

Tips for Careworkers: Advanced Dementia – Behavioural Changes



What it is: People with advanced dementia may show behaviour that is very different to how they usually are. If this is related to their dementia, then it is known as behavioural and psychological symptoms of dementia (BPSD). BPSD commonly appears as aggression, agitation, anxiety, depression, or apathy.

Why it matters: Most people with dementia experience BPSD. This has a negative impact on their quality of life. It also affects carer quality of life.

What I need to know: Common BPSD symptoms include:

- being easily upset or worried
- repeating questions
- arguing or complaining
- physical aggression
- searching for or hoarding things
- inappropriate screaming or sexual behaviour
- refusing care (such as not wanting to have a shower or to get dressed)
- wandering or shadowing (following a carer).

Creating supportive relationships with the person to promote trust can help. Person-centred care based on activities that the person enjoys can also help. For example, music therapy where the person can choose the music and take part in the activity. Ask the person or their family what things they do or do not like. Usually, antipsychotic medications are not recommended. But they may be needed if the person has severe BPSD and could harm themselves or others.

Do

If you notice symptoms of BPSD let your supervisor know. Look for – and try the following:

- unmet needs such as pain, hunger, need to go to the toilet
- worries about family or staff interactions – take time to talk one-to-one
- lack or loss of supportive social relationships or meaningful activity – be a friend for them, help them to focus on what they can do and to make choices such as what to do or wear
- communication difficulties – use communication cards or an interpreter if appropriate
- physical environment problems such as privacy, noise, or light levels – knock before entering their room, find a quiet place for them to be including for meals if wanted, ask if they want lights on or off
- things that have changed for them such as staff, their routine, or physical ability – gently talk with them about this
- patterns in behaviours e.g. time of day, a certain activity – be prepared to provide more support at these times.

Do

Keep the person physically active if appropriate.

Do

Watch for body language signs indicating that they agree (smiling, laughing) or disagree (agitation, resisting activity, restlessness).

Name:

My reflections:

What ways have I tried to deal with behavioural and psychological symptoms of dementia?

What worked well and what could have been done better?

What supports does my organisation offer staff and families to manage BPSD?
What would be useful?

My notes:

See related palliAGED Practice
Tip Sheets:
Advanced Dementia
Anxiety
Person-Centred Care

For references and the latest version of all Tip Sheets visit
palliated.com.au/Practice-Centre/For-Careworkers