

行為變化

CANTONESE | ENGLISH

本資訊單張介紹了人們患上痴呆症時可能出現的一些常見行為變化，並且討論了發生變化的原因以及一些應付變化的一般指導原則。

痴呆症病人發生行為變化非常普遍。這可能給家人和照顧者帶來巨大壓力。以前溫和可愛的人現在卻變得舉止異常或暴躁好斗，這尤其令人感到不安。

為什麼會發生行為變化？

病人行為發生變化有多種原因。痴呆症是因為病人大腦發生變化並影響病人的記憶力、情緒和行為而造成的。這些行為有時可能與大腦中發生的這些變化有關。其他情況可能是因為病人所處環境、健康或藥物發生變化而觸發了這些行為，可能是沐浴之類的活動過於困難，也可能是病人感到身體不適。痴呆症對病人的影響各不相同，並且會降低病人表達自己需要及控制環境緊張因素的能力。瞭解病人為什麼會出現某種特定的行為，可能有助於你獲得一些如何應對的主意。

從哪裡開始

一定要找醫生談談你對行為變化的擔心。醫生能夠檢查是否出現疾病或不適，並能提供一些建議。醫生能夠說出是否存在潛在的精神疾病，並且檢查病人的藥物。

應對

應對行為變化可能非常困難，經常需要不斷嘗試和出錯。請務必記住，這種行為不是刻意的。怒氣和暴躁通常都發洩在家人和照顧者身上，因為他們是病人最親近的人。病人控制不住這種行為，自己也可能對此十分害怕。他們需要安慰，但表面看起來卻並非如此。

嘗試做些什麼

- 提供一個安靜、輕鬆的環境，讓痴呆症病人遵照熟悉的日常習慣，可以幫助避免一些困難行為。

- 保持熟悉的環境。痴呆症病人如果發現自己處於一個陌生的環境或置身於一群陌生人中間，就會覺得糊里糊塗，不知所措，感到局促不安。由於無法達到他人的期望，就會產生挫折感，可能就足以觸發行為變化。
- 如果某種行為變得難以應付，最好不要嘗試任何形式的身體接觸，如限制、把他們帶走或從後面靠近。在他們恢復前，最好讓他們獨自呆著，或者叫朋友或鄰居幫忙。
- 不要懲罰。病人可能不記得發生的事情，因此也無法從中吸取教訓。
- 慢慢說話，細聲細語，語氣平靜、安慰。
- 如果病人給你說錯誤或混淆的事情，保持安靜，不露聲色。

侵犯行為

這可能表現為亂打一氣等身體侵犯行為，也可能表現為使用髒話等口頭謾罵。侵犯行為通常是憤怒、恐懼或失望的表現。

嘗試做些什麼

- 侵犯行為可能是由失望引起的。例如，把門鎖上可能防止漫遊行為，但可能讓病人更加沮喪。
- 活動和鍛煉可能有助於防止某些感情衝動。
- 慢慢走近對方，讓對方完全看見自己，這可能會有所幫助。使用簡短明確的語句來解釋要做的事情，如：“我要幫你把大衣脫下來”。這可以讓對方不會感覺受到攻擊，從而不會做出自我保護的反應而變得暴躁好斗。
- 檢查侵犯行為是不是因為病人想得到自己想要的什麼。如果是這種情況，試著預先想到病人的需要，這樣可能會有所幫助。

FIGHTDEMENTIA.ORG.AU NATIONAL DEMENTIA HELPLINE 1800 100 500

反應過度

一些癡呆症病人會對細小的挫折或輕微的批評產生過激反應。他們可能尖叫、大喊、無理指責、變得非常激怒或固執，或者無法控制、不合時宜地大哭或大笑。病人也可能變得孤僻。這種過激反應的傾向是癡呆症的一部份，稱為災難性反應。

有時候，災難性反應是表明出現癡呆症的第一徵兆。這可能是個短暫的階段，隨著病情發展逐漸消失，也可能會持續一段時間。

災難性反應可能由以下原因引起：

- 某種情況的過度要求造成壓力
- 誤解信息造成沮喪情緒
- 另一種潛在的疾病

這種行為可能迅速出現，讓家人和照顧者感到驚恐。但是，試著弄清楚是什麼觸發了災難行為，有時候就可以避免這種行為。記日記可能有助於瞭解這種反應是在什麼情況下出現。如果這不可能做到，就可以採用先前列出的一些指導原則，找到迅速有效地應對這種行為的方法。

藏匿物品

癡呆症病人可能看起來總是急於尋找自己認為丟了的東西，並且藏匿物品來妥善保管。

藏匿物品的行為可能由以下原因引起：

- 孤立。如果癡呆症病人沒有人陪或者覺得受到忽視，就可能將注意力全部集中在自己身上。藏匿物品的需要是常見的反應。
- 對往事的回憶。現在發生的事情可能會觸發對往事的回憶，比如與兄弟姐妹住在一起時，兄弟姐妹總是拿他們的東西，或者經歷經濟蕭條或戰爭時期而要養活幼小的子女。
- 喪失。癡呆症病人不斷失去自己生活的部份。失去朋友、家人、生活中富有意義的角色、收入以及可靠的記憶力，都可能加劇病人藏匿物品的需要。
- 擔心。擔心被人盜竊是另一種常見情況。病人可能會把貴重物品藏起來，然後又忘記藏在什麼地方，然後責怪他人偷走了貴重物品。

嘗試做些什麼

- 瞭解病人通常藏東西的地方，首先檢查這個地方是否有丟失的物品。
- 準備一個裝滿零星物件的抽屜讓病人來整理，這樣可以滿足病人不能閑著的需要。
- 確保病人熟悉自己週圍的環境，無法辨認環境可能會加劇藏匿物品的問題。

重復性的行為

癡呆症病人可能會反復訴說或詢問一些事情。他們還可能變得非常纏人，總是跟著你，甚至跟你到洗手間。這些行為可能令人感到非常不安和生氣。重復性的行為可能主要是因為病人無法記住自己說過和做過什麼事情造成的。

嘗試做些什麼

- 如果解釋沒有用，分散注意力有時候會起作用。散步、食物或喜愛的活動可能有所幫助。
- 認可所表達的感覺可能有所幫助。例如，“我今天做什麼？”可能表示病人感到不知所措，心中無數。對這種感覺作出回應可能會有所幫助。
- 回答重復的問題，就當是第一次問一樣。
- 給病人拿些其他東西，讓他們的手不閑著，如可以擠捏的軟球或需要摺疊的衣服，可能會減少重復性的動作。

根據《瞭解及應對挑戰性行為》，蘇格蘭阿耳茲海默氏病協會－癡呆症行動。

請與醫生討論你對行為變化的擔心及其對你造成的影響。

癡呆症行為管理諮詢服務(DBMAS)是一項全國電話諮詢服務，為擔心癡呆症病人行為的家人、照顧者和護理工作人員提供服務。這項服務每週7天、每天24小時提供保密的建議、評估、干預、教育和專業支援，聯絡電話：**1800 699 799**。

詳情

澳洲阿耳茲海默氏病協會(Alzheimer's Australia)提供支持、資訊、教育和心理輔導。請聯絡全國癡呆症幫助熱線：**1800 100 500**，或瀏覽我們的網站：fightdementia.org.au



Interpreter

若需要語言方面的幫助，請致電口筆譯服務處電話：**131 450**

CHANGED BEHAVIOURS

This Help Sheet looks at some of the common behaviour changes that may occur when a person has dementia. Reasons for the changes and some general guidelines for coping with them are discussed.

Changes in the behaviour of a person with dementia are very common. This may place enormous stress on families and carers. It can be particularly upsetting when someone previously gentle and loving behaves in a strange or aggressive way.

Why does behaviour change?

There are many reasons why a person's behaviour may be changing. Dementia is a result of changes that take place in the brain and affects the person's memory, mood and behaviour. Sometimes the behaviour may be related to these changes taking place in the brain. In other instances, there may be changes occurring in the person's environment, their health or medication that trigger the behaviour. Perhaps an activity, such as taking a bath, is too difficult. Or the person may not be feeling physically well. Dementia affects people in different ways and reduces a person's capacity to communicate their needs and manage environmental stressors. Understanding why someone is behaving in a particular way may help you with some ideas about how to cope.

Where to begin

Always discuss concerns about behaviour changes with the doctor, who will be able to check whether there is a physical illness or discomfort present and provide some advice. The doctor will be able to advise if there is an underlying psychiatric illness and check the person's medications.

Managing

Managing changed behaviours can be very difficult, and is often a matter of trial and error. Always remember that the behaviour is not deliberate. Anger and aggression are often directed against family members and carers because they are closest. The behaviour is out of the person's control and they may be quite frightened by it. They need reassurance, even though it may not appear that way.

What to try

- Providing a calm, unstressed environment in which the person with dementia follows a familiar routine can help to avoid some difficult behaviours

- Keep the environment familiar. People with dementia can become upset if they find themselves in a strange situation or among a group of unfamiliar people where they feel confused and unable to cope. The frustration caused by being unable to meet other people's expectations may be enough to trigger a change in behaviour
- If a behaviour becomes difficult, it is best to refrain from any form of physical contact such as restraining, leading them away or approaching from behind. It may be better to leave them alone until they have recovered, or call a friend or neighbour for support
- Avoid punishment. The person may not remember the event and is therefore not able to learn from it
- Speak slowly, in a calm, quiet and reassuring voice
- Remain quiet or neutral if the person tells you something that seems wrong or mixed up

Aggression

This can be physical, such as hitting out, or verbal such as using abusive language. Aggressive behaviour is usually an expression of anger, fear or frustration.

What to try

- The aggression may be due to frustration. For example, locking the door may prevent wandering but may result in increased frustration
- Activity and exercise may help prevent some outbursts
- Approaching the person slowly and in full view may help. Explain what is going to happen in short, clear statements such as "I'm going to help you take your coat off". This may avoid the feeling of being attacked and becoming aggressive as a self-defence response
- Check whether the aggressive behaviour is about getting what the person wants. If so, trying to anticipate their needs may help

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Over-reaction

Some people with dementia over-react to a trivial setback or a minor criticism. This might involve them screaming, shouting, making unreasonable accusations, becoming very agitated or stubborn, or crying or laughing uncontrollably or inappropriately. Alternatively, the person might become withdrawn. This tendency to over-react is part of the disease and is called a catastrophic reaction.

Sometimes a catastrophic reaction is the first indication of the dementia. It may be a passing phase, disappearing as the condition progresses, or it may go on for some time.

Catastrophic behaviour may be a result of:

- Stress caused by excessive demands of a situation
- Frustration caused by misinterpreted messages
- Another underlying illness

This behaviour can appear very quickly and can make family and carers feel frightened. However, trying to figure out what triggers catastrophic behaviour can sometimes mean that it can be avoided. Keeping a diary may help to identify the circumstances under which they occur. If this isn't possible, you can find ways of dealing with the behaviour quickly and effectively using some of the guidelines listed earlier.

Hoarding

People with dementia may often appear driven to search for something that they believe is missing, and to hoard things for safekeeping.

Hoarding behaviours may be caused by:

- Isolation. When a person with dementia is left alone or feels neglected, they may focus completely on themselves. The need to hoard is a common response
- Memories of the past. Events in the present can trigger memories of the past, such as living with brothers and sisters who took their things, or living through the depression or a war with a young family to feed
- Loss. People with dementia continually lose parts of their lives. Losing friends, family, a meaningful role in life, an income and a reliable memory can increase a person's need to hoard
- Fear. A fear of being robbed is another common experience. The person may hide something precious, forget where it has been hidden, and then blame someone for stealing it

What to try

- Learn the person's usual hiding places and check there first for missing items
- Provide a drawer full of odds and ends for the person to sort out as this can satisfy the need to be busy
- Make sure the person can find their way about, as an inability to recognise the environment may be adding to the problem of hoarding

Repetitive behaviour

People with dementia may say or ask things over and over. They may also become very clinging and shadow you, even following you to the toilet. These behaviours can be very upsetting and irritating. Repetitive behaviours may be mainly caused by the person's inability to remember what they have said and done.

What to try

- If an explanation doesn't help, distraction sometimes works. A walk, food or favourite activity might help
- It may help to acknowledge the feeling expressed. For example "What am I doing today?" may mean that the person is feeling lost and uncertain. A response to this feeling might help
- Answer repeated questions as if they were being asked for the first time
- Repetitive movements may be reduced by giving the person something else to do with their hands, such as a soft ball to squeeze or clothes to fold

Based on 'Understanding and dealing with challenging behaviour', Alzheimer Scotland – Action on Dementia

Discuss with the doctor your concerns about behaviour changes, and their impact on you.

The Dementia Behaviour Management Advisory Service (DBMAS) is a national telephone advisory service for families, carers and care workers who are concerned about the behaviours of people with dementia. The service provides confidential advice, assessment, intervention, education and specialised support 24 hours a day, 7 days a week and can be contacted on **1800 699 799**.

FURTHER INFORMATION

Alzheimer's Australia offers support, information, education and counselling. Contact the National Dementia Helpline on **1800 100 500**, or visit our website at fightdementia.org.au



For language assistance phone the Translating and Interpreting Service on **131 450**