



Enhancing Quality of Life

Renee Parham, CTRS, CDP, Emerging Gerontologist

Objectives

Participants will understand cognitive changes that are abnormal with aging and warrant further investigation.

Participants will understand the role of palliative providers in enhancing quality of life through assessment and future planning.

Participants will learn common challenges those with dementia face and how to assist in navigating said challenges.

Participants will understand the importance of socialization and techniques to promote quality of life.



DEMENTIA Umbrella term for loss of memory and other thinking abilities severe enough to interfere with daily life. Others: Lewy Body Vascular Alzheimer's Dementia: Dementia: Dementia: 60-80% 5-10% 5-10% Dementia from more than one cause

Dementia Overview

Dementia (Major Neurocognitive Disorder) is an umbrella term that describes a set of symptoms that impact ability to carry out daily tasks.

Our goal is to ensure highest quality of life for the person living with dementia and their care partners.

Abnormal cognitive changes with aging

Memory impairments that disrupts daily life

Difficulty completing familiar tasks

Changes in planning or solving problems

Unable to trace steps

Changes in mood or personality

Confusion with time or place

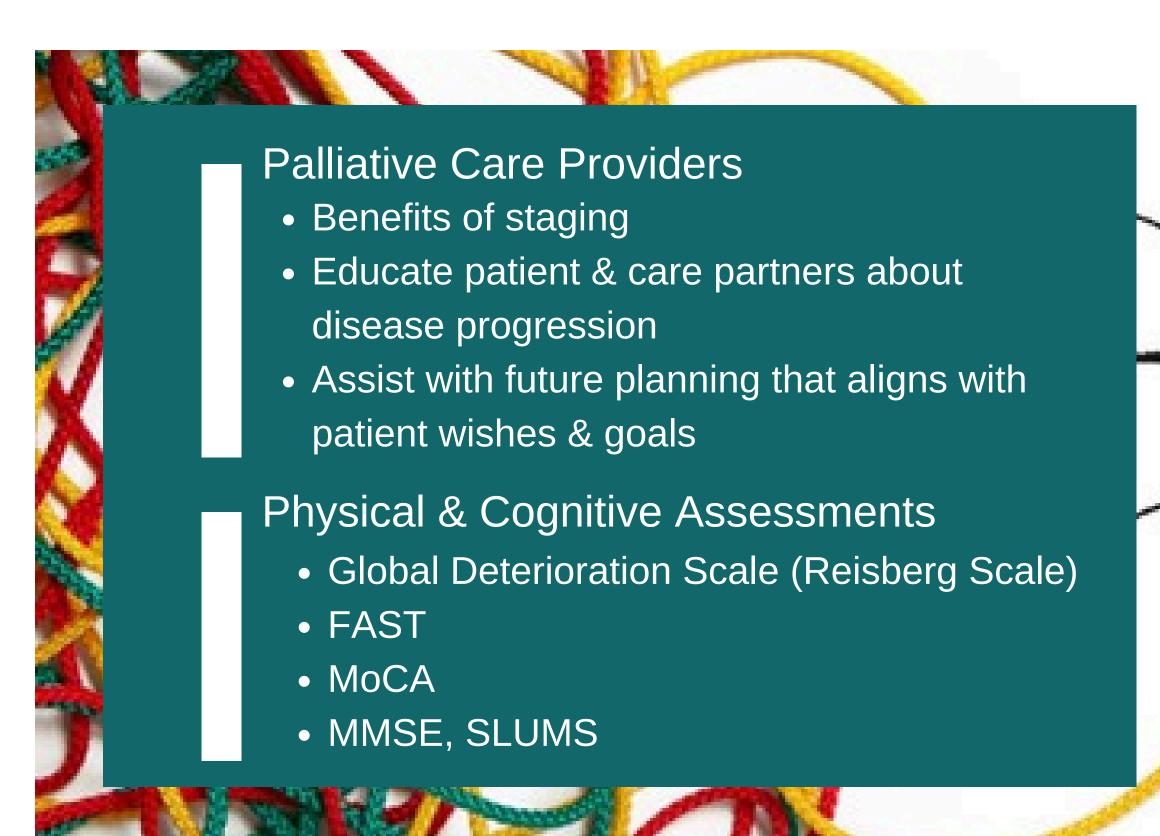
New problems with words in speaking or writing

Difficulty
understanding
visual images and
spatial relationships

Decreased or poor judgement

Withdrawal

Assessments & Future Planning



Global Deterioration Scale

Stages of cognitive decline

7 Stages of Dementia **No Cognitive Decline** No noticeable symptoms or memory problems **Very Mild Cognitive Decline** Subtle memory lapses, generally not detected Mild Cognitive Decline Increased forgetfulness, slight concentration problems **Moderate Cognitive Decline** Clear-cut memory loss, difficulty with complex tasks **Moderately Severe Cognitive Decline** Assistance with daily activities often needed **Severe Cognitive Decline** Significant memory issues, personality changes **Very Severe Cognitive Decline** Loss of verbal abilities, total dependence on caregivers

Functional Assessment Staging (FAST) Stages of functional decline

Stage	Level of Functioning	Clinical Diagnosis
1	No decrement	"Normal" adult
2	Subjective deficit in word finding	Normal-aged adult
3	Deficit in demanding employment settings	Compatible with incipient AD
4	Assistance required in complex tasks (eg, handling finances, marketing, planning dinner for guests)	Mild AD
5	Assistance required in choosing proper clothing	Moderate AD
6a	Assistance required in putting on clothing	Moderately severe AD
6b	Assistance required in bathing properly	
6c	Assistance required with the mechanics of toileting (eg, flushing, wiping)	
6d	Urinary incontinence	
6e	Fecal incontinence	
7a	Speech ability limited to approximately a half-dozen intelligible words	Severe AD
7b	Intelligible vocabulary limited to a single word	
7c	Ambulatory ability lost	
7d	Ability to sit up lost	
7e	Ability to smile lost	
7f	Ability to hold up head lost	



Case Study

For years, Bob has enjoyed going for daily walks around his neighborhood, no matter the season or temperature. It's currently July and a balmy 80 degrees out. A neighbor notices Bob wearing a winter coat on his walk.

What stage is Bob likely in? What supports could be put in place to maintain independence?

MoCA

- Cognitive assessment for MCI
- Adaptable: blind version and lower education levels
- Evaluates different brain functions
- Do need to be certified

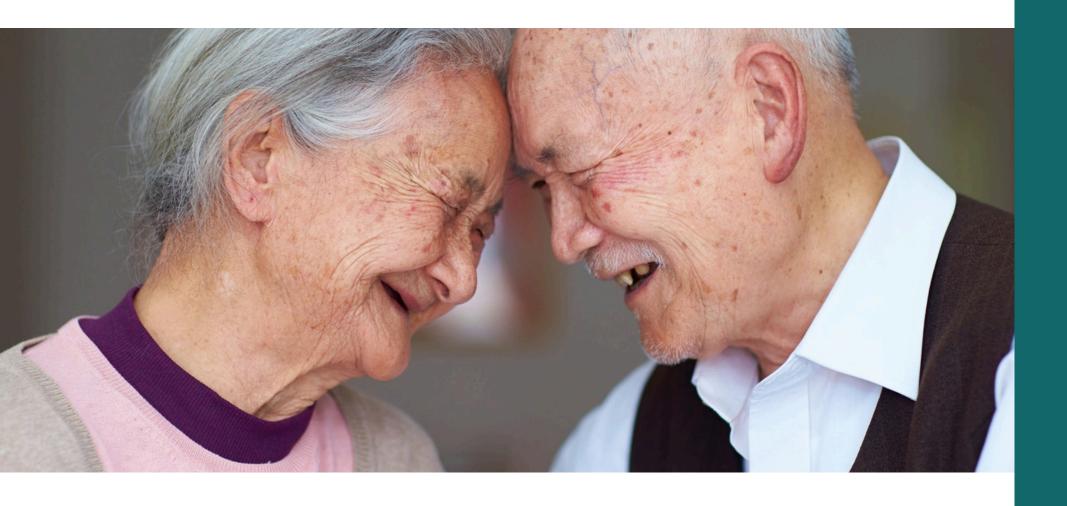
<u>Scoring</u>

- Normal Cognitive performance 26 and above
- Mild impairment 18-25
- Moderate impairment 10-17
- Severe impairment 0-9

NAME: Date of birth: MONTREAL COGNITIVE ASSESSMENT (MOCA) Version 7.1 Original Version DATE: VISUOSPATIAL / EXECUTIVE Draw CLOCK (Ten past eleven) (3) 3 [] NAMING CHURCH VELVET Read list of words, subject must repeat them. Do 2 trials, even if 1st trial is successful. 1st trial Do a recall after 5 minutes. 2nd trial ATTENTION] 2 1 8 5 4 Read list of digits (1 digit/ sec.). Subject has to repeat them in the forward order 1 7 4 2 Subject has to repeat them in the backward order Read list of letters. The subject must tap with his hand at each letter A. No points if ≥ 2 errors [] FBACMNAAJKLBAFAKDEAAAJAMOFAAB [] 93 Serial 7 subtraction starting at 100 [] 79 4 or 5 correct subtractions: 3 pts, 2 or 3 correct: 2 pts, 1 correct: 1 pt, 0 correct: 0 pt Repeat: I only know that John is the one to help today. [The cat always hid under the couch when dogs were in the room. [Fluency / Name maximum number of words in one minute that begin with the letter l (N ≥ 11 words) ABSTRACTION Similarity between e.g. banana - orange = fruit] train – bicycle [] watch - ruler CHURCH DAISY RED FACE VELVET **DELAYED RECALI** Has to recall words WITH NO CUE recall only Category cue Optional Multiple choice cue [] Day [] Place [] City [] Month [] Year ORIENTATION Date www.mocatest.org © Z.Nasreddine MD Normal ≥ 26 / 30 Add 1 point if ≤ 12 yr edu



The Bookcase Analogy



Communication

• • • •

Validation of Personal Truths

- We enter into their reality.
- You'll never win an argument!
- Anosognosia
- Validate what's true or important to them, *then* redirect

Best Practices

- Don't rely on verbal communication
- Be face to face at eye-level
- Limit distractions (TVs)
- Speak in sentences with 7 words or less in a lower tone of voice
- Offer choices, yes/no
- Emotional Intelligence
- Don't test "Don't you remember..."
- Task breakdown
- Give lots of time to respond (60 seconds+)

Behaviors ...or *reactions* to unmet needs

Basic needs

- Pain
- Feeling safe
- Hungry or thirsty
- Tired
- Bathroom

Environmental

- Clutter
- Noise levels
- Lighting
- Orientation in Space (wayfinding)

Confusion

- Time & current reality
- Slowed language comprehension
- Multi-step processes
- Hallucinations

Emotional Challenges

- Anxiety
- Depression
- Anger and Frustration
- Isolation





Physical Challenges

- Wandering
- Verbal and or Physical Aggression
- Hoarding
- Home safety



Case Study

Sue is living with dementia and is in stage 6 (severe dementia). Sue's daughter, Ellen, moved into Sue's home of 50 years to be her mom's full time care partner. Recently, Sue has started calling Ellen by her (deceased) mother's name and will demand that Ellen take her home. When Ellen tells Sue that she is home, Sue become irate and verbally aggressive.

How can Ellen handle this situation differently?

"They used to do_but not any more"







Socialization

- National Council of Dementia Minds
- Connect with others
- Day Centers

Leisure

- Simplified books
- Music and Art
- Joy for All Pet
- Exercise

Purpose

 Interest and ability based purposeful roles









Resources

- Alzheimer's Association Home Safety Check List: https://www.alz.org/getmedia/dc740fbd-9cdc-4b64-b274-9fc9ee4ec64e/alzheimers-dementia-home-safety-checklist.pdf
- MoCA: https://mocacognition.com/
- National Council of Dementia Minds: https://dementiaminds.org/
- The Alzheimer's Store: https://www.alzstore.com/Default.asp
- Global Deterioration Scale PDF: https://geriatrictoolkit.missouri.edu/cog/Global-Deterioration-Scale.pdf