A Dementia Friend

Who do you see when you look at me?”
I’m not the person I used to be.
At times I will not know your name,
But really I am not to blame.
Dementia has changed a part of me.
A part that you can’t even see.
It’s had an effect upon my brain,
But deep, deep, down, I’m still the same.
I can still feel and laugh and cry.
So when you see me, don’t pass by,
Without a word, a wave, a smile.
Please just stop and chat a while.
You’ll cheer me up and make my day,
Maybe, we’ll laugh at things I say.
For there’s still humor to be found,
It is not doom and gloom, all round.
So, please, please, treat me just the same.
The word ‘Dementia’ is only a name,
For a condition that I’ve got,
But I can still do such a lot.
I may just need a bit more time,
So please be patient when in line,
I’m struggling at the shopping till.
I’ll get there in the end, I will.
So take a moment, pause a while,
And then give me a nod, a smile.
And maybe then, your hand you’ll lend.
For you are now a “Dementia Friend.”

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One of the easiest ways to get help is by dialing 2-1-1, Tennessee’s community services help line. When you call, you’ll get a real person, one who is trained to help you sort out your needs, and then give you phone numbers and addresses of the closest places where you can get help.

You can also utilize the website, tn211.mycommunitypt.com
Regular, nutritious meals may become a challenge for people with dementia. As a person’s cognitive function declines, he or she may become overwhelmed with too many food choices, forget to eat or have difficulty with eating utensils. The basic nutrition tips below can help boost the person with dementia’s health and your health as a caregiver, too.

- **Provide a balanced diet with a variety of foods.** Offer vegetables, fruits, whole grains, low-fat dairy products and lean protein foods.
- **Limit foods with high saturated fat and cholesterol.** Go light on fats that are bad for heart health, such as butter, solid shortening, lard and fatty cuts of meats.
- **Cut down on refined sugars.** You can tame a sweet tooth with healthier options like fruit or juice-sweetened baked goods. But note that in the later-stages of Alzheimer's, if loss of appetite is a problem, adding sugar to foods may encourage eating.
- **Limit foods with high sodium and use less salt.** Cut down by using spices or herbs to season food as an alternative.

As the disease progresses, loss of appetite and weight loss may become concerns. In such cases, the doctor may suggest supplements between meals to add calories.

Staying hydrated may be a problem as well. Encourage fluids by offering small cups of water or other liquids throughout the day or foods with high water content, such as fruit, soups, milkshakes and smoothies.

During the middle and late stages of Alzheimer's, distractions, too many choices, and changes in perception, taste and smell can make eating more difficult. The following tips can help:

- **Limit distractions.** Serve meals in quiet surroundings, away from distractions.
- **Keep the table setting simple.** Avoid placing items on the table — such as table arrangements or plastic fruit — that might distract or confuse the person. Use only the utensils needed for the meal.
- **Distinguish food from the plate.** It can help to use white plates or bowls with a contrasting color placemat. Avoid patterned dishes, tablecloths and placemats.
- **Check the food temperature.** Always test the temperature of foods and beverages before serving.
- **Serve only one or two foods at a time.** Simplify by serving one dish at a time. For example, mashed potatoes followed by meat.
- **Be flexible to food preferences.** Be aware that a person with dementia may suddenly develop new food preferences or reject foods that were liked in the past.
- **Give the person plenty of time to eat.** Remind him or her to chew and swallow carefully. Keep in mind that it may take an hour or longer to finish eating.
- **Eat together.** Research suggests that people eat better when they are in the company of others.

(continued on page 3)
During the middle and late stages of Alzheimer’s, allow the person with dementia to be as independent as possible during meals. Be ready to help, when needed.

- **Make the most of the person's abilities.** Adapt serving dishes and utensils to make eating easier. You might serve food in a bowl instead of a plate, or try using a plate with rims or protective edges. A spoon with a large handle may be less difficult to handle than a fork, or even let the person use his or her hands if it’s easier.
- **Serve finger foods.** Try bite-sized foods that are easy to pick up, such as chicken nuggets, fish sticks, tuna sandwiches, orange segments, steamed broccoli or cauliflower pieces.
- **Use a "watch me" technique.** For example, hold a spoon and show the person how to eat a bowl of cereal.
- **Don't worry about neatness.** Let the person feed himself or herself as much as possible. Consider getting plates with suction cups and no-spill glasses.

In the middle and late stages of Alzheimer’s, swallowing problems can lead to choking and weight loss. Be aware of safety concerns and try these tips:

- **Be alert for signs of choking.** Avoid foods that are difficult to chew thoroughly, like raw carrots. Encourage the person to sit up straight with his or her head slightly forward. If the person’s head tilts backward, move it to a forward position. At the end of the meal, check the person's mouth to make sure food has been swallowed. Learn the Heimlich maneuver in case of an emergency.
- **Address a decreased appetite.** If the person has a decreased appetite, try preparing favorite foods, increase physical activity, or plan for several small meals rather than three large ones. If the person’s appetite does not increase and/or he or she is losing weight, consult with the doctor. Keep in mind, as the person’s activity level decreases, he or she may not need as many calories.
- **Only use vitamin supplements on the recommendation of a physician.**

### Possible Causes of Poor Appetite

- **Not recognizing food.** The person may no longer recognize the foods you put on his or her plate.
- **Poor fitting dentures.** Eating may be painful, but the person may not be able to tell you this. Make sure dentures fit and visit the dentist regularly.
- **Medications.** New medications or a dosage change may affect appetite. If you notice a change, call the doctor.
- **Not enough exercise.** Lack of physical activity will decrease appetite. Encourage simple exercise, such as going for a walk, gardening or washing dishes.

Adapted from alz.org/care/alzheimers-food-eating.asp
Animal Therapy Recommended for Alzheimer’s Patients

Over the years, countless health organizations have used pet therapy for patients suffering from various mental diseases. This kind of therapy is especially beneficial to Alzheimer’s patients suffering from dementia.

In animal-assisted therapy, often called pet therapy, specially-trained dogs and other animals are used to interact with people in need of stimulation and socialization. Alzheimer’s patients who have dementia benefit from the presence of therapy animals in eldercare settings. A major advantage is reducing agitation, which is common among dementia patients.

Memory impaired patients may withdraw from people, but find animal interaction easier, less painful and non-threatening. Other patients simply enjoy the presence of the dog and find pet interaction to be soothing. They benefit from the physical contact provided by contact with a pet.


(Editor’s Note: Please be cautious of your loved one potentially tripping over a pet. In some cases, a stuffed animal can be a good substitute for a real pet.)

Shaving Tips

- Many men have always preferred the close shave they can achieve with a straight-edge razor or safety razor blade. Like women who have a lifetime peeling vegetables and can still handle a knife, such men may be able to continue shaving themselves after other skills have diminished. Go with the person’s preference as long as it’s safe to do so, but don’t hesitate to switch to an electric razor when necessary.
- Some men may be persuaded to puff out their cheeks and stretch their jaws from side to side to assist others in shaving them. Try to model the behavior you want from them.
- If you are a female professional caregiver, practice your shaving technique on your husband, brothers or grown sons, and ask their advice for how to make your loved one more comfortable. Family caregivers can also ask for advice from other males in the family, including asking them to take over the task.
- Some women might find they can gain the man’s cooperation by using the barber’s trick of warm towels on the face. Actually having a barber shop shave in a barber shop chair is the best solution for some men, even if it can be done only once or twice a week.
- Some days the scruffy look — preferred by many movie stars — may simply have to do.
- Most women with AD have little interest in shaving. As women age, the hair on their legs tends to thin out, and they sweat less (at least after the hot flashes of menopause). Indeed, because they are easily chilled, they may cover their legs with pants, tights, or stockings. Some women shave or pluck unwanted facial hair, but the only reasons to continue shaving any part of women’s bodies is their personal desire to do so, or to maintain their dignity. For safety, try an electric razor; painful measures such as waxing absolutely should not be attempted.

Adapted from Activities of Daily Living - An ADL Guide for Alzheimer’s Care, by Kathy Laurenhue, MA.
Published by Wiser Now, Inc. 2006.
Tips for the Month of July

- Often people with Alzheimer’s disease in moderately severe stages of the disease display moments of lucidity with no apparent explanation. Enjoy such moments with them.
- Limit your relative’s intake of coffee and tea. They don’t aid in keeping the kidneys flushed like other fluids such as water and juices.
- If religious traditions are an important part of your family life, continue to observe them with your loved one. Remember symbols and prayers may still have a strong significance for him. They can be a great source of comfort even if he just partakes quietly.
- Complex instructions are probably not easily understood by your loved one. Always get her attention before you start talking. Give a short message. If you have to repeat a direction, use the exact same words you used the first time. Say the first thing to do, then do it. When it is done, say the next thing. Life goes more smoothly one step at a time. Your loved one will be grateful for your care and patience.
- Anger at the disease is normal. Anger directed at your loved one or extreme anger at the disease can seriously affect your caregiving. Your loved one did not cause the disease. She can’t control its progression. If you find yourself feeling extremely angry, seek qualified help right away. You will learn ways to appropriately deal with your anger as well as ways to help her deal with the anger she may be experiencing. Inappropriate anger can cause guilt feelings you don’t need.
- A glass top table might be confusing for your loved one at mealtimes. Cover the top with a short cloth. Long table cloths can get caught in her legs and feet.
- If your loved one insists upon holding onto an idea that is not based on reality, telling her she is mistaken probably won’t change her mind. She may actually believe something to be true that is not. Occasionally these delusions may make her sad, depressed, or suspicious. When this is the case, comfort her and try to introduce a more pleasant thought or distraction.

Adapted from: Lyn Roche, Coping with Caring, Elder Books, 1996.
Coping with Your Loved One’s Anger

Sometimes your loved one will get angry. He or she may yell, curse, hit, slam things around, or make accusations. There may seem to be a reason for the anger or none at all. Caregivers may be upset by this anger, especially when they’re doing their best. Try to remember that your loved one is confused. His or her anger is probably an exaggerated response and not directed at you. He or she may get frustrated or embarrassed, and this comes out as anger.

When your loved one gets angry, there are ways you can help. Distraction and avoidance are useful coping strategies. If your loved one gets upset, try distracting him or her with a different activity or with food. Respond calmly and speak slowly. Reasoning may cause more frustration.

As much as possible, avoid situations that may be upsetting, such as a change in routine, fatigue and stressful situations. Some people with Alzheimer’s are especially sensitive to sudden movements near their face that might startle and anger them.

Talk to your loved one’s doctor to make sure the anger isn’t caused by physical discomfort or side effects of medication.

A regular routine and daily exercise may reduce stress and help prevent angry outbursts.

Coping with Your Anger

Caring for a loved one can create a lot of anger. Being on the front line with aging parents changes your life in many unexpected and often undesirable ways. This does not feel good. Anger is often a cover-up for other emotions that are difficult to face, such as fear, guilt, helplessness and hurt. If you are angry, it is likely that this is your way of dealing with one or more of these other emotions.

Exploding at the person you are caring for or the event that makes you angry will probably not be very effective. It may only make you more frustrated, create guilt over losing control and lead to even stronger feelings of anger. It is important to find nondestructive ways to express your anger:

**Work it off.** Do anything that allows you to vent the feelings you do not know what to do with. Beat a sofa or bed. Throw a pillow. Give yourself permission to let go of the steam built up inside you.

**Write a letter or draw a picture.** Express your anger on paper. If you do not feel like writing a letter, just write the words that express how you feel. Draw images of how you feel. When you are finished, destroy the letter or drawing.

**Take a shower or long bath.** This is an easy way to change your environment. Wash the anger out of your system. As you soak or relax, or vigorously scrub, imagine that tensions inside you are flowing out of your muscles into the water.

**Exercise.** Take a walk, go jogging or swimming, or go to a health club to work out your anger. Take your frustrations out on that cluttered closet.

**Express your anger with a friend.** Find someone you trust to let you act out or talk about your anger. But do not project your anger on the person with whom you are talking.

It is normal to be angry and to express it. After you relieve your anger, call a friend, get a massage, go to a good movie, take a nap or find something pleasurable to do.

Source: Caring for Your Aging Parents, Donna Cohen and Carl Eiserdorf, March 1995.

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**Alzheimer’s caregiving is not a science, it is an art.**

**The art of great love.**

**The art of unconditional love.**

Bob DeMarco,

alzheimersreadingroom.com
Activities for July

**Dorothy’s Place Activities**

- **Music Therapy** with Rebecca, Tuesdays at 10:00 and Wednesdays at 2:00
- **Spanish Language Arts** with Brigitte, Mondays at 2:00
- **Tai Chi** with Marilyn, Wednesdays at 10:00
- **Mid-South Therapy Dogs & Friends**, Thursday, July 25 at 10:00
- **Music Entertainment** with Brenda Buford-Shaw, Friday morning, July 19

**Kennedy Park Activities**

- **Music Therapy** with Rebecca, Fridays at 2:00
- **Pet Therapy** with Bunni and Megan, Wednesdays at 10:00
- **Tai Chi** with Marilyn, Wednesdays at 1:30
- **Spanish Language Arts** with Brigitte, Thursdays at 10:00
- **Music Entertainment** with Brenda Buford-Shaw, Thursday morning, July 25

Our “Friends” are greatly enjoying special creative art activities and related conversations with Brittany, our summer Art Therapy intern.

**Friday, July 26, 2019 Talent/Fashion Show**

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**Send Your Loved One Some Mail**

Everyone has a lifetime of getting mail. Who would you be without your mail? It’s a way of daily connecting with the outside world and knowing what is going on around you. A wonderful gift you can always give to the person with Alzheimer's is mail. Send a magazine subscription to him on a subject he enjoys. Since people with dementia usually lose the ability to comprehend what they read, find magazines with lots of distinct, clear pictures.

The greatest and most simple mail is a card. Cards say “Thinking about you” or “You are a special friend” or “Hello.” There are countless stories of how people with Alzheimer’s find these cards every day and read them as if for the first time. This is a moment of joy that is simple for anyone to give.

Adapted from Alzheimer's Home Companion, February 2002

**Give your loved one unimportant mail to open. It may prove important to her. It can be a useful activity for her while you attend to other mail or activities.**

Adapted from: Lyn Roche, Coping with Caring, Elder Books, 1996.
10 Things You Should Have in Place for Your Loved Ones

Watching your aging loved one’s health decline is heart wrenching, especially when you feel like a helpless bystander. It’s during this time, however, you can show your loved one that you are their greatest fan! Start by overseeing their affairs, ideally with their approval, and before a health crisis develops.

1. Seek Power of Attorney Know what financial resources are available and how to access them, for example, savings accounts and pension funds, which can continue to pay for living expenses. Discuss any outstanding debts to be settled. Consult a financial advisor to help make their monies last.

2. Preside Over Legal Documents Oversee estate plans and wills (know who is executor) including up-to-date living wills (know who is nominated healthcare proxy) that describes their preferences in the case of mental dysfunctions and hospice care.

3. Manage Retirement Plans and Medical Insurance Remember Medicare doesn’t pay for long term care; be informed on any long term care insurance and what is required for the policy to begin coverage.

4. Access to Birth Certificates and Travel Documents Your loved one’s important personal data should be in the palm of your hands or accessible for legal, medical and travel reasons.

5. Access to Motor Vehicle Documents Transfer of vehicle ownership may be required in situations where the person with dementia can no longer drive and possession or disposal of the asset is necessary.

6. Manage Personal Care Items Suitable attire is needed for nursing care, which may include loose-fitting garments and short sleeve nightwear. These allow for easy dressing and access to medication injection sites.

7. Guard Valuables Family heirlooms and precious items should be placed in a safe.

8. Medications and Allergy Information Know how medications are best tolerated (for example: crushed or mixed); be ready to give information on a penicillin allergy and other life threatening medical conditions.

9. Preparations for Relocation or Home Care A geriatric case manager can help you decide on the best housing option for aging parents. For relocation to an assisted living facility or nursing home, help will be needed in packing, disconnecting home cable and other services. Home care may involve remodeling, private nursing and other logistics.

10. Accommodate Special Wishes As you care for your loved ones, they may express desires to see a special place, a long-time friend or family members. Know what soothes their soul and makes them happy.

Adapted from umh.org, article posted by Elizabeth Benis, April 12, 2013.

Go to our website adsmemphis.org to Resources to find online links to resources and more articles related to caregiving, managing finances and long term care information and options.