

A Publication of Together In This™

Introductory Guide to Alzheimer's

A Guide for Family

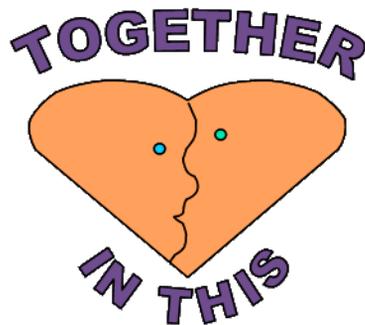
Steps and Knowledge to Start You on the Right Track



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Empowering Caregivers

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INTRODUCTION

You are not alone: As of 2014, in the U.S.A, roughly 4 million people with Alzheimer's are cared for at home by a family member.

These caregivers who are balancing careers, family, and personal life have no training on how to successfully care for their loved one.

Alzheimer's is arguably the most difficult situation you will ever face. It is not like caring for someone with an injury - the average duration is 4 – 10 years, sometimes longer.

Alzheimer's is not a death sentence but if you bury your head in the sand, you will fail.

There are no “magic bullets” - you have to work at it! Following the suggestions found in this guide will put you on the right path to successful caregiving.

INITIAL STEPS

If you are like I was, spelling Alzheimer's or dementia may still be a challenge. Sure there's a lot to learn but there's time.

You don't have to learn everything at once. Take small steps. Get yourself some free coffee table books. Subscribe to some newsletters.

Knowledge is power and the more you study Alzheimer's, your adversary, the more strength you will have to fight back.

The next chart has 3 very simple steps that you must do immediately.

This is the time to gear up, so let's get started!

3 INITIAL STEPS

(check each box when complete)

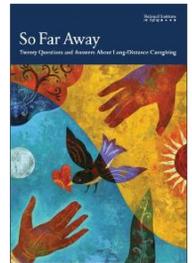


Register with the Alzheimer's Association

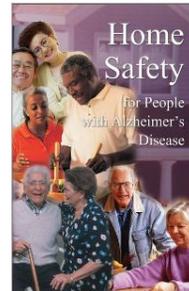
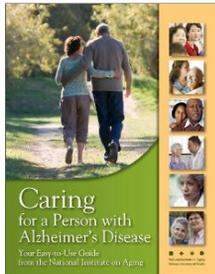
Available 24/7
1.800.272.3900



Order **free** reading material from the National Institute of Health



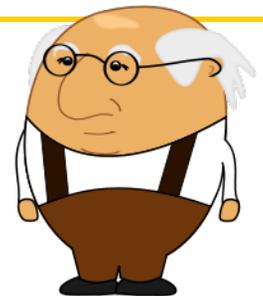
<http://www.nia.nih.gov/alzheimers/publication>



Contact your local Aging Services to discover local services



<http://www.eldercare.gov>



COMMON TERMS

Do you know what Anosognosia means? Probably not but there is a good chance that you are witnessing it now.

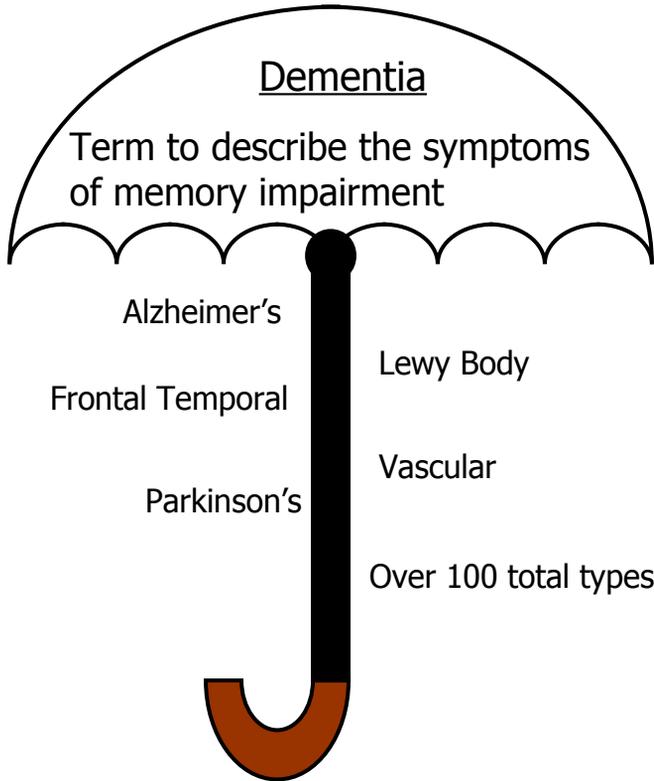
With any new undertaking, there's always new terminologies and acronyms, and this is no different.

Your vocabulary is going to change. Over the course of the disease, you will probably increase your vocabulary with dozens of new words.

I've compiled a short list that stumbled me in the beginning.

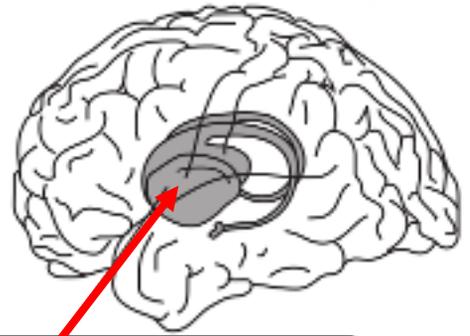
Study the list, print the list, and carry it around if needed. In no time, you'll easily understand these terms.

COMMON TERMS



Respite -

To get a mental & physical break from a stressful situation



Hippocampus – memory area of the brain generally affected first by Alzheimer's

Caregiving – taking care of a person who is unable to fully care for themselves

Activities of Daily Living (ADL) - Self care actions such as bathing, eating, sleeping, & toileting

Anosognosia - is viewed as a deficit of self-awareness; a condition in which a person who suffers a certain disability seems unaware of the existence of his or her disability

COMMON TERMS

Elder Law Attorney – focuses on the special needs of older adults

Amyloid plaque - Abnormal clusters of dead and dying nerve cells, other brain cells, and amyloid protein fragments



Wandering – when a person moves from one place to another without purpose; this is subtly different than exploring or becoming lost

Incontinence – inability to control one's need to urinate or have a bowel movement (BM)



Aphasia - loss of ability to speak or understand language

An extensive list can be found at:

<http://www.webmd.com/alzheimers/glossary-terms-alzheimers>

SAFETY

Safety is your number one priority but homes are not safe enough for older adults, let alone, people with Alzheimer's.

Your loved one's abilities will decline. To have the peace of mind that they are safe, you must take steps to make the home safe and functional for them.

At first, these steps can be simple and inexpensive but as needs change, more extensive modifications should be made. Remember, however, these costs will pale in comparison to the cost of a memory care facility.

The next two charts provide a checklist of inexpensive things you must incorporate.

SAFETY

(check each box when complete)



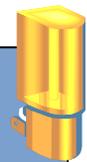
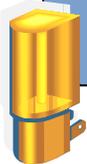
Smoke Detector – this is the most basic safety device you can install. Some now have WiFi capability to allow you to be notified remotely.



Fire Extinguisher – should be located in the kitchen and anywhere else your loved one may have access to flammable stuff.



Night Lights – should be placed throughout the residence.



Shower Mat – can help prevent slips in the shower.



Emergency contacts & medical information – should be placed in plain sight; typically on the refrigerator.



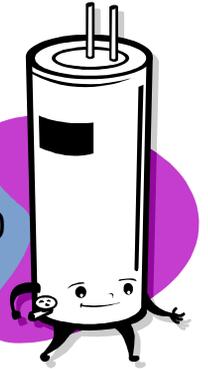
SAFETY

(check each box when complete)



Trip hazards/clutter – ensure that floor coverings are secured down and walkways are clear.

Water heater – setting the temperature to 120 degrees Fahrenheit will avoid scalding.



Make items accessible – put regularly used items in easy to access locations.

Check outdoors for hazards – don't forget to examine the exterior of the house for dangers.



Remove medications – expired and unwanted medicines, creams, liquids, etc. should be disposed of properly.

FAMILY & FRIENDS

If it wasn't for family & friends, caregiving would be easy. While this isn't absolutely true, most caregivers feel this way at one time or another.

Because dementia is an invisible disease, "outsiders" won't witness the signs. This can lead to their denial and an underestimation of the burden. As a result, they may innocently make uninformed comments that will upset you.

The best way to minimize these potential clashes is to keep them involved and informed when possible. With most families this will be complicated but an ounce of prevention can go a long way.

Take the following steps to help get your family and friends on track.

FAMILY & FRIENDS



Get everyone involved from the very beginning. You don't want to hear, "but you never told me."

Communicate often. Face-to-face is best but when not possible use the phone. Avoid exclusively using email but a periodic status to the group can generate conversation.

Have some group gatherings in an open setting. Include food & keep the mood light. Make sure the person with Alzheimer's gets to help & be involved.

Educate, Educate, Educate. Share articles, videos, or audio files that you find helpful. Help them learn.



Keep them involved, educated, and informed. Many will fail but you will have the peace of mind knowing you did your best.

LEGAL & FINANCIAL

Eventually your loved one will not be able to make sound legal & financial decisions; someone will have to act on their behalf. Is that someone you?

While your loved one still has the ability to make good decisions, you must take action. Being proactive will save a lot of heartache, misery, and money.

Completing the right documents will help take the guess work out so that you have the comfort of knowing your loved one's wishes are respected and protected.

The next chart lays out the 4 most basic documents.

LEGAL & FINANCIAL

4 Must Have Legal Documents

Health Care Directive (Living Will)

This advanced directive communicates a person's wishes for medical treatment when they are unable to speak for themselves.

Medical Power of Attorney

Allows an individual to appoint someone to make real-time medical decisions on their behalf when they are unable to make decisions on their own.

Financial Power of Attorney

Allows an individual to appoint a trustee to manage their finances on their behalf when they are unable to make decisions on their own.

Last Will and Testament

Describes a deceased person's final wishes. Often times a will names a person or persons as the executor responsible for ensuring that all wishes are carried out.

Each state has its own set of regulations that will dictate which documents are recognized and in what form. So, always consult with an elder-law attorney when completing any documents.

MEDICAL

Older adults have a much higher risk of emergencies due to misuse of medications and other issues.

You are going to find yourself managing the medical aspects of your loved one's life including proper use of medications and appointments with professionals.

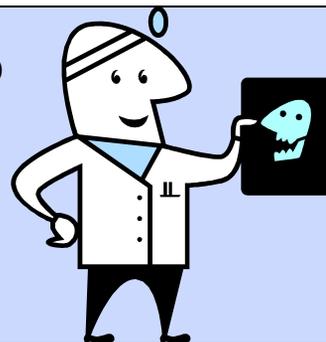
By understanding the medications and benefit of each medical professional, you will make a difference in the well-being of your loved one.

The next charts will introduce you to the healthcare team & the medicines prescribed to ease the symptoms of Alzheimer's.

MEDICAL

The U.S. Dementia Healthcare Team

Primary Care Physician (PCP) is also referred to as a General Practitioner (GP). This is the medical doctor with whom most of us are familiar. This doctor provides preventative care and treats common illnesses.



Geriatrician is a PCP who has received additional training in geriatric medicine. These medical doctors understand and focus on the specific needs of older adults.



Neurologist is a physician who has received additional training in the diagnosis & treatment of nervous system disorders. They perform neurological examinations of memory, speech, language, & other cognitive abilities.



MEDICAL

Geriatric Psychiatrist is a physician who has also received training in psychiatry. They specialize in the diagnosis & treatment of behavioral & cognitive issues in older adults including dementia. They also prescribe & help manage medications.



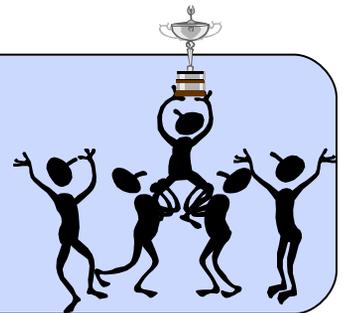
Clinical Psychologist focus on the assessment, diagnosis, and treatment of individuals, couples, and families who are suffering psychological distress. They are not a physician & can not prescribe medications in most states.



Pharmacists are the medication experts who advise other medical professionals, patients & caregivers on the selection, dosage, usage, and side effects of medications.



Occupational Therapists (OT) help people perform at their highest capability by helping them successfully accomplish everyday activities such as bathing, eating, or toiletry.



MEDICAL

MEDICATIONS

Stage of Alzheimer's: Mild to Moderate

These drugs may help delay or prevent symptoms from becoming worse for a limited time and may help control some behavioral symptoms.

Razadyne® (galantamine)

Exelon® (rivastigmine)

Aricept® (donepezil)

Stage of Alzheimer's: Moderate to Severe

This drug may allow patients to maintain certain daily functions a little longer.

Namenda® (memantine)

You are not alone.

Following our recommendations will help you eliminate the guilt and fear that will prevent you from being a successful caregiver.

Please tell us how we can improve this guide. It's important for us to learn what does and doesn't work so that we can continually improve this important guide for each and every caregiver.

Don't forget to share this guide with others.



We are Together in This
But nobody is going to fight
this fight for you.

Look for our follow up correspondence

If you received this publication as a result of signing up to receive the guide, you can expect to receive additional communications to build our relationship so we can help you succeed.

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Goodbye