

Self-care is essential

When you care for a person with dementia, it's easy to focus entirely on their needs, but it's important to ensure your own needs are also being met.

I often get criticised when I say this on the Dementia Help Facebook page, but you have to make time for yourself. You have to think about your own physical and emotional well-being. Otherwise, you risk becoming ill, and then you'll be unable to care for your loved one, so self-care is a necessary part of your caring role.

A quick break, such as a 20-minute walk around the block, can make all the difference. I juggled caring for my mum with a full-time job, so I know how it feels to be busy. When I could, I made time for exercise. It kept me sane and made me a better carer.

I knew if I didn't exercise regularly, I would see a mental and physical decline in my own well-being. So don't neglect your own needs. Find someone to look after your loved one while you do something for yourself. You'll feel so much better afterwards.

This issue is dedicated to self-care. We talk about making time for exercise (page 32) and look at supplements that can boost your energy (page 34). We also cover how to cope with the impact that being a carer may have on your relationship (page 35).

Some of the other topics in this magazine aren't pleasant. We cover late-stage dementia (page 16), so that you know how to prepare for the future, and deal with the sensitive topic of personal hygiene (page 26).

Dementia is not a glamorous topic, but the right advice and information can make your caring role that bit easier.

Warm regards,

Chirinax

Christina Collison

(formerly Neal - I just tied the knot!)

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'Kindness can transform someone's dark moment with a blaze of light'



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Cover photograph Shutterstock

Published by Healthy Content Ltd © 2023

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Next issue out on 30/11/23

Our contributors have a wealth of knowledge and experience about dementia, as well as the help and support available to family carers



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Jeff is an estate planning consultant and will writer for MB Associates, who believes it's important to make plans for the future as soon as possible, so a person can receive the care and support they'd like. Jeff offers guidance for creating a Lasting Power of Attorney (LPA). Visit mbassociates.net for more details.



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Walk a mile in our shoes

Training company <u>Dementia Carers Count</u> is launching a campaign in October called Walk in My Shoes, and is asking members of the public to step out of their comfort zone and comfy shoes to help support unpaid dementia carers.

Most of us didn't choose to become carers – but we have had to step into the role when needed. For five days in October, Dementia Carers Count is encouraging

people to step into others' shoes, like carers do every day.

You can walk a mile in flip-flops, do your 10,000 steps in high heels, take the dog for a walk in your slippers or go to the office for a week in boots.

The money raised will help Dementia Carers Count maintain its free support line, to help those caring for someone with dementia.

For more information, please visit the website at **dementiacarers.org.uk/walkinmyshoes/** or for support, you can call them on **0800 652 1102.**



A breakthrough opportunity in dementia research

The more we understand about dementia, the better placed we are to deal with it. Your help could make a difference.

Researchers at Cardiff University are developing a

database to help improve the understanding, diagnosis and treatment of mental health diagnoses and dementia.

The project, called UK Minds, stands for the UK Mental Illness and Dementia Study and is a collaboration between the <u>National Centre for Mental Health</u> (NCMH), hosted at Cardiff University, and <u>Akrivia Health</u>.

The project is open to adults over the age of 18 who are currently or have been registered under secondary care mental health services in the past and who have a diagnosis or experience of schizophrenia, psychosis, bipolar disorder, major depressive disorder and dementia.

Register your interest at https://www.ncmh.info/sign-up

Alzheimer's disease is the most common form of dementia. Up to 70 per cent of those living with dementia have Alzheimer's

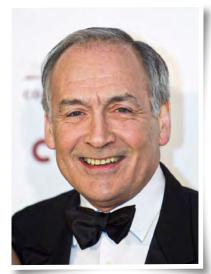


DID YOU KNOW?

More than 55 million people currently have dementia worldwide

Updates

The latest news, facts and stats about dementia



Alastair Stewart's dementia diagnosis

We're sorry to hear the sad news about former newsreader and journalist Alastair Stewart being diagnosed with dementia. Stewart, aged 71, was diagnosed with dementia after a series of mini-strokes.

His wife Sally says her biggest fear is the impact his illness will have on their children. The pair first noticed something was wrong after he had trouble re-setting a kitchen clock and began to forget the days of the week and what month it was.

We wish Alastair well, and hope he and his wife receive plenty of support.

DID YOU KNOW?

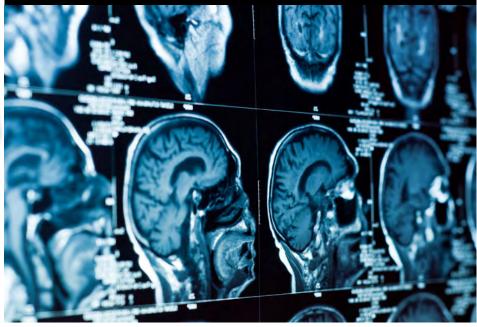
On average, a person may see two to five consultants before a dementia diagnosis is made.

Source: Dementia LIK

Dementia on the increase

The overall number of people developing dementia is increasing. This is partly due to people living longer. The number of people expected to have dementia by 2030 is set to rise to 1.1 million.

Source: Alzheimer's Research UK





Key things not to say to a person with dementia...

- 'Do you remember me?' The person may be embarrassed if they don't.
- 'What did you do today?' The person may not remember, which can cause frustration.
- 'You just asked me that.' Repeating questions is normal when a person has dementia. Be patient.
- 'Don't worry about it.' This can seem dismissive

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IT'S A FACT

There are around 70,800 people living with young-onset dementia in the UK. Young-onset dementia is when a person is diagnosed under the age of 65.

DID YOU KNOW?

There's a wealth of information on all aspects of caring for a loved one with dementia on the <u>Dementia Help website</u>, including back issues of this magazine, plus free downloadable guides on nutrition and challenging behaviour. Visit <u>dementiahelpuk.com/resources/</u>





HOLIDAYS ARE STILL POSSIBLE WITH DEMENTIA.

If you still live at home a holiday is still possible. We know this because of our lived experience.

Research shows that dementia-inclusive holidays significantly increase the wellbeing of those living with dementia and their unpaid carers.

Our advisors have more than 50 years of collective professional and personal experience supporting the dementia community.

We are the only organisation who work with you to identify your challenges and find solutions that empower you to choose the right holiday for you.

Our hands-on experience of dementia-inclusive breaks means we are skilled in finding solutions to the challenges you may face.

Through our personal and professional experience of dementia we have created a trusted network of organisations and partners that will help you select your perfect holiday.

BOOK YOUR FREE CONSULTATION

Book your free, no obligation 30-minute call today to learn more. www.sargentgroup.consulting/dementia-travel-advisors









f your loved one has been diagnosed with a form of dementia and has been prescribed medication, you may be wondering what the medication does and how it helps the person. Medication to treat the condition can be used to manage symptoms, but there is sadly no cure for dementia. Here's some useful information...

THE PERSON MAY NEED OTHER MEDICATION

Your loved one may be given other drugs to treat underlying conditions, such as heart disease, a stroke in the case of vascular dementia, or symptoms, such as hallucinations, suffered by a person who has Lewy Body

dementia. A person with vascular dementia may be given drugs to treat high blood pressure, high cholesterol, diabetes or heart

problems, as these can be linked to the condition.
Specialist drugs are only available for people with Alzheimer's disease.

DEMENTIA IS A PROGRESSIVE CONDITION

Medication
currently available
may slow down the
progression of symptoms,
but not the disease. The
condition will still progress,
and medication is simply

masking the symptoms – like taking a tablet for a headache. However, progress has been made, and last November, the BBC reported

'Medication for Alzheimer's disease may help to reduce depression, aggression and anxiety' a 'momentous breakthrough' when referring to an Alzheimer's drug called Lecanemab, which was reported to slow down the destruction of the brain in Alzheimer's disease. Alzheimer's Society recently

mentioned another drug, Donanemab, stating that it appeared to slow the progression of Alzheimer's symptoms by 36 per cent. These drugs are only suitable for Alzheimer's disease.

MEDICATION CAN IMPROVE MENTAL HEALTH

Medication for Alzheimer's disease may help to reduce depression, aggression and anxiety, although the drugs will only work for some people. There can be side effects, too, which may include vomiting and diarrhoea.

MEMANTINE IS COMMONLY PRESCRIBED FOR ALZHEIMER'S DISEASE

Memantine is usually prescribed for those with severe Alzheimer's disease or those with moderate Alzheimer's if cholinesterase



my mum and get her to take her tablets while I waited on the phone. She used a dosset box with different days of the week on it, so we could both easily tell whether or not she'd had her tablets for the day. However, a product with least once a year. This is because they may need to change the dosage or change to a different type of medication that would be more suitable for them as the condition progresses. This is especially important if the person has vascular dementia, which is linked to high blood pressure. It's also important for the person to have their blood pressure checked and undergo a general health check during these appointments. 🛚

'They may need to change the dosage or change to a different type of medication'

inhibitors aren't suitable. It works by regulating activity of glutamate, a chemical messenger involved in brain functions that is released excessively when brain cells are damaged. Side effects of Memantine can include dizziness, aggression, depression, headaches and sleepiness.

5 POU'LL NEED TO REMIND THE PERSON TO TAKE MEDICATION

Your loved one will need prompting to take their medication, as dementia affects memory. I used to call a timer or alarm to prompt her would have been more useful and given her more independence. Tabtime, suppliers of medication management products, has a range of safe pill dispensers ideal for a person with dementia that can prompt the person to take their medication. Visit tabtime.com for more information.

6 SHOULD BE REVIEWED ANNUALLY

Make sure your loved one sees their GP to have their medication reviewed at



More Information

For more information on whether your loved one would be eligible to take part in clinical trials in the UK for new drugs that may help to slow down the progression of Alzheimer's disease, please visit recognitionhealth.com or call 0800 802 1030.

Coping with conversations

As dementia progresses, having a conversation and keeping it going can be a challenge. Yet it's important not to give up... and there are things you can do to make talking easier

Ingaging with someone who has dementia can pose challenges as the condition progresses. Remembering recent events and formulating responses will become increasingly difficult for the person. The crucial factor is to start conversations without relying on their memory. Unfortunately, you may find that asking specific questions, such as what your loved one had for breakfast, can lead to frustration. Therefore, it's

Additionally, incorporating visual aids, such as pictures, can greatly facilitate communication. Instead of simply asking, "Do you know what this picture is?", try

different approach, one that

comfortable and reassuring atmosphere in all interactions.

important to adopt a

focuses on creating a

saying something like, "Oh, look! This is a picture of the beach." Such an approach can encourage further conversation and make the interaction more intriguing.

GET THE PERSON'S ATTENTION BEFORE YOU SPEAK

Speak to the person at their eye level. So, if your loved one is sitting down, don't tower over them. Kneel so that your eyes are level with theirs, but respect their personal space and don't lean in too close.

KNOW THAT YOUR LOVED ONE MAY UNDERSTAND

The person may understand what you are saying, but might need more time to process and respond.

Speaking slowly and using simpler sentences can help. It's important to give them enough time to answer.

Research shows that it can take up to two minutes for someone with dementia to understand and respond to a question. By that time, the conversation may have moved on.



THE IMPORTANCE OF CONVERSATION DURING VISITS

How much should you talk? It depends on the person. If the person seems content with your presence, it's OK to be silent sometimes. If you do talk, keep it general and avoid direct questions.

KEEP THE FACTS SIMPLE

Keep words simple, slow and repetitive. Avoid using baby talk or raising your voice, unless this is necessary for someone who is hard of hearing. Repeating information may feel silly to you, but it will help the person's memory.

COMMUNICATING WITH A PERSON WHO DOESN'T UNDERSTAND YOU

Remember not to raise your voice, unless the person is hard of hearing

interested, repeat key words and maintain attention. A gentle touch can help grab their attention. You can also use sign language, such as patting a chair, to indicate where they could sit.

HOW TO HANDLE CONTRADICTIONS FROM A PERSON WITH DEMENTIA

You don't need to agree with the person, but avoid arguing. Apologising and backing down can defuse tense situations, especially if the person with dementia becomes agitated. It's possible that you may have misunderstood them, so there's no need to argue over trivial points.

DON'T MAKE QUESTIONS TOO COMPLICATED

Use body language and touch, and stay focused to convey your message. Look

Avoid asking complex questions that require multiple understandings.

'Look interested, repeat key words and maintain attention'

As dementia progresses, it's best to avoid difficult questions whenever possible. Avoid compound questions, where you combine two or more questions into one. Questions that invite a person's opinion can be a good idea – as they can't be wrong.

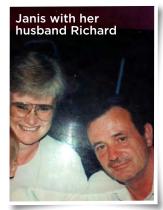
DON'T SHOUT TO MAKE YOURSELF UNDERSTOOD

My mum's hearing was fine right up until the last few days of her life. So when careworkers at her home used to raise their voices and assume she was hard of hearing, she naturally found it frustrating. Having them shouting words at her distracted her from what they were saying. So don't shout - the person may not be hard of hearing.

More information

Most of the advice in this article was supplied by writer Mary Jordan, author of the book, *The Essential Carer's Guide To Dementia*. Available on Amazon.





'My husband was diagnosed with dementia at 57'

Janis Cottee had a battle to get her husband diagnosed with young onset Alzheimer's, even though it was clear something was wrong. She talks about her journey as his carer and why she continues to raise awareness of dementia

cared for my husband,
Richard, who had young
onset Alzheimer's disease.
It was a long and arduous
journey to get an official
diagnosis. I knew I had to do
my own research, seek help
from other experts and
continue to advocate for
his health to be a priority.

Although my husband sadly passed away in 2015, in his memory, I continue to

advocate for the health and well-being of those living with Alzheimer's and dementia. I also use my platform to help carers who deal with mental and physical health problems due to lack of support, which results in burnout.

I have partnered with MedicAlert because they not only support people living with Alzheimer's and other forms of dementia, but also

provide tools to offer additional peace of mind to carers. (Read more about MedicAlert's Safe & Found programme on page 15.)

HOW IT STARTED

Our story begins with my husband, at the age of 57, confronting a series of traumatic events that would test our resilience in ways we could never have anticipated.



The initial blow struck in the form of a mugging at a cash machine.

Then, news arrived of the 7th July London bombings, an event that hit dangerously close to home, with my husband's nephew being severely injured.

As we struggled to find our footing, my husband faced yet another challenge – an unjust dismissal from his job. This deepened the emotional and financial strain we were already navigating. It was during this time that I began to notice shifts in his behaviour, prompting us to seek medical guidance.

Our journey through the medical system commenced with a diagnosis of depression.

MORE COMPLEX SITUATION

Antidepressants were prescribed, yet despite gradual increases in dosage over the course of a year, it became increasingly evident that something more complex

was at play. His confusion, difficulty with words and diminishing self-assurance persisted, which prompted me to delve deeper into his symptoms.

After extensive research, a question began to take shape in my mind: Could young onset Alzheimer's be the source of these challenges? I approached our doctor with my concerns, only to be met with scepticism due to my husband's relatively young

'I continued to seek medical guidance. It took seven months before I managed to secure a referral for young onset Alzheimer's testing'

age. Instead, the doctor offered a diagnosis of PTSD and corresponding medication. As time passed and dosages increased, it became clear that a more comprehensive understanding was needed.

THE MOMENT OF DIAGNOSIS

I continued to seek medical guidance. It took seven months before I managed to secure a referral for young onset Alzheimer's testing.

During this time, I also found myself engaging in a battle for justice surrounding my husband's unfair dismissal from work.





In a rather remarkable turn of events, we emerged triumphant.

The moment of diagnosis arrived, confirming my suspicions: Richard had young onset Alzheimer's. Armed with this knowledge, I resolved not only to care for my husband, but also to raise awareness about the many facets of dementia. Our three-year journey to diagnosis had transformed into a mission to make a difference.

This mission led me to organisations such as Uniting Carers, <u>Dementia UK</u> and <u>TIDE</u> (Together In Dementia Everyday Carers). Joining their advisory group allowed me to channel my experiences into tangible support for others facing similar challenges.

SUPPORT FROM ADMIRAL NURSES

We came across Admiral Nurses, who were able to provide the support we so desperately needed. After months of anticipation, we finally gained access to their expertise and guidance. Their practical advice and support were invaluable.

Balancing my caring role and a semblance of normality became my daily reality. Enlisting the help of a daytime carer while managing a full-time job meant clocking in over 90 hours a week between caregiving and professional responsibilities. It was physically and emotionally demanding.

As time pressed on, challenges evolved. Basic tasks became monumental and his health deteriorated further. Despite my commitment, the strain began to take its toll, leading to me reaching carer burnout.

CARE HOME CHOICE

With a heavy heart, I made the difficult choice to move my husband into a care home. It was a decision born out of love and an understanding that his needs were now more than what I could provide. I visited him daily and watched the progression of his condition.

On 28th July 2015, his journey came to a close. The loss was immense, yet as I reflect on the path we took – a path marked by ups and downs and boundless love – I am reminded that our experiences possess the power to shape not only our lives, but the lives of others.

In honour of his memory and the countless individuals and families impacted by dementia, I continue to champion awareness, support and understanding for those living with dementia and for their carers.



More information
Janis is an
ambassador for
MedicAlert, a leading
charity dedicated to
keeping those with

medical conditions and memory loss safe. For more information on its Safe & Found programme, visit medicalert.org.uk/safe-and-found or call 01908 951045. For more details on Admiral Nurses and how they may be able to help, visit the Dementia UK website or call the helpline on 0800 888 6678.



Stay Prepared. Stay Protected.

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Find out more - scan the QR code or visit www.medicalert.org.uk/mclay-dementia-trust



The later stages of dementia

It's not a pleasant topic, nor something we want to contemplate, but it's important to be aware of what symptoms in the later stages of dementia can be like, so that you are prepared to deal with them.

Words: Christina Collison

f you've recently noticed that your loved one's condition has worsened - for example, they're having trouble speaking clearly, their mobility is limited or they are living in the past - they may be entering the later stages of dementia. While it's difficult to think about what lies ahead, identifying these symptoms will help ensure they receive proper care.

In the later stages of dementia, a person's memory loss becomes significant and they may only remember earlier memories. They might even believe they're living in a different stage of their life. For instance, my mother, in her late seventies,

believed she was a teenage girl. Although she seemed happy, it was clear that she was detached from reality and didn't recognise the stage of her life she was actually in. She also displayed very childlike behaviour sometimes, occasionally throwing tantrums.

LACK OF RECOGNITION

At this stage, the person may no longer recognise

themselves or others. Looking in the mirror, they may mistake their reflection for an old stranger and become distressed. My mum didn't recognise the 'old lady' in the mirror and thought it was a stranger staring at her. She believed herself to be much younger at that stage. When I asked her how old she was, she told me she was 18, when in reality, she was almost 80. To avoid any distress, we removed mirrors entirely.

Mobility is severely affected in the later stages of dementia. The person may lose the ability to walk, stand or get up from a chair, increasing the risk of falls. Close monitoring is crucial.

'Looking in the mirror, they may mistake their reflection for an old stranger and become distressed'



WEIGHT LOSS

Other symptoms of later stage dementia include weight loss due to a fading appetite, which weakens the immune system and makes it harder to fight off infections. The person may also become incontinent and struggle with speech. My mum lost the ability to construct clear sentences, and her words became jumbled. Eventually her speech became limited to a few words.

Swallowing and chewing food may become difficult, posing a choking risk. It's best to feed your loved one soft foods at this stage, such as yogurts, mashed avocado, mashed potato and soups.

Medication can help, so it's important to consult with the person's GP.

The person may become bedridden or spend most of their time seated. This could mean they may develop pressure ulcers. Seek medical help if this occurs. Regular



'The person may lose the ability to walk, stand or get up from a chair, increasing the risk of falls'

skin checks, as well as using devices such as foam at the end of the bed or a pillow under the calves, can provide relief. Turning and shifting the person regularly in bed can also redistribute their weight and help to prevent pressure sores.

At this stage, you will likely find that round-the-clock

care will be necessary. Don't try to handle it alone, as you may end up with carer burnout. Consider enlisting professional help from a care agency if the person is living with you.

LOSING CONSCIOUSNESS

In the final stages, the person may lose consciousness, become agitated or have irregular breathing. Their hands and feet may also feel cold. Although this can be distressing for family carers, the person is usually unaware of what's happening. Consult a healthcare professional, as medication may be available to make the person as comfortable as possible.

Finally, it's distressing for you to see your loved one like this, so try to ensure you have support from friends and family.



Find rest and relaxation on a dementia-inclusive holiday



Embarking on a journey with a loved one who has dementia can create cherished memories and personal growth. But you may feel overwhelmed by the idea. **Dr Carol Sargent** explains how to find the right holiday for you and your loved one

Travelling with a loved one with dementia can be a rewarding and enriching experience. However, for those supporting somebody living with dementia, it may seem daunting. My experience in taking people living with dementia and their families on holiday for over ten years is that if a person is still living at home, then they can still go on holiday. Here's my advice...

STEP 1 ASSESS ANY CHALLENGES

Before embarking on a trip, identify potential challenges you may need to overcome. Make a list of the things that worry you both, and speak to dementia experts, family and friends to identify solutions to overcome them. This will assist in selecting your accommodation, identifying any equipment and deciding if you need any support.

STEP 2 DECIDE WHAT YOU WANT TO DO

Make a list of the things you do at home that you don't want to do on holiday and what you would like to experience together or independently. Do you want to meet new people? Do you want to meet others living with dementia? Do you want to explore a new country?

STEP 3 CONSIDER HOW YOU TRAVEL

Discuss which travel option will be most relaxing and enjoyable for both of you. Think about how long you are comfortable travelling for and what support you would require.

STEP 4 PLAN AHEAD

Plan well in advance. Investigate destinations, accommodation and activities that are dementia-friendly. Choose places that are easy to reach. Think about how long you need to go for, to minimise putting pressure on both of you.

STEP 5 CHOOSE SUITABLE ACCOMMODATION

Select accommodation with approachable staff who understand dementia and can accommodate your specific needs.

STEP 6 CONSULT A HEALTHCARE PROFESSIONAL

Make an appointment for a pre-travel check-up with your healthcare provider. Ensure medications are up-to-date and prescriptions are filled for the duration of the trip.



Discuss how to manage any health emergencies that could occur and identify a plan. For example, a phone consultation with your local GP if your loved one's medication goes missing.

STEP 7 CREATE A DETAILED ITINERARY

Outline a daily schedule, including meal times and rest periods, and think about planning activities at a time your loved one is most alert and/or when it is quietest or coolest. It's really important not to do too much, as this can be overwhelming. Consider distances. Are there frequent seating options, wheelchairs or buggies available?

STEP 8 REMEMBER TO PACK THE ESSENTIALS

Prepare a travel kit with important documents, medications and a list of emergency contacts. If your loved one needs incontinence pads, don't let them take up space in your suitcase; order

them to be delivered to your accommodation. Pack a day bag with supplies you may need, such as water, snacks, clothes and medication.

STEP 9 ENGAGE IN FAMILIAR ACTIVITIES

Bring along familiar items, such as favourite sweets, music or a photograph. Plan regular activities they enjoy at home, as well as new experiences.

STEP 10 BE PATIENT

Understand that challenges may arise. Make sure you have an emergency plan in place. Don't be too ambitious and don't be afraid to ask for help.

Decide what you want to do and how you want to travel, and you'll fall into one of the six different groups below, which will help you to select the right holiday for you.

Independent travellers
 who want to holiday abroad
 any holiday your friends



and peers go on. However, you will need to consider your specific needs, and discuss them with your travel and accommodation provider.

- 2. Independent travellers who want to holiday in the UK the same applies.
- **3.** Travellers who require support from family/friends to holiday abroad consider dementia-inclusive or disabled holiday companies, villas that are attached to hotels, hotel suites or self-catering accommodation.
- 4. Travellers who require support from family/friends to holiday in the UK consider dementia-inclusive or disabled holidays; companies, cottages that are attached to hotels, hotel suites or self-catering accommodation.
- 5. Travellers who require professional dementia support for holidays abroad consider holiday types in Group 3, which provide or which have links with professional carers or organisations that take groups of people living with dementia, and which provide professional support.



6. Travellers who require professional dementia support for holidays in the UK – same as Group 5.

HOLIDAYS ABROAD

If you're keen to travel abroad but need extra support, there are a range of disabled holiday organisations that can provide personal care and equipment. To my knowledge, there is only one company that specialises in dementia, and that is <u>Elite</u> <u>Cruises and Vacations</u>, which takes small groups of people living with dementia on bucket list cruises in the US.

Interestingly, they are introducing European Destinations in 2024. There are several disabled holiday companies whose care and support packages could be suitable for you and your loved one with dementia. These include Enable Holidays, Altogether Travel Company, Limitless Travel and LanzAbility.

HOLIDAYS IN THE UK

If you would prefer to holiday in the UK and need extra support, then there are several organisations specialising in taking groups of people living with

If a person still lives at home, they can still go on holiday





dementia. Dementia Adventure takes small groups to self-catering properties throughout the UK from April through to December and provides support throughout your holiday. Revitalise has two weeks a year where they focus on dementia holidays and can provide support at other times at one of their purpose-built facilities in Epping Forest and Southport. There are also two charities based in the Coventry and Barnsley areas (Cherish Holidays and BIADS) who, once a year, offer coach holidays for people who attend their dementia groups.

GOING YOUR OWN WAY

If you prefer to holiday by yourselves, here are some ideas. In the Peak District, Hoe Grange Holidays offers beautiful, fully accessible self-catering properties in magnificent scenery, with compassionate and experienced staff who can organise everything you need for your stay, including food, equipment and personal care staff. If you fancy a hotel stay,

then the family-owned <u>Bond</u>
<u>Hotel</u> in Blackpool has
personal care on hand with
entertainment every evening
or the opportunity to enjoy
yourself on the prom.

HOLIDAY SUPPORT

Lastly, when you support a loved one with dementia, it can be extremely difficult to find the time or head space to progress through Step 1 to Step 3. Sargent Group Consulting has recently launched a two-part Dementia Travel Advisor service to help with this.

For £250 + VAT, they will capture the barriers you are concerned with, identify agreed solutions and recommend which holiday group, destination and holiday type is suitable for you. Armed with your personalised needs, you can find that perfect holiday to relax and have quality time together. If you need help to select and book your holiday, they can provide their Premier Service at a cost of 15 per cent of the total cost of your holiday. 🝱

Stay somewhere special

If you're thinking of taking your loved one away for a break, Hoe Grange Holidays could be the perfect place



Leveryone deserves the chance of a peaceful, relaxing holiday. But if you're considering a break with a loved one with dementia, it can sometimes be difficult finding the perfect option to suit their needs.

At Hoe Grange Holidays, though, both you and your loved one can have the break you deserve. Situated on a working farm in the heart of the Peak District, in Derbyshire, their award-winning, fully accessible cosy log cabins offer a home-from-home luxury stay, whether you're looking for a short break, week away or extended holiday.

DEMENTIA-FRIENDLY STAY

Hoe Grange Holidays is dementia-friendly and fully accessible, ensuring inclusivity for all. The small, family-run business has staff on site at all times, ready to offer you a warm welcome. It provides a range of dementia-friendly



activities, and the accommodation is wheelchair accessible and equipped with a range of access equipment, including a mobile hoist, roll-in wetroom shower, shower chairs, bed rails. rise-and-recline armchairs and electric profile beds. Off-road wheelchair hire is also available, should you wish to take your loved one to explore the beautiful views that the peaceful location has to offer. Waterproof mattress protectors are provided and there are laundry facilities on site, too, so you don't have to worry about the odd accident.

VIRTUAL 3D TOURS

Through personal experience, the team at Hoe Grange Holidays understands just how important it is for carers and their loved ones to know exactly where they will be holidaying, and what the site and facilities will be like. This is why, to help reassure you, the website offers detailed information about each log cabin, as well as floor plans, a virtual 3D tour and photo gallery, so you and your loved one can become familiar with



the layout and surroundings before your visit. Once you've booked, you can view the video and photos as often as you like, to provide a feeling of familiarity for your loved one and to reduce stress.

The family team at Hoe Grange Holidays looks forward to welcoming you and your loved one on your break!

A dementia-friendly break at Hoe Grange Holidays includes:

A warm welcome

Peaceful location with beautiful views

Accessible, cosy log cabins

✓ Wide range of accessible equipment

☑ Dementia-friendly activities

Pets welcome!

Hoe Grange Holidays is open all year round. For more details, please visit hoegrangeholidays.co.uk or email info@hoegrangeholidays.co.uk. To speak to a member of the friendly team, call 01629 540262 or 07737 926165.



A person with dementia may have hallucinations, seeing things that aren't there or hearing noises. They might even encounter smells that aren't there. Here's how to manage this distressing situation.

Words: Christina Collison

hen a person has dementia, the brain can misinterpret information from their senses. The person may have trouble with their sight. for instance, even if their eyesight is fine. This is because the brain has to process what we see, and this can be difficult for a person with dementia. My mum would sometimes struggle to recognise me and would occasionally confuse me with a member of staff at her nursing home.

There are also some cases where a person with dementia can have hallucinations. They may see

things that aren't there and even hear voices. Visual hallucinations are more common in a person with Lewy body dementia, but they can also occur in a person 'It's important to

with Alzheimer's or vascular dementia.

DON'T BE DISMISSIVE

It's important to understand how disturbing this could be for your loved one, so don't be dismissive or ignore what they are experiencing. To them, it can seem very

real. Ask the person what's wrong and make sure you don't tell them that what they are seeing isn't real. Depending on what they

> are experiencing, there might be a way of dealing with the situation without being dismissive.

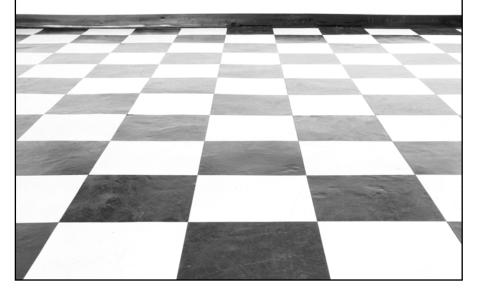
For instance, my mum once thought actors

on a TV show in a party scene were in her house, drinking and chatting. She felt like her home had been gatecrashed by revellers.

understand how disturbing this could be for your loved one'

REMOVE VISUAL DISTRACTIONS

A person with dementia may get confused by patterns on the floor. Black and white square tiles on bathroom or kitchen floors can be confusing, for instance – the person may think a black square is a black hole. Dementia UK recommends using blinds or curtains to prevent window reflections. It also suggests using bright contrasting colours to help make objects more visible.



She rang me and told me they were having a party in her house and were ignoring her instructions to leave. I kept her calm by telling her to go into the kitchen to make a cup of tea while I got rid of them. I then asked her neighbour to go over and turn the TV off. When mum went back into the lounge, it appeared to her that the intruders had left.

TRY A DISTRACTION

If your loved one appears to be hallucinating, encourage the person to talk with you, speak slowly and softly, and reassure them you're there for them. Listen to what they say, but try to change the subject. Distraction techniques may work, so offer the person a cup of tea, change the subject or try to move them to a different room.

REMOVE MISLEADING OBJECTS

Dementia UK advises moving objects that could be mistaken for a person, such as coat stands or dressing gowns hanging up. Remove or cover mirrors, as the person may not recognise their reflection – they may think they're much younger than they really are and may not recognise themselves.

It's also important to address the physical aspects of why they might be hallucinating, especially if it hasn't happened before. The person could have a urinary infection, for instance, or could be suffering from side effects of medication. Seek medical advice as soon as possible, especially if the person's medication has been changed recently.

SEEK MEDICAL HELP

If your loved one starts to have regular hallucinations, it may be useful to keep a diary of when they occur so that you might be able to work out why they are happening. You might want to note down the time of day, how long they last and whether anything else has happened that might have triggered them, such as a change in routine.

CHECK GLASSES AND HEARING AIDS



Although the person's sight and hearing may be fine, it's important to check there have been no changes. Take the person for an eye test to be sure, and if they wear a hearing aid, make sure the battery is charged and it's still in good condition.

Dealing with nuisance calls and scams

Is your loved one receiving unwanted calls and 'special offers' on the phone? Are they feeling confused and stressed about how to deal with such situations? Here's how to handle nuisance calls



If you are caring for a loved one with dementia, you may be concerned about whether others are trying to take advantage when you're not there. Sales calls can be confusing, as Jayne Sibley, CEO of Sibstar, knows only too well. Her mother had dementia and was constantly hassled on the phone.

ON A DATABASE

'My mum somehow found herself on a database,' says Jayne. 'Her phone rang all the time with people trying to sell her fake insurance policies on the washing machine or the Sky box. I would be there, and the phone would be ringing three or four times a day. The scammers would say things like, "We're going to cut off your Sky box if you don't pay this now," so

she would be really panicked and distressed.'

AVOIDING NUISANCE CALLS

There are several things that people can do to help protect their loved ones against unwanted, nuisance and scam calls.

Register with TPS (Telephone Preference Service), which prevents cold callers from phoning. This can be done online for landline phones at

tpsonline.org.uk or by calling 0345 070 0707 - and it's free to register.

For TPS on mobile phones, text 'TPS' and your email address (required to verify your identity) to 85095.

If your loved one's landline is through BT, you can opt in to "Call Protect," which is a free service that is designed to filter out spam calls and stop them from getting through to your landline. It blocks numbers which are on the BT blacklist; it also enables you to create your own blacklist and will automatically block certain types of callers (withheld

numbers or unrecognised numbers, for example).

Ofcom has advice on its website about dealing with nuisance calls and scams, and has a <u>free guide</u> on dealing with them, which

you can download.

'Ofcom has advice on its website about dealing with nuisance calls and scams'

VIDEO SYSTEM

A video door monitoring system could be a good option for monitoring visitors who are trying to sell things. Paying for items online or over the

phone could also be an issue. You may need to take control of the person's spending at some point, and the <u>Sibstar</u> app can help you. For more information, please visit sibstar.co.uk.



Manage spending with confidence

Introducing Sibstar: a game-changing debit card and app for families dealing with dementia to help manage and control spending

oney matters aren't always easy to deal with when a person has dementia. There's always a risk of your loved one overspending, losing their debit card or, worse, being taken advantage of by unscrupulous people. As a carer, you naturally want to encourage your loved one to be as independent as possible for as long as possible, but you may have concerns about their ability to manage their spending. What can you do? If you take the person's debit card away from them, you'll not only make them feel bad, but it may also cause friction between the two of you. They will want to retain their independence, but you will want to ensure they don't overspend or be exploited by others with bad intentions.

Sibstar is a debit card app that can offer peace of mind for carers and the chance for their loved ones to remain





independent. Jayne Sibley, a busy mum and carer to parents with dementia, came up with the idea of Sibstar, to help individuals with dementia manage their money safely and independently.

After witnessing her mother struggle with overspending and falling victim to fraud, Jayne created Sibstar, an innovative debit card and app combo. Sibstar empowers families by giving them the ability to manage spending and prevent fraudulent activity, while preserving the person with dementia's independence.

SET SPENDING LIMITS

With Sibstar, you can set spending limits, choose where the money is spent and receive notifications about card usage. The app also offers enhanced security measures that detect patterns commonly associated with dementia, providing added protection. Additionally, features like auto top-up and cash withdrawal rules make managing finances even easier.

Jayne's mission is to support other carers and families facing similar challenges. Sibstar is the only service of its kind, allowing individuals living with dementia to take control of their own spending. Think of Sibstar as a super-safe purse or wallet.

More information
Learn more about
this groundbreaking
solution at
sibstar.co.uk.
Alternatively,
email hello@sibstar.
co.uk or call 01962
676 080 between 8am
and 6pm Monday to Friday.



When someone has dementia, it's common for them to lose interest in their appearance and not maintain their personal hygiene as before. It can be a challenge to encourage them to wash and dress appropriately because they may not recognise the need or prefer to stay in the same clothes for extended periods of time. However, there are ways to handle this situation with care and understanding.

It can be upsetting for carers to see, especially if your loved one has previously been neat and taken great pride in their appearance. It's a situation that I encountered with my mum in the mid stages of her dementia. Mum was reluctant to change out of her favourite black jumper and black trousers. She would have happily worn them all the time (even at night) if I hadn't managed to persuade her to change. During one

visit, I noticed she needed a bath, and when I persuaded her to take one, she sat in the bath with her jumper on. It was heartbreaking to see.

Struggling to persuade the person to get washed and dressed? Consider how essential it is at that moment.



If they are staying in most of the day, then sitting around in their nightwear won't be a big deal, and a quick wash may be less stressful for them.

If you are helping the person with personal hygiene, try to make them feel at ease. If they need to remove their clothes and wash, they may feel violated, even by you. How much help do they really need? If they

elasticated waistband will be easier than jeans or buttoned trousers.

HELPING WITH WASHING AND DRESSING

When helping with personal care, try the following:

Give them space

Allow extra time to help the person get washed and dressed if you are taking them out.

'Do what you can to help while distracting them with a conversation about a topic they like'

are in the early or mid stages of dementia, the person may be able to manage with only a few prompts.

GET THE RIGHT CLOTHES

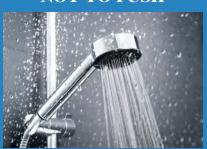
Choose clothes that are easy to pull on or take off. Avoid fiddly zips or tops that need to be pulled overhead.
Cardigans will be easier to put on than roll-neck jumpers, for example, while tracksuit bottoms or trousers with an

• Use distraction techniques

If you're helping the person with washing or toileting, do what you can to help while distracting them with a conversation about a topic they like. A care worker once told me a colleague of hers would tell a resident they were going for a spa treatment and made them feel like they were being pampered. She'd then give her a foot massage with oils afterwards.



KNOW WHEN NOT TO PUSH



Timing is key. On certain days, my mum was more open-minded to the idea of taking a shower or changing her clothes. On other days, she'd refuse. Never force the person to have a wash or a shower - they may be having a bad day or be excessively tired. Encourage the person if you can, and if they don't want to know, leave it or try again later. If you're taking the person to an appointment, allow plenty of time for them to get washed and dressed, so you're not stressing about being late. I used to allow an extra hour when taking my mum to a medical appointment, in case she was having a bad day.

Put yourself in their shoes

As a carer, it's easy to focus on the task and not think about the impact it's having on the person. Yet imagine how strange it would feel to have a person dressing you. Empathy can go a long way.

Encourage independence

Whatever they can still do for themselves, let them do it, without trying to take over or pointing out that they are doing it wrong.



Getting the support you need as a carer

Caring for a person with dementia can feel overwhelming, so it's crucial to ensure you and your loved one are getting all the practical support you need. Here's a quick guide to the help you may be entitled to receive

We often advise not to try to care for your loved one on your own. However, you may know you're in need of help and support, but not know where to look. It's essential to get help and support as a carer, but it can seem like a daunting task. But where do you start and who can help you? Over the

next few pages, we've put together a guide to help you may be able to access...

AN ASSESSMENT FROM THE LOCAL AUTHORITY

Your loved one is entitled to have an assessment of their care needs by the local authority in their area. Contact the welfare rights adviser at their local council and ask for a carer's assessment. Even if they don't need much help at this stage, the sooner you start the process, the better, as you may have to wait a while.

The council will conduct an assessment to determine whether your loved one is eligible for funding.

OTHER FORMS OF SUPPORT

While financial and practical help can make a huge difference, emotional support is also crucial. Sheila Marsh cares for her partner, Sue Strachan, who has early onset dementia. Sheila also led the Herefordshire Dementia Partnership until January 2023, working with agencies involved in dementia care. Sheila reveals her top tips on how to access more support.



Search online

In pretty much every local authority, there will be an organisation given money by the council to provide carer support. You can literally type 'carer' or 'support Bedfordshire' for example, into Google.

Check the noticeboard at your doctor's surgery or speak to the GP

Often, these organisations have notices in GP surgeries. You can ask the GP surgery if there is a local carer support organisation.

Ask about grants

There are grants you can get from <u>Carers UK</u> for individuals to get equipment. Grants may be given for things like home repairs and moving house, buying disability equipment, daily living costs, or help with replacing essential items like a fridge. The criteria for applying will vary, but the grant provider will want to ensure you have received all government benefits first. Charities and trusts are usually the ones who administer grants. For more information, visit <u>www.carersuk.org/help-and-advice/financial-support/benefits-if-you-are-disabled-ill-or-injured/grants-and-schemes/</u>

Go to local support groups

Some people go to these groups and take their cared-for person with them. Getting out of the house can be beneficial for the person with dementia, and it helps to talk to others who are going through the same thing.

The person is entitled to receive advice upon their initial contact with the council. If the person qualifies, their assets will be considered, and they may be required to contribute towards the cost of care.

While the local authority doesn't supervise private care, they're responsible for ensuring the care provided by them meets the person's needs. If issues arise, the local authority can address them through

'If the person
is not eligible for
financial support, the
authority should still
provide information
and guidance'

their complaints system. If the person is not eligible for financial support, the authority should still provide information and guidance on finding the appropriate care. If there is a possibility of NHS support, the local authority will link the assessment to the NHS. For more information, visit www.gov.uk/help-care-support to find your local social services department.

ATTENDANCE ALLOWANCE

You should also look into <u>Attendance Allowance</u>. This is provided to those who are 65 and over who require help with personal care.

Independence Payment (PIP).

This can help with extra living

costs if your loved one has a

long-term physical or mental

Attendance Allowance helps with extra costs if your loved one needs someone to help look after them. It is not

means-tested and. at the time of writing, pays out between £68 and £102 per week, depending on the level of care required. There are two levels of financial assistance. For more information, visit the DWP website at www.gov.uk/

grants you *individuals* to get equipment'

disability, or if they have trouble doing everyday tasks or getting around due to a health condition. There are two parts to PIP - a daily living part and a mobility part. You can find out

more information

health condition or

about PIP at www.gov.uk/pip

CARER'S ALLOWANCE

'There are can get from Carers UK for

If you care for your loved one for more than 35 hours per week, you could also be eligible for Carer's Allowance, which pays out around £76

per week. You need to be earning £100 or less per week after deductions and not currently enrolled in full-time education. For more details, visit www.gov. uk/carers-allowance

NHS CONTINUING **HEALTHCARE**

This is a lesser-known package of care which is arranged and funded by the NHS that can be in any setting - in the person's home or in a care home. It is available in England, Wales, Scotland and Northern Ireland, though the details below may be different in Northern Ireland, It is intended for those with long-term complex needs.

If the person is eligible, it is free and is not means tested.

PERSONAL INDEPENDENCE **PAYMENT**

attendance-allowance

If the person needing care is under state pension age, the equivalent would be Personal





The NHS will pay for services from a community nurse or a specialist therapist and associated social care needs, such as personal care and domestic tasks.

For more information on NHS Continuing Healthcare in England, visit the NHS website.

LOOK INTO MEALS ON WHEELS

If your loved one lives alone but you're concerned about their dietary intake, Meals On Wheels could be a solution. To find out if you can access it in your area, visit www.gov.uk/meals-home

MORE GUIDANCE

 Navigating this process may seem overwhelming, but rest assured, assistance is available. Age UK offers a free Advice Line on 0800 169 2081. You can also locate a local branch and access additional resources on the Age UK website: www.ageuk.org.uk/no-one/we-provide-advice/

- For further support, visit The Carers UK website, call the advice line on 0808 808 7777 or email advice@carersuk.org
- Finally, Alzheimer's Society has a handy factsheet called Benefits for People Affected by Dementia, which you can download from its website. This is updated annually and lists all the benefits your

loved one may be entitled to claim. Visit www.alzheimers.org.uk/get-support/legal-financial/ benefits-dementia

COUNCIL TAX DISCOUNT

On a separate note, if your loved one has a dementia diagnosis and is receiving disability benefits (which could include Attendance Allowance or Personal Independence Payment (PIP), they may be entitled to a 25 per cent discount on their council tax, which could save them an average of £400 per year.

To find out if your loved one is eligible and to apply for this discount, visit www.gov.uk/ apply-council-tax-reduction Image: https://www.gov.uk/



Exercise will make you more mentally resilient, reduce your own dementia risk and even give you more energy. Here's how to make time for regular activity. Words: **Christina Collison**

often write on the **Dementia** Help Facebook page about the need to take care of yourself as a carer. As the saying goes, you can't pour from an empty cup. If you feel burned out, and mentally and physically exhausted, you won't be providing the best care for your loved one. Self-care is not selfish. When I was caring for my mum, I ensured I got to exercise for 30 minutes most days. Exercise was my solution for unwinding, and resetting both my mind and body. I enjoyed running and found it very beneficial for improving my mindset.

While I knew it wouldn't solve my problems, it made me feel better equipped to deal with them.

There are various other reasons why exercise is beneficial for carers. Firstly, it can boost your stamina and strength, making you a better carer. It can also reduce depression and anxiety, leaving you better placed to cope with stressful situations.

BETTER SLEEP AND QUALITY OF LIFE

Other reasons to exercise include improved health benefits and better sleep.
Despite the obvious benefits

of exercise for carers, a study from <u>Carers UK</u> showed that carers aged over 55 are less active than other adults in their age range. The study also showed that carers are more likely to be inactive - 46 per cent of carers are likely to be sedentary compared with 33 per cent of adults in general.

EXERCISE BARRIERS

As you might expect, the biggest barriers carers face to physical activity include lack of time and motivation. Another reason why carers are less likely to be active, according to the Carers UK study, is feelings of guilt.

This guilt can prevent carers doing something for themselves and stop them putting themselves first from time to time.

I keep coming back to my original point. Exercise will help protect your health and make you a better carer. The NHS guidelines for exercise for adults aged 19 to 64 are to do some form of physical activity on a daily basis. This level of activity can reduce the risk of heart disease and stroke. Adults should aim to do strength training twice a week and at least 150 minutes of moderate-intensity cardio exercise (such as brisk walking, dancing, cycling or hiking) per week in total. Alternatively, you can do several shorter sessions of vigorous activity, such as running or swimming.

FIND WHAT YOU LOVE

Whatever you do, make sure it's something you enjoy. If





you're not naturally drawn to exercise but feel you should be doing something, then you could make a playlist of your favourite songs and go for a brisk walk or a jog. Or you could join a dance class. Anything that makes you more active.

Another good reason to be active is it can help reduce your risk of getting dementia. Research presented at the Alzheimer's Association International Conference in Toronto in July 2018 showed exercise reduces shrinkage of the hippocampus – the part of the brain that deals with memory and thinking. It also showed that exercise could thicken the cortex, the part of the brain that deals with our consciousness.

REDUCED RISK OF ALZHEIMER'S DISEASE

Those in a 12-week study who performed 45 minutes of cardiovascular exercise four times a week were shown to have decreased levels of tau, the protein that builds up in the brain that can contribute to Alzheimer's disease. Don't feel you have to do loads of exercise in one go. Breaking it down into two or three ten-minute chunks per day will have the same benefit as a longer session. It's the cumulative effect that counts.

QUICK WORKOUTS

Need a plan? Download our free walking and walk/run plans from our website: dementiahelpuk.com/thebenefits-of-exercise.



t's natural to rely on coffee to boost your energy and help you cope with your caring duties, but it may not be ideal for everyone.

Caffeine will improve alertness, as it acts as an adenosine receptor antagonist. Adenosine is a substance in your body that promotes sleepiness, so caffeine blocks the adenosine receptor, to keep you from feeling sleepy.

ADRENAL GLANDS

However, caffeine also stimulates the adrenal glands to work harder and release more adrenal hormones, such as adrenaline. If you are already stressed, this is adding to the long-term effects of stress on your body and exhausting your adrenal glands. This stimulating effect can also interfere with sleep.

COFFEE ALTERNATIVE

For a natural alternative, you could try mushrooms. Over 2,000 scientific articles have been written about cordyceps mushrooms regarding their effect on the kidneys, liver, genito-urinary and immune systems and, importantly, on energy. Several scientific studies have also confirmed that cordyceps increase the use of oxygen in the body, reducing recovery time. There are various mushroom supplements that may help, including Hifas Da Terra Mico Cord, which contains a high concentration of cordyceps active ingredients, also known as the "energy mushroom".

CHECK YOUR IRON LEVELS

Get your iron levels checked, as you may be deficient. Iron contributes to the normal function of the immune system and helps with the reduction of fatigue. Another Vitamin to look at if you're feeling run down and lacking in energy is vitamin B12, which contributes to the reduction of tiredness and fatigue, and promotes normal energy metabolism. It also contributes to the normal functioning of the nervous system and red blood cell formation, as well as supporting the immune system. Vitamins B6 and B12 are also known for their energy-yielding properties. Finally, vitamin C can be beneficial, as it helps ensure the adrenals are nourished, which helps maintain good energy levels.

More information

Dr Naomi Newman-Beinart is a nutritionist (BSc) and specialist in health psychology (PhD). You can obtain iron supplements from Better You at betteryou.com, and Unbeelievable Health has a range of supplements to help you sleep and keep you calm.

When your partner has dementia

Caring for someone with dementia is challenging, and if that person happens to be your partner, the challenge can be even greater

When your partner has dementia, the dynamic of your relationship will sadly change. You may be used to supporting one another equally, but you may have recently had to become the sole decision maker and person who runs the household.

Sheila Marsh is a carer for her partner Sue Strachan, who has early-onset dementia. Sheila has had to take over running the household.

At times, the stress can cause tension. She says: 'I often know when Sue is tired - there may be an angry exchange. Sue will want to tell me about things she's done and reel off all sorts of things, but I'm not really with it.

Sheila adds: 'She's very absorbed in what she's doing,

but I'm doing millions of things too, like keeping the house running, walking the dog, managing the goats in the field and growing vegetables. Plus there's the cleaning of the house and all other things that need to be done.'

YOUR OWN INTERESTS

Over time, the person with dementia may lose empathy and be more wrapped up in their own world. 'Sue is still quite aware and sometimes realises she's being a bit demanding,' says Sheila. 'I will have to say, "I have to do this as well," so that she realises.'

ENLIST SUPPORT

Sheila recommends getting a support system in place. 'Whether that's friends or family or other carers through an organisation, it can be enormously helpful,' says Sheila. 'You have to have somewhere to vent. I think it's easier to vent if the person with dementia is a parent. You may have a partner or siblings you can talk to. But you need people to genuinely understand what you're dealing with.'

To help maintain your own emotional well-being, make sure you have a bit of time out now and then. Exercise can help, or even going to a class where you meet other people and have conversations about everyday topics. Most importantly, don't try to cope alone. It's important to make sure you have someone you can talk to.



Is dementia harming your relationship?

Are you caring for a parent with dementia and finding it's affecting your relationship with your partner? Here's how to make sure you get the support you need from your nearest and dearest. Words: **Christina Collison**

Caring for a parent or elderly relative with dementia can put a strain on your relationship with your partner. While they may have good intentions and want to help, they may not fully grasp how dementia affects a person's ability to function independently, leading to misunderstandings and potential resentment about the time you spend caring for your parent. As the carer, it's easy to feel overwhelmed and wish for more support.

The key to maintaining a healthy relationship lies

'Can your partner help by collecting medication?'

in open and honest communication. If you feel that you're not receiving the support you need, sit down with your partner and explain your feelings. Be specific about the type of support you require and how you're struggling to cope on your own. It's important to have

this conversation, even if it feels difficult or unnecessary, as your partner may also be facing their own challenges.

IDENTIFY THE SUPPORT NEEDED

Before speaking to your partner, identify the practical support you need as a carer. Do you require assistance with daily tasks, such as visiting your parent or accompanying them to appointments? Can your partner help by collecting medication or spending time with your parent while you attend to other responsibilities? Consider these needs carefully and discuss them calmly with your partner, avoiding confrontational approaches. It's also beneficial to assess your partner's understanding of dementia. Do they comprehend how it can impact a person's emotions and behaviour? The more knowledge they have about the condition, the better they will comprehend the challenges you face as a carer.

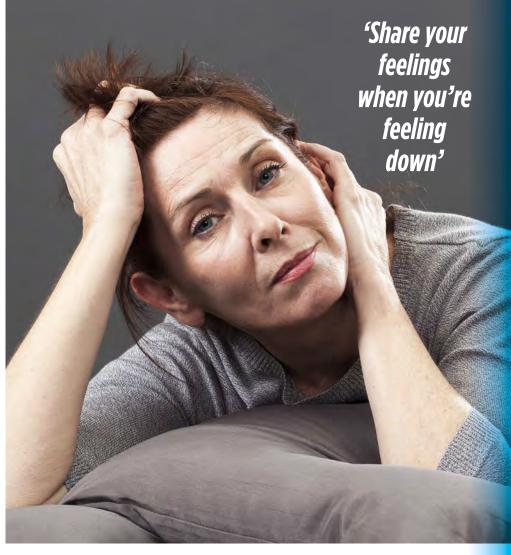


CARING FOR A PARTNER WITH DEMENTIA



Of course, not everyone is caring for a parent. There are many dementia carers out there looking after their partner with the condition. This will change the dynamic of their relationship. What might have been an equal relationship in terms of sharing bills and household responsibilities may shift, so the pressure is solely on the person caring. One carer recently commented on our Dementia Help Facebook page: 'I've been caring for my hubby of 40 years. Every day, I watch him lose things like his awareness of others' feelings, his ability to have deep conversations, his organisational skills. All the things that made him so special. Now I watch him struggle to get dressed, or work out where the bedroom is. I still love him and always will, but I certainly miss the real 'him'.'

Does your partner have dementia? See page 35 for advice on caring for a partner with dementia.



If you had a difficult relationship with your parent in the past, share this with your partner, so they can better empathise with your emotional journey.

UNDERSTANDING THE CONDITION

Encourage your partner to educate themselves about dementia, by visiting reliable websites that offer advice and information.
Understanding the condition will help them better support you through both the emotional and practical aspects of caregiving. For

instance, when my mum experienced mood swings, my partner knew the reasons behind them and empathised with how they affected me.

Above all, maintaining good communication with your partner is crucial. Share your feelings when you're feeling down and request their comfort and support. Make an effort to spend quality time together whenever possible. Even if long vacations are not feasible, short breaks or day trips can provide much-needed rejuvenation for both of you.

Unlock healthier eating habits in six easy steps

Make sure your loved one eats regular, healthy meals and stays hydrated with our top tips for improving their nutrition habits.

Words: Christina Collison



ating a healthy, balanced diet is essential for everyone, especially those with dementia. But ensuring the person sticks to a nutritious diet can be challenging. Your loved one's eating habits may not always be easy to manage, but here are some simple yet effective steps you can take, to help ensure they get the nourishment their body needs...

SERVE MEALS ON A BRIGHT PLATE

A study conducted at
Boston University showed
that eating from a red
plate meant that patients
consumed 25 per cent more
food at mealtimes. Using
a pale or white plate can
mean your loved one may
not be able to see food on
the plate. Use red or blue to
make food stand out.

ENSURING YOUR LOVED ONE STAYS HYDRATED

We all know the importance of staying hydrated, but it can be difficult to get your loved one to drink water or drink enough fluids in general. There's also the issue that the person with dementia may forget they need to drink.

Make sure you always give your loved one a glass of water when you serve a meal. Place a cup or glass close to the person so that it's clearly visible. If the person doesn't like to drink plain water, dilute it with squash. Offering fruit juice and smoothies will also help the person to remain hydrated.

Finally, choose a cup or glass that's easy to handle and not overly fancy.





'Cutlery can

be challenging,

so make it easy

for the person

to eat - buffet

foods can

he ideal'

OFFER FINGER FOODS

served with dips.

ADD HEALTHY GREENS TO SANDWICHES

If you're making the person a sandwich, add healthy foods, like salad, cucumber or chopped tomatoes.

DON'T SERVE LARGE PORTIONS

While you want to ensure the person with dementia is eating enough, don't serve very large meals, as these can look daunting and the person may get tired while

eating. Serving smaller, more regular portions may be ideal.

DON'T TALK DURING MEALS

You may have already noticed that a person with dementia can be easily distracted. This means that conversation during the

> meal can stop the person from eating. Try to eat in silence, so that they can focus on their food.

CUT UP MEATS

Make sure the food is easy to eat - even if the person is still able to use cutlery. If

you're serving a large portion of meat, cut it up before you serve it to the person. You may also want to consider offering easier alternatives, such as mashed potato instead of boiled potatoes, to make eating easier. I

ALCOHOL AND **DEMENTIA - IS IT** A GOOD IDEA?

If your loved one enjoys a drink occasionally, you may see no harm in giving them the occasional beer or glass of wine. However, it's important to be aware that a person with dementia can become confused after drinking alcohol and may forget how much they've had to drink. This means they can easily end up drinking too much. If the person likes a drink from time to time, make sure you're with them when they do and try to dilute alcohol with soft drinks. It's important for the person to moderate their intake - research has found that alcohol increases brain atrophy in the brains of those with Alzheimer's and causes a greater number of amyloid plaques (proteins that form in the spaces between nerve cells that clump together to form plaques between neurons and disrupt cell function).

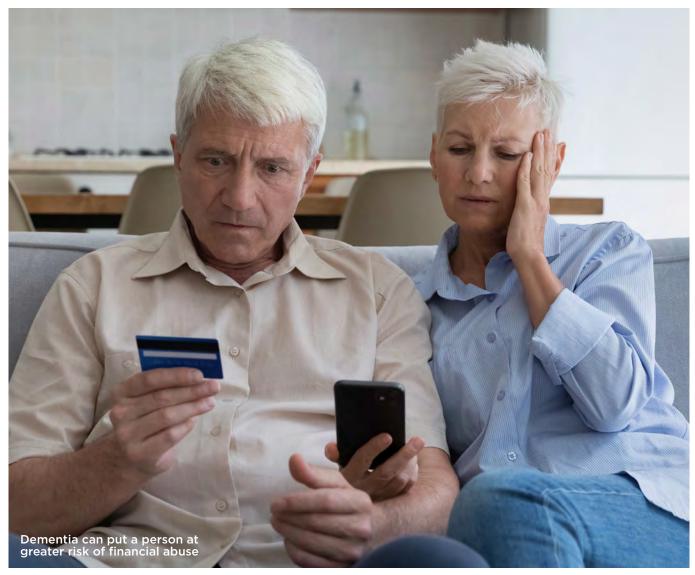


Cutlery can be challenging to use as dementia progresses, so make it easy for the person to eat - buffet foods can be ideal. Healthy choices include fruits, such as raspberries, strawberries and halved grapes, or chopped vegetables

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Protecting your loved one from financial abuse

Having dementia puts a person at greater risk of being exploited financially. **Christina Collison** explains how to prevent fraud



t's a sad fact that a person with dementia is at greater risk of being exploited by those who are supposed to be caring for them. After conducting a survey, Alzheimer's Society revealed that 76 per cent of people had experienced difficulties

in managing their finances. The survey said people find it difficult to talk about financial issues, and highly technical banking security makes it hard for people with dementia to manage their money. This, of course, means they need to put their trust

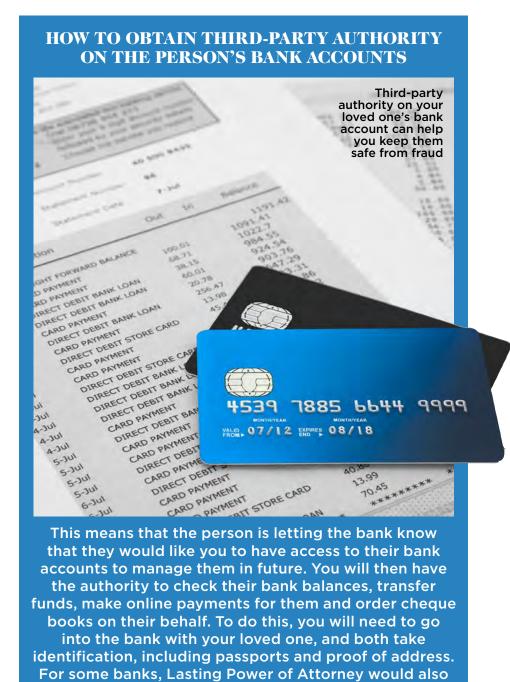
in other family members or close friends to manage their finances. And the Alzheimer's Society survey says that some 15 per cent of carers revealed that the person they care for had been subjected to some form of financial abuse.

FINANCIAL EXPLOITATION

Money can bring out the worst in people. Friends or even members of the person's own family can exploit them, as it may be difficult or impossible for them to manage their own affairs. According to a Financial Abuse Review, published by Age UK in November 2015, those with dementia or reduced cognitive function are most at risk. The review also revealed that 50 per cent of financial abuse in the UK is by 'adult children'. Approximately 130,000 people aged 65 and over have suffered financial abuse since turning 65.

GUILTY FAMILY MEMBERS

Another review, conducted for Age UK in 2008, showed that 70 per cent of financial abuse is by a family member. A report by King's College London and the National Centre for Social Research, published in 2007, revealed that 57,000 people aged 66 and over in the UK had suffered financial abuse by a relative, friend or care worker.



give you this authority, but the situation can vary

depending on the bank.

AN APP TO HELP WITH MONEY MANAGEMENT

Jayne Sibley, whose parents both had dementia, created and launched Sibstar, a new flexible debit card app to help families with dementia manage spending and avoid fraud. You can choose where and how the person's money is spent, as well as setting daily or weekly spending limits. As a carer, you can choose to receive notifications about how the card is being used and set up enhanced security protections as well as auto top-up, so that the card never gets declined from small transactions. Visit the website for more info at https://www.sibstar.co.uk/



'I NEVER THOUGHT IT WOULD HAPPEN IN MY FAMILY'

Sue Smith' talks about how she was shocked and appalled to find that her sister, whom she trusted, was stealing their mum's money, despite her mum being at her most vulnerable...



When my father died, my sister took charge of my mother's finances. Mum wasn't confident in her own ability to deal with paperwork, so she asked my sister to manage everything. This turned out to be a huge mistake. My sister ran into financial difficulties and began taking my mum's money without permission. She started off with small amounts, then began to withdraw regular sums of about £500 every two weeks. My sister knew my mum had dementia and would most likely need full-time care one day. Yet she still took Mum's money - and did so regularly over a two-year period.

To conceal her actions, my sister had my mum's post diverted to her own address, so that Mum didn't receive any bank statements. We only found

out what had occurred after I grew suspicious. I began to talk to my sister about Mum's future care needs and what it might cost, and my sister was very defensive about Mum's financial situation. I discovered the deception when Mum and I visited her bank and asked for a printout of some recent bank statements, which showed consistent withdrawals made in the town where my sister lived.

My mum was devastated and died a few years later, knowing her own daughter had stolen from her. I know people often think it won't happen in their family. Unfortunately, I've learned that when people get desperate, they will always find a way to justify their actions, even if they are wrong. Don't think it can't happen in your family. I just wish I'd trusted my instincts sooner.

TAKING ACTION

Don't think it won't happen in your family. Trust your instincts. If you suspect wrongdoing, here's what you can do:

- Speak to the person's bank if you suspect theft from their account
- Cancel all debit cards immediately
- Obtain third-party access to the person's account, so that you can monitor activity (see box, page 41)

'I discovered the deception when Mum and I visited her bank and asked for a printout of some recent bank statements'

- If theft has occurred, report the matter to the police and obtain a crime reference number for the bank, which they may require in order to investigate the matter
- Seek advice urgently. Call The National Careline for advice on 0800 0699 784, or alternatively, speak to Age UK's helpline on 0800 678 1602.

More information

If you are concerned about someone abusing a Lasting Power of Attorney, it can be revoked if the person with dementia still has capacity. Contact the Office of the Public Guardian on 0300 456 0300 or by email at opg. safeguardingunit@publicguardian. gsi.gov.uk, or speak to a solicitor for further advice.

Helpful directory

Do you sometimes feel a bit isolated in your caring role? There is help and support available, if you need to talk to someone...



AGE UK

A charity dedicated to helping older people. ageuk.org.uk

ALZHEIMER'S RESEARCH UK

A charity conducting research into finding treatments for dementia.

Infoline: <u>0300 111 5555</u> alzheimersresearchuk.org

ALZHEIMER'S SOCIETY

Help and support.
Support: 0333 150 3456
alzheimers.org.uk

CARERS UK

Information and advice on caring, connecting carers and campaigning with carers for change. Offers advice on benefits and financial support, and your rights as a carer in the workplace.

Helpline: <u>0808 808 7777</u>

carersuk.org

DEMENTIA CARERS COUNT

Free online learning about dementia.

Support line: <u>0800 652 1102</u> dementiacarers.org.uk

DEMENTIA HELP

Our own website, with articles and free guides on coping with being a carer for your loved one, as well as free resources you can download, to make you better informed about dementia, including guides on challenging behaviour and nutrition.

<u>dementiahelpuk.com</u>

Email: christina@dementiahelpuk.com

DEMENTIA UK

Specialist support for advice and information on dementia.

Helpline: <u>0800 888 6678</u> <u>dementiauk.org</u>

DEMENTIA TALKING POINT

A free online community available 24 hours a day run by Alzheimer's Society. alzheimers.org.uk/get-support/dementiatalking-point-our-online-community

YOUNG DEMENTIA NETWORK

A community of people keen to improve the lives of those who are affected by young onset dementia.

youngdementianetwork.org

Email: youngdementianetwork@dementiauk.org



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