

# Caregiver Assistance News

“CARING FOR YOU... CARING FOR OTHERS”

## Emergencies—Is the Person with Alzheimer’s in Pain?

It can be difficult to figure out whether someone with dementia is in pain, and what is causing the pain. People with dementia may not be able to tell you in words that they are in pain, or even where the pain is. They can be in great pain and not be able to communicate it directly.

In the early stage of dementia, she may answer in what seems like a response to the question the doctor is asking, even though she does not understand the question, but is simply trying to be helpful. For example, *wherever* the doctor touches and asks, “Does it hurt here?” She may keep saying, “Yes.” This does not help the doctor to figure out exactly where the pain is.

You know the person in your care better than the doctor, so you will be able to interpret her way of communicating. Signs of pain when the person is unable to tell you directly—

- ➔ verbal cues - moaning or calling out
- ➔ rubbing or protecting one area
- ➔ grimacing
- ➔ decreased activity level
- ➔ trouble sleeping
- ➔ a stiffened upper or lower body that is held rigidly and moved slowly
- ➔ increased agitation, aggressive behavior, pacing or rocking
- ➔ mental status changes, increased confusion or irritability

Each person has his or her own pain signature. Because you know this



person, you will know what behavior is typical. You can recognize that there is a change in behavior and perhaps when that change indicates pain.

### What to Do in an Emergency

In the course of caring for a person with Alzheimer’s disease, it is likely that an accident will occur or that the person will appear to be seriously ill. A person with dementia can fall and break a bone, and not complain of pain. On the other hand, a relatively minor illness or discomfort may make the person extremely upset. Because of his dementia, the person may not be able to help you to decide what kind of care is needed. Is this an emergency? If it is, you should call 911, the fire department or whatever agency is in charge of sending the Emergency Medical Service in your area. You should not try to take the person to the emergency room on your own. The following signs always indicate an emergency that needs immediate attention—

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- loss of consciousness or a marked change in mental state
- sudden severe chest pain
- a fall that results in severe pain or inability to move
- an accident that results in a blow to the head
- uncontrollable bleeding
- high fever accompanied by confusion and delusions
- difficulty breathing
- repeated or forceful vomiting
- failure to urinate for more than twelve hours
- sudden slurring of speech, loss of vision or balance, extreme weakness
- violent or uncontrollable behavior
- swallowing a poisonous substance

Even if none of these signs are present and you think that the person is seriously ill, call for emergency help.

## **NOTE**

If the situation allows, ask that the person be taken to the hospital with which his doctor is affiliated to facilitate continuity of care.

Once you arrive in the emergency room do your best to stay with the person and inform all staff that he has Alzheimer's disease and may not be able to provide accurate information about his condition or to follow their instructions.

If the person in your care is enrolled in a hospice program, find out in advance what arrangements the program has for emergency care.

### **Have ready in advance:**

- Insurance documents, advance directives, and a written profile of the person if you have one.
- A list of all of the medications the person is taking.
- A small notebook and a pen for questions and taking notes.

### **While waiting for the ambulance:**

- Gather your wallet, identification, credit card, and cash for food, reading material.
- If the person with AD is not dressed, bring along a pair of shoes, clothes, and a coat to be worn home if he or she is not admitted to the hospital. Do not bring valuables, such as expensive watches, or jewelry; and do not leave more than a few dollars with him.
- Let family or a friend know that you are taking him to the hospital and could use a helping hand.
- If time permits, call the person's doctor to let her know that you are taking the person in your care to the E.R.

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

## Taking Care of Yourself—How To Manage Frustration

It's a fact of life: the people closest to us are the same ones who best know how to "push our buttons." Feeling frustrated or resentful toward the people you live with, work with, or care for is a stressful and unhealthy situation, both for you and for others. Instead of letting negative feelings "simmer" or, worse, giving in to angry or unkind words and actions, take a time out to be grateful for the very people who can drive you nuts. The people in our lives are there because we value and appreciate them. Every time you're tempted to wish them out of your life, imagine losing all the good they bring into your life as well as the "bad." Let a feeling of gratitude fill you and frustration evaporates.

Source: *Happiness in this World*; [www.happinessinthisworld.com](http://www.happinessinthisworld.com)



## Inspiration

*Resenting someone is a way of never leaving them.*

## Live Life Laughing!

Running late is exercise, right?



## Memory Care

- Alzheimer's disease is the 6th leading cause of death in the U.S.
- More than 16 million Americans provide unpaid care for people with Alzheimer's or other dementias.
- 1 in 3 seniors dies with Alzheimer's or other dementia. It kills more than breast cancer and prostate cancer combined.

Source: *Alzheimer's Association*

## Caregiving in The Comfort of Home®

### Our Purpose

To provide caregivers with critical information enabling them to do their job with confidence, pride, and competence.

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## SAFETY TIPS— Dehydration

A major cause of emergency room visits for frail or demented older adults is *dehydration*.

Dehydration occurs when a person is either not getting enough liquids daily or excreting too much urine. The body's ability to detect thirst diminishes with age. Illness and medication can also cause dehydration.

Signs and symptoms of dehydration include:

- Headache—the most common symptom
- Dry mouth and tongue
- Cracked lips and dry skin
- Sunken eyes
- Nausea, vomiting, diarrhea
- Dark, strong smelling urine
- Weight loss
- Fast heart beat
- Low blood pressure
- Confusion, light-headedness and disorientation

# Caregiver Assistance News

“ C A R I N G F O R Y O U ... C A R I N G F O R O T H E R S ”

## Q U I C K Q U I Z

Throughout the course of the person's hospital stay, pay attention to your own level of stress and fatigue. If you don't get enough help from family and friends you may need to hire a professional aide. This can be done through the hospital. Answer True or False to the questions below.

1. The primary caregiver may know the person in care better than the doctor. As the caregiver, you will be able to interpret her way of communicating.  
T F
2. Because of his dementia, a relatively minor illness or discomfort may make the person extremely upset.  
T F
3. Loss of consciousness or a marked change in mental state is *not* a medical emergency.  
T F
4. A major cause of emergency room visits for frail or demented older adults is *dehydration*.  
T F
5. In the early stage, a person with dementia may respond to the doctor with a “yes” when asked about pain, even though she does not understand the question but is simply trying to be helpful.  
T F
6. A person with dementia can fall and break a bone, and not complain of pain.  
T F
7. The body's ability to detect thirst does *not* diminish with age.  
T F
8. People with dementia may not be able to tell you in words that they are in pain, or even *where* the pain is.  
T F
9. A fall that results in severe pain or inability to move and an accident that results in a blow to the head are medical emergencies.  
T F
10. One in three seniors dies with Alzheimer's or other dementia and it kills more than breast cancer and prostate cancer combined.  
T F

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_