Dementia, delirium and depression in older adults

What is dementia?
Dementia is a term which is used to describe a group of brain disorders that result in a progressive loss of thinking abilities (e.g. memory/learning, language/communication, and skills like problem solving, planning, judgment/decision making and impulse control). Dementia may also cause changes in mood or personality. There are many different types of dementia. The most common forms of dementia are Alzheimer’s disease and Vascular Dementia. Dementia can occur at a younger age; however, it is more common in people over the age of 75. Although dementia is progressive, there are strategies to help the adult with dementia and their caregivers adapt to its symptoms and behavioural changes.

What is delirium?
Delirium is a term used to describe an acute medical crisis (often with sudden onset) that impacts attention, memory, and perception. Delirium is common - up to 75% of older adults experience a delirium after an acute physical health problem (e.g. an infection, illness or surgery) however diagnosis is missed in 50% of the cases. Malnutrition, dehydration, misuse of prescription or other drugs, alcohol withdrawal, injury, pain, stress, or unfamiliar environments are some of the circumstances that can cause or worsen a delirium. Delirium can be frightening for an older adult and family member but likely can be reversed once the underlying cause is treated.

What is depression?
A clinical depression is more than feeling “down, blue or sad”. It is a mood disorder which changes how a person feels, thinks, and manages daily activities. Depression is NOT a normal part of aging. Factors that can increase risk of depression include certain health problems, loneliness, a reduced sense of purpose, and recent losses. Sometimes older adults who are depressed may display symptoms such as exhaustion, difficulty sleeping, moving slowly, memory or attention problems (which can mimic dementia), irritability, changes in appetite and/or weight. An older adult with depression may also start experiencing more physical pain, not enjoying things as they used to, and displaying anxiety or guilt. It is important to consult a health care provider if you are experiencing these symptoms. If untreated, depression can impact other health conditions and increase the risk of suicide.
What is the relationship between dementia, delirium, depression and abuse?
Older adults with a dementia, delirium or depression are much more vulnerable to abuse, neglect and self-neglect. All these conditions can create dependency on others and if social networks are not strong, the risk of isolation increases. When cognition is compromised it becomes more difficult to seek support and/or enact a safety plan. Someone can have a dementia, be depressed, and also be in a delirium at the same time making it difficult to separate the conditions and treat them.

Does the stress of caregiving, especially for someone with dementia, delirium and depression trigger abuse?
Older adults with a dementia, delirium and/or depression can become confused and when fearful may even demonstrate aggressive behaviour towards others. It is important that caregivers and friends understand the nature of the older adult’s illness(es) and learn ways to de-escalate aggressive behaviour while ensuring safety of all.

Most caregivers do not resort to abuse in times of stress, but stress can increase impulsivity and reactivity. It is important for caregivers to monitor their own stress level, fatigue and possible depressive symptoms, so that they can remain healthy. Support and regular respite is often helpful for the older adult and caregiver.

Tips for family and caregivers:
Ensure the values and wishes of the older adult are noted and respected. Be proactive and consider completing an Advance Directive, Enduring Power of Attorney and Will when the older adult is energized, focused and able to give instructions.

Don’t assume that all changes in the behaviour of an older adult with dementia are related to the progression of dementia — always consult with the older adult’s health care providers for advice. Respites should be planned in advance so that a caregivers health is not compromised.

Foster and prolong autonomy by increasing supports, and demonstrating patience and understanding.

Educate yourself on dementia, depression, and delirium and know that a support or care plan should be evaluated periodically to ensure everyone’s health and safety.