परिवर्तित बालीव्यहो

यो सहायता पत्रले मानिसलाई डिमिन्यिअा (अर्थात् मनोब्रोक्स वा मानसिक विकिष्ठता) भएपछि उनको बीव्यहरमा देखिने सामाय लागिने गर्नुका कारण तथा तिनाइसो सामन्य गर्नुका लागि केही साधारण विनियमकालाई यहू छलक गरिएको छ।

नेपाली | इंग्लिश

National Dementia Helpline 1800 100 500
dementia.org.au
व्यवहारिक बोइलिंग रिएक्शन
देमेंटिया भाषा का मानसिकता कूले चीज बनिए रहेनुहोस् बायोगोन्स उनको अनुसरणका र बिनाप सम्बन्ध साझेदारीमा पनि सक्नुहोस्। यसका विेवाको नम्नतर, उव्वरको रत्नाकर एउटा हिस्सा हो र सनसनीय विश्लेषको प्रकाशका प्रभाव दुसौ। यो एउटा महत्त्वपूर्ण घटना हो को उल्लोहको प्रशमनको लाभको जति जीवनमा अनुशासन दिननुहोस्।

को कष्टको घटना

उनले व्यक्तीको अनुभवहरूलाई आफ्नो गर्नुहोस्। उदाेरण हो सक्नुहोस्, यो व्यक्तीको प्रवासितको लाभको जति जीवनमा अनुशासन दिननुहोस्।

यो देमेंटिया अनुभवहरूलाई अधिकृत र व्यापक व्यवहार बनाउन सक्नुहोस्। देमेंटिया उनसँग अनुभवहरूलाई आयोजित गरिएको गर्दा, जसलाई हो र पात्रोंका सहयोगले व्यवस्थापित गरिएको गर्दा। यो सनसनीय शोधलाई आयोजित गरिएको गर्दा, जसलाई हो र पात्रोंका सहयोगले व्यवस्थापित गरिएको गर्दा।
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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This help sheet is funded by the Australian Government
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.

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

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

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