Zac Backlin

Nursing Care of the Gerontological Client

Case Study 17.2

December 8, 2012

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1. Based on the website provided, it would seem that Claudine is in the fourth stage of cognitive decline. The Alzheimer's Association states that this includes forgetting recent events, an impaired ability to perform mental arithmetic, difficulty doing complex things, like planning dinner and forgetting parts about one's own personal history. (Alzheimer's Association, 2012).

2. According to the Hartford Institute for Geriatric Nursing, dementia is defined as a "clinical syndrome of cognitive deficits that involves both memory impairments and a disturbance in at least one other area of cognition such as aphasia, apraxia, agnosia and disturbance in executive functioning." (Hartford Institute for Geriatric Nursing, 2012). It goes on to state that dementia prevalence in the elderly population affects about 5% of people over the age of 65. (HIGN, 2012). Across the world, dementia affects about 24.3 million people with an increase of 6 million new people suffering each year. (HIGN, 2012).

3. Three sites that seem to be authoritative that would help Claudine's family with gathering information about Alzheimer's disease are as follows.

a. The US National Library of Medicine at http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001767/

b. The Alzheimer's Association, at www.alz.org

c. The National Institute on Aging, at www.nia.nih.gov

4. The ten warning signs of Alzheimer's are, Memory loss that disrupts ADLs, Problems solving issues and/or planning, difficulty doing familiar activities, some confusion

with time or place, difficulty understanding images and spatial relationships, new problems with speaking or writing words, misplacing things and difficulty retracing steps, poor decision making, social withdrawal, and changes in mood/personality. (Alzheimer's Association, 2009).

5. According to the Alzheimer's Association a physician is the appropriate practitioner for Claudine to visit. (Alzheimer's Association, 2012).

6. Some of the medications that are likely to be given to Claudine include some form of a Cholinesterase inhibitor for helping with the symptoms dealing with memory, thinking, language and judgement. Once her disease progresses, the next step would be to use memantine, which is used to help improve memory, attention, reason language and motor skills/ability to do simple tasks. (Alzheimer's Association, 2012).

7. Some of the forms of respite care available include in-home care services, as in maids or caregivers that come to the home to help, adult day centers, and or residential facilities for extended stays. (Alzheimer's Association, 2012). I have a personal association with this sort of care. For 9 years, my grandfather took care of my grandmother who suffered from Alzheimers. He refused any sort of help that wasn't me going out there and giving him a day or weekend off. The day he finally gave in and accepted home hospice care to assist him, was the day she died. It can be difficult to accept that one cannot handle a situation, especially when one has always been a self sufficient, independent person.

8. An adult day center can be the balance that Mr Everett needs to help him continue to take care of his wife, along with making sure that all of her physical, emotional, psychosocial and health needs are met. It would give him the time he needs to take

care of himself while still allowing him to take an active role in caring for his wife. It would also help her health care providers be able to monitor her situation for signs of deterioration that he may not notice.

9. Some questions to ask the family include, but are not limited to, is Claudine able to recognize a dangerous situation, can she get to and use the telephone in an emergency situation, and does she have the tendency to wander? (National Institute on Aging, 2011). These types of situations run the risk of emergent harm to her, and given her progressing memory impairment, it is prudent to constantly assess her ability to take care of herself. One question I myself would ask, and I speak from personal experience, is does Claudine possess the knowledge and understanding of how to manage a firearm, along with does she own one? My grandmother was a woman who enjoyed shooting for sport. There was always the constant worry that one day she might come across one of her firearms and in a fit of confusion and agitation, discharge it. When we looked at the situation, we decided it was prudent to put them out of harm's way, with the neighbor across the street.

10. Two things that can be done to help promote safety in a home's entryway could include making sure that spills and wet floors are cleaned and dried promptly to avoid slipping, and that the area is free and clear of clutter, to prevent tripping and falling.

11. I suppose in this situation, my thoughts would depend very much on how advanced Claudine's memory loss is. It is entirely possible that she may not even notice or remember anything about he son-in-law, depending on the stage of her disease. In that situation, I would likely only discuss it if brought up by Claudine. There is also another option. The circumstances of the separation aren't exactly discussed

here. After 3 decades of marriage, it is possible that if the agitation is bad enough, the former son-in-law could very well still attend family functions, depending on the circumstances of the divorce and if Mary would permit such a situation. There are many variables to the equation, it is difficult to determine the best course of action in this situation.

References

Geriatric Nursing Resources for Care of Older Adults :: Dementia. (n.d.). *Geriatric Nursing Resources for Care of Older Adults*. <http://consultgerirn.org/topics/dementia/want_to_know_more>

Alzheimer's Disease and Dementia | Alzheimer's Association. (n.d.). *Alzheimer's Disease and Dementia | Alzheimer's Association*. <http://www.alz.org>

National Institute on Aging | The Leader in Aging Research. (n.d.). *National Institute on Aging | The Leader in Aging Research*. <http://www.nia.nih.gov>