, or other activities.
- The other critical way to prevent illness is to get into the practice of washing hands and using antibacterial hand gel throughout the day: before each meal; after using the toilet; and whenever hands are soiled.
- **Medication issues** – Taking medications incorrectly is the most common reason for hospitalization in older adults. Because of a decreased understanding of time and increased difficulty with complicated tasks, taking medications is an even greater potential hazard for a person with dementia – especially if the person takes more than medication more than once a day. It is strongly suggested families oversee medications by doing the following:
 - Use a dated and timed pillbox.
 - Have a family member fill the box and check every few days to see if medications are being taken correctly
 - Firmly but gently reinforce to the person that their medications must be taken regularly
 - If there is any question about medication mistakes or oversight administer the medications – even if the patient is early in the disease.
 - Be VERY careful about adding dietary supplements, vitamins, and other neutraceuticals (? Better term?) when a person takes medications as they may interact with prescribed medications and cause harm. As a general rule pharmacists have references where they can check for interactions. Take all medications and supplements to your pharmacist to check for potential dangers.
 - The medications for dementia must be given consistently. They are started at a low dose and increased after a few weeks. Stopping and restarting these medications must be done with the help of the prescriber. If the person with dementia is not taking the medications correctly, such as missing doses, discuss this with your prescriber.
 - For people with dementia who live alone

- Do not assume a phone call will really result in taking medications correctly
 - There are electronic devices that can dispense several doses of medications each day and contact family if medications are not taken
 - Ask prescribers to limit medications to only those that are absolutely essential and to decrease the number of times medications must be given during the day.
- **Diet – There are no special dietary regimens or supplements that have been found to help Alzheimer’s disease or other dementing illnesses.**
- A good balanced diet is recommended for all older adults including protein, fruits, vegetables, whole grain breads, and some starch (such as potato or pasta). This can be a problem if the person is no longer able to plan meals, shop, or prepare a balanced diet. Often eating at congregate meal sites is helpful because the person eats with others and needn’t worry about food preparation.
 - If the person does not eat adequate amounts or a variety of food, a general multivitamin can be helpful in maintaining nutritional status
 - If there is decreased appetite, try regular snacks of the person’s favorite foods.
 - Many people with dementia prefer to have five or six small meals each day instead of larger meals.
 - There is no advantage of using commercial nutritional supplement drinks over “real” food. If the person enjoys the milkshakes use the cheaper breakfast drinks (e.g. Instant Breakfast) mixed with whole milk.
 - If the person’s appetite wanes, begin to think about using higher calorie foods such as mashed potatoes with half and half and butter; macaroni and cheese; cheese and crackers; peanut butter, etc.
- **Fluid intake** – Many people with dementia do not drink enough fluid. This can lead to urinary infections, bladder irritation, and premature loss of urinary control. It can also lead to constipation. Offer fluids in any form frequently. Sweetened beverages are just as effective as water, however avoid caffeine and sports drinks.
- **Rest** – People with dementia often need more rest than before the illness. There are several ways to manage this:
- People with dementia do best when they are allowed to “sleep in” until they awaken naturally
 - Many people find a nap or quiet period of up to 90 minutes after lunch is helpful in maintaining energy and orientation later in the day. As the disease progresses additional brief naps or rests may be added if the person tires.
 - If the person is sleeping too much there are several common causes:
 - Depression – This must be treated medically by the doctor
 - Medical illness – This must be diagnosed and treated by the doctor

- Boredom or inability to start activities – By the time the person is unable to start activities on their own they often benefit from adult day programming or having someone help them to start activities that have been modified for success. Ask the doctor for either an occupational therapy or recreational therapy referral to provide help with developing new activities specific to the person’s changing abilities.
- There is a pamphlet available to help you plan travel that reduces stress for people with dementia.

NOTES:

Key Points for Maintaining Health & Function

1. Exercise doing something that moves the body for at least 20 minutes 3-5 times a week
2. Pleasurable activities are critical in maintaining health. If the person can not start them, either help to start activities or get professional help in redesigning them.
3. Medications are a common source of confusion and result in illness. Careful attention to medication-taking is key to maintaining health
4. Make sure immunizations are up to date and wash hands or use hand cleaning gel regularly
5. Eat a balanced diet but if appetite is poor try small frequent snacks of high calorie food
6. Try to have at least 1 ½ quarts of liquid each day, avoiding sports drinks and caffeine whenever possible
7. Get some rest during the day