

Dysexecutive syndrome

[Health & Medicine](#), [Disease](#)



Dysexecutive Syndrome occurs when there is a loss of executive brain function. The term was first coined by Alan Baddeley and may result from physical trauma such as a blow to the head, a stroke or other internal trauma. Executive brain function, which includes insight, judgment, planning and initiative, makes it possible for humans to successfully manage the problems of everyday life. These functions allow individuals to carefully navigate day to day activities, make certain decisions, while evaluating the outcome, and plan accordingly.

Loss of executive function occurs as a result of brain disease, injury, intellectual disability or psychiatric disorders. The loss of executive function may be permanent as a result of Alzheimer's disease, dementia, schizophrenia or massive head injury. Temporary loss may result from delirium, physical illness or intoxication. While the syndrome manifests itself in various ways, it is mainly apparent from the "afflicted person's prior personality, life experiences and intellect" (Royal Hobart Hospital Department of Health and Human Services).

Dysexecutive Syndrome was once thought to be associated with frontal lobe syndrome. However, researchers have come to realize that this syndrome may occur as a result of impairment to other parts of the brain and not just the frontal lobe. Symptoms of Dysexecutive Syndrome may fall into three different categories: cognitive, emotional and behavioral. Symptoms include loss of memory which causes the individual to lose track of conversations, have trouble interacting socially and following a story-line.

Therefore it is very difficult for a person suffering from this syndrome to carry on with simple tasks that were once the norm for them such as reading

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and maintaining simple conversations. It is also very common for individuals with this syndrome to lose problem-solving skills and lack good judgment which are essential for daily activities, communication with others and general behavior. The lack of insight leads to a loss of social skills such as normal speech and how to behave in social and group settings.

Due to their loss of cognitive reasoning, they may also react aggressively or appear stubborn and self-centered. They have little or no control over their reactions to frustration or their lack of understanding. They have forgotten how to control their behavior and have no sense of what is acceptable in certain social situations. It is also common for patients suffering from this syndrome to have disturbed sleep patterns. They also have the tendency to become resistant and aggressive when others try to provide care as they are unable to recognize or fathom what is happening to them.

Many times, the person with this illness does not realize that they have a problem therefore they are unable to do anything to rectify it. There is no cure for Dysexecutive Syndrome, however, therapy is available that helps the patient to cope. In order to assist someone experiencing Dysexecutive Syndrome, the caretaker should encourage conversation while focusing on familiar, reminiscent and here and now contextual information. These conversations should take place in a quiet place where there are no distractions. Large group conversations should be avoided as this may confuse and frustrate the patient.

The caretaker should also give orientating information regularly throughout the conversation, providing gentle reminders about the conversation topic and explaining things clearly and simply. They should ensure that the patient

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understands the conversation and take care to repeat and simplify if necessary. The caretaker should also aim to provide structure for the patient by trying to keep the same daily routine where possible. They should point out problems gently and tactfully and encourage the patient to write important things down.

Assist the patient by providing memory and orientation aids such as a clock, diary, calendar, timetable, notebook, photoalbum, etc. And avoid asking complex questions which require good understanding and memory. With the loss of the ability to perform simple, everyday tasks, patients experience a loss of self-esteem and self-worth. This may contribute to frustration, boredom and aggression. To avoid this, caretakers or loved ones should be sure to involve them in the activities that they are still able to do.

Encourage responsibility and contribution to the household in order to reinforce their importance. Engage them in diversional, recreational and functional activities. It would also help to write out activities so they are able to read and follow steps. It is difficult for both a patient and a loved one dealing with this illness. Since the patient is experiencing a loss of cognitive reasoning, it is up to the caretaker or loved one to recognize the symptoms and assist the patient with regular day to day functions.

It is the caretaker's responsibility to try and uplift or maintain the patient's self-confidence while assisting them with navigating the normal issues of day to day life and activities. While it is never easy on anyone involved, there are strategies that can alleviate the situation. Recognizing the symptoms of this syndrome is the first step in helping everyone to cope. Reference Alderman, N. , Burgess, P. , Emsile, H. , Evans, J. J. , & Wilson, B. A. ,(1996). Behavioural <https://assignbuster.com/dysexecutive-syndrome/>

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