

# [Alzheimer's disease and the effects on family members](https://assignbuster.com/alzheimers-disease-and-the-effects-on-family-members/)

Alzheimer's disease and the Effects on Family Members Cara Morris of NM N332 Alzheimer's disease is a dreadful chronic diseasethat develops gradually and affects the brain and the nerves in the body. Alzheimer's disease is the most common type of dementia and is a growing problem in the US. A person with Alzheimer's disease does not have the ability to perform activities of daily living; they have behavior changes, loss of memory and controlled thought, they become a person that you do not recognize anymore. Failure to recognize family members and friends is bothersome, depressing, and stressful.
" Scientists think that as many as 4. 5 million Americans suffer from AD, and about 5 percent of men and women ages 65 to 74 have AD. 50 percent are 85 and older may have the disease" (NIA). There is not a specific cause, but has several risk factors such as age, family history and inflammation in the brain. Scientists are investigating if environment, education and diet are risk factors for the disease. Alzheimer's disease is named after the German physician, Alois Alzheimer, who discovered the changes in a 51 year old woman's brain tissue that had passed away from a strange mental illness. Most AD patients live 8 to 10 years after being diagnosed, but some can live as many as 20 years (NIA). Women usually develop Alzheimer's more than men because women live longer.
The family role of care giving is becoming more prominent on account that long-term facilities are so costly and nursing homes have negative stigmas. The cost of family care giving averages about $77, 447 and the cost for long-term care runs about $5, 000. 00 a month. The impact of Alzheimer's disease takes a toll on family members because family caregiver's health begins to decline. Research shows that family members who provide care to individuals with chronic or disabling conditions are themselves at risk. Emotional, mental, and physical health problems arise. (FCA) Family members who place their loved ones in long-term care facilities also suffer from the same conditions and family caregivers, such as depression, anxiety, and high stress levels have poor eating habits, fail to exercise, and they even fail to skip doctor's appointments. However, family caregivers have an increased risk for heart disease, cancer, infections, and have a " high risk for excessive alcohol consumption, tobacco and other drugs" (FCA) . A caregiver's level of burden increases with the amount of time spent a week caring for family members, which is more than 40 hours a week (NAC). Some people think that placing a family member in a nursing home relives the depression and stress, but the conditions do not change. " 48. 3 percent of caregivers were at risk for clinical depression following placement of a relative in a long-term care facility" (JAMA), because this is the last home they will live in before they die.
Women are usually the primary caregivers at 61 percent, and women carry most of the burden, while 39 percent of men are caregivers (NAC). Family caregivers and family in general need to understand Alzheimer's disease and how to cope with their feeling and have to take care of themselves. Families can improve their well being by asking for help, exercising such as walking, behavior management classes, and various intervention programs help alleviate stress and enhance coping skills. " The most beneficial results were found in studies that included multicomponent interventions" (Psychology & Aging).
The importance of Alzheimer's disease in nursing is that there is no cure for this disease and it is growing problem, and these patients require tons of nursing care. The effect of AD on family members has harmful outcomes on their health and ultimately they will need nursing care.
References
Family Caregivers Alliance: Caregiver Health. Retrieved (November 9, 2007) from http://www. caregiver. org/caregiver/jsp/content\_node. jspnodeid= 1822
Gallagher Thompson, D., and Coon, D. (2007). Evidence-based psychological treatments for distress in family caregivers of older adults. Psychology and aging 22(1), 37-51.
National Alliance for Care giving and AARP. (2004). Care giving in the U. S. retrieved (November 10, 2007) from http://www. caregiver. org/pubs/data. htm
National Institute on Aging: Alzheimer's Disease Fact Sheet and General Information. Retrieved (November 10, 2007) from www. nia. nih. gov/alzheimers/publications/adfact. htm
Papastavrou, E., Kalokerinou, S., and Papacostas, S. et al.(2007). Caring for a relative with dementia: family caregiver burden. Journal of Advanced Nursing 58(5), 446-457.
Schulz, R., Belle, S., and Czaja, S. et al. (2004). Long-term care placement of dementia patients and caregiver health and well being. Journal of the American Medical Association 292(8), 961-967.