



Dementia An introductory guide for ambulance clinicians

A recent survey found that ambulance crews are in frequent contact with people with dementia and that crews want information about dementia, how it affects people and how best to support and communicate with this patient group.



It is a complex subject. The purpose of this guide is to provide basic information and point you in the direction of where you can find out more.

Dementia: Some basic facts

- ➔ Dementia is an age related condition. The older you are the more likely you are to have dementia.
- ➔ 1 in 16 of people over 65 have dementia, 1 in 4 over 85.
- ➔ A quarter of hospital patients are estimated to have dementia. The experience of people with dementia in hospital is often not a good one.
- ➔ 42% of people over 70 who have an unplanned admission to acute hospital have dementia. Rising to almost 50% in those aged over 80 years.

More about dementia

The term 'dementia' is used to describe the symptoms that occur when the brain is affected by specific diseases and conditions, such as Alzheimer's disease. Dementia is the result of increasing organic damage to the brain. Over time it can progress from a mild to severe condition. Dementia affects people in different ways, depending upon the area of brain affected and a person's personality, background and physical health.

Most people with dementia will experience:

- ➔ loss of short term, recent memory
- ➔ problems in perception and understanding, and
- ➔ problems in expressing themselves.

Some people with dementia may also experience:

- ➔ hallucinations
- ➔ problems in controlling bodily functions (e.g. in standing, continence), and
- ➔ find it hard to sequence activities.

Dementia can result in people becoming reliant on long term memory, causing them to relate to the present as if it was the past. This leads to miscuing and misunderstanding. For example they may perceive an ambulance clinician in a uniform as an enemy soldier from the war, a shiny surface as water, attempts to lift them as an assault, strangers as long-lost relatives.

Imagine what it must be like to be so confused, when the world isn't making sense, people around you are not responding in the way you expect and you cannot get the words out to explain yourself. People with dementia naturally respond by becoming very anxious, withdrawn, frustrated or angry.

It is hard to tell if someone has dementia. **Only 1 in 3 people are ever diagnosed.** But if things aren't "ringing right" consider dementia as a possible reason.

Suggested approaches

A common mistake is to think a person with dementia is behaving in a certain way because they are choosing to be difficult or awkward. It is often only because they are confused and have misunderstood the world around them.

In approaching someone with dementia it is critical to try and put yourself into their shoes.

Top tips

1. Remember the person's comprehension of a situation may be very different from reality
2. Find out and use the person's preferred name
3. Find a point of interest in order to communicate and gain the person's trust for example gardening, previous employment and family
4. Minimise background stimulation and noise
5. Keep your sentences short
6. Don't accept every thing the person says is true
7. Pay close observation to non-verbal communication especially facial expressions and gestures: remember 70% of communication is non verbal
8. Recognise that difficult behaviour is often only a means of communicating anxiety, confusion and distress
9. Strive to avoid hospital admission wherever possible (unless necessary)
10. Acknowledge feelings rather than confront their reality
11. Try to access alternative care pathways, for example social services, and primary care trust (PCT) intermediate care and rapid response services
12. Provide support and reassurance to the person
13. Consider the Mental Capacity Act and the best interest test

Medication

If you attend a person who appears confused check their repeat prescription or medications. Typical drugs used include: Donepezil (Aricept), Rivastigmine (Exelon), Galantamine (Reminyl) and Memantine (Ebixa). Many patients are likely to have been prescribed a wide range of other drugs to assist with symptom management including antipsychotics, antidepressants, anxiolytics, hypnotics or, anticonvulsants.

Where to find out more



Dementia Gateway
better knowledge for better practice

The Dementia Gateway www.scie.org.uk/publications/dementia/ produced by the Social Care Institute for Excellence (SCIE) offers high quality information, video and training programmes. There is in depth advice about establishing communication and managing difficult situations. You can also use materials on the site to update your learning portfolio!



The Alzheimer's society website www.alzheimers.org.uk offers a wide range of fact sheets, studies, discussion forums, advice and sources of support.

There are also some valuable “tips for nurses” which are suitable for a wide range of professionals www.alzheimers.org.uk/countingthecost

The South West Dementia Partnership website www.southwestdementiapartnership.org.uk provides information about progress in implementing the National Dementia Strategy in the region.