



## NEWSLETTER

*This is the first in a series of newsletters being prepared for frontline workers that are caring for people with dementia in long term care facilities and the community. It will be produced in March, August and December and will be distributed through facilities and community agencies throughout Algoma District.*

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### “The 7 A’S of Dementia”

The “7 A’s” categorize the most common losses of dementia and can help us to better understand the meaning of behaviour. This information is adapted from the P.I.E.C.E.S Learning Initiative Resource Guide 2003-2004.

**1. Amnesia** means loss of memory. At first, short term-memory will be lost, but eventually long-term memory will also be affected. A person with short-term memory loss may not remember what was just said, and this is why we will often hear repetitive questions or statements. Since people with **Alzheimer Disease or a Related Dementia (ADRD)** may only have access to long-term memories, they may talk about things from long ago.

**2. Apathy** is when an individual appears to be depressed or simply uninterested in activities. The person with apathy experiences a loss of drive or initiative. The part of the brain that controls initiation of activity is damaged to the point where it may not occur to the person to do anything at all.

**3. Aphasia** means loss of language, and can include both speaking and understanding others. The person may have trouble thinking of the word they would like to use or may “mix up” words. Difficulty understanding what other people are saying may lead to misunderstandings.

**4. Altered perception** means misinterpretation of sensory information, which may lead to illusions and/or delusions. This can be upsetting for both the person and their care partners. Another perceptual loss is loss of depth perception—the ability to see in three dimensions. It becomes difficult for the person to judge how high, deep, long, wide, near or far things are.

**5. Agnosia** means a loss of recognition of sensory information and includes all senses—sight, sound, taste, touch, and smell. People with agnosia are not able to sort out what they see, hear, etc. The person with ADRD may not recognize family members or friends, or even themselves in the mirror. Safety can be compromised if the person with ADRD confuses objects and their use.

**6. Apraxia** means loss of ability to initiate purposeful movements and patterns of movement. People with apraxia may have trouble understanding directions—back, front, left, right, up, down, etc. The person may have difficulty controlling their body parts to do familiar tasks, such as making a pot of coffee or brushing one’s teeth. They know what they want to do but, for some reason, the message does not get to the part of the brain that tells their muscles what to do. Since the message does not get from the brain to the body parts, people with apraxia often do not know how to start a movement or what order to follow.

**7. Anosognosia** means loss of ability to realize there is anything wrong. The person with anosognosia is not pretending and it is not “denial”. The person with ADRD honestly does not realize there is a problem because the part of the brain that allows one to reason is now damaged. This can cause challenges when the person resents being told what to do or what not to do.

## TIPS

When dealing with clients with dementia it is important to consider the following tips:

- Always introduce yourself and tell the person why you are there. This will orient him to the current situation.
- Always reassure the person and give him tasks that he can do successfully. This will increase his self confidence.
- You need to be the motivator and encourage the person to participate whenever there is an opportunity.
- Use all communication methods including tone of voice, emotion and body language as the person may have difficulty communicating verbally.
- Using verbal and visual cues may be helpful in keeping the person on track when he is attempting to do tasks. Use simple short sentences and give one instruction at a time.
- He may see or believe things that are not true to reality. Validate his feelings as it is reality to him. Don't argue with his beliefs but provide calming reassurances to any fears.

## EVENTS & EDUCATION

### Introduction to Dementia Care

This certificate program consists of three, two hour sessions. The topics covered are an overview of dementia, communication, ABC's of behaviour management, responsive behaviours, solving bathing problems and sexuality. For more information or to register call Sault College at 759-2554.

**Name Your Newsletter Contest!!** This newsletter needs a name. Visit our website [www.dementiaalgoma.org](http://www.dementiaalgoma.org) to enter the contest. The winner will receive a copy of the book *Living With Grief, Alzheimer's Disease, Hospice Foundation of America*, edited by Kenneth J. Doka. **Donated by Sault College.**

## WHAT'S NEW

### Ebixa (memantine hydrochloride)

Ebixa has been conditionally approved by Health Canada to relieve the symptoms of people with moderate to severe Alzheimer Disease. Families can call their health care provider for further information.



### "Have You Seen This Logo?"

**ATTENTION**  
**MEDICINE CLEAN OUT!**

**Wanted**  
Medications that are expired, left over or "just in case". Including pills, ointments & liquids.

**Why**  
Medication is hazardous waste.  
Don't throw it out. Don't flush it.

**Where**  
Return it to your pharmacist for safe, free disposal.

**FILL THIS BAG TODAY!**

Prescriptions, over-the-counter, herbals & vitamins

**FOCUS** SAULT STE. MARIE ANTI-DRUG COALITION  **256-6463**

You may have seen this image on a bag for the disposal of expired or left over medications. The goal is to reduce the risk of injury from unsafe medication use and storage, and to promote safe disposal of unused, not needed and expired medication.

These bags can be obtained from your local pharmacy or by calling the above number.

## RESOURCES

[www.u-first.ca](http://www.u-first.ca) U-first

[www.piecescanada.com](http://www.piecescanada.com) P.I.E.C.E.S.

[www.ocsa.on.ca](http://www.ocsa.on.ca) Ontario Community Support Association

[www.alzheimer.ca](http://www.alzheimer.ca) Alzheimer Society of Canada

## Evaluation and Feedback

To ensure that this newsletter is an effective source of information for you, your feedback is important to us. Please visit our website [www.dementiaalgoma.org](http://www.dementiaalgoma.org) and fill out the evaluation.