



## Behavioral problems and Alzheimer's disease Care giver Education



### BEHAVIOUR

- 1- Wandering behavior/  
repetition .



- 2- Anxiety /anger &  
aggression/self harming



- 3- Night sleep disturbance



- 4-Delusion / Suspicion



### CHARACTERISTICS

Walk around aimlessly  
in the house or outside,  
unaware of the risk .

Frequent anger  
& fighting

Disturbed sleep cycle due  
to confusion, disorientation.

Misinterpretation of  
objects & environment due  
to failing senses.  
Hallucination can be due  
to sound , shadows &  
colors

### CARE GIVER ROLE

- 1- Use of safety devices for the  
home & other risk prone areas.  
E.g. auto locks system.. Increasing  
the safety of the environment by  
equipping doors and gates with  
locks, and removing guns and  
other weapons.
- 2- Identify precursors of wandering  
behavior, e.g. restlessness & disori-  
entation.
- 3- Engage in productive activities  
e.g. laundry.

- 1- Care giver needs be aware of po-  
tential cause of anger.
- 2- Don't confront the person &  
discuss the causes.
- 3- Don't initiate physical contact  
during anger out bursts. Distract  
the person towards more pleasurable  
activities.

- 1- Improve sleep hygiene, avoid  
day time sleep.
- 2- Increase day time activities to  
induce sleep at night.
- 3- Create a calm atmosphere.
- 4- Relaxation techniques.

- 1- It can be managed by –properly  
lighting the room, reduce furniture,  
remove or cover, glasses & mirrors.  
Avoid watching violent TV programs
- 2- Paint the walls with light colors to  
reflect more light in the room.





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**BEHAVIORAL PROBLEMS & ALZEIMER'S DISEASE  
CARE GIVER EDUCATION**



**Alzheimer's disease is a degenerative disorder of the cerebral cortex that cause behavioral problems which poses a significant challenge to the caregiver & healthcare professional**

**TRIGGERING FACTORS**

- 1. Medication –overdose and side- effects.**
- 2. Physical factors – fatigue, pain and Physical illness.**
- 3 Environmental factors - Noise and Contrast color.**
- 4. Psychological factors - Boredom, Restlessness and loneliness.**
- 5. Cognitive factors –specific brain area dysfunction and disorientation.**
- 6. Social factors -changes in caregiver.**

**OCCUPATIONAL THERAPY  
MANAGEMENT:**

**Behavioral intervention:**

Use Behavioral techniques e.g. encouragement and appreciation.

**Cognitive intervention :**

Improve attention; promote mental relaxation by slow music, & breathing exercise.

**Physical & environmental intervention:**

Suggestion for modification of the environment by removing harming & unsafe objects. Change lighting systems if necessary.

**Social intervention:**

Family education on strategies develop social skills.







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## What's happening to grandpa?? Alzheimer's disease



### Description:

Alzheimer's disease (AD) is a progressive degenerative disease that alters the brain, characterized by a progressive decline in memory, thinking, comprehension, calculation, language, learning capacity and judgment the disease is sufficient to impair personal activities of daily living, Age of onset is 45 years or older.

### RISK FACTORS

1. Age
2. Family history & genetics
3. Health factors- hypertension, high cholesterol, diabetes



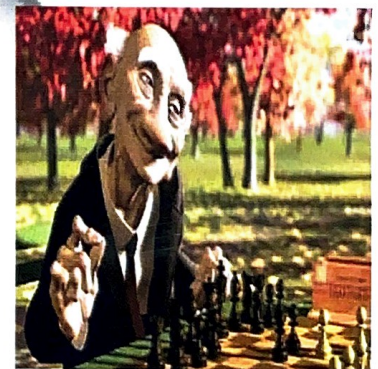
### SYMPTOMS

#### Motor:

- The person will usually have a gradual loss of gross motor skills, fine motor skills and bilateral coordination.
- Loss of balance, equilibrium reactions and gait.
- Loss of manipulation and dexterity.

#### Sensory:

- The person may have increasing loss of sensory awareness and registration (in tactile, vestibular, auditory, deep sensation of the body joints and muscles)
- Loss of sensory processing (interpreting sensory information)
- Loss of spatial relationship and spatial visualization (being aware of surroundings)



#### Cognitive:

- Becomes increasingly disoriented to time, place, or person.
- Increasing forgetfulness and disorientation.

For Further information please contact: DEPARTMENT OF OCCUPATIONAL THERAPY PHONE NO: 24874365

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- The person may have a gradual memory loss, beginning with short term memory (recent events) and increases to include long term memory (remote events).
- Gradual difficulty learning and remembering new information.
- Increasing inability to concentrate.
- Increasing loss of abstract thinking skills.
- May experience emotional moodiness.
- Usually will have loss of judgment about personal safety.
- Usually will experience decreased ability to write or speak.

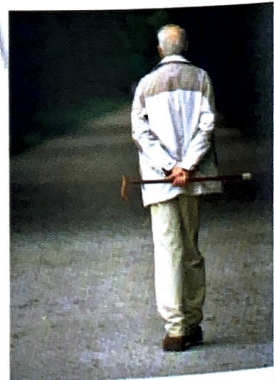
### ***Self care, (ADLs, IADLs and Sleep):***

- The person may experience loss of self care skills,
- Withdrawal of ADLs (bathing, grooming, brushing teeth, dressing and feeding) and IADLs (tying shoes and money management)
- May become increasingly irritable
- The person may become restless, especially at night



### ***OT role and Alzheimer's disease:***

- The occupational therapist will assess the environment and try to orient the person to environment through orientation session (to time, place, people) or environmental adaptation if possible.
- Teaching caregiver and guiding him for a better performance, such as compensatory memory techniques, by writing down a daily schedule and keeping a notebook of important personal information.
- Increasing opportunities for socialization through group sessions.
- To promote vocalization and interaction skills through activities such as word search and object identification.
- Encouraging the person to maintain independent performance of daily living activities.
- Providing assistive devices and instruct person or caregiver in its proper use.
- Instruct caregivers to maintain person's independence in ADL's with precautions
- Encouraging person to participate in productive activities (work, homemaking) as long as possible.
- Maintaining the person's leisure interests by offering opportunities to engage in favourite leisure activities







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DEPARTMENT OF OCCUPATIONAL THERAPY**



**ROLE OF OCCUPATIONAL THERAPY IN MEMORY LOSS DISORDER**



**WHAT IS MEMORY LOSS?**

MEMORY LOSS IS DEFINED AS PARTIAL OR TOTAL IN ABILITY TO RECEIVE / REGISTERING (RECEIVE , REGISTER , RECOLLECT , RECALL) INFORMATION.

**PROBLEMS-**

- DIFFICULTY IN PERFORMING ADL SKILLS.
- DEFICITS IN MEMORY.
- LACK OF AWARENESS.
- DEFICIT IN RETAINING IMMEDIATE INFORMATION (PRESENT).
- DEFICIT IN SPEED OF PROCESSING INFORMATION .



OCCUPATIONAL THERAPY – INTERVENTION  
RETRAINING THE MEMORY BY SIMPLIFYING ACTIVITIES  
AND PROVIDING CUES PHYSICALLY OR VERBALLY.  
INCREASING ATTENTION AND MEMORY RETRIEVAL BY  
USING AIDES TO COMPENSATE FOR LOSS OF MEMORY .

- MOTOR PLANNING AND ORGANIZATION.

EXAMPLE –MEMORY GAMES

- JUDGEMENT OF SAFETY SKILLS.

EXAMPLE-PROBLEM SOLVING ACTIVITIES

- COMMUNICATION / SOCIAL INTERACTION SKILLS.

EXAMPLE-SOCIAL CONNECTIONS.

- MAXIMIZE THE QUALITY OF LIFE .





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### MEMORY ACTIVITIES FOR ELDERLY



It is very important for the elderly to exercise the mind as well as the body, and memory games can help. Everyone forgets things at times, but for some, the memory becomes obviously troubling. Regular memory games for the elderly, along with encouragement and grief counseling, could improve memory and overall mental health.



#### 1 - Conversation

##### Procedure:

- Conversation with a friend work just as well as elderly activities.
- Conversations strengthen memory .

#### 2 -Visual Memory Games

Items required: Paper clip, pencil, pen, artificial flower, and any other small items to be .

##### Procedure:

- Give the elderly individual or a group of elderly individuals a pencil and paper then 1 - 2 minutes to try to visually memorize the items on the tray.



#### 3 - Matching Pairs

Items required: Playing cards, and select two suits of cards from the deck.

##### Procedure:

- Place each cards face down and face up on a table.
- Turn over one card at a time from the suit that is face down, then turn it back face down .
- The object of the game is to match cards by remembering where a face-up card's corresponding match is in the face down cards.
- When a match is found, remove both cards from the table.

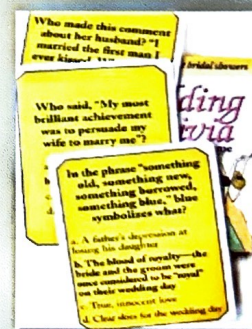


#### 4 - Trivia and crossword puzzles

Items required: Trivia quiz card

##### Procedure:

- Game begins with the question, then provide a series of hints to help the players answer the question.
- The object of trivia board games is to move a game piece on a board by correctly answering questions about a variety of specific subjects.



#### 5 - Party game

##### Procedure:

- Several elderly adults sits in a circle.
- One of them should begin the game by saying, "I am going on a trip to some place ,Al -wafra , and in my suitcase I am taking a pair of pants and a shirt."
- The second person would say, "I am going on a trip to Al wafra and in my suitcase I am taking a pair of pants and a shirt, and a... (Fill in the blank.)".
- Continue the game till it comes back to the first person. He has to tell the original line plus the items added in the suitcase.