

Abstract Track: Patient and Care Partner Track

Topic Category: Symptom Management

Abstract Title: Non-drug Approaches for Care Partners to Use When a Loved One Living with LBD has Behavioral Changes

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Background

Most people living with LBD experience behavioral or mood changes which vary from person to person, occurring at different times as the disease progresses. Some types are more common than others; some are benign while others are more intrusive and distressing. Behavioral changes contribute significantly to caregiver burden. Fortunately, there are ways to address these behavioral changes - with and without drugs. Clinical and research experts in LBD recommend that non-pharmacological approaches comprise the first course of action (unless the person living with LBD poses a significant danger to self or others).

LBD care partners need resources to help them acquire the knowledge and skills to apply non-drug approaches when their loved ones experience hallucinations, illusions, delusions, paranoia, misidentification, Capgras syndrome, reduplicative paramnesia, depression, apathy, anxiety, agitation, verbal and physical aggression, disinhibition, wandering, and catastrophic reactions.

Methods

The authors have been care partners for loved ones living with LBD; volunteered in numerous ways to support people living with LBD and their care partners and to advocate for funding, research, and other support; founded LBD organizations in the US; served on the Board of Directors and committees of the LBDA; and written extensively about LBD in books, articles, blogs, care briefs, etc. including research-based information on non-drug approaches to behavioral changes in people living with LBD.

The poster presentation draws from this body of work to present non-pharmacological approaches care partners can use to address the behavioral changes in loved ones living with Lewy body dementia (LBD).

Results

The presentation

- provides definitions, descriptions, and examples of common behavioral and mood changes

- summarizes possible causes or triggers for behavioral changes which may help LBD families understand, prevent or minimize the symptoms, develop strategies to cope with them, and support the person with LBD and their care partners
- summarizes evidence-based, non-drug strategies that care partners can incorporate into daily life that may possibly prevent or curb behavioral changes
- describes strategies that care partners can use to manage, reduce, or perhaps even eliminate many behavioral changes
- discusses the non-drug therapies that can be used alone or in combination: physical, occupational, speech, art, music, aroma, reminiscence, touch, massage, pet, nutrition, light, validation, support group, individual, and family therapies
- suggests some online resources and print related to behavioral and mood changes in LBD.

Conclusions

Many people with LBD are extremely sensitive to drugs and experience severe, sometimes irreversible, adverse effects. However, when care partners don't know how to use non-drug approaches, their loved ones may be given antipsychotics, benzodiazepines, anticholinergics, tricyclic antidepressants, and other potentially dangerous medications as the first line of treatment. Care partners who implement non-pharmacological approaches to behavioral changes in their loved ones with LBD may avoid or reduce the use of these drugs and their adverse effects.