

# Communication and dementia



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Different forms of dementia may affect the way an individual communicates. People with alzheimers and most other types of dementia, often suffer from short-term memory loss. This means that they may be unable to remember events that have just happened or they may repeat a question after just a few minutes. They may forget names or even forget who people are all together. This can cause communication issues as they may be unaware who they are talking to, forget earlier parts of the conversation or repeat things frequently.

Some people may struggle to find the right word so use words that do not sound in the right context making holding a conversation a challenge for them. Struggling to verbally communicate will often result in someone trying to communicate through their behaviour, this can then be mistaken for agitation or aggression again making communication difficult. People with vascular dementia can often suffer similar symptoms due to memory loss. People with vascular dementia also tend to have a slower thinking process, making everything they do slower and more difficult.

It may take them a while to find the right word to finish a sentence or they may lose track of what they are trying to say. This can make communication quite slow and laboured, which can then lead to them becoming frustrated. Dementia with Lewy Bodies also has some similar symptoms and similar affects on communication as Alzheimers. It can also however, have some quite distinct symptoms that are not necessarily associated with other types of dementia. People with DLB tend to suffer from visual hallucinations. Hallucinations create communication difficulties as the individual is not in touch with reality when they are hallucinating.

It is often hard to comfort and reassure someone who is hallucinating as the hallucinations are real to them. Acknowledging the reality of the hallucinations and trying to provide non-verbal comfort and reassurance are the best form of communication during these episodes. Fronto-temporal dementia mainly affects people between the ages of 30 and 60. The symptoms are different from other forms of dementia although they do look similar in the early stages, especially communication issues such as forgetting names and words.

Even though there is no memory loss, in the early stages, it can seem that way because of communication problems. People with fronto-temporal dementia often suffer from changes in personality. They may become rude or impatient and may start to behave inappropriately in public. Quite often there is a change in how they react to people, they may suffer from a lack of empathy and seem quite rude and selfish. These sort of changes can make communication difficult, especially if someone knew the individual before the onset of the dementia, as it may seem that they are interacting with a completely different person.

When communicating with an individual with dementia it is important to consider how physical and mental factors may influence the way they are communicating. People who develop dementia do not suddenly become different people. They still have the same background, history and upbringing that they have always had and therefore will still have many of the same personality traits they have always had. So if someone has always struggled to communicate they probably still will. Someone who was always

chatty may still try to reach out and communicate with others even though they may no longer have the ability to do so.

People may have physical conditions such as a hearing or visual impairment that can affect the way they communicate as well as things like a stroke, illness or a physical disability etc. Pain is also a major communication issue for people with dementia as they may not be able to express or explain the pain. They may not be able to process the pain messages to understand the cause of their discomfort and so may find it hard to communicate the fact that they are in pain. Pain can cause reduced concentration, increased memory loss, increased confusion, aggressive behaviour, sleep disturbance and depression.

All of these will have an effect on an individual's ability to communicate and interact with others. An individual's mental health also can affect communication. For example if they are suffering from depression or anxiety it can make communication as they may find it harder to concentrate and affect their sleeping patterns etc. Also some individuals with dementia may also have a learning disability which that alone can affect concentration and you will need to adjust your methods of communicating to take into account their disability.

Some people have other communication issues in addition to the dementia, such as a visual or hearing impairment. If an individual suffers from hearing loss it is important to ensure that if they use any hearing aids that they are working properly, fitted correctly, are clean and have fresh working batteries in place. It is important to ensure that they are actually improving a person's

hearing abilities. You may need to communicate with them using things such as visual aids and sign language.

It is important to speak slowly and clearly to enable to hear you more and if necessary lip read. It is also important to sit in good clear light if this is the case so that they can see you and any aids you may be using clearly. Some people suffer from visual impairments. One of the most common ways of assisting someone with a visual impairment is to provide them with glasses or contact lenses. These need to be clean and the correct prescription. You need to ensure that the individual wears them as someone with dementia may forget to put them on.

If someone has an extreme visual impairment it is important to explain everything you are doing to them clearly. Introduce yourself as you come in the room. You may need to communicate to their other senses more as they may not be able to see you properly. For example if you are expressing concerns or sympathy, you may want to gently touch their hand or arm to express this. Having a visual impairment can make the process of dementia even more daunting and confusing therefore communication and interaction is vital!

The way people communicate with an individual with dementia can impact on their behaviour. Using effective communication, for example sign language if needed or visual aids or even just speaking clearly and slowly helps the individual to communicate properly with others which affects both the individual and carer or family member ect to feel good, encouraging positive behaviours. Similarly, if you do not communicate effectively or in a

way that the individual can understand it can frustrate them which could in turn lead to agitation and aggression.

It can also frustrate the person trying to communicate with them leading them to be frustrated also. There are several different approaches to therapeutic work with individuals with dementia. Two of the main ones are reality orientation and validation. Reality orientation attempts to make sure that the individual remains in touch with reality as long as possible. It is a way in which the carers working with the person do as much as they can to ensure the person knows who and where they are, eg by reminding them of the time and day frequently.

Or if the individual becomes confused they would they would remind them of the reality. For instance if they become confused and say they need to go home to cook tea for their children, a carer would show them a picture of their grown up children and gently remind them that they are now grown up and she no longer cooks their meals. All activities are also done in a way that constantly reminds people of the real world around them. This approach was very widely used in the past but not so much today. Validation is part of a person-centred approach.

In this approach the persons confusion is accepted as being their reality, and carers do not correct them or tell them they are wrong. It is an approach where their emotions are recognised and supported. For example if an individual thinks she needs to go home and cook tea for her children she will not be reminded they are now grown up. Instead her feelings of anxiety will be recognised and supported, she will be comforted and reassured and then

distracted onto something else or even encouraged to talk about her children.