THE TWO MOST COMMON DEMENTIAS

True and False

- 1. F Pick's disease and Alzheimer's disease are the two most common dementias.
- 2. F Alzheimer's disease and vascular dementia are reversible.
- 3. T Alzheimer's disease is progressive, degenerative, and permanent.
- 4. T The progression of vascular dementia is more step-wise than in Alzheimer's disease, with relatively obvious and sudden changes seen in the resident.

- 5. Which of the following best describes the progression of Alzheimer's disease?
 - a. Sudden, dramatic changes appearing over a short period of time.
- ⇒ b. A gradual decline occurring over several years.
 - c. Both are common.
- 6. Which of the following is not true about Alzheimer's disease?
- ⇒ a. A cure is available.
 - b. It will always get worse over time.
 - c. It is the result of destruction to important cells in the brain.
 - The exact cause has not been identified.
- 7. The cortex of the brain is responsible for
 - a. Basic functions, such as breathing and heart rate.
 - b. Control of sleeping and waking.
- ⇒ c. Higher cognitive functions, such as reasoning and language.
- 8. Vascular dementia is caused by
 - Unknown factors.
- ⇒ b. Blood clots in vessels supplying the brain.
 - c. Aluminum poisoning.
 - d. A virus.

Short Answer

9. Describe the differences between Alzheimer's disease and vascular dementia. Include a description of the differences in progression.

Be sure the following are addressed:

Alzheimer's progression is more gradual, where as vascular progression is more stepwise.

Vascular has a more clear treatment approach with drugs such as Coumadin.

Comprehension exercise

KEY PRINCIPLES IN THE MANAGEMENT OF DEMENTIA ENVIRONMENTAL ALTERATIONS

Few things have as significant an impact on the client with dementia as the environment. Walk through the facility in two or three groups looking for environmental alterations that have been or could be made to benefit the client with dementia. After your "tours" return to the classroom and discuss what you found. Discuss steps that could be taken to make additional alterations you identified.

Environmental alterations already made in the facility.

Point out environmental alterations/adaptations that have been made in your facility, such as:

Photos of resident's families

Efforts to minimize noise

Lack of clutter/distractions

Safety measures in place

Additional environmental alterations that could be made in the facility.

KEY PRINCIPLES IN THE MANAGEMENT OF DEMENTIA

True and False

- 1. F The management of dementia is primarily from a medical approach, through medications, surgeries, etc.
- 2. T Placing a picture of the client on her door is an example of an environmental alteration.
- 3. T Medication side effects can cause a decline in the client's cognitive function, beyond that caused by the dementia.
- 4. T Problem behaviors and depression must be monitored for and managed by the facility staff and supervisors.
- 5. F The client with dementia will perform most ADLs independently.

COMMUNICATING WITH THE RESIDENT WITH DEMENTIA

Short Answer

1. Identify three components of positive interaction techniques.

Include any of the following:

Use the resident's name
Provide explanations for care
Active listening
Encourage the resident to discuss feelings

2. Give 2 reasons why the caregiver should not "do it all" or "spoil" the client.

Include any of the following:

Encourage independence Improves sense of self worth Improves communication

3. Identify 4 interventions to improve communication with the client with aphasia.

Include any of the following:

Face the resident
Establish eye contact
Ask family for suggestions

Use normal voice tone Speak clearly Avoid complicated messages

- 4. A client who speaks normally but has difficulty coming up with a name of an object has
 - a. Nonfluent aphasia
 - b. Conduction aphasia
 - c. Fluent aphasia
- ⇒ d. Anomic aphasia

Comprehension exercise

BEHAVIORS AND INTERVENTIONS IN DEMENTIA CARE

Case Study

Read the case study below. Working in groups, establish a plan for managing this behavior.

John has been living in your facility for over 2 years. He is diagnosed with probable moderate Alzheimer's disease. He displays impairments in short-term memory, judgment, reasoning, and language. John is normally calm and mild-mannered, but has occasional episodes of agitation.

Today Mary is assigned to care for John. During lunch Mary was helping John to eat when he started to become increasingly agitated saying; "I need to get out of here." Mary told John; "you need to eat your lunch, you didn't have any breakfast today, and only ate a little at dinner last night." But John continued to refuse to eat.

Finally, John become very upset and through his plate at Mary.

Is this behavior a problem?

Yes. It poses a safety risk to the resident and others.

Identify the A-B-Cs:

Possible answers include:

A = Mary argues with John and pushes him to eat.

B = John becomes agitated and has a catastrophic reaction

C = John stops eating and Mary leaves

Describe your plan to manage this behavior now and in the future.

Possible answers include:

Do not argue with residents Allow him to feed himself Talk to family about food preferences Give more time and space during meals

BEHAVIORS AND INTERVENTIONS IN DEMENTIA CARE

True and False

- 1. F A problem behavior and catastrophic reaction are managed in the same way.
- 2. T A catastrophic reaction is a sudden change in behavior in a client with dementia.
- 3. F When a client with dementia is demonstrating an odd behavior, your first step in managing it is to find out why the client is doing that.
- 4. T Not all behaviors related to dementia require management.

Multiple Choice

- 5. Behavior problems in dementia can be related to which of the following?
 - a. A urinary tract infection
 - b. Dehydration
 - c. Previous profession
- - e. None of the above
- 6. The goal in dealing with problem behaviors is to
 - a. Stop the behavior
- ⇒ b. Manage the behavior
 - c. Change the behavior
 - d. None of the above

Short Answer

- 7. What does A B C parts of behavior management stand for?
 - A = Antecedent (or trigger)
 - B = Behavior
 - C = Consequence

MEDICATIONS IN DEMENTIA

True and False

- 1. F Some medications are able to cure dementia.
- 2. T Two groups of antipsychotics are available, the traditional and atypical antipsychotics.
- 3. T Antipsychotics can manage hallucinations, delusions, aggression, and some behaviors.
- 4. T Antipsychotics can be over-used.

- 5. Which of the following is not a benefit of the atypical antipsychotics?
 - Better effect than the traditional antipsychotics.
 - b. Less side effects.
- ⇒ c. Cheaper than the traditional antipsychotics.
- 6. Which of the following is not an atypical antipsychotics?
- ⇒ a. Mellaril
 - b. Zyprexa
 - c. Risperdal
 - d. Clozaril
- 7. The side effects associated with antipsychotics include
 - a. Tremors
 - b. Difficulty sitting still
 - c. Abnormal tongue and lip movements
- ⇒ d. All of the above
- 8. Which of the following is not true about Aricept
 - a. It is given to improve cognitive function
 - b. It has fewer side effects than Cognex
- ⇒ c. It can cure some dementias
 - d. It is indicated for early to mid-stage Alzheimer's disease

ALZHEIMER'S DISEASE: AN IN-DEPTH OVERVIEW

True and False

- F Unlike other dementias, Alzheimer's disease does not go through obvious stages of progression.
- T Symptoms of Alzheimer's disease can be grouped as mild, moderate and severe.
- 3. F Difficulty in performing activities of daily living does not typically occur until the final stages of Alzheimer's disease.
- T Alzheimer's disease cannot be definitively diagnosed until an autopsy is performed.

- 5. Which of the following are considered symptoms of Alzheimer's disease?
 - a. Improved short-term memory
- ⇒ b. Getting lost in familiar environments
 - c. Increased production of acetylcholine
 - d. Loss of vision
- 6. What role do neuritic plaques play in Alzheimer's disease?
 - a. The help heal brains cells.
 - b. They decrease the destructive proteins that cause Alzheimer's disease.
- ⇒ c. They contribute to degeneration of brain cells.
 - d. None of the above
- 7. How do new medications called cholinesterase inhibitors help to treat Alzheimer's?
- ⇒ a. They lead to an increase in the essential neurotransmitter acetylcholine.
 - b. They lead to an increase in the essential neurotransmitter serotonin.
 - c. They are only experimental and have not been shown to work.
 - d. They improve oxygen flow to the brain.
- 8. Which of the following is not a medical approach to treating Alzheimer's disease?
- ⇒ a. Surgical removal of dead brain cells
 - b. Estrogen replacement
 - c. Increasing available acetylcholine
 - d. Antioxidant therapy

CAUSES OF ALZHEIMER'S DISEASE

True and False

- 1. T Neurotransmitters are responsible for passing "messages" between brain cells.
- F In Alzheimer's disease, brains cells are killed, but neurotransmitters are unaffected.
- 3. T The build up of protein plaques in the brain is considered the hallmark of Alzheimer's disease.
- 4. T The protein plaques of Alzheimer's disease are composed of a protein called beta amyloid.

- 5. Which of the following proteins are believed to play a role in Alzheimer's disease?
 - a. Beta amyloid
 - b. Tau
 - c. Alz protein
- ⇒ d. Both a and b
- 6. Which of the following statements is most correct regarding genes and Alzheimer's?
 - a. All cases of Alzheimer's disease are hereditary.
- ⇒ b. Persons with Alzheimer's are more likely to have a gene the produces a protein called apoE
 - c. There is no link between genes and Alzheimer's disease.
 - d. None of the above
- 7. Which of the following is not considered a possible risk factor for developing Alzheimer's disease?
 - a. Age
 - b. Family history
 - c. Head injury
- ⇒ d. Using aluminum pans