

## STAGES OF ALZHEIMER'S DISEASE

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### **STAGE ONE: FORGETFUL**

**Mild or Early Stage, lasts 2 to 8 years. Person needs occasional reminders, lists and routine.**

1. Short term memory loss.
2. Disorientation to time; spatial disorientation.
3. Aphasia, mild anomia, some circumlocution.
4. Mild apraxia.
5. Judgment errors.
6. Affect changes.
7. Absent-minded, difficulty concentrating.
8. Behavior or lifestyle changes.
9. Self-aware or unaware of deficits or changes.

### **STAGE TWO: CONFUSION**

**Middle/Moderate Stage, lasts 3 to 6+ years. Person needs occasional assistance and supervision.**

1. Short-term and remote memory loss.
2. Needs help with activities of daily living (bathing, toileting, etc.)
3. Emotional ups and downs.
4. Aphasia, paraphasia with semantic/phonemic errors.
5. Ideational and ideomotor apraxia. One or two steps skills.
6. Agnosia; less able to interpret sensory input (visual, touch, etc.)
7. Restless, listless, wandering or slow moving, hard to motivate (abulia).
8. Clumsy movement, decreased muscle control and some ataxia.

### **STAGE THREE: DEMENTIA**

**Severe or End State, lasts 1 to 4 years. Person needs constant supervision and assistance.  
Respite essential to primary caregiver.**

1. Decreased communication skills, difficulty talking or understanding.
2. Apraxia, one step skills.
3. Perseveration.
4. Minimal motor control.
5. Forgets social graces, decreased gating, spontaneous outbursts.
6. Behavioral problems, such as wandering, unwilling to bathe or dress.
7. Incontinent.
8. Bedridden.

### **HELPS FOR CAREGIVERS: REMEMBER: A SENSE OF HUMOR IS ESSENTIAL!**

1. Be consistent. Do things the same way each time.
2. Stay positive. Smile. Praise.
3. Take your time. One step at a time. Stay on a daily routine.
4. Body language. Eye contact. Point. Pleasant voice.
5. Keep pleasant distractors handy: snacks, music, a pet.
6. Let others help: family, friends, community resources.

### **HELPING APRAXIA**

1. Familiar actions and tools are easier than anything new or strange.
2. Be careful of sharp or dangerous tools.
3. Simple movements are easier than complicated movements.
4. One step activities are easier than those with many steps.
5. Reduce the choice of tools. Use one object at a time.
6. Proximal movements (movements toward the body) are easier than distal movements (movements away from the body.)
7. As each step is completed, remind about the next step (if needed).

## HELPING APHASIA

### REMEMBER K.I.S.S. (KEEP IT SHORT AND SWEET)

#### SET UP THE BEST CONDITIONS:

- \*\* THE BEST SETTING
- \*\* THE BEST STATE OF MIND
- \*\* THE BEST WAY TO TALK

1. The best place is quiet and peaceful in a small group.
2. The best state of mind is rested and fresh.
3. The best way to talk is:
  - a. Say the most important thing first. Be direct. Be brief.
  - b. Keep the patient's attention.
  - c. Talk slowly; give patient time to understand. Repeat.
  - d. Use everyday words, short statements, simple grammar.
  - e. Use few describing words. Use nouns, names of people & objects.
  - f. Do not use abstract, general words or pronouns.
  - g. Do not use metaphors (describing a likeness).
  - h. Give correct order when talking about actions using many steps.

### TO HELP THE PATIENT UNDERSTAND,:

1. Use hand signals. Point. Show pictures. Speak clearly and slowly.
2. Write. Being able to read aloud does not mean understanding.
3. Ask questions that need "Yes/No" answers.

### HELP PATIENTS COMMUNICATE BY HAVING THEM:

1. Point. Show with an arm and hand. Write or draw it.
2. Act out the request or need. Use facial expression to show meaning.

## READING SUGGESTIONS

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