



BAI Beacon

*The Newsletter from Family and Community Services
Made possible by generous donations to Banner Alzheimer's Foundation*

www.banneralz.org • 602.839.6900 • February 2014 • Volume 7, Number 2

Beacon Bits



As Dementia Progresses:

Next Steps for Caregivers

Thursday, February 6, 12:30 – 2 p.m.

Banner Alzheimer's Institute,

Third Floor Conference Room

901 E. Willetta Street, Phoenix

Free but registration is required.

Call (602) 839-6850 to register.

Planning Ahead for Caregivers

Monday, February 10, 10:00 a.m. - noon

Banner Alzheimer's Institute,

Third Floor Conference Room

901 E. Willetta Street, Phoenix

Free but registration is required.

Call (602) 839-6850 to register.

GPS Lecture: The Alzheimer's Prevention Diet with Dr. Marwan Sabbagh

Friday, February 14, 10:30 a.m. – noon

Banner Sun Health Research Institute

10515 W. Santa Fe Drive, Sun City

Free but registration is required.

Call (602) 839-6850 to register.

COMPASS: Directions for Caregivers after the Dementia Diagnosis

Tuesday, February 18, 10 – 11:30 a.m.

Banner Alzheimer's Institute,

Third Floor Conference Room

901 E. Willetta Street, Phoenix

Free but registration is required.

Call (602) 839-6850 to register.

Understanding Aggression and Violence

One pressing but often ignored issue in dementia is the topic of aggression and violence and the potential for injury to caregivers or family. Violent behavior associated with dementia is relatively rare but is always serious because the person is generally unable to control the extent of their upset, has limited insight and poor judgment about the use of weapons, and is unable to decide when “enough is enough.” There are several triggers for aggression:

1. By far, the majority of aggression occurs when people are resisting assistance with personal care. Adjusting their routine, giving them a choice about when and how to clean up, walking away, and realizing that “no one ever died from not bathing” can help to prevent care-related aggression.
2. Some types of dementia have more potential for aggression than others. This includes people who develop psychosis (hallucinations and delusions) or have behavioral variant of Frontotemporal Dementia (FTD) in the moderate to advanced stages. These people must be treated with medications to ease their psychosis. People with FTD often go through a phase of severe anger that is difficult to placate.
3. People who have led aggressive lifestyles may be more aggressive as they lose judgment along with the ability to inhibit or suppress aggressive personalities. This may include people with dementia who were in contact sports, people who have been aggressive in relationships, had substance abuse issues, those who have had “anger issues,” were aggressive as part of their career, or had an argumentative “in your face” personality.
4. People with acute illness may develop delirium (sudden and additional confusion on top of dementia) and reject care particularly in hospital or long term care facilities.

While not all people in these categories become violent, it is important for families to recognize and acknowledge when there is danger. Some common complaints we often hear include:

- “I have to watch what I say, she gets so angry. I can't talk with you on the phone because she will demand to know what I am saying about her. Last night she grabbed the phone and tried to beat me with it.”
- “My husband insists on keeping loaded guns with him and says he will shoot anyone who opposes him. He threatened the neighbor with my chef's knife yesterday. I know he would never hurt anyone but it scares me!”
- “I'm calling you from the bathroom. I had to lock myself in. But he was so good yesterday. I know this will pass.”

- “He grabbed my wrist and started to twist it until I thought it would break. He later said it was just a joke.”
- “She says she would never hurt me but she looks murderous and screams at me all the time. She even screams at me when she is angry with someone else. She is always slamming doors and throwing things.”

The people who made these calls are not safe. Moreover, simply giving medication usually does not resolve these issues. There are things you need to do to protect yourself.

1. Admit that there is potential for violence. You are unsafe if your person’s anger becomes physical or he/she is angry on a regular basis. Left untreated, the anger will escalate.
2. If the person has threatened violence - even casually - take it very seriously and seek help from your doctor. If the threat is overt and a plan mentioned, call 911 and ask for paramedic services. People who are fearful will often calm down when people in uniforms are present.
3. Diffuse an aggressive situation by apologizing to the person that they are upset; agree with their anger; and state your intention to resolve the problem. Most of all get away from them. Standing and trying to reason only heightens the danger. Never let the person get between you and the door.
4. Do not deny the situation or think it will only happen once. Untreated behavioral problems go from bad to worse. Get professional help immediately. Do not call an adult child in another state and ask them what to do or to call 911. Only you can give the necessary information in this situation.
5. Obtain a medical evaluation for potential causes of delirium. When speaking with a medical professional do not try to minimize the behavior to them. If the person looks good and you try to “save face” by not being entirely forthright, the doctor will not understand the problem. If you can’t say it aloud, write what happened down and hand it to the doctor or let the office staff know that you need to speak to the doctor away from your person. Families do themselves a disservice when they present the patient as calm and kind when this is not what they are living with.
6. Remove weapons from the home. Make sure ANY weapons are not loaded and, if still in the home, the guns are in a gun safe with you having the key.
7. If the aggression is related to personal care, contact the Alzheimer’s Association or Family & Community Services at BAI to discuss how to minimize the potential for resistance.
8. Discuss the danger with your family. Do not let them tell you that you are wrong. Hold your ground and tell them what you expect.
9. Do not think you can offload a violent person to long-term care. They have no magic for managing violence. If medications fail, it is best to start with an acute care psychiatric hospitalization.

We live in a society that is becoming increasingly violent and more tolerant of aggression. Violence in someone with dementia is a dangerous and complicated situation. Immediate steps must be taken to protect the person with dementia and their family. Due to the changes in the brain, the person with dementia who threatens violence must be taken seriously and medical attention sought early and often.

Clinical Trials Announcement

Healthy seniors: help us shed light on Alzheimer’s disease. Despite progress being made in our understanding of Alzheimer’s disease (AD), there’s still a lot we don’t know. Currently, there is no cure for Alzheimer’s...and no way to delay its symptoms. The TOMMORROW study seeks to learn more about the early phase of Alzheimer’s—a phase referred to as mild cognitive impairment due to Alzheimer’s disease (or MCI due to AD). This important clinical research study is now seeking healthy senior participants between the ages of 65 and 83. To learn more: Call 602-839-6500 or visit www.TOMMORROWStudy.com

Do you have a loved one or know someone who has been diagnosed with Alzheimer’s disease and is experiencing secondary symptoms such as agitation, aggression and/ or pacing? We currently have clinical studies to assess the efficacy, safety, and tolerability of investigational drugs for the treatment of symptoms of agitation in patients with Alzheimer’s disease. If you are interested, please call Banner Alzheimer’s Institute at (602) 839-3111.



Ask The Expert

Helle Brand, PA
Physician Assistant

Dear Helle:

My dad has moderate dementia and tends to anger easily. Our problem is that he has an extensive gun collection. Most are loaded. He is an expert marksman and hunter. Should I be concerned about his guns? My brother is not but will agree to whatever you suggest. I worry for Mom's safety but whenever she talks with him about it he gets angry stating it is his "right" to own guns. What can I do?

Jenny

Dear Jenny:

Dementia changes the way people cope. They regress to earlier stages of development where judgment, visual perception, inhibitions, and reasoning may be that of a young child. The sooner the guns and other weapons are out of the home, the safer it will be for the family.

All guns should have ammunition removed, be in a locked gun safe with the key or combination protected. Ammunition should be removed from the home. If there is no gun safe, store the weapons at the home of a responsible relative or friend.

You are probably going to have to do this in stages when your dad isn't home. Your mom and brother may not want to discuss this plan with your dad. If/when he discovers the guns missing, play dumb. That is, you will all act like you don't know what happened and then try to deflect the situation by letting him know you will take care of it.

Also, if he wants to purchase new weapons, change the subject or suggest he can go with your brother "when he has time." I am assuming your brother will not find the time and you need to make sure that your brother agrees with this plan!

No gun(s) in the house is the only way to assure that family and friends will not be shot or injured during a confused episode.



Have a Question?

To submit your question for future consideration
email us at:
baiinfo@bannerhealth.com



Banner Alzheimer's Institute

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Phoenix, AZ 85006

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Beacon Bits *(Continued)*

NEW Brain Activities for People with Dementia

Wednesday, February 19, 12:30 – 2 p.m.
Banner Alzheimer's Institute,
Third Floor Conference Room
901 E. Willetta Street, Phoenix
Free but registration is required.
Call (602) 839-6850 to register.

Free Memory Screening Event

Friday, February 21, 9:00 a.m. – 1:00 p.m.
Banner Alzheimer's Institute
901 E. Willetta Street, Phoenix
Free but registration is required.
To register, call (602) 230-CARE

GPS Lecture: The Alzheimer's Prevention Diet with Dr. Marwan Sabbagh

Friday, March 14, 10:30 a.m. – noon
Banner Gateway Medical Center
1900 N. Higley Road, Gilbert
Free but registration is required.
To register, call (602) 230-CARE

Did you know!

**Banner Alzheimer's Foundation
secures charitable contributions
to support our model of care and
research aimed at treating and
preventing the disease? To learn more
about the ways you can help us win
the fight against Alzheimer's, visit
www.banneralz.org/waystogive or call
602-747-GIVE (4483).**

Our Mission

To end Alzheimer's disease without losing a generation, to set a new standard of care for patients and their families, and to forge a model of collaboration in biomedical research.