

Research advocates behavior-based treatment as an option for dementia patients

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Dementia -- an acute loss of cognitive ability -- can be marked by memory loss, decreased attention span, and disorientation. It occurs in severe disorders such as Alzheimer's disease. Despite the fact that the condition is common, especially among older persons, there is still a lack of effective treatment.

According to Prof. Jiska Cohen-Mansfield of Tel Aviv University's Herczeg Institute on Aging and Sackler Faculty of Medicine, dementia sufferers are often prescribed psychotropic drugs to mitigate symptoms such as delusions. But this tactic can cause more harm than good, she says. Many of the delusions experienced by dementia patients may have a rational basis and could be more effectively treated through [behavioral therapy](#) than by medications, suggests Prof. Cohen-Mansfield. A better understanding of delusions has direct implications for the care and perception of those who suffer from dementia.

The study, done in collaboration with Prof. Hava Golander of the Department of Nursing and Drs. Joshua Ben-Israel and Doron Garfinkel of the Shoham Medical Center, was published in the journal *Psychiatry Research*.

A rational basis for delusion

The researchers examined six common categories of delusion, including fears of abandonment, suspicions that patients' possessions were being

stolen, and feelings that they were not "at home." The participants in the study were 74 adults from nine nursing homes in Israel who had received a diagnosis of dementia. The research team questioned caretakers, including [registered nurses](#) and nursing home staff, who had daily interactions with the patients.

Researchers assessed elements including the patient's mental state, behavioral pathology, and incidents of past trauma. Caretakers were asked to describe not only the patient's delusions, but to explain the circumstances under which they emerged. Taking into account all these parameters, researchers discovered that a large percentage of the delusions that the caregivers described seemed to have logical explanations. Some were even the result of the patient re-experiencing traumas they had suffered earlier in their lives.

"If you begin to think about these delusions from the point of view of the dementia patient, you begin to understand that their delusions are explainable reflections of the reality they live in," explains Prof. Cohen-Mansfield. For example, for patients who felt that they were not at "home," the nursing home did not satisfy their definition of home. Anxiety often accompanied separation from the outside environment or from their loved ones — a rational response.

A better quality of care

These findings can have an impact on the way health care providers and family members respond to [dementia patients](#), says Prof. Cohen-Mansfield. Characterizing their delusions as "psychotic" puts them in the category of severe mental illness, which is frequently inappropriate. Instead, caretakers can devise methods to work with patients that take context into account.

Prof. Cohen-Mansfield also notes that participants in the study were

highly medicated, with 47 percent on antidepressants, a third taking sedatives/hypnotics, and 13.5 percent on antipsychotic medications. "If you can ascertain why the patient is experiencing these 'delusions,' you can create another treatment plan that addresses issues of orientation," she explains.

In people with [dementia](#), [delusions](#) do not really match the psychiatric definition of psychosis. A closer analysis of these behaviors is likely to promote empathy, understanding, and ultimately a more humane and compassionate treatment, the researchers concluded.

Provided by Tel Aviv University

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