

Assessments, interventions and caring for patients with Alzheimer's and Dementia

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Abstract

In 2016, The World Alzheimer's report estimated that 47 million around the globe had Dementia. By 2050, an American will be diagnosing with Alzheimer's every 33 seconds. Caregivers provide 18 billion hours of unpaid assistance. In 2017, Every 66 seconds, an American will develop Alzheimer's Disease. Leading cause of Dementias are Alzheimer's Disease, Vascular Dementia, Parkinson's Disease, Lewy Body Disease, Alcohol-related Dementia, (Korstkoﬀ's syndrome), HIV/AIDS Related Dementias, and Frontal-Temporal Dementias (Pick's Disease). Early signs of Alzheimer's over 60 found those who consistently slept for more than 9 hours each might twice as likely to develop neurological conditions. Arterial stiffness in Older Adults predicts future Dementia (Chen Cui U of Pittsburgh 2018). Stages of Dementias include Mild Cognitive impairment, Early Dementia, Moderate Dementia, and Severe Dementia.

Risk factors of Dementia and Alzheimer's include age, sedentary lifestyle, genetics, head trauma, lower education, poor social support, obesity, depression, hypertension, smoking, heart disease, and miscarriage in pregnancy. Caring for Patients with Alzheimer's and other Dementias include home safety tips, memory Aids, Enhanced communications, Strategies to assist with patients with mood and behavioral problems, such as Reminiscence techniques, communications enhancement techniques and positive psychology. Implications for practice, policy or research. There's a positive connection between higher levels of education and lower risk of dementia, including that the higher educated exercise more and both weights. Researchers and Dr. Tanzi suggest that the therapeutic answer might ultimately be a cocktail of medications. "Drugs to hit amyloid early on, drugs to hit tangles early on, drugs to hit inflammation," Dr. Tanzi said. "And you might want to add antivirals." (NY Times Nov. 2018). Delirium and Alzheimer's disease share many underlying path physiologic contributions. Thus, preventing delirium may in turn prevent Alzheimer's disease.

Legal Instruments and financial issues to be planned with, Social Workers, Geriatric Care Managers, Alzheimer's Association and Elder Law Attorneys. Finally, the presentation will encourage social workers to examine their own practice implications when working with Alzheimers Disease and related dementias in community, hospital, long term care settings, palliative care and hospice settings. Personal and Professional challenges. Professional and Reading Resources will be provided.

Learning Objectives:

After completing this workshop, participants will be able to:

1. List leading causes of Dementias & Alzheimers
2. Identify Different Stages of Dementias
3. Assessments for Alzheimers and Dementias
4. Interventions for Alzheimers and other Dementias
5. Identify strategies for handling exercise, socializing and other activities
6. Identify strategies of dealing with behavioral issues using enhancement techniques, positive psychology, reminiscence technique and safety guidelines
7. Delirium screening tools in Older Adults
8. Mindful and Nine ways of Healthy Aging
9. Current Findings and Future Research
10. Legal and financial concerns that need to be addressed with patients and caregivers

Brief Summary Abstract

An increased understanding on Alzheimer's and Other Dementias, Assessments, and Interventions. Reviewing Different Stages of Dementia. Discussion of Concept of Delirium vs. Dementia. Current Findings and Future Research. Caring for Patients with Alzheimer's and other Dementias include home safety tips, positive psychology, memory Aids, reminiscence techniques, and communications enhancement techniques following the NASW professional standards for ethical practice.

Biography

Virginia Lee has been a Social Worker for the past 25 years. Her work has primarily focused on assisting people who are frailer-ed, living with chronic illness, in health care social work. She also sees patients who seek help for variety of reasons. For most of her career, she worked at Masonicare Care, a premier home care agency, assisted living facilities, and nursing homes and NYC Health and Hospital Corporation at Bellevue Hospital, a trauma hospital and Coler Memorial Hospital. She held a medical social worker position at Masonicare caring for geriatrics and palliative care patients that were home bound, nursing homes, hospitals, and assisted living facilities. At New York City Health and Hospital Corporation, she held the Social Worker Supervisor III, she was in charge of 500 sub acute care beds facility, graduate interns, six MSW staff and chaired Quality Assurance Committee and Education Committee. Virginia Lee is now the creator of Aging Life Care Professional and Care Management LLC. Virginia Lee has an in- depth understanding of issues that are connected to her work. She has sat on many committees, including Advisory Member of Late Life Issues Committee in Fairfield County, Co-Chair Aging Committee with Connecticut National Association of Social Workers, Creative Learning Advisory Board Meetings.



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