

# Caregiver Assistance News

“CARING FOR YOU...CARING FOR OTHERS”

## Bullies/Dealing With Difficult People

Some people are born complainers. If the person in your care has *always* been difficult to get along with, age isn't going to improve him or her. A sudden change in personality, from sweet-tempered to angry all the time, however, may be a red flag for other problems such as:

**Medication effects.** Some medications can cause personality changes in some people. Drug interactions can also cause problems, so always have drug combinations checked by a pharmacist. Antidepressants are a big cause of personality changes; the wrong drug can make depression worse. Don't assume things will get better; talk to a doctor right away. Many elders with dementia symptoms are sometimes suffering from drug interactions; once the drugs are gone, the dementia disappears!

**Infections.** “Silent” infections, especially bladder or urinary tract infections (UTIs) can affect emotions and personality, even when the person doesn't seem sick.

**Pain.** If you see a sudden change from sunny to irritable complainer, have a doctor check for painful health conditions. Many elders “don't want to complain” to a doctor, so they complain to their caregivers all day long.

**Attitude.** Some people believe that age gives them the right to say whatever they feel—and much of this could be negative if they are bored or feeling

unneded. If the person in your care can be made to understand what he is doing, he may be able to change.

**Dementia.** Memory issues are what we generally think of in dementia. However, frustration, getting lost, or not being able to do or recognize familiar things can cause startling personality changes. People with Alzheimer's, Pick's disease and other dementias need to see a doctor as soon as possible. If the person is developing dementia, new drugs can help ward off the worst personality changes (in some people) for months or even years. Antianxiety medications and, for some, antipsychotics, can make a difference.

**Abusive personality.** Unfortunately, a lot of adults grew up in families where they were abused, physically and/or emotionally, all of their lives. Just because they have grown old doesn't mean family relations will change for the better. It's likely that these abusive elders will be just as abusive to their adult children (and their caregivers!) as they were when they were younger.



## Handling Angry Outbursts or Uncooperative Behavior

To diffuse anger, try:

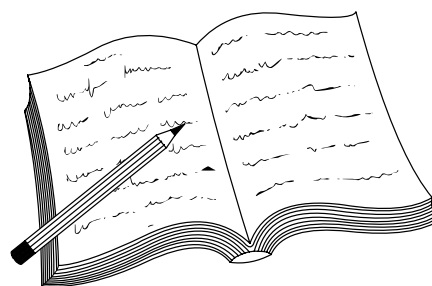
- **Humor:** Make light of the *situation*, but not the person.
- **Empathy:** “I see how upset you are and I understand.”
- **Changing the subject:** Address what he is saying briefly, then move on to a different topic.
- **Taking a break:** Tell the person you have a task to take care of in another room and that you’ll discuss the issue in a little while. This will give him time to cool down and you a chance to take some deep breaths to get centered again.

## When the Person Refuses to Cooperate

First, make sure he understands what you are asking. He may be confused, especially in cases of dementia, or he may be feeling ill and is simply unable to respond quickly.

- ➔ **Make sure he is comfortable:** He may be confused, overstimulated, or in physical pain.
- ➔ **Listen:** Ask him how he is doing. Sometimes combative behavior is a symptom of a deeper issue. For example, a person may refuse to be bathed because of embarrassment. Or, he may refuse to eat because he feels he has no control over his life. Giving the person choices can make him more likely to cooperate.
- ➔ **Be patient:** Your schedule may be overwhelming, but the person in your care is on his own schedule. Allow more time than usual for simple tasks. Too many activities at once can provoke a reaction because the person feels overwhelmed.

- ➔ **Remain calm:** Seeing you calm may help calm him down.
- ➔ **Delay personal care if possible:** Ask yourself if the task you are attempting can be put off until the person is calmer.
- ➔ **Do not contradict his reality:** If he believes something to be true, do not disagree, unless it poses a physical threat.
- ➔ **Track the behavior:** Keep notes on times of day, frequency, or type of behavior problem.



## Changing What You Do

You may not be able to control the other person’s behavior, but you can control your own. Here’s how to appear less confrontational to the person who is agitated:

- ☛ **Stand beside him** or at eye level rather than towering over him, especially if several people are tending to him at once.
- ☛ **Don’t expect an immediate answer** or response. Give him extra time.
- ☛ **Keep the room calm.** Turn off the TV and radio.
- ☛ **Speak clearly and slowly.**

## Don’t Take It Personally

Sometimes a person’s abusive behavior is a symptom of illness or dementia and is not his true nature. Remember, he may not be able to control his behavior or even be aware of it because of his disease.

*Taking Care of Yourself* — **Anger and Depression Increase Pain**

Anger and sadness hurt. Scientists found that when people are angry or sad, they feel more pain.

If you, or the person in your care is in pain, depression or anger can make her feel even worse. Many people, especially elders, tend to hide negative emotions, but keeping sadness or irritation inside can make painful conditions worse. Recognize your emotions and express them in a healthy way that makes you feel better.

It's normal for a person to be upset or depressed when not feeling well, but in some cases improving mood can make pain less intense. Learning new ways to cope with sadness and anger can help a person cope better with illness and pain—and caregiving.

Source: WebMD

*Inspiration*

*I like to listen. I have learned a great deal from listening carefully. Most people never listen.*

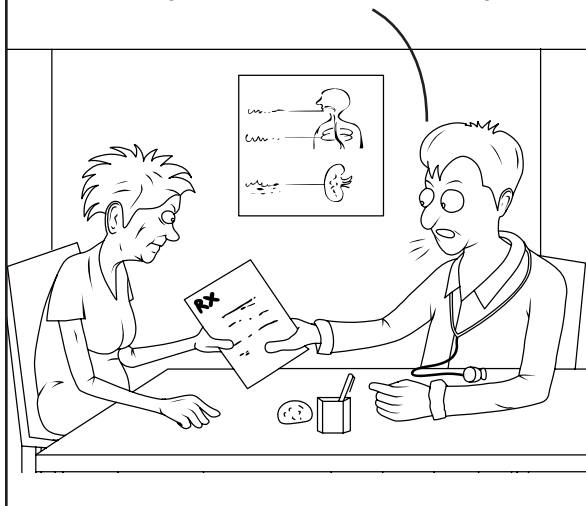
~Ernest Hemingway

**HALT**

Never let yourself get too **Hungry**, too **Angry**, too **Lonely** or too **Tired**.

**Live Life Laughing!**

Your prescription is to laugh every hour. More, if necessary.



*Good Manners*

Saying "I'm sorry" is like giving someone a gift....the gift of using Good Manners.

**Don't Fall** – Be Safe

Be aware that sedatives, anti-depressants, and anti-psychotic drugs can contribute to falls by reducing mental alertness, worsening balance and gait, and causing drops in systolic blood pressure while standing. Additionally, people taking multiple medications are at even greater risk of falling.

## *The Comfort of Home*<sup>®</sup>

### **Our Purpose**

To provide caregivers with critical information enabling them to do their job with confidence, pride, and competence.

### **Ordering Info**

From the publishers of

*The Comfort of Home*<sup>®</sup>  
*Caregiver Series*

#### **available from...**

CareTrust Publications LLC  
PO Box 10283, Portland, OR 97296  
800-565-1533  
or [www.comfortofhome.com](http://www.comfortofhome.com)

Comments and suggestions welcome.

©2011 CareTrust Publications LLC.

All rights reserved. Reproduction of any component of this publication is forbidden without a license from the publisher.

Some content in this publication is excerpted from *The Comfort of Home: Caregivers Series*. It is for informational use and not health advice. It is not meant to replace medical care but to supplement it. The publisher assumes no liability with respect to the accuracy, completeness or application of information presented or the reader's misunderstanding of the text.

## **When Hostility Builds to a Breaking Point**

Control your emotions by releasing anger and frustration in a safe way. Take a walk to cool down, or go to a private corner and unleash your anger on a big pillow.

To find professional help or support-group counseling, check out:

- The community pages of the phone directory
- The local county medical society, which can provide a list of counselors, psychologists, and psychiatrists
- Religious service agencies
- Community health clinics
- Clergy
- Area Agency on Aging
- United Way's "First Call for Help"
- A hospital's social service department
- A newspaper calendar listing of support group meetings
- Parish nurses
- Counselors familiar with the needs of caregivers.

NEXT ISSUE... MENTAL ILLNESS, DEPRESSION, STRESS

# Caregiver Assistance News

“ C A R I N G F O R Y O U ... C A R I N G F O R O T H E R S ”

## Q U I C K Q U I Z

With age or because of illness, personality changes can be intense and difficult for the person in your care, family members, and caregivers. There is no guarantee that the personality changes will go away. Read the issue and answer True or False to the questions below to test your knowledge.

1. Some medications can cause personality changes in some people.  
T F
2. “Silent” infections, especially bladder or urinary tract infections (UTIs) can affect emotions and personality, even when the person doesn’t seem sick.  
T F
3. Memory issues are what we generally think of in dementia. However, frustration, getting lost, or not being able to do or recognize familiar things can cause startling personality changes.  
T F
4. When handling an angry outburst, making light of the person helps.  
T F
5. When the person refuses to cooperate, first make sure he understands what you are asking.  
T F
6. Sometimes combative behavior is a symptom of a deeper issue.  
T F
7. Too many activities at once can provoke a reaction because the person feels overwhelmed.  
T F
8. In some cases, improving mood can make pain less intense.  
T F
9. A sudden change in personality may be a red flag for other problems.  
T F
10. Giving a person *choices* will not make him or her any more likely to cooperate.  
T F

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_