

# Help! My mom is changing in front of me: helping a dementia parent with their behavior issues

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# Objectives

By the end of this session, participants will be able to:

- Ask for appropriate medical and psychological evaluations for people with dementia
- Discuss with a prescriber when dementia folks need medications and what medications are appropriate
- Use non-medication approaches to manage behavioral problems at home
- Utilize resources and support available in the community

# Evaluating an Evangelist

- 73 year-old develops tremors & an unsteady gait
- Diagnosed with Parkinson's disease & started on Sinemet
- Starts having urinary incontinence
- Becomes forgetful and more confused
- Is more and more depressed
- What medical work up and testing does he need?

# Reversible Causes

- Normal Pressure Hydrocephalus
  - Treatment: brain shunt
- Neurosyphilis
  - Treatment: high dose IV penicillin
- Vitamin B12 deficiency
  - Treatment: high dose B12 shots
- Brain Tumor
  - Treatment: surgery

# Dementia Definition

- Progressive degenerative brain disease
- Impairs psychosocial functioning
- Involves at least 2 cognitive domains

# Prevalence of Dementias

## Most Common

Alzheimer's

Vascular

- Multi-infarct

Lewy Body

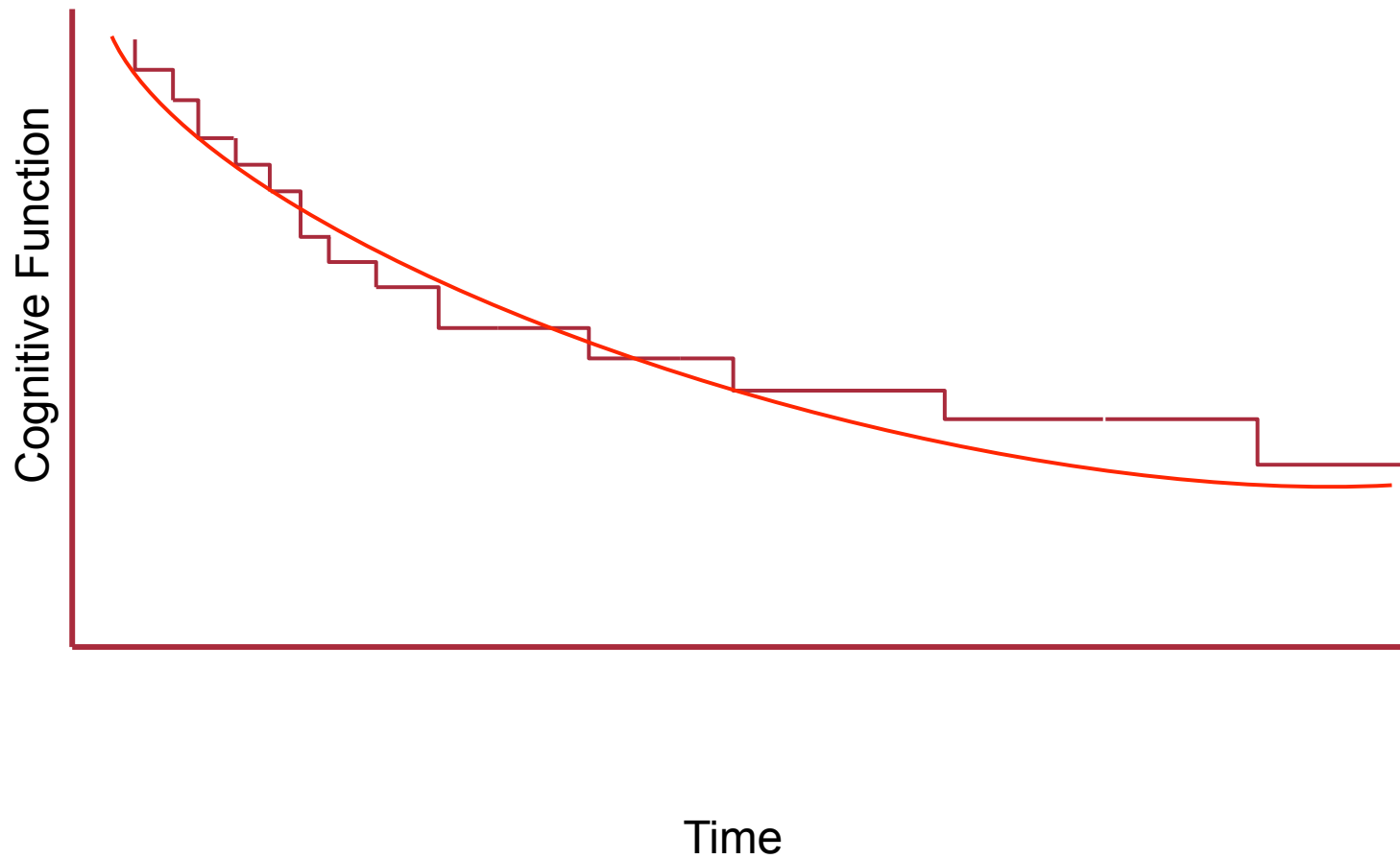
## Less common

Parkinson's

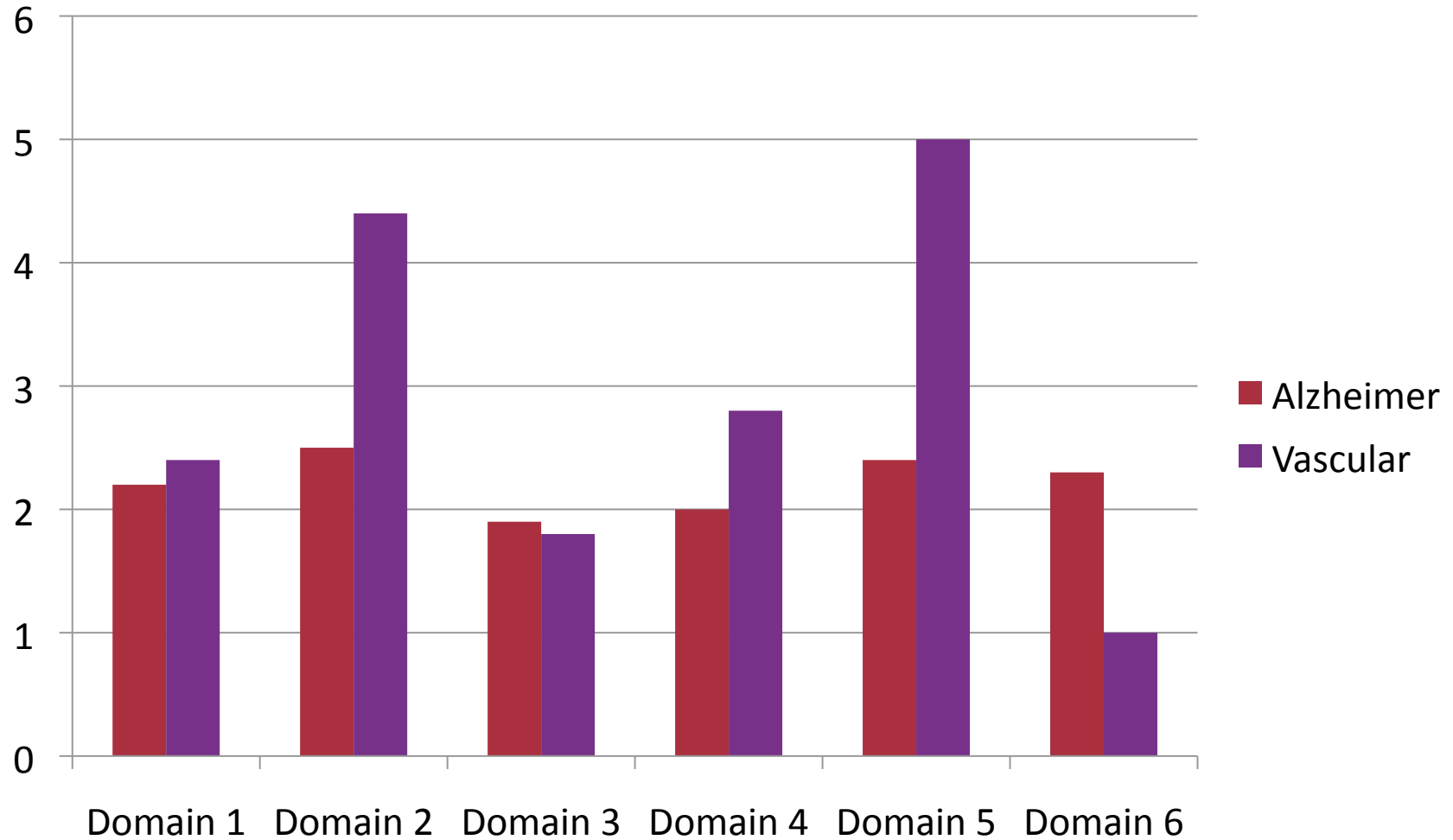
Frontal-temporal lobe

- Pick's disease

# Alzheimer's vs Vascular



# Neuropsych Testing





# Dementia Staging

	<b>MMSE</b>	<b>Function</b>	<b>Placement</b>
Mild	>25	Advance ADL	Home alone
Moderate	16-25	IADLs	Home with caregiver
Severe	10-15	ADLs	Assisted living
Advanced	0-9	Some ADL	Nursing home

# Depressing Debilitating Decline

- 68 year-old just diagnosed vascular dementia a few months ago
- Rapid decline in the last few weeks
- Sleeping a lot during the day
- Not interested in activities, eating less
- Gets anxious for no reason
- Easily agitated and irritable
- What can we do?

# Rule Out Stroke

- Other neurological changes?
  - Other symptoms: weakness, swallowing difficulty, vision change, imbalance
  - Physical exam
- Brain imaging
  - MRI
  - CT scan – rather useless

# Rule Out Delirium

- Impairment of concentration and attention
- Reversible
- Look for
  - Infection
  - Heart disease
  - Change in medications
  - Metabolic lab abnormalities
- Avoid sleeping pills
  - Benadryl, Ambien

# Depression Screening

- Geriatric depression scale
  - 15 item
  - Self report by senior
- Cornell depression scale
  - For non-verbal seniors
  - Interview of caregiver
  - Approximately 20 minutes to administer

# Choosing an Antidepressant

- SNRI – if also have pain
- Remeron – if appetite problem, insomnia or anxiety
- Trazadone – if insomnia & depression is mild
- SSRI - default
- Avoid tricyclics

# Agitated for Attention

- 69 year-old moderate Alzheimer's
- Long history of anxiety
  - On Valium for years
- 64 year-old spouse still working part time
- Gets agitated every morning when spouse leaves
- What can we do to help?

# Responding to Repetition

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## Do

- It's the disease, not the person
- Redirect
- Refresh
  - Take care of self
- Take time out
- Call a friend

## Don't

- Confront or correct
- Get angry
  - Yell, scream
- Hold it in
- Give in
- Tell lies
- Self medicate



# Options

- Hire caregiver
  - Pro – stay at home, 1:1 attention
  - Con – expensive, risky
- Adult day health care
  - Pro – socialization, can get rehab & nursing care
  - Con – transportation & transition
- Medications
  - Pro – convenient
  - Con – side effects
- PACE programs
- Dementia Unit placement

# PACE Programs

- Program for All-Inclusive Care for the Elderly
- Comprehensive health services
  - Medical care
  - Dental care
  - Nursing care
  - Social services
  - Rehab
  - Transportation
  - Home care
  - Medications
  - Meals
- “Nursing home eligible”
- Medicare & Medicaid dual eligible

# Medication Options

- Anxiety medications
  - Benzodiazepines: Ativan, Valium, Xanax
    - Paradoxical response
    - Increase risk of falls
  - Non-sedating: Buspar
- Antipsychotics
  - No paradoxical response
  - Increase risk of stroke and death
- Antidepressants
  - Weeks to kick in

# Alzheimer's Medications

- Cholinesterase inhibitors
  - Aricept (donepezil)
  - Exelon (rivastigmine)
  - Razadyne (galantamine)
- Namenda (memantine) – NMDA blocker

# Alzheimer's Association

- Classes
- Educational materials
- Support groups
- Referrals
- Resources

# Conclusion

- Get appropriate medical and psychological evaluation
- Screen for depression
- Non-medication management is best
- Medication management may be necessary