Caregiver Assistance News

"Caring for You - Caring for Others"

Area Agency on Aging District 7, Inc.

Serving Adams, Brown, Gallia, Highland, Jackson, Lawrence, Pike, Ross, Scioto and Vinton Counties in Ohio

www.aaa7.org Helping You Age **Better!**

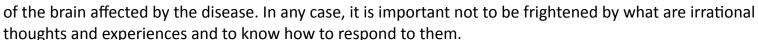


JULY 2020

Alzheimer's - Hallucinations and Paranoia

People with Alzheimer's disease (AD) may see, hear, smell, taste or feel things that are not really there. The most common hallucinations are those that involve sight or hearing. Some people with AD develop strange ideas about what is actually happening and may come to believe that other people want to harm them. This kind of belief is called a delusion.

These symptoms are usually thought of as being caused by mental illness, but they are actually fairly common in Alzheimer's disease, especially in the middle stage, although they can occur at other stages. There may be many causes mostly having to do with the parts





It is essential that you do not tell the person who is seeing or hearing things that you know what they see is not real because the things are real to the person. Reassure the person that you will keep them safe and try to understand the emotion behind the hallucination or delusion. This may be enough to enable the person to let go of these concerns, at least for the moment. If the hallucination is pleasant and the person is planning a birthday party, try to connect to them by joining in the fantasy. You do not need to say that you see or hear the same things but you can accept that the person does.

People with Alzheimer's may also become suspicious and may accuse someone of stealing from them when they cannot find something. When the person with dementia does not remember where they put something, the idea that it has been taken by someone may appear to be a reasonable explanation for its being missing. Tell them that you will help them look for it, and try not to mention the fact that he or she is the one who misplaced it.

Paranoia in people with Alzheimer's appears as unrealistic beliefs, usually of someone seeking to do them harm. They may hoard or hide things because they believe someone is trying to take their possessions. These symptoms can be very distressing both for the person with AD and for you. Remember, what the person is experiencing is very real to them. It is best not to argue or disagree. Try not to take it personally. In this situation, it is best to offer to help the person to find the missing item. It will not be helpful to try to convince them that their explanation is wrong or based on poor memory.

(continued on Page 2)

Hallucinations and Paranoia...continued from Page 1

When these behaviors do not respond to supportive caregiving techniques, it may be necessary to consider medication, especially if the person is very upset or puts themself or others in danger because of their symptoms. These symptoms are sometimes caused by depression, which often accompanies Alzheimer's disease. Consult with your physician, who may recommend an antidepressant medication. Other medications, called anti-psychotics, are frequently prescribed. They should be used with caution and sensitivity.

Source: The Comfort of Home for Alzheimer's Disease: A Guide for Caregivers

"Resistance" to Care

In the later part of the middle stage of Alzheimer's disease, when a person for whom you care seems to be refusing to cooperate with the activities of daily living, such as dressing or bathing, you may think they are resisting care. In fact, any time a person with Alzheimer's says "no", they may be labeled uncooperative.



People with Alzheimer's may get upset when somebody touches them. You may be trying to do something to

help, but they do not understand what's going on. They may be feeling uncomfortable, powerless, frightened, tired, in pain, or confused. They cannot say how they want to be treated.

Resistance has many components. Try to put yourself in the shoes of the person with Alzheimer's and you may be able to avoid causing resistance. You may be able to change your approach to reduce these responses and actually be able to help the person to cooperate with you.

In order to provide good care, you need to know how to respond to all the different ways in which the illness affects the person with dementia. This means that in many cases, the person shows you with actions what can no longer be communicated in words. So behaviors are more than behaviors. They are messages about ideas, feelings, and needs the person is telling you about in the best way he or she can.

TAKE CONTROL OF CHRONIC PAIN

join us for a **Telephone** Chronic Pain Self-Management Class

If you are age 60 or over and live in one of the ten counties in our district, join us by telephone on a weekly call from 1:30 pm - 2:15 pm $\,$

Wednesdays from August 12th - September 16th

Pre-registration is required by August 3rd

For more information or to register, please call 1-800-582-7277, ext. 247 or e-mail info@aaa7.org



Taking care of yourself

Anger

It is easy to feel victimized in this situation; you are caught up in the problems caused by someone else's illness. One natural response is anger. Unleashing anger on the person in your care is wrong and may make you feel guilty that you have expressed anger; think of it as a message to yourself that you need more respite or support. Try these outlets:

- Caregiver support groups provide a place where you can freely express your feelings. Everyone there understands; no one will make you feel guilty. Members will often offer effective, real-world solutions.
- Make an appointment with a therapist or clergyperson.
- Separate the person from the condition. The illness, not the person in your care, is responsible for the difficulties and challenges that you both are facing. Don't blame the care receiver for the situation you are in.

Memory Core - Language — Aphasia, associated with Alzheimer's, is a word for problems with language: it can affect speaking,

Aphasia, associated with Alzheimer's, is a word for problems with language: it can affect speaking, understanding speech, reading, and writing. In the early stages, people have trouble thinking of common words while speaking or writing. In time, the ability to understand what others are saying also declines.

Interested in a Telephone Support Group for Caregivers?

The Caregiver Support Program at the Area Agency on Aging District 7 is offering a free telephone support group for caregivers. **Next Call: August 20th from 1:30 pm - 2:30 pm**

If you are interested, please call Vicki Woyan for more details. Vicki can be reached at:

1-800-582-7277, extension 215 or you can e-mail info@aaa7.org.



Census 2020: Everyone Counts

This year, there are four options to completing the Census - online, by phone, by mailing a paper questionnaire, or by responding in person. Depending on how likely your area is to respond online, you have either received an invitation encouraging you to respond online, or an invitation with a paper questionnaire. These invitations were sent from the Census Bureau starting in March. Additional reminders have been sent since to encourage participation.

There is still time to complete your Census if you have not yet done so!

Participating in the Census is a part of our civic duty and important to make sure our district has fair representation and appropriate funding based on our population. For more information, log onto www.census.gov or call 1-800-923-8282

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Your local Area Agency on Aging District 7, Inc. serves the following counties in Ohio: Adams, Brown, Gallia, Highland, Jackson, Lawrence, Pike, Ross, Scioto and Vinton. Services are rendered on a non-discriminatory basis. Those interested in learning more about the services provided through the Area Agency on Aging District 7 can call toll-free at 1-800-582-7277. Here, individuals can talk directly with a trained Resource Specialist who will assist them with information surrounding the programs and services that are available to best serve their needs.

The Agency can also be reached via e-mail at info@aaa7.org.

Safety Tips - Fear of Falls with Alzheimer's

A person with Alzheimer's, even in the early stages, probably will have subtle changes in walking ability that will become more severe as time goes on. This can create difficulty with balance. If the person has other illnesses, the problems may be more severe. It is natural that they will fear falling.

To help the person in your care feel more confident, adaptive devices such as walkers or canes can be useful, but you will have to remind them to use these devices. Bring the cane or walker to the person when they have forgotten it. Exercises that you can do with the person in your care may improve their balance. Remember, before starting any type of exercise routine, get advice from your physician. Start slowly with only moderate effort. Give the care receiver time to build

strength and stamina. Any amount of exercise helps reduce risk of falling, and the benefits of exercise are cumulative, so find a way to make it easy and enjoyable to exercise. Exercise is a particularly effective way to reduce depression.

And finally, everything said here about the benefits of exercise also applies to the caregiver. You need exercise as much as the person in your care. Find a way to make it part of most days.

