

Communication and Alzheimer's Dementia

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Communication is an important part of our life; it allows us to relate to one another. Communication is more than just talking and listening; it involves understanding and interpreting.

In people with dementia, nerve cells in the part of the brain that controls memory, thinking and judgment are damaged, interrupting the passage of messages between nerve cells. Messages are passed between nerve cells by chemicals called neurotransmitters.

At least one particular neurotransmitter is lacking in people with Alzheimer's Dementia (AD). Those with AD may have trouble with naming, word finding, fluency, comprehension, repetition and in some cases, reading and writing.

Problems arise when caregivers continue to cling to the assumption that a person's communication tools still have the same meaning as in years gone by. Making such value judgments can hinder communication with a cognitively impaired person. The person with dementia may only be able to use a limited number of words. These same words may be spoken in anger or gratitude.

The person with dementia is dealing with: confusion, anxiety, fear, irritability, depression, short attention span, inability to learn new things, loss of inhibition and loss of self-esteem.

As a caregiver, it is important to remember that kindness, patience and respect go a long way toward improving communication with a person with AD. When interactive with a person with AD, you must be calm, reassuring, listen more than you talk and never correct instead try to connect — accept that the individual with AD's reality may be different.

Before good communication can take place, it is crucial that you build a rapport with the person with AD. Caring is hard to fake, it has to be genuine. Remember to be patient, maintain eye contact and use touch to build trust.

Verbal communication techniques

- Speak slowly — the person with dementia processes verbal information more slowly.
- Don't give rapid instructions.
- Construct communication to match the person's ability. Early dementia needs less adaptation; middle and later requires more.

- Use simple words and short sentences (simple, not compound or complex).
- “Go into the kitchen, gather together the dishes (don’t forget the salad bowls), silverware and take them into the dining room and set the table with the blue place mats in the bottom drawer of the buffet.” “Put these mats on the table.”
- Use words frequently used by the person in the past: “supper” instead of “dinner.”
- Use nouns rather than pronouns – “This is Michael’s book” not “This is his book.”
- Don’t use two-part questions — “Here’s your blouse” not ”Do you want to wear the blue shirt with the navy pants or the white one?”
- Address by name to get attention and reinforce identity. In the later stages also, remind the person who you are before beginning any communication.
- Make one request or ask one question at a time
- Give person time to respond
- If need to repeat, use same words. If this does not work, wait a few minutes and then rephrase.
- Change topics slowly
- Use humor, but not at the person’s expense.
- When questions are repeated, answer once and then use reassurance instead of repeating the answer.
- If necessary, to speak louder, lower tone of voice
- Need quiet, non-distracting environment. People with dementia cannot function in a chaotic environment. (Person trying to eat breakfast with a child racing around getting ready for school, the baby is crying and a TV is blaring in the background.)
- Remember, every behavior has a reason even if you do not understand it. They are doing the best they can at the moment.
- Don’t overreact — this will only produce anxiety and agitation.
- Don’t embarrass, scold, shame, moralize or punish. This destroys self-esteem and is counter-productive.

As the disease progresses, there is an increased awareness of nonverbal cues: nonverbal communication becomes more important in communicating. We are verbal creatures by nature

and tend to think only regarding communicating with words; however, much more is conveyed through nonverbal means.

Remember, nonverbal communication is felt and is interpreted by others not involved in the process (anger expressed regarding another, but witnessed by the person with dementia may be interpreted as anger against that person).

The person with dementia is extremely sensitive to the emotional climate of the environment. The tone of your voices can be colored by the history of a relationship. If the relationship was not all that terrific in the past, a lot of negative messages could be conveyed. You may be providing care not out of desire but out of obligation. You may be resentful and these feelings can wash through into day-to-day caregiving communication. The person with dementia is highly sensitive to his/her role in the family or group and reprimands, especially by an adult child or a grandchild. The person needs to feel that his/her dignity and self-esteem remain intact, even if the mental condition is declining.

Non-verbal communication techniques

- Maintain eye contact to maintain attention and convey care.
- Be consistent — the verbal message should match body language — sarcasm is inconsistent.
- Listen and pay attention, even when you do not understand — conveys respect and concern.
- Use gestures to clarify what you want and to reinforce your message (nod head yes when saying yes).
- Cue the person by stimulating several senses. If he may need to use the bathroom, take him there, show him the toilet and ask “do you have to use the toilet?”
- Show love and affection, hold hands, touch, hug, praise — touch conveys trust and understanding. Touch can enhance attention and listening behaviors, reduce feelings of rejection, increase interaction and reinforce confidence. Sensations from the skin are represented by a large area of the brain.
- Feelings expressed in the person’s voice or gestures are often more important than their words and are more likely to get through.
- Communication is a two-way street, as caregivers, it is also vital that we pay attention to the nonverbal messages from a person with dementia.

Here are some physical signals that a person with AD may exhibit that you need to be alert to:

- Pale or flushed face, perspiration, etc., may mean the person is receiving too many sensory stimuli — the smell of dinner cooking, the sight of busy preparations and the sound of the TV.
- Averting the eyes, looking down and increasing hand gestures may mean the person does not understand.
- Feelings of hostility may be expressed by an increase in motor activity (pacing), frowning, shouting, pursed lips and tight facial muscles and jaw.
- Non-listening behavior may be exhibited by the lack of direct eye contact, failing to nod or affirm. Leave alone and try later.
- Being receptive is often indicated by decreased or absent body motion, relaxed facial muscles, smiling, extending hands.
- Hand-wringing, crossing may exhibit anxiety and uncrossing legs, stepping toward you, increased body movement.

Don't let frustration get the better of you. While the general trend of dementia sufferers is a downward decline, people with dementia will have ups and downs just like everybody.