



Ellen Munsterman, MSN,  
APRN, AGCNS-BC  
*Department Editor*

## LET'S TALK DEMENTIA

Michelle Kimzey, PhD, MSN, RN-BC  
Sonia Shamlin, RN, MSN, MBA, PMP

**D**ementia is not a normal part of aging nor a specific disease. It is an overall term that describes a wide range of symptoms associated with a decline in memory or other thinking skills severe enough to reduce a person's ability to perform everyday activities. Dementia is a progressive debilitating condition that affects cognitive function, self-care ability, and quality of life (Alzheimer's Association, 2020). Nearly six million Americans are living with Alzheimer's dementia, with over 70% of them living in the community (Alzheimer's Association, 2020). While Alzheimer's disease is the most common form of dementia, the diagnosis of any type of dementia has a profound effect on the person living with dementia and their caregiver (e.g. vascular dementia, Lewy-body dementia). However, many may present with signs of dementia, but without a formal diagnosis.

**Dementia is more than memory loss.** Changes due to dementia interfere with how brain cells communicate with each other. Changes can affect a person's thinking, behavior, and feelings. Persons with dementia might have problems with vision, understanding words, coordination, judgement, and language. **Dementia affects everyone differently.** Living with dementia makes it harder to do things, but many continue to lead active, healthy lives and enjoy loving relationships.

Communication is central in providing good care for those with dementia. When people have dementia, they might have difficulty remembering the facts, but they remember the feelings. They pay more attention to what they see than what they hear, so be aware of your nonverbal communication. Your goal is to say whatever it takes to help them feel safe and secure for the moment. You will meet them where they are and respond to their emotion not the behavior. **Behavior is their communication.** It is a clear expression of feelings and needs. Look for patterns when behaviors are observed to better understand what they are expressing. When you are

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**About the authors:** Michelle Kimzey, PhD, MSN, RN-BC, Texas Christian University, Harris College of Nursing and Health Sciences, TCU Box 298620, Fort Worth, Texas, 76129.

Sonia Shamlin, RN, MSN, MBA, PMP, Texas Christian University, Harris College of Nursing and Health Sciences, TCU Box 298620, Fort Worth, Texas, 76129.

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**Correspondence to:** Michelle Kimzey, PhD, MSN, RN-BC, Texas Christian University, Harris College of Nursing and Health Sciences, TCU Box 298620, Fort Worth, Texas, 76129 ([m.kimzey@tcu.edu](mailto:m.kimzey@tcu.edu)).

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working with someone with dementia in the gastroenterology setting, you will be the one to adapt your care and approach, not the person with dementia.

When communicating with a person with dementia, slow down and remove any distractions and background noise. Persons with dementia may have difficulty communicating if we move or talk too quickly. Approach them from the front and identify yourself to get their attention. Ask one question at one time and maintain eye contact while speaking to the person with dementia to convey a sense of caring and understanding. Persons with dementia should not be excluded from conversations regarding their care. All healthcare professionals should **speak directly to the person** even if a caregiver is present. Always allow them time to express their thoughts and needs without interruption. It is best to avoid criticizing, correcting, or quizzing the person with dementia. Erase the phrase, “Do you remember?” It is more constructive to listen and try to understand the meaning or emotion behind what they are trying to say.

Persons with dementia requiring sedation for a gastrointestinal procedure should be monitored closely for any cognitive changes prior to and after the procedure. Evidence suggests that surgery and anesthesia can affect a person’s cognitive trajectory around the time of surgery (White et al., 2019). Persons requiring sedation should not be assumed to lack decision-making capacity based solely on a diagnosis of dementia. Time should be taken to identify and **assess for cognitive difficulties** such as: difficulty in finding words, difficulty organizing thought, or describing objects rather than referring to them by name. Nurses must be aware of potential effects of sedation and surgery on persons with dementia and understand the impact of sedating drugs on cognition (delirium), interactions with anti-dementia medications (cholinesterase inhibitors), and pain.

Persons with dementia are at increased risk of developing delirium, for any reason, not just following a gastroenterology procedure. It is imperative we understand **delirium is not dementia**, although the symptoms are similar (Alzheimer’s Society, 2021). It is equally as important to report any changes in behavior, concentration, memory, or confusion. To help reduce confusion and anxiety, ensure that the environment for the patient during their recovery is as comfortable and familiar as possible. Nonpharmacological interventions should be used first including addressing sensory needs (such as glasses and hearing aids), maximization of family support and familiar items, and developing a good sleep routine (Alcorn & Foo, 2017). Family

caregivers can be an invaluable resource for information; more importantly, family can provide support and comfort for the person with dementia (Krupic, Eisler, Sköldenberg, & Fatahi, 2016). Dementia is not an all-or-nothing phenomenon; therefore, a range of tools will be needed to appropriately assess patients with different levels of cognitive impairment. The assessment of pain in the person with dementia may be complicated by communication difficulties related to dementia; therefore, simple categorical scales and observation tools should be used (in addition to facial expressions or other behaviors) as indicators to pain (Achterberg, Lautenbacher, Husebo, Erdal, & Herr, 2020). Facial expression as a non-verbal marker is useful to assess pain in cases of diminished communication abilities (Manfredi, Breuer, Meier, & Libow, 2003).

As the number of persons living with dementia rises, gastroenterology nurses must be prepared with the knowledge, skills, empathy, and abilities to care for persons with dementia. It is our responsibility to facilitate positive interactions by our approach with persons with dementia. The ability to listen and communicate, provide care that meets their needs while recognizing their individuality, and support of family caregivers are central to the care of people with dementia. We must assess, recognize, and respond to their needs with empathy and compassion. They are doing their best and we must meet them where they are. We are always better together.

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