# Good example of dementia caregiving critical thinking

Technology, Development



Dementia is a group of brain syndromes that leads to gradual mental retardation and usually occurs in people older than 65 years of age. The health care and nursing of dementia patients is largely dependent on the medical practitioners. Dementia may be accompanied by symptoms like senescent forgetfulness, loss of language function termed as aphasia, delirium or confusion, apraxia or difficulty in performing deliberate movements . Some diseases that can manifest as dementia are Alzheimer's disease, Creutzfeld-Jacob's disease, Wilson disease, Parkinson's disease and Huntington's disease, Neurosyphilis and cerebral tumors. The care provided to the dementia sufferers by their family caregivers determines the quality of life and wellbeing of these care recipients.

#### History

In the eighteenth century, dementia was classified as a reversible mental impairment with psychosocial incapabilities, regardless of the age . It was in the nineteenth century that it was recognized as an irreversible syndrome of old age with declining intellectual and memory functions of the brain. Until the nineteenth century, the distinction of dementia from other forms of insanity was rather obscure. Dementia praecox was regarded as one underlying disease with many manifestations. In 1920's dementia praecox got sidelined and was substituted by Eugene Bleuler's Schizophrenia although the disorders were often used interchangeably. Schizophrenia, however, had more positive symptoms compared to dementia. Over the years, the concept of dementia has evolved from a rather broad definition of illnesses comprising several symptoms to a narrower and specific idea of mental disorder related to ageing.

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## **Demographics**

The challenges of financial hardship, psychological stress, social isolation faced by the family caregivers of dementia patients can impose a severe burden on their wellbeing and health. As of 2009, about 30 million people suffer with dementia and the number is anticipated to increase twofold in the next twenty years. In the USA 75 % of the people with dementia are taken care of by family and friends. More than 60 % of dementia sufferers belong to the developing countries . The difference in the caregiving between developing and developed countries is attributed to the living arrangements, considering that the people in developing countries live more commonly in bigger households and extended families. The costs of providing informal care to dementia patients were estimated to be 257 billion dollars in 2004 . Developed countries demonstrated a variation in the rates of dementia at all geographical scales . Living in the rural areas was correlated with the risk of developing Alzheimer's disease and evidence demonstrated that early rural living in particular increased this risk.

## **Contemporary Issues of Dementia Caregiving**

Although informal caregiving gives the caregivers tremendous satisfaction and a sense of purpose and spiritually fulfillment as they nurture their suffering relative, it is often accompanied my several hurdles and predicaments. The annual costs of Dementia care in the UK supersede the costs of cancer and heart diseases. The exorbitant cost burden and other emotional and physical challenges faced by informal caregivers of dementia patients often leads to depression or anticipatory grief in them . A recent report on dementia care in UK underscores the need to introduce early intervention in dementia cases and improving the quality of primary care for people with dementia . With appropriate measures to improve the dementia treatment and diagnosis and providing training and care to the caregivers can enhance the overall efficiency of medical care for dementia.

#### References

Berrios, G. (2004, June 23). Wellcome TrustWebsites. Retrieved from The human genome: http://genome. wellcome. ac. uk/doc\_WTD020951. html Brodaty, H. (2009). Family caregivers of people with dementia. Dialogues in Clinical Neuroscience, 11(2): 217-228.

Crisp, H. (2011). Spotlight on Dementia Care. London: HEalth Foundation .

Greene, R. (2006). Contemporary Issues of Care. NY: The Haworth Press, Inc.

Ropper, A. (1979). A rational approach to dementia. Cancer Medicine Journal, 121: 1175-1190.

Russ, T. (2012). Geographical variation in dementia: systematic review with meta-analysis. International Journal of Epidemiology, 1-21.