COMMUNICATION TIPS WHEN INTERACTING WITH DEMENTIA PATIENTS

It has been noted widely that non-verbal communication, such as body language, voice tone and facial expressions relay great amounts of information to the cognitively impaired adult. As their ability to process verbal information is impaired, the way in which we use language is extremely important when working with cognitively impaired adults.

Clear communication, verbal and non-verbal alike, is the essence of any quality interaction. The following suggestions will enhance your effectiveness with your family member or patients.

1. In your interactions with the patient, try to:
   * Be calm and reassuring
   * Speak slowly and distinctly
   * Use simple words

2. Remember that the patient is dealing with:
   * Confusion
   * Anxiety
   * Loss of self-esteem
   * Irritability
   * Feeling of depression (when he is aware enough)

3. Before asking the patient to do something, address him by name to get his attention. While you are speaking, maintain eye contact to help maintain his attention. Non-verbal gestures help in communicating to the patient what you want him to do.

4. Ask only one question at a time and give the patient time to respond. If the patient does not seem to understand, repeat the question using the same wording. If this does not work, after a few minutes try to rephrase your question. (This will require that the patient process new information).

5. Approach the patient from the front. It may startle and upset him if you touch him unexpectedly or approach him from behind.

6. Allow the patient adequate time to respond in conversation or when performing an activity. Rushing the patient will increase his confusion.

7. Use humor whenever possible though not at the patient's expense.

8. Always remember the importance of love and affection. Sometimes holding hands, touching, hugging and praise will get the patient to respond when all else failed.

9. The feelings expressed in your voice when speaking to the confused patient are as important as the words you say.

10. Try to maintain a regular daily routine. An Alzheimer patient has difficulty coping with change. A structured routine will help the patient maintain his abilities. It may also save you time and energy.

11. Involvement with his daily tasks help to maintain the patient's self-esteem. Also, disruption in the patient's usual habits may result in his no longer being able to perform that activity. For example, if you begin dressing the patient, he might soon forget how to perform this function.
12. Keep your expectations of what the patient can do realistic given his degree of impairment. There will be less frustration on both your parts if expectations are realistic.

13. Break down all tasks into simple steps. Tell the patient one step at a time what to do. Giving too many directions at one time, or giving them too quickly, will increase the patient’s confusion. If the patient gets upset and becomes uncooperative, stop and try again later.

14. When the patient wakes up from a nap or a night’s sleep, he may be more disoriented than usual. Expect this and be prepared to orient him through general conversation.

15. Do not disagree with made up stories. Instead, gently correct the patient to avoid increasing his anxiety. If the patient mumbles incoherently or rambles, attempt to reduce this by directing him with an activity.

16. Be consistent. If you say that you are going to do something, follow through with it.

17. If the patient repeatedly asks a question, remember that he cannot remember the answer you have just given him. Instead of answering the question after a second or this repetition, reassure the patient that everything is fine and that you will be with him and will help him.

18. Repeating the same act may be meaningful for the patient and provide relief of tension. For example, the patient may spend 20 minutes contentedly wiping the kitchen counter. If the activity does not seem to be upsetting the patient, let him continue. If it upsets you, try to gently redirect his activity by giving him something else to do.

19. Use gestures when appropriate. Point to objects or demonstrate an action, such as brushing your teeth.

20. Do not argue over the correct answer. Relatives are often confused. He may call you his mother and mean his wife. Also remember he may be speaking his reality. If he says it is winter even though it is the middle of July, it may feel like, look like, and be what “winter” is for him.

21. If you do get angry, use “I” statements as opposed to “you” statements. Example: “I’m feeling angry, I need to rest now,” instead of “You make me so angry, I can’t stand to be here.” Accusing him of causing your bad feelings is fruitless. He can’t change his behavior for you. Also, he is frightened to see you angry at him when he feels so helpless. Talk to a friend when you need to blow off steam. Support groups are a great place for this. You will be relieved you did not yell at him after things have settled down.

22. When he is no longer able to communicate verbally, keep talking to him about those things that were important to him, such as yourself, family member, etc. Speak clearly, say names of people he loved, touch him, massage his arms, feet, head and back. Touching is the greatest communicator of love.