

# Humor as effective as medication in treating agitation in dementia

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Humour therapy is as effective as widely used antipsychotic drugs in managing agitation in patients with dementia – and avoids serious drug side effects, a new study shows.

The first major study of the impact of humour therapy on mood, agitation, behavioural disturbances and social engagement in [dementia](#) patients found both short term and persisting decrease in agitation, according to lead researcher, Dr Lee-Fay Low, a Research Fellow in the School of Psychiatry at the University of New South Wales.

The SMILE study across 36 Australian residential aged care facilities involved the recruitment and training of a staff member to act as a "LaughterBoss" who worked with a humour practitioner with comedic and improvisation skills – not unlike "Clown Doctors" used in hospitals to aid recovery and lift mood in children.

Jean-Paul Bell, the key humour therapist in the SMILE study, has set up the Arts Health Institute (AHI) to train humour practitioners and aged care staff. The AHI's core program, Play Up, provides a playful relationship with residents and staff in aged care, focusing particularly with people with dementia. The AHI is now focused on translating the knowledge of the SMILE study into residential aged care and continues to work with UNSW's Dementia Collaborative Research Centre to roll out the program nationally.

Dementia rates are expected to double to in the next 20 years in

Australia to about 450,000, mainly due to an ageing population. About 6.5 per cent of people over 65 and 22 per cent of people over 85 have dementia – an umbrella term used to describe up to 60 different conditions causing similar neurodegenerative changes in the brain.

Between 70 and 80 per cent of people suffering from dementia are troubled by agitation, a problem for both patients with the disease and their carers.

"Agitated behaviours include physical and verbal aggression, wandering, screaming and repetitive behaviours and questions. This is challenging for staff and often indicates unmet needs and distress in the residents of aged care facilities," says Dr Low.

The SMILE study found a 20 per cent reduction in agitation using humour therapy, an improvement comparable to the common use of anti-psychotic drugs.

"This shows humour therapy should be considered before medication for agitation, particularly taking into account its side effects."

A major 2009 study for the UK Department of Health found serious side effects of antipsychotics, including thousands of deaths and strokes, linked to the use of these drugs in dementia and recommended a reduction in medication rates and specialised training for carers in non-drug therapies.

In the SMILE study agitation decreased not only during the 12 week humour therapy program, but remained lower at 26 week follow up. Happiness and positive behaviours rose over the 12 weeks of the program, however, dropped as soon as humour practitioner visits ceased.

The [SMILE](#) Study results will be presented at the National Dementia

Research Forum 2011 on the 22nd and 23rd September.

Provided by University of New South Wales

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