



Dementia care and treatment issues

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This perspectives article expands on the one published in EBN July 2019, Vol 22-3 about Care of the Older Person by focusing on commentaries specifically related to research with dementia. Dementia rates are growing internationally and along with this are the complexities of caring for this growing cohort of people.¹ It is helpful to explore the literature related specifically to this issue. Commentaries related to dementia and cognitive decline were found from January 2017 to January 2020. Key themes were identified followed by a summary and discussion.

Key themes

The 13 commentaries are grouped into three themes (see box 1).

- ▶ *Pain management and dementia.*
- ▶ *Carers of those with dementia.*
- ▶ *Treatment issues for those with dementia.*

Theme 1: Pain management and dementia

Literature demonstrates that there is very poor pain management for those with dementia. There is a lack of understanding about the signs of pain for people with dementia and there are some alarming findings, such as one where the majority of healthcare staff in a study thought that people with dementia had reduced pain sensation.² Three commentaries from the past 3 years reflected various aspects of pain management for people with dementia. The first was based on a study by Blytt *et al*,³ a double-blinded, placebo-controlled trial of 106 long-term patients with depression and dementia. The research group studied the effects of pain treatment versus non-treatment and found that treatment for pain was significantly associated with better sleep.³

The second commentary reviewed qualitative research by De Witt Jansen *et al*⁴ where 24 nurses practising in long-term care were interviewed about their experiences in caring for patients dying of advanced dementia. Three themes were identified including *patient-related challenges*, such as the patient's refusal to take medication; the *nurse-physician relationship*, where if a difficult relationship with physicians was identified, nurses gave examples such as waiting for prescriptions and physician refusal to assess complex cases; and *interactive learning and practice development*, where some nurses were not able to access appropriate professional development activities. The overall message was that achieving pain management for people dying of advanced dementia is extremely challenging.⁴

The final commentary in this theme was a cross-sectional study by Fain *et al*⁵ of 18 536 nursing home residents with persistent pain living in the USA. The findings showed that pain in nursing homes is undertreated, especially for those with dementia and cognitive decline.⁵

Theme 2: Carers of those with dementia

The second theme explores the experiences and challenges of carers for those with dementia and cognitive decline. The first commentary about research by Kobiske *et al*⁶ describes the outcomes of a cross-sectional, correlational study that investigated the experiences of caregivers for people with young-onset dementia. The survey design reflected the theoretical framework of Resilience Theory and examined the effects of personal and social relationships, pre-death grief and stress of this caregiving role. There was a large positive correlation between pre-death, grief and caregiver perceived stress, which was positively impacted by social resourcefulness.⁶

The outcomes of caregiver stress are examined in research by Moermans *et al*.⁷ In this cross-sectional study, older adults who were receiving care in their home were randomly selected for the study. The district nurses caring for this group were asked to complete an online questionnaire that identified the use of involuntary treatment. The findings demonstrated that non-consensual care, psychotropic drugs and physical restraints were often used, in part, to address informal caregiver burden.⁷

The final commentary in this theme reflects research by Førsund *et al*,⁸ a qualitative, grounded theory design consisting of 15 interviews with the spouses of nursing home residents with dementia. The findings demonstrate that it is important for the spouses to remain involved with the resident and they did so by establishing visiting routines.⁸

Theme 3: Treatment issues for those with dementia

The final theme includes a variety of commentaries, all with a focus on a treatment issue related to the care of people with dementia. The first two commentaries are of studies related to prescription medication for those with dementia. In the first, Renom-Guiteras *et al*⁹ conducted a survey of people with dementia from across the EU to explore a variety of issues. The findings showed that 60% of the participants had at least one inappropriately prescribed medication.⁹ The next study, by Wouters *et al*,¹⁰ included a randomised controlled trial of the discontinuation of one medication for nursing home residents in the Netherlands. Results showed that the 3MR process of multidisciplinary, multistep medication review was significantly better than usual care for successful discontinuation of one medication.¹⁰

Next, McEvoy *et al* conducted a population-based cross-sectional study that showed an association between neuroprotective diets, such as the Mediterranean Diet, and better cognitive health.¹¹ In the next research, also related to diet, Dolansky *et al*¹² conducted an observational study which demonstrated that adults with cognitive decline may be at risk for gaining significant amounts of weight, thus negatively impacting their heart failure status.¹²

Box 1 Evidence-based nursing commentaries on dementia and cognitive decline (2017–2020)

Theme 1: Pain management and dementia

Evidence that active pain treatment improves sleep quality and quantity in people with depression and dementia <https://ebn.bmj.com/content/22/2/49>

Pain-related palliative care challenges in people with advanced dementia call for education and practice development in all care settings <https://ebn.bmj.com/content/20/4/118>

Assessment and treatment of persistent pain in nursing home residents should be implemented systematically to prevent suffering <https://ebn.bmj.com/content/20/3/91>

Theme 2: Carers of those with dementia

Help seeking increases stress among caregivers of partners with young-onset dementia <https://ebn.bmj.com/content/23/1/28>

Better support and education is imperative to bolster informal at-home carers of people with cognitive impairment and reduce incidences of involuntary treatment of older adults in their homes <https://ebn.bmj.com/content/22/2/51>

Spouses with partners with dementia living in institutional care develop visiting routines that help to maintain the spousal relationship <https://ebn.bmj.com/content/20/2/58>

Theme 3: Treatment issues for those with dementia

International study reveals aged patients with dementia frequently receive 'inappropriate prescriptions' <https://ebn.bmj.com/content/22/2/50>

Deprescribing in nursing homes is safe and should be pursued <https://ebn.bmj.com/content/21/2/53>

Effective dietary recommendations could help to prevent age-related cognitive decline <https://ebn.bmj.com/content/21/1/26>

Cognitively impaired patients with heart failure may not perceive weight gain as a risk for decompensation <https://ebn.bmj.com/content/20/4/115>

Risk of injury higher in older adults with dementia than in those without <https://ebn.bmj.com/content/20/4/117>

More research needed on animal-assisted interventions in dementia (Olsen) <https://ebn.bmj.com/content/20/2/60>

Nursing home residents prefer fewer interventions and the nursing home instead of hospital for place of death <https://ebn.bmj.com/content/20/1/24>

The final cluster of commentaries gives an overview of three different topics. Meuleners *et al*¹³ analysed 29 671 hospital admissions and identified that older adults with dementia are at greater risk for admission to hospital with an injury.¹³ Next, Olsen *et al* found in their randomised trial that when a dog was added to activities of those with severe dementia in nursing homes, there was a significant decrease in the levels of depression and a positive impact on quality of life of the residents.¹⁴ Finally, Ng *et al*¹⁵ conducted a cross-sectional study of nursing home residents in Singapore to determine their wishes at end of life. Their findings determined that the majority would prefer to die at home.¹⁵

Conclusions

There is a wealth of research related to dementia. Commentaries about dementia research give nurses efficient summaries, which may be of benefit to them in expanding knowledge and improving practice that includes those with dementia.

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