

## **How to Respond to Difficult Behavior** (Coping with someone with Alzheimer's disease or other memory problems)

Remember that difficult behavior is caused by the same disease that causes memory problems. The person with the disease is not being "stubborn" or "crazy." The disease is changing the brain, but the person is still trying to do the best he can. You cannot change the person. You cannot control the disease. You can only control your reaction to the disease.

### **Communication**

1. Speak slowly and in short, simple sentences.
2. Give the person time to understand the meaning of your words. It can take up to a minute for the person to respond.
3. Smile.
4. Always approach the person from the front. He may be startled if you approach him from the back.
5. Use the person's name.
6. Remind the person of your name and who you are.
7. Only communicate one message at a time.
8. Be positive, optimistic, and reassuring to the person.
9. Use comforting statements. Try to identify feelings rather than argue about facts. For example, instead of arguing with the person about going outside, you can agree by saying, "Yes, it would be fun to go outside." Or say, "I want to go outside, too. We can go after we eat. I am hungry!" Or, "Yes, it is nice to go outside. That is a nice sweater you are wearing."
10. Give praise for simple things. "You are doing really well."
11. Prepare the person for what you want them to do. For example, "You need to get up now," and then gently help the person to get out of the chair.
12. Do not ask the person if they want to do something you know they do not like, for example, taking a bath. Instead say, "It is time to take your bath now."
13. If the person becomes frustrated and angry with you, say, "I am sorry I upset you. Will you accept my apology?"
14. If the person says they are sad or upset, accept their statement. You can agree by saying, "You feel sad. Sometimes I feel sad. But you know you are my (friend, husband, etc.) and I love you very much."
15. Give many hugs.

### **Problems with Eating**

1. Meals should be quiet and relaxed.
2. Do not put more than three different kinds of food on the plate.
3. Food should be in small pieces.
4. Give food that can be eaten with the fingers in a bowl when the person cannot use utensils. Use straws to make drinking easier.

5. Give several small meals a day if the person cannot eat one large meal at a time.
6. If the person is pacing, put food in a paper cup in his hand.
7. Take the person to the dentist to keep his mouth and teeth healthy.

### **Problems with Sleeping**

1. Avoid drinks with caffeine in the afternoon and evening.
2. Encourage exercise during the day.
3. Limit napping during the day.
4. In the evening, make a quiet, peaceful home. Keep lights low and avoid noises.
5. The older person may find television upsetting. If he likes it, play soft music. Have a familiar routine when preparing for going to bed for the night.
6. If nightmares upset him, it may be a side effect of a medicine. Ask the doctor if there is a different medicine he can take.

### **Problems with Bathing**

1. Plan the bath or shower for the time of day when the person is most calm.
2. Remember that it is not necessary to have a full bath or shower every day.
3. Explain what you are going to do (“now I will wash your feet”), or ask him to do it, at each step. Allow the person to do as much for himself as he can.
4. Sing a song, hum quietly, or keep repeating soothing words.
5. Make sure the water is warm, but not too hot.
6. Respect the person’s privacy by keeping his body partially covered.
7. For safety, use a hand-held shower spray, shower bench, grab bars, and mats in the tub or shower that will not slide.
8. Do not leave the person alone in the bath or shower.
9. If a bath or shower is too upsetting to the person, give a bath at the sink instead. Sit the person near the sink and only wash one part of the body at a time, while the rest remains covered.

### **Problems with Getting Dressed**

1. Remember that changing clothes can be exhausting and confusing to the person.
2. Put the clothes on the bed or chair in the same order he puts them on. Encourage him to do as much for himself as possible.
3. If the person has one favorite set of clothing he wants to wear every day, buy a second set so that one set can be washed while he is wearing the other set.
4. Choose clothing that is comfortable, easy to get on and off, and easy to wash. Elastic waists and Velcro are easier than buttons and zippers.

## **Problems with Bladder or Bowel Control**

1. The first time the person loses control of his bladder or bowel, have a doctor check to see if he has an infection or other condition that can be treated. It may even be a side effect of medicine.
2. Give comfort and reassurance to the person if he loses control. He cannot help it and he did not do it on purpose.
3. Give the person liquid, but not liquids with caffeine, such as coffee, tea, or colas. Liquids with caffeine can increase urination. The person should drink at least six cups (48 ounces) of liquid every day. Not drinking enough liquid can actually cause loss of control of bladder or bowel.
4. Keep a light on in the bathroom. Put a picture of a toilet on the door of the bathroom.
5. Make sure the person's clothes are easy for him to manage. Provide assistance if needed.
6. Watch for cues that the person needs to use the bathroom. For instance, a person may make unusual sounds or faces, get restless, pull at his clothes, or pace when he needs to use the bathroom.
7. Help the person to the bathroom every two or three hours.
8. At night, leave a light on in the bedroom and the bathroom.
9. When it is not possible for the person to control his bladder and/or bowel, use pads on the bed to keep the mattress dry, and use special under-garment pads to keep the person dry.

## **Repeating**

1. If the person repeats a question, answer him gently each time. He does not remember that he already asked you. If he seems anxious, try to reassure.
2. Stay calm and patient.
3. Distract him with a pleasant activity, such as looking at photographs, making a favorite food, folding towels or putting socks in pairs.
4. If the person is repeating an action, such as rubbing his hand across the table, give him a cloth and ask him to help with dusting.
5. Some repeating behaviors may be a side effect of medicine. Review the person's medicine with his doctor to see if medicine may be causing the problem. If it is, perhaps the doctor can prescribe a different medicine.

## **Wandering**

1. Wandering may be a side effect of medicine. Review the person's medicine with his doctor to see if medicine may be causing the problem. If it is, perhaps the doctor can prescribe a different medicine.
2. The environment may be exhausting and confusing for the person. If possible, reduce noise and remove objects and furniture that are not needed. Ask others to be pleasant around the person.

3. Some persons wander because they are hungry, thirsty, or need to use the bathroom. They may need help in finding the kitchen or bathroom.
4. If the person wanders at certain times of the day, try to plan an activity for that time.
5. Some wandering may be a result of not enough exercise. Try to take the person on a walk outside every day or do simple exercises at home.
6. Accept the fact that wandering is something the person does. Make certain that he is safe.
7. If the person wanders alone outside the home, it can be very dangerous for him. To prevent him from leaving, put a lock on the door. Put it either very high or very low, out of the normal range of vision. Put an alarm or bell on the door. Cover the door handle with a cloth. Put a special handle on the door that is difficult to open. Use a door lock that must be opened with a key. Keep the key near the door in case you have to leave in an emergency.
8. If the person wanders in the neighborhood, tell the neighbors about his condition and ask them to guide him home if they see him outside. Give the neighbors your telephone number.
9. Provide the person with identification, such as a medical bracelet. Put a card with your name, address, and phone number into a pocket of the person's clothing. Keep a recent picture of the person. The Alzheimer's Association office has a "Safe Return Program." If the person becomes lost, the Safe Return Program works with the police to find the person. To locate the nearest office of the Alzheimer's Association, call 1-800-272-3900.
10. If the person asks to go home, or is searching for someone who has died, he may want to return to a time that was safe and that he remembers. Do not argue with the person. Do not tell a lie. Say, "You miss your home." Ask him to tell you about his home while you share food or beverage. If he asks for his mother, say, "I loved her, too. Tell me about her."
11. Remind the person that you know how to find him and that he is in the right place.