

alzheimer's association®

PERSONAL CARE

ASSISTING A PERSON WITH MIDDLE- OR
LATE-STAGE ALZHEIMER'S WITH DAILY NEEDS



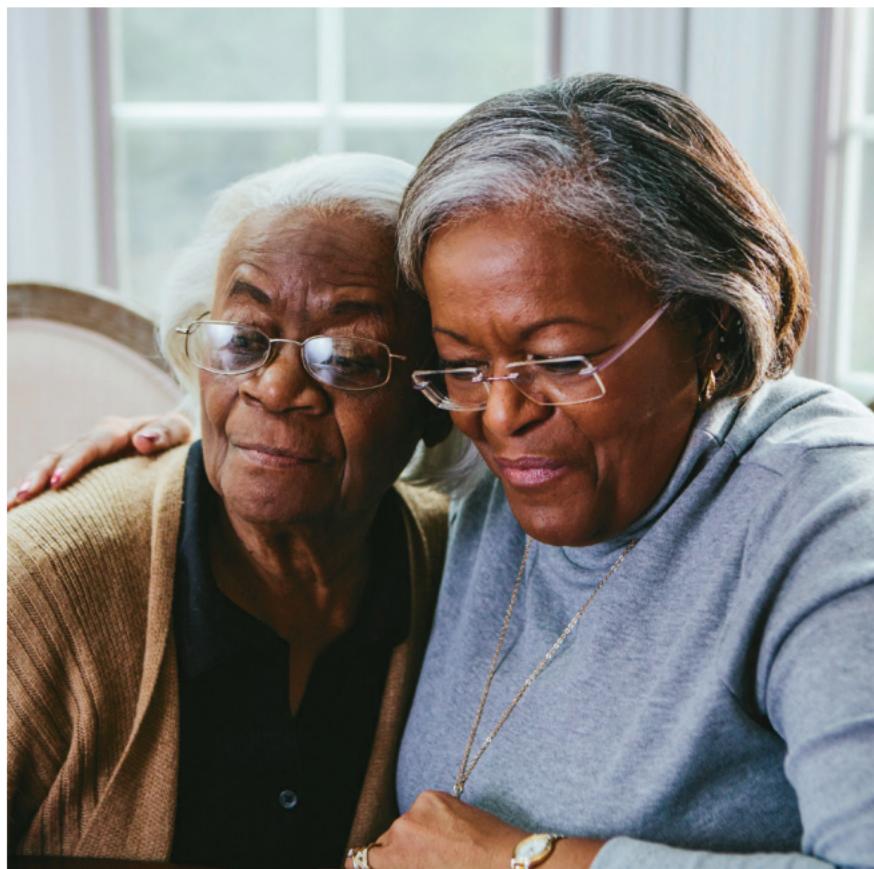
DAILY CARE FOR A PERSON WITH MIDDLE-OR LATE-STAGE ALZHEIMER'S

People living with dementia slowly become less able to take care of themselves. At first, a person may need only prompting or a little help, but eventually caregivers will be responsible for all personal care.

Loss of independence and privacy can be very difficult. Being aware of the person's reactions, abilities and fears can help both the person living with the disease and the caregiver have a better experience.

CONSIDERATIONS FOR ASSISTING WITH PERSONAL CARE

1. Be flexible — adapt to the person's preferences.
2. Help the person be as independent as possible.
3. Guide by using easy, step-by-step directions.
4. Speak in short, simple sentences.
5. Avoid rushing the person through a task.
6. Encourage, reassure and offer praise.
7. Watch for nonverbal communication.
8. Experiment with new approaches.
9. Consider using different products.
10. Be patient, understanding and sensitive.



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1. TIPS FOR BATHING

Bathing is often the most difficult personal care activity that caregivers face. Because it is such an intimate experience, people living with dementia may perceive it as unpleasant or intrusive. They may show their discomfort or distress by screaming, crying, resisting or hitting.

Such behavior may occur because the person doesn't remember why they have to bathe or lacks the patience to endure unpleasant parts of the task, such as lack of modesty, being cold or experiencing other discomforts.

TO ASSIST:

Prepare the bathroom in advance

Gather supplies such as towels, washcloths, shampoo and soap beforehand, so that you and the person can focus on bathing. Ensure the room is a comfortable temperature.

Make the bathroom safe

To prevent falls, install grab bars on the wall and tub edge. Place non-slip mats on floors. Use a tub bench or bath chair that can be adjusted to different heights. Test the water temperature in advance to prevent burns. Never leave the person alone in the bathroom.

Help the person feel in control

Involve and coach the person through each step of the process. You may need to experiment to find out if the person prefers tub baths or showers. Also, consider what time of day seems to be best.

Include the person in the process

Be sure the person has a role in the process. For example, have the person hold a washcloth or shampoo bottle.

Respect the person's dignity

Some people may be self-conscious about being naked. Letting the person hold a towel in front of his or her body while getting in and out of the shower or tub may help ease anxiety.

Don't worry about the frequency of bathing

It may not be necessary for individuals to bathe every day. "Sponge baths" with a washcloth can be effective between showers or baths.

Be gentle

The person's skin may be very sensitive. Avoid scrubbing and pat dry instead of rubbing. You may want to install a hand-held shower to make it easier to wash hard-to-reach areas.

Prevent discomforts

Washing the person's hair may be the most difficult task. Ask the person to hold a washcloth over their eyes to avoid getting soap in them.



2. TIPS FOR DENTAL CARE

Proper care of the mouth and teeth can help prevent eating difficulties, digestive problems and extensive dental procedures down the road. However, brushing can be challenging because a person living with dementia may not remember the importance of oral care.

TO ASSIST:

Provide short, simple instructions

Simply saying, “Brush your teeth” may not be specific enough. Break down each step by saying: “Hold your toothbrush.” “Put paste on the brush.” Then, “Brush your teeth with the toothbrush.”

Use a “watch-me” or “hand-over-hand” technique

Show the person how to brush his or her teeth by brushing your own. Or put your hand over the person’s hand, gently guiding the brush.



Monitor daily oral care

Brush teeth or dentures after each meal. Remove and clean dentures every night. Very gently brush the person's gums, tongue and roof of the mouth. Try to floss regularly. Take notice of any signs of mouth discomfort during mealtime, such as the person refusing to eat or making strained facial expressions while eating. These signs may point to mouth pain or dentures that don't fit properly.

Keep up with regular dental visits for as long as possible

A dental care routine is essential for healthy teeth. Ask the dentist for suggestions or products that may help maintaining dental care easier.

3. TIPS FOR DRESSING

Physical appearance contributes to a person's sense of self-esteem. For a person living with dementia, choosing and putting on clothes can be frustrating. The person may not remember how to dress or may be overwhelmed with the choices or the task itself.

TO ASSIST:

Simplify choices

Too many options can be overwhelming. Try laying out clothes or offering only two outfit choices. Keeping the closets free of excess clothing can also minimize distractions.

Organize the process

Lay out clothing in the order that each item should be put on. You may also hand the person one item at a time while giving short, simple instructions such as, "Put your arms in the sleeves," rather than "Get dressed." Don't rush the person — haste can cause anxiety.

Choose comfortable and simple clothing

Cardigans, shirts and blouses that button in front are sometimes easier to work than pullover tops. Substitute Velcro® for buttons, snaps or zippers, which may be too difficult to handle. Make sure the person has comfortable, non-slip shoes.

Be flexible

If the individual wants to wear the same outfit repeatedly, consider purchasing a duplicate or having similar options available. It's all right if the person wants to wear several layers of clothing, just make sure he or she doesn't get overheated. When outdoors, be sure the person is dressed properly for the weather. Even if the person's outfit is mismatched, try to focus on the fact that he or she was able to get dressed.

4. TIPS FOR EATING

Regular, nutritious meals may become a challenge for people living in the middle and late stages of Alzheimer's. They may become overwhelmed with too many food choices, forget to eat or think they have already eaten.

If the person living with dementia is not having problems with eating, there is no need to make any changes. However, if he or she does have difficulty, consider the following tips:

TO ASSIST:

Make mealtimes calm and comfortable

Serve meals in quiet surroundings away from distractions. Keep the table setting simple, using only the utensils needed for the meal. Avoid placing items on the table that might cause confusion.

Offer one food item at a time

The person may be unable to decide among the foods on his or her plate. Serve only one or two items at a time. For example, serve mashed potatoes followed by cooked meat.

Encourage independence

Make the most of the person's abilities. Allow the person to eat from a bowl instead of a plate, with a spoon instead of a fork — or even with his or her hands — if it's easier.

Be flexible with food preferences

It is possible the person may suddenly develop certain food preferences or reject foods he or she may have liked in the past.

Be alert for signs of choking

The person may have trouble swallowing some foods. Avoid foods that are difficult to chew thoroughly, like raw carrots.



5. TIPS FOR GROOMING

A person living with dementia may forget how to perform grooming tasks, like combing hair, caring for fingernails or shaving. He or she may forget the purpose of items like nail clippers or a comb.

TO ASSIST:

Continue grooming routines

If the person has always gone to the beauty shop or a barber, continue this activity. If the experience becomes overwhelming, it may be possible to have the barber or hairstylist make a home visit. Allow the person to continue using his or her favorite toothpaste, shaving cream, cologne or makeup.

Perform tasks alongside the person

Comb your hair, and encourage the person to copy your motions.

Use safer, simpler grooming tools

Cardboard nail files and electric shavers can be less threatening than clippers and razors.



6. TIPS FOR TOILETING

Many people living with dementia experience loss of bladder or bowel control (incontinence). Causes include inability to recognize natural urges, forgetting where the bathroom is or side effects from medicine. If this occurs, have the doctor rule out medical problems as the cause.

TO ASSIST:

Remove obstacles

Make sure clothing is easy to remove. Provide a clear path to the bathroom.

Create visible reminders

Post a sign or picture of a toilet on the bathroom door and use colored toilet lids and bathroom rugs.

Offer reminders

Encourage the person to use the bathroom regularly. Look out for signs of agitation, like pacing, that may indicate the need to go.

Monitor incontinence

Identify when accidents occur and try to prepare accordingly. If they happen every two hours, direct the person to the bathroom before that time. Reduce fluids in the evening or schedule bathroom visits in the middle of the night. Try using a bedside commode.

Consider incontinence products

Rubber sheets or incontinence pads on the person's bed may help. Padded undergarments or adult briefs are another option.

Be supportive

Help the person retain a sense of dignity. Offer reassurance to reduce embarrassment.



alz.org/care

The Alzheimer's and Dementia Caregiver Center provides reliable information and easy access to resources, including:

- » Alzheimer's Navigator® – Assess your needs and create customized action plans of information and support.
- » Community Resource Finder – Find local resources.
- » ALZConnected® – Connect with other caregivers who can relate to your situation.
- » Safety Center – Access information and tools.



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