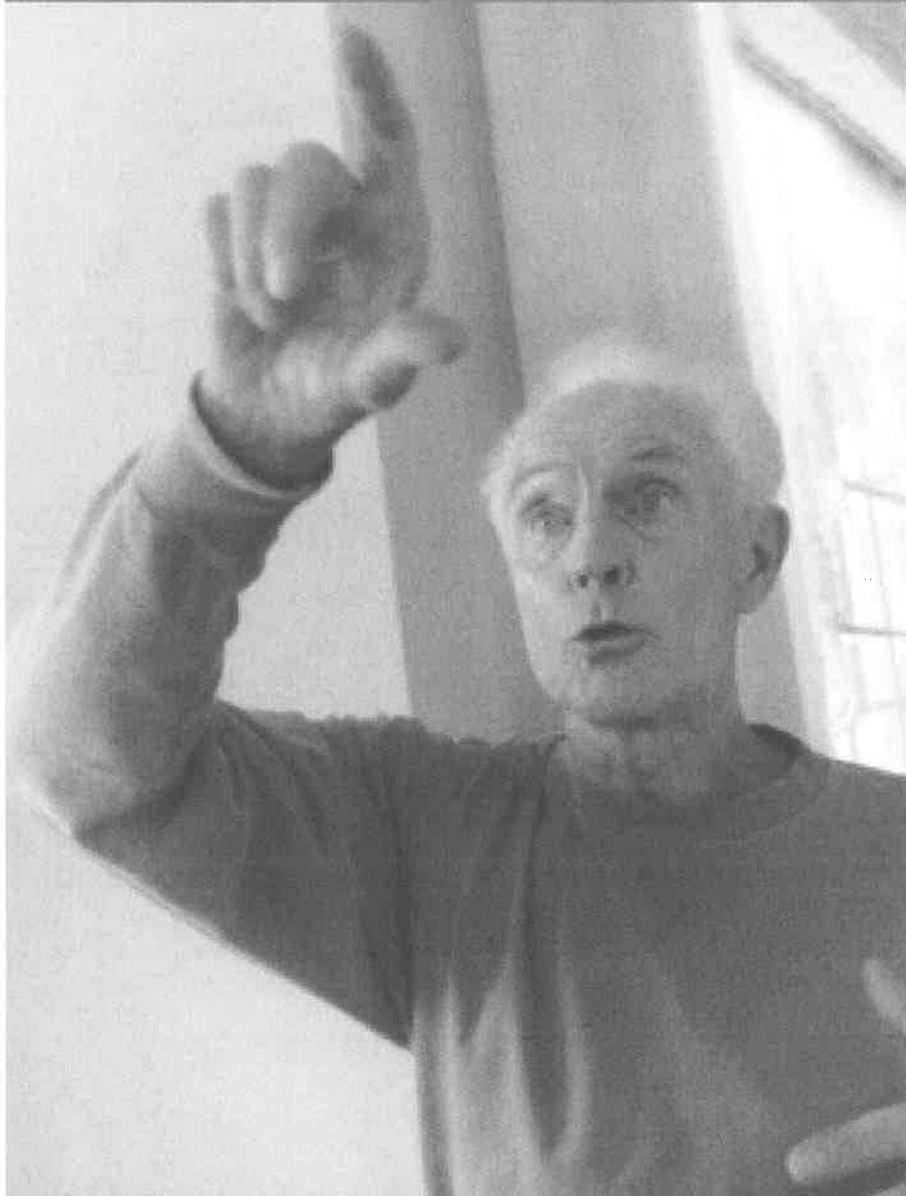


alzheimer's  association®

behaviors

What causes
dementia-related
behavior like aggression,
and how to respond



the compassion to care, the leadership to conquer

Alzheimer's disease and related dementias can cause a person to act in different and unpredictable ways. Some individuals with Alzheimer's become anxious or aggressive. Others repeat certain questions or gestures. Many misinterpret what they hear.

These types of reactions can lead to misunderstanding, frustration and tension, particularly between the person with dementia and the caregiver. It is important to understand that the person is not acting that way on purpose.

Behavior may be related to:

- **Physical discomfort**
Illnesses or medication
- **Overstimulation**
Loud noises or a busy environment
- **Unfamiliar surroundings**
New places or the inability to recognize home
- **Complicated tasks**
Difficulty with activities or chores
- **Frustrating interactions**
Inability to communicate effectively

Use this three-step approach to help identify common behaviors and their causes:

1. Identify and examine the behavior

- What was the behavior? Is it harmful to the individual or others?
- What happened just before the behavior occurred? Did something trigger it?
- What happened immediately after the behavior occurred? How did you react?
- Consult a physician to identify any causes related to medications or illness.

2. Explore potential solutions

- What are the needs of the person with dementia? Are they being met?
- Can adapting the surroundings comfort the person?
- How can you change your reaction or your approach to the behavior? Are you responding in a calm and supportive way?

3. Try different responses

- Did your new response help?
- Do you need to explore other potential causes and solutions? If so, what can you do differently?

Dementia affects each person differently. Inside, the Alzheimer's Association describes five common behaviors with recommended responses:

1 Aggression	page 4
2 Anxiety or agitation	page 5
3 Confusion	page 6
4 Repetition	page 8
5 Suspicion	page 10

1 Aggression

Aggressive behaviors may be verbal (shouting, name-calling) or physical (hitting, pushing). These behaviors can occur suddenly, with no apparent reason, or can result from a frustrating situation. Whatever the case, it is important to try to understand what is causing the person to become angry or upset.

How to respond:

Try to identify the immediate cause

Think about what happened right before the reaction that may have triggered the behavior.

Focus on feelings, not facts

Try not to concentrate on specific details; rather, consider the person's emotions. Look for the feelings behind the words.

Don't get angry or upset

Be positive and reassuring. Speak slowly in a soft tone.

Limit distractions

Examine the person's surroundings, and adapt them to avoid other similar situations.

Try a relaxing activity

Use music, massage or exercise to help soothe the person.

Shift the focus to another activity

The immediate situation or activity may have unintentionally caused the aggressive response. Try something different.

3 Confusion

The person with Alzheimer's may not recognize familiar people, places or things. He or she may forget relationships, call family members by other names or become confused about where home is. The person may also forget the purpose of common items, such as a pen or fork. These situations are extremely difficult for caregivers and require much patience and understanding.

How to respond:

Stay calm

Although being called by a different name or not being recognized can be painful, try not to make your hurt apparent.

Respond with a brief explanation

Don't overwhelm the person with lengthy statements and reasons. Instead, clarify with a simple explanation.

Show photos and other reminders

Use photographs and other thought-provoking items to remind the person of important relationships and places.

Offer corrections as suggestions

Avoid explanations that sound like scolding. Try "I thought it was a fork," or "I think he is your grandson Peter."

Try not to take it personally

Remember, Alzheimer's causes your loved one to forget, but your support and understanding will continue to be appreciated.



4 Repetition

A person with Alzheimer's may do or say something over and over again – like repeating a word, question or activity. In most cases, he or she is probably looking for comfort, security and familiarity.

The person may also pace or undo what has just been finished. These actions are rarely harmful to the person with Alzheimer's but can be stressful for the caregiver.

How to respond:

Look for a reason behind the repetition

Try to find out if there is a specific cause for the behavior.

Focus on the emotion, not the behavior

Rather than reacting to what the person is doing, think about how he or she is feeling.

Turn the action or behavior into an activity

If the person is rubbing his or her hand across the table, provide a cloth and ask for help with dusting.

Stay calm, and be patient

Reassure the person with a calm voice and gentle touch.

Provide an answer

Give the person the answer that he or she is looking for, even if you have to repeat it several times.

2 Anxiety or agitation

A person with Alzheimer's may feel anxious or agitated. He or she may become restless and need to move around or pace. Or the person may become upset in certain places or focused on specific details. He or she may also become over-reliant on a certain caregiver for attention and direction.

How to respond:

Listen to the frustration

Find out what may be causing the anxiety, and try to understand.

Provide reassurance

Use calming phrases. Let the individual know you're there for him or her.

Involve the person in activities

Try using art, music or other activities to help the person relax.

Modify the environment

Decrease noise and distractions, or move to another place.

Find outlets for the person's energy

He or she may be looking for something to do. Take a walk, or go for a car ride.



Engage the person in an activity

The individual may simply be bored and need something to do. Provide structure and engage the person in a pleasant activity.

Use memory aids

If the person asks the same questions over and over again, offer reminders by using notes, clocks, calendars or photographs, if these items are still meaningful to the individual.

Accept the behavior, and work with it

If it isn't harmful, let it be. Find ways to work with it.

5 Suspicion

Memory loss and confusion may cause the person with Alzheimer's to perceive things in new, unusual ways. Individuals may become suspicious of those around them, even accusing others of theft, infidelity or other improper behavior. Sometimes the person may also misinterpret what he or she sees and hears.

How to respond:

Don't take offense

Listen to what is troubling the person, and try to understand that reality. Then be reassuring, and let the person know you care.

Don't argue or try to convince

Allow the individual to express ideas.
Acknowledge his or her opinions.

Offer a simple answer

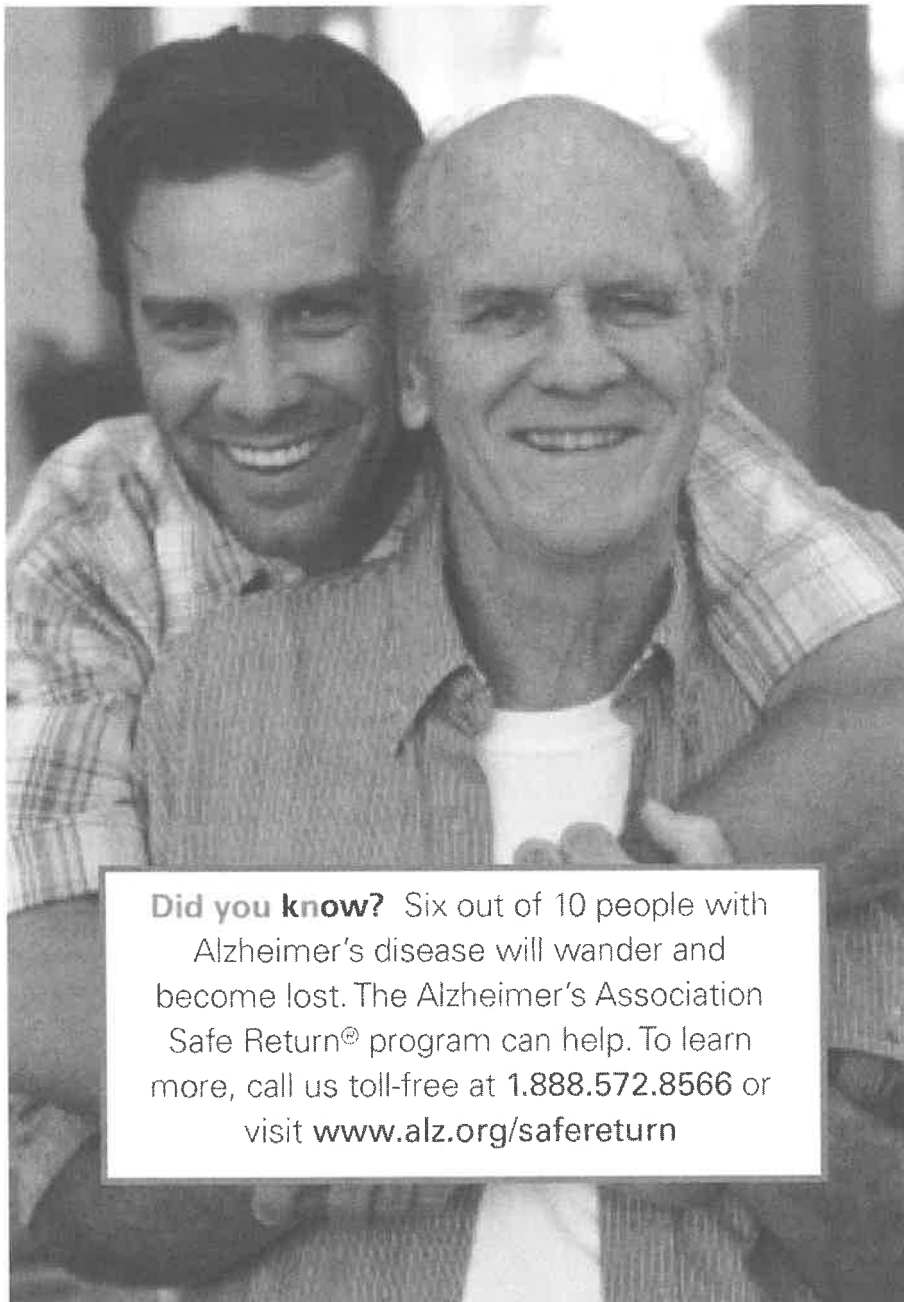
Share your thoughts with the individual, but keep it simple. Don't overwhelm the person with lengthy explanations or reasons.

Switch the focus to another activity

Engage the individual in an activity, or ask for help with a chore.

Duplicate any lost items

If the person is often searching for a specific item, have several available. For example, if the individual is always looking for his or her wallet, purchase two of the same kind.



Did you know? Six out of 10 people with Alzheimer's disease will wander and become lost. The Alzheimer's Association Safe Return® program can help. To learn more, call us toll-free at 1.888.572.8566 or visit www.alz.org/safereturn

If you have questions about your loved one's changing behavior, the Alzheimer's Association is here to help. Contact your local chapter directly or call our 24/7 Nationwide Contact Center Helpline, which provides information, referral and care consultation in 140 languages:

1.800.272.3900

10 quick tips

Responding to behaviors

- 1** Remain flexible, patient and calm
- 2** Respond to the emotion, not the behavior
- 3** Don't argue or try to convince
- 4** Use memory aids
- 5** Acknowledge requests, and respond to them
- 6** Look for the reasons behind each behavior
- 7** Consult a physician to identify any causes related to medications or illness
- 8** Explore various solutions
- 9** Don't take the behavior personally
- 10** Share your experiences with others

The Alzheimer's Association,
the world leader in Alzheimer research,
care and support, is dedicated to finding
prevention methods, treatments and an
eventual cure for Alzheimer's.

For reliable information and support,
contact the Alzheimer's Association:

1.800.272.3900

www.alz.org

© 2005 Alzheimer's Association. All rights reserved.

This is an official publication of the Alzheimer's Association but may be distributed by unaffiliated organizations and individuals. Such distribution does not constitute an endorsement of these parties or their activities by the Alzheimer's Association.


1005005 ED311Z

Memory Walk 2010


Every 70 seconds, someone will develop Alzheimer's.
This fall, a nation will walk together to move us
closer to a cure.




Join or start a memory walk team.

Español | 中文 (Chinese) |  Other languages

Home | About Us | News & Events | Media | Contact Us | Donate | Advocate | Memory Walk | Shop

alz.org | alzheimer's  association®

24/7 Helpline:
800.272.3900

Find us anywhere: ZIP 

Our vision is a world without Alzheimer's disease

alzheimer's association®

What is Alzheimer's



- ▶ [Introduction](#)
- ▶ [Alzheimer's and the brain](#)
- ▶ [Plaques and tangles](#)
- ▶ [Early stage and younger onset](#)
- ▶ [About Dr. Alzheimer](#)

Introduction

Alzheimer's disease is a brain disorder named for German physician Alois Alzheimer, who first described it in 1906. Scientists have learned a great deal about Alzheimer's disease in the century since Dr. Alzheimer first drew attention to it. Today we know that Alzheimer's:

- **Is a progressive and fatal brain disease.** As many as 5.3 million Americans are living with Alzheimer's disease. Alzheimer's destroys brain cells, causing memory loss and problems with thinking and behavior severe enough to affect work, lifelong hobbies or social life. Alzheimer's gets worse over time, and it is fatal. Today it is the seventh-leading cause of death in the United States. Learn more: [Warning Signs and Stages of Alzheimer's Disease](#).
- **Is the most common form of dementia**, a general term for memory loss and other intellectual abilities serious enough to interfere with daily life. Alzheimer's disease accounts for 50 to 80 percent of dementia cases. Other types of dementia include vascular dementia, mixed dementia, dementia with Lewy bodies and frontotemporal dementia. Learn more: [Related Dementias](#).
- **Has no current cure.** But [treatments for symptoms](#), combined with the right services and support, can make life better for the millions of Americans living

with Alzheimer's. There is an accelerating worldwide effort under way to find better ways to treat the disease, delay its onset, or prevent it from developing. Learn more about recent progress in Alzheimer research funded by the Alzheimer's Association in the [Research](#) section.

[Back to top](#)

Alzheimer's and the brain

Just like the rest of our bodies, our brains change as we age. Most of us notice some slowed thinking and occasional problems with remembering certain things. However, serious [memory loss](#), confusion and other major changes in the way our minds work are not a normal part of aging. They may be a sign that brain cells are failing.

The brain has 100 billion nerve cells (neurons). Each nerve cell communicates with many others to form networks. Nerve cell networks have special jobs. Some are involved in thinking, learning and remembering. Others help us see, hear and smell. Still others tell our muscles when to move. In Alzheimer's disease, as in other types of dementia, increasing numbers of brain cells deteriorate and die.

Take the [Brain Tour](#) to learn more about how the brain works and how Alzheimer's disease affects it.

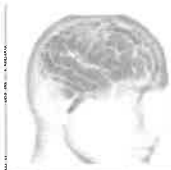
[Back to top](#)

The role of plaques and tangles

Two abnormal structures called plaques and tangles are prime suspects in damaging and killing nerve cells. Plaques and tangles were among the abnormalities that Dr. Alois Alzheimer saw in the brain of Auguste D., although he called them different names.

- **Plaques** build up between nerve cells. They contain deposits of a protein fragment called beta-amyloid (BAY-tuh AM-uh-loyd). Tangles are twisted fibers of another protein called tau (rhymes with "wow").
- **Tangles** form inside dying cells. Though most people develop some plaques and tangles as they age, those with Alzheimer's tend to develop far more. The plaques and tangles tend to form in a predictable pattern, beginning in areas important in learning and memory and then spreading to other regions.

Scientists are not absolutely sure what role plaques and tangles play in Alzheimer's disease. Most experts believe they somehow block communication among nerve cells and disrupt activities that cells need to survive.



See [Brain Tour](#) for more information on plaques and tangles.

[Back to top](#)

Early-stage and younger-onset Alzheimer's disease

Early-stage is the early part of Alzheimer's disease when problems with memory, thinking and concentration may begin to appear in a doctor's interview or medical tests. Individuals in the early-stage typically need minimal assistance with simple daily routines. At the time of a diagnosis, an individual is not necessarily in the early stage of the disease; he or she may have progressed beyond the early stage.

The term younger-onset refers to Alzheimer's that occurs in a person under age 65. Younger-onset individuals may be employed or have children still living at home. Issues facing families include ensuring financial security, obtaining benefits and helping children cope with the disease. People who have younger-onset dementia may be in any stage of dementia – early, middle or late. Experts estimate that some 500,000 people in their 30s, 40s and 50s have Alzheimer's disease or a related dementia.

[Back to top](#)

About Dr. Alzheimer

At a scientific meeting in November 1906, German physician Alois Alzheimer presented the case of "Frau Auguste D.," a 51-year-old woman brought to see him in 1901 by her family. Auguste had developed problems with memory, unfounded suspicions that her husband was unfaithful, and difficulty speaking and understanding what was said to her. Her symptoms rapidly grew worse, and within a few years she was bedridden. She died in Spring 1906.

Dr. Alzheimer had never before seen anyone like Auguste D., and he gained the family's permission to perform an autopsy. In Auguste's brain, he saw dramatic shrinkage, especially of the cortex, the outer layer involved in memory, thinking, judgment and speech. Under the microscope, he also saw widespread fatty deposits in small blood vessels, dead and dying brain cells, and abnormal deposits in and around cells.

The condition entered the medical literature in 1907, when Alzheimer published his observations about Auguste D. In

1910, Emil Kraepelin, a psychiatrist noted for his work in naming and classifying brain disorders, proposed that the disease be named after Alzheimer.



Auguste D.



Dr. Alois Alzheimer

[Back to top](#)

More information

- ▶ [10 signs of Alzheimer's disease](#)
- ▶ [Brain Tour](#)

Memory Walk 2010

Every 70 seconds, someone will develop Alzheimer's.
This fall, a nation will walk together to move us
closer to a cure.



Join or start a memory walk team.