

What is dementia?

Dementia is an overall term for a set of symptoms that is caused by disorders affecting the brain. Symptoms may include memory loss and difficulties with thinking, problem-solving or language, severe enough to reduce a person's ability to perform everyday activities. A person with dementia may also experience changes in mood or behaviour. These dementia symptoms are irreversible, which means that any loss of abilities cannot come back.

Dementia is not a specific disease. Many diseases can cause dementia, including Alzheimer's disease, vascular dementia, Lewy Body disease, frontotemporal dementia and Creutzfeldt-Jakob disease. These conditions can have similar and overlapping symptoms.

There is currently no cure for dementia. However, there are treatment options and lifestyle choices that may slow it down. Researchers continue to look for ways to prevent or stop dementia and to improve care and quality of life for those living with dementia.

The Alzheimer Society recommends a person-centred approach to personal care, hygiene and bathing. What does that mean?

All the strategies presented in this sheet follow a person-centred approach to personal care. A successful person-centred approach to personal care is based on:

Learning about dementia, its progression and how it affects individuals:

Try to learn as much as you can about the disease to provide the best possible care and support. Learning about the disease, its progression and how it affects a person will help you be prepared and have realistic expectations of the person's abilities to manage their personal care, hygiene and bathing.

Knowing the person:

It is important to get to know the person with dementia and understand what comfortable personal hygiene, oral health, toileting, bathing, dressing, regular foot care, etc., mean to them. Tap into the person's rituals and lifelong habits. Adopting - as much as possible - their past personal care routines, including the use of favourite care products, can provide some comfort. For example, you need to know if the person fears water, if they are particularly modest, or if they experience foot pain if they don't have a toe-spacer in place.

Believing that communication is possible throughout the stages of the disease:

Communication remains possible at all stages of dementia. Although it may become difficult to understand what the person is trying to communicate to us, remember that the person's words and actions always have meaning.

It remains critical to be person-centred: Consider the whole person and value the human interaction, rather than just a series of tasks to be completed.

How does dementia affect personal care and hygiene?

Dementia affects a person's cognitive abilities.

As the dementia progresses, simple tasks that have been performed for years will become more difficult or be forgotten. For example, some individuals with dementia will forget what good hygiene means, such as brushing their teeth, taking a bath, toileting, or changing their clothes.

Dementia affects a person's functional abilities.

Because simple tasks often require sequencing, memory, coordination and problem-solving skills, a person with dementia might not know where to start and how to proceed. For example, they may forget all the steps required for brushing teeth or dressing. Dementia can also affect a person's physical coordination and mobility, leading to a gradual physical decline. This will affect the person's ability to independently perform day-to-day tasks such as taking a shower or getting dressed.

Dementia affects personality, mood and behaviour.

Some people with dementia have changes in their moods and emotions. These changes can be unpredictable. The person may lose interest in hygiene or may feel frightened by the shower, which can cause agitation and distress. Because of these changes, some individuals do not remember to take care of their personal hygiene, to bathe or even why bathing is necessary, while others may resist showering or exhibit behaviours that may be distressing for caregivers.

Although each dementia will impact the person's ability to perform personal care differently, some of the changes that the person may experience as the disease progresses include:

- Forgetting about personal care tasks by bathing less or wearing the same clothes repeatedly.
- Forgetting which tap is for hot water and which one is for cold water (consider labelling taps).
- Forgetting they had their hair combed and asking for it to be combed again.
- Forgetting how to use personal care and grooming objects like a toothbrush or hairbrush.
- Not knowing how to bathe and where to start, such as testing how hot the water is before getting in or getting undressed before getting into the tub.
- Feeling loss of control and frustration because of their declining self-care abilities.
- Having difficulty understanding the caregiver's help. For example, not understanding why they are being helped to undress or dress.
- Perceiving their caregiver's help as an invasion of personal space because of privacy issues. For example, having the caregiver remain present when they go to the toilet may feel like an invasion of privacy.
- Feeling embarrassed or humiliated especially when incontinence occurs.
- Feeling fearful of water or of drowning as some people with dementia have trouble with depth perception.
- Becoming disoriented in space and time or having perceptual problems. For example, thinking that the bathmat is a hole into which they will fall.
- Hiding dentures, brushes, combs, etc.

In the late stage of the disease, individuals experience more mental and physical changes and may need help with all aspects of care, such as bathing and using the toilet, and other day-to-day activities.

What should I try?

Despite your best efforts, providing care will become more difficult as the disease progresses and the person you are caring for becomes more dependent on you. This is a time when many family members need increased support. Learn about the services available in your community as well as tips and strategies to help you respond to the challenges of personal care and day-to-day activities. When helping with personal care, consider the following:

Promote independence and self-sufficiency:

- Focus on what the person *can* do instead of what they cannot do. Adapt activities to accommodate for loss of abilities and make the most of remaining ones.
- Involve the person in their personal care as much as possible.
- Give the person choice and put their preferences first when possible (e.g. when getting dressed, allow the person to choose between two sweaters).
- Communicate what needs to be done using short sentences and one step at a time. This will allow the person to be as independent as possible. If the person you are caring for speaks a different language than you do, try to learn a few key words in that language. Or, use your body language to communicate the steps as best as you can.
- Make sure the environment meets the person's needs.
- Always show and tell the person what you mean.

Maintain safety:

- Store all toxic materials such as bathroom cleaners, shampoos and medications in a locked cupboard. Do not assume the person will understand labels (e.g. "Poisonous – Do not drink") or symbols (skull and crossbones indicating poison). Scissors, clippers and razors also need to be stored away.
- Never leave the person alone in the bathroom and always supervise bathing or showering.
- If there is an obvious danger of the person with dementia unknowingly locking themselves in, remove the key or tape the latch open so it cannot lock.
- The person may confuse nail polish for eye drops. Lock away nail polish after every use.
- Contact an occupational therapist and consider home safety improvements to prevent falls and accidents and to enhance safety.

Reassure, encourage and stay positive:

- Be positive and calm and encourage the person's involvement when possible.
- Offer encouragement ("You're doing great!" or "You smell so good!").
- Humour and laughter can help in certain situations. It is also a great stress reliever and will help put the person at ease. Instead of being serious about everything, joke about things and laugh together.

Be as attentive and flexible as possible:

Think of adjusting time and routine to suit the person's needs, moods and preferences. Can the personal care activity be rescheduled - does it *really* have to happen now? Or can we skip it today?

Keep things simple:

Try using clothes that are easy to put on, or purchase adaptive clothing, encourage simple hairstyles, etc. For example, keeping a woman's hair short or permed can help. Avoid having too many objects in the bathroom. Mirrors can sometimes confuse people with dementia. Keeping things simple and neat will help. Remember that clutter can contribute to confusion.

Decrease the risk of infection and monitor for pain:

Pay careful attention to oral hygiene. Tooth decay and pain can affect all aspects of the person's health and wellbeing. Treat cuts and abrasions immediately. If the person sits or lies down a lot, watch for redness of the buttocks and skin breakdown. People with late stage dementia may have difficulty communicating pain and family members and caregivers must learn other ways of recognizing pain and illness.

Strategies for different aspects of personal care



Washing and bathing

As the dementia progresses, the person will need more help with washing and bathing. For most of us, bathing is a personal and private activity, so it is normal for the person with dementia to find it difficult to adjust to these changes. Similarly, caregivers often find bathing to be particularly physically and emotionally challenging. When helping with washing and bathing, consider the following:

- **Maintain the person's privacy and dignity.** Lack of privacy and loss of dignity can contribute to making the bathing experience difficult for both you and the person with dementia. If you know that the person is modest, undress them in the bathroom, making sure that the shower curtain or the door is closed. You can also try covering body parts or even leave their underwear on to respect their modesty and dignity. Remember to have towels and a robe ready when the person gets out of the shower.
- **Avoid bath oil** that makes the tub or shower slippery.
- **Try a sponge bath or a towel bath** if the person does not want to bathe or shower (please refer to page 12 for a detailed method of providing a towel bath in bed). Bathing may not be necessary every day. A sponge bath can be effective between showers or baths.
- **Suggest a special spa day** and set up the bathroom for it.
- **Explain** to the person that you are going to help them bathe. It sometimes helps to give them a reason for bathing, like an activity you have planned for after the bath (for example, "your daughter is coming" or "we are going out").
- **Use contrasting colours** to help the person pick out objects more easily. A white towel hung on a white wall may seem invisible. On the other hand, a dark bathmat in a white bathtub may look like a hole.
- **Run the bath ahead of time**, test the water and consider playing soothing music to create a calm environment. Make sure the room and the water temperature suit the person.
- **Ensure you have all items on hand** that are required to complete the person's bathing before you assist the person into the bathing area. This will help to reduce stress.
- **Keep water or juice nearby** in case the person becomes thirsty during the bath. Avoid glass cups and use plastic cups or a reusable bottle instead. Having a small snack on hand if the person becomes hungry can also be useful.

- **Give the person something to hold**, like a washcloth, if they feel restless during bath time.
- **Ensure that safety features are installed properly**, such as a handheld showerhead, shower bench, grab bars and non-skid bath mats. People are often afraid of falling; help them feel secure in the shower or tub.

“I found that using bubble bath was a huge help in getting my mom into the bathtub. The sight and smell of the bubbles had a calming effect. I also warmed her towel and clothes so that when she got out of the tub she would be dried with a nice warm towel and could get into nice warm clothes. I also had the heat turned up very high so that the bathroom stayed warm. Then I dried her hair before she left the bathroom, this way she wouldn’t catch a chill.”



Oral care

Proper oral care is important to prevent tooth decay and gum disease. Poor dental health will also affect an individual’s ability and willingness to eat. It is wise to have a complete dental examination early in the disease. Ask the dentist to schedule appointments at times when there will be no delay at the office.

At home, the following tips might be helpful:

- Remind the person to brush twice a day with a soft-bristled toothbrush and fluoridated toothpaste.
- Consider getting the person an electric toothbrush. It may be easier for them to use, especially if they have any problems with dexterity or arthritis.
- Give step-by-step instructions or try “hands-on” guidance or gestures.
- Be present when the person is brushing to make sure that they do not swallow toothpaste, fluoride, or mouthwash.
- Try fluoride swabs if the toothbrush is refused. You can also try regular fluoride treatments at home by using fluoride trays.
- Remove partial dentures before cleaning natural teeth.
- Be prepared for the person to hide their dentures; try to keep them in a specific place at all times.
- Remove dentures at bedtime and clean with a firm brush. Place them in water overnight.
- Make sure dentures are clearly labeled.
- To prevent damage when cleaning dentures, make sure the sink is filled or the drain is closed and the toilet lid is shut.
- If the person develops “dry mouth”, try sugarless candies, gum or ice chips to increase the flow of saliva.

For example, when saying, “It’s time to brush your teeth,” hand the toothbrush to the person. Demonstrate. It can sometimes prompt the individual to begin the task themselves.



Hair care

Clean, well-groomed hair will make a person with dementia look and feel better.

- Choose a hairstyle that is easy to care for.
- Encourage the person to comb their own hair. If necessary, give step-by-step instructions or a cue, for example, place the comb in the person's hand or start combing your own hair.
- Use non-stinging baby shampoo.
- Try a dry shampoo if washing hair is difficult.
- Try a scalp massage when washing — it may be soothing.
- A salon or barbershop can be a familiar and relaxed setting. Make the stylist aware that the person has dementia.
- If the person feels insecure, you may want to stay with them or try to find a stylist to come into the home to cut or style hair.

“My mom really likes fruit. I found that having a bowl of fresh fruit nearby during bath time helped focus her attention on something she enjoyed. As I would shampoo her hair, if she began to feel agitated, I would give her a fresh strawberry to eat. This made shampooing easier and a more positive experience for us both.”



Skin care

As a person ages, skin becomes more delicate and needs a little extra care beyond a wash. Creams or lotions can help the skin and may be necessary in the prevention of skin breakdown for those who are inactive. The application itself can also have a pleasantly soothing effect.

- Use a damp cloth or a wipe for cleaning their hands and face. This may be easier than a basin-soap routine.
- Use a favourite scent for soap or lotion.
- Massage or stroke when applying cream or lotion.
- If applying lotion is soothing, try it at a time of day when the person is more likely to be restless.
- You can also get a basin of warm water and a washcloth and sit with the person to wash their face and hands. Have a towel ready to dry them as well.



Foot care

As people age, foot care is often neglected because people can no longer reach their feet comfortably, and they often can't see to provide proper nail care. This task can be more of a challenge if the person has dementia.

The following suggestions may assist you:

- Check the person's feet on a regular basis. Look for discoloration that might be a sign of circulatory problems. Check for calluses, bunions or nail problems that might cause foot pain. Report any findings to the doctor.
- Check nail length. Be careful with nail clippers and scissors. If you are uncomfortable trimming nails, arrange to have this done at a foot clinic or have a professional come to the house.
- After bathing, make sure skin between the toes is clean and dry.
- While checking the person's feet, take the opportunity to provide comfort by giving a foot massage with scented lotions.
- Make sure care providers know that toe spacers can prevent foot pain.
- And a little nail polish often brings about a smile!



Dressing

- Whenever possible, allow the person to choose the clothing to be worn that day. Limit the number of choices to make the decision easier.
- Lay out clothing in the order that it should be put on.
- Remove extra clothing from the closet. Seeing a lot of clothing can be confusing.
- If the person insists on wearing the same clothes every day, try to launder these clothes often or get duplicates of favourite outfits.
- Choose clothing that is easy to wear and care for. Zippers and Velcro are easier to fasten than buttons. Skirts and pants with elastic bands are easier to put on.
- Label (or use pictures from magazines) to describe the contents of dresser drawers.
- For some people it may be helpful to group items of the same colour or ones that are worn together.
- Hang ties, belts or other accessories on a hanger with the matching shirt, dress or pants.
- Have a basket handy to put soiled laundry to avoid confusion with clean clothes.



Special tips for women

- The application of make-up may be a regular and important part of the grooming routine. Try to simplify and allow the person to do as much as possible for themselves. For some women, beauty treatments (such as facials) give particular pleasure.
- A manicure can help overall grooming and also be a source of pleasant touching and stimulation, and can often be given by a friend or a family member.
- Give up on stockings and pantyhose! Use long warm socks to provide warmth and modesty if pants are not welcomed.
- Keep sweaters, cardigans or shawls handy as they can bring comfort and security.
- If the person has facial hair, trim facial hair gently. Consider tweezing or waxing (watch for skin sensitivity).



Special tips for men

- Use an electric razor.
- Consider the time of day. It may be best to shave at a regular time, or at a time when the person seems most willing. These times may vary from day to day.
- Try going to a barber for a shave, or find one who will come into the home.
- Let the beard grow if shaving becomes difficult.



WHEN TOILETING BECOMES A CHALLENGE: TIPS AND STRATEGIES

Consider the person's overall health and abilities:

- Could there be other medical problems besides the dementia that should be treated, such as a bladder infection, constipation, loss of bladder tone, weakening of control muscles, decreased bladder capacity or prostate problems for men?
- Is the person taking medication or drinking a large amount of liquids which may be contributing to a frequent need to go to the bathroom? Drinking a large amount of tea or coffee may make the person feel an urgency to go to the bathroom.
- Is urine being released with the pressure of a sneeze, cough or laugh?
- Can the person communicate the need to go to the toilet?
- Does the person understand the body's message that it is time to go to the toilet?
- Can the person find the bathroom?
- Are other objects being mistaken for a toilet, such as a garbage can?
- Does the person's confusion increase at night, requiring an adaptation to the environment, such as a night light?
- Can the person pull their clothing down, wipe properly, put their clothing back on and wash their hands after toileting?
- Is it difficult for the person to get up from a low bed or a deep chair?
- Is the person able to undress in time to go to the toilet?
- Is going to the toilet too complicated? Is the person able to go through all the steps that are needed (finding the toilet, undressing, turning around or sitting down on the toilet, etc.)?

Helpful tips:

- Make an appointment for the person with dementia to have a full medical assessment to rule out infections, treatable conditions, and to review medications.
- Make the toilet easy to find: clearly mark the path on walls and/or floors; ensure that there are no obstacles; label bathroom doors with words or a picture of a toilet.
- Use a contrasting coloured toilet seat. Coloured tape around the perimeter of a toilet or coloured water may prevent accidental misses due to perceptual or visual losses.
- Put lids on waste paper baskets and other containers that may be mistaken for toilets.
- Watch for visible cues that the person needs to use the bathroom. For example, the person may get restless, make unusual sounds or faces, or pace around the room.
- Give the person reminders to go to the toilet regularly, perhaps every two hours or before going out.
- Direct the individual to the front of the toilet before removing clothes.



Helpful tips, continued:

- ✓ Choose easy-to-remove clothing, such as Velcro closings or elastic waists.
- ✓ For men, try putting a decal inside the toilet bowl to have something to “aim at.”
- ✓ Give a cue to get started, such as running water, prompting, or demonstrating what to do.
- ✓ Hand the person toilet paper to use as needed. You may need to help the person get started with wiping. Using wipes can be easier than toilet paper if you need to wipe for them. Remember to have disposable gloves on hand.
- ✓ Give the person some privacy, but stay nearby. Explain that you are “just outside the door if anything is needed.”
- ✓ If you leave the person alone in the washroom, make sure that there are no medications or dangerous objects that the person could have access to.
- ✓ Install hand rails beside the toilet, and a raised toilet seat to make sitting down and getting up easier.
- ✓ Consider removing any door locks as the person may not be able to unlock the door without assistance.
- ✓ Distract the person if staying seated is a problem by playing music or providing a favourite item to look at or hold, like a book or a magazine.
- ✓ Provide good lighting by ensuring that the bathrooms and hallways are well lit.
- ✓ Use a commode or a urinal in the bathroom.
- ✓ If accidents happen during the night, consider having a commode in the bedroom. It is important to keep the person dry and clean. If accidents continue to occur, products such as disposable underwear, panty liners (for women) or protective bedding might be helpful. Use them only if necessary.
- ✓ Unless it is necessary, do not wake up the person during the night. If needed, have the person use a good disposable, absorbent brief.
- ✓ Toilet the person regularly throughout the day (approximately every two hours).
- ✓ Watch for redness or skin breakdown of the buttocks. Contact a nurse or doctor to treat this right away.
- ✓ Accidents may happen. Remain calm and try to overcome any embarrassment the person may feel. Remember that this is as hard for the person living with dementia as it is for you.

**Connect with the staff at your local Alzheimer Society for more information and support.
Visit www.alzheimer.ca/helpnearyou**



PERSONAL CARE TIPS AND STRATEGIES

- ✓ Communication is key!
- ✓ Be patient.
- ✓ Find humour and laugh together.
- ✓ Respect the individual's privacy and modesty.
- ✓ Check the temperature of the room and water: Is the room too cold? Is the water too hot or too cold? Warm towels in the dryer so the person feels cozy after the bath.
- ✓ Know the preferences of the person and modify the bathing experience to best meet their needs. Bath or shower? Morning or evening?
- ✓ Allow the person to do as much of their personal care activities as possible.
- ✓ Be flexible, attentive and creative and always keep options open.
- ✓ Allow enough time for bathing so the person or caregiver does not feel rushed. This should reduce anxiety for both of you.
- ✓ Set up a relaxing, private and calming environment. Use soothing music and limit distractions. Consider hanging pictures or paintings of nature such as a lake, a river, bathers swimming at the beach, etc.
- ✓ Lock up all toxic materials, sharp objects, electrical appliances and medications.
- ✓ Keep the person safe and secure using equipment such as grab bars, shower chairs, benches, non-skid mats and ensure safe transfers into and out of the tub or shower.
- ✓ Consider a safety assessment by a professional occupational therapist.
- ✓ Ensure good lighting so the person can clearly see.
- ✓ Make sure the person wears glasses and hearing aids and check batteries regularly. If the person needs to remove their hearing aids while taking a shower, make sure they put them back in while getting dressed.
- ✓ Use contrasting colours to help the person pick out objects easily. Avoid the use of patterns; solid colours are advised.
- ✓ Lay a towel or a strip of coloured tape on the tub to distinguish the edge.
- ✓ Use a coloured rubber bath mat to make it easier to judge the depth of water. Avoid a dark coloured mat as it could give the impression of a hole.
- ✓ Keep the bathroom neat and avoid excess objects, especially breakable or electric appliances.
- ✓ Remove or cover mirrors to avoid the illusion of additional persons in the room or if these create anxiety.
- ✓ Remove locks, keep the key handy or tape the latch open so the person cannot unknowingly lock themselves in.
- ✓ Be aware of your tone and body language and use positive, encouraging and friendly facial expressions.

THE TOWEL BATH¹ - A gentle in-bed method

Equipment

One or more bath blankets (a thin, lightweight cloth used to cover a person during a bath. It absorbs moisture while keeping the person warm)

1 large plastic bag containing:

- 1 large lightweight towel (fan folded)
- 1 standard bath towel
- 2 or more washcloths
- 2-to-3-quart plastic pitcher filled with water (approximately 105°F/40°C to 110°F/43°C).

Because burns may occur if the water is heated in the microwave, use warm tap water, to which you add: 1 to 1½ ounces of no-rinse soap (use manufacturer's instructions for dilution)

Preparing the person

Explain the bath to the person. Make the room quiet or play soft music and dim the lights if this calms the person, while ensuring privacy. Wash your hands. If necessary, place one bath blanket under the person to protect the linen and provide warmth. Undress the person, keeping them covered with the bed linen or the second bath blanket. You may also protect the covering linen by folding it at the end of the bed.

Preparing the bath

Pour the soapy water into the plastic bag and work the solution into the towels and washcloths until they are uniformly damp but not soggy. If necessary, wring out excess solution through the open end of the bag into the sink. Twist the top of the bag closed to retain heat. Take the plastic bag containing the warm towels and washcloths to the bedside.

Bathing the person

Expose the person's feet and lower legs and immediately cover the area with the large warm, moist towel. Then gently and gradually uncover the person while simultaneously unfolding the wet towel to cover the person. Place the covers at the end of the bed. Start washing at whatever part of the body is least distressing to the person. For example, start at the feet and cleanse the body in an upward direction by massaging gently through the towel. You may wish to place a bath blanket over the towel to hold in the warmth. Wash the backs of the legs by bending the person's knee and going underneath. Bathe the face, neck, and ears with one of the washcloths. You may also hand a washcloth to the person and encourage them to wash their own face. Turn them to one side and place the smaller warm towel from the plastic bag on the back, washing in a similar manner, while warming their front with the bath blanket or warm moist towel. No rinsing or drying is required. Use a washcloth from the plastic bag to wash the genital and rectal areas. Disposable gloves should be worn when washing these areas. Remove the damp towel before you wash the back or when done with the towel bath, depending on the person's wishes and tolerance.

After the bath

If desired, have the person remain unclothed and covered with the bath blanket and bed linen, dressing at a later time. A dry cotton bath blanket (warmed if possible) placed next to the skin and tucked close is comforting. Place used linen back into the plastic bag; tie the bag, and place it in a hamper.

¹ Adapted from Towel-bath - Totman technique, St. Louis: Calgon-Vestal Laboratories, 1975. Copyright ER Squibb and Sons, LLC.

WHERE CAN I GET FURTHER INFORMATION?

Please refer to the following resources available from your local Alzheimer Society and www.alzheimer.ca. You can find your local Alzheimer Society at www.alzheimer.ca/helpnearyou.

Progression series:

- Overview
- Early stage
- Middle stage
- Late stage
- End of life

Day-to-Day series:

- Communication
- Meal times
- Moving to long-term care series

Conversations About series:

- Intimacy and sexuality
- Decision-making: Respecting individual choice
- Driving

Other helpful resources:

- A handbook for care
- All about me
- All about me: A conversation starter
- Ambiguous loss and grief: A resource for individuals and families
- Reducing caregiver stress

USEFUL RESOURCES

Bathing Without a Battle: *Creating a better bathing experience for person's with Alzheimer's Disease and related dementias:* www.bathingwithoutabattle.unc.edu

Canadian Association of Occupational Therapists

Are you looking for an occupational therapist?
Check the OT Finder Tool at: www.caot.ca
Phone: 613-523-CAOT (2268) Toll-free: 1-800-434-2268

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