

## Case Study on Dementia

Dementia and its effects on individual's intellectual and cognitive abilities

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### Abstract

Before we can get into the depth of the Permira Tilney deal it is important to understand the Dementia is a mental disorder which affects an individual's intellectual and cognitive abilities which interfere with his/her daily activities (Birren, 2013). In general perception, this disease was thought to be a normal part of ageing, but with the advent of medical genetics and molecular biology its underlying causes are slowly revealing. Although the exact underlying causes are yet to be fully understood from the mechanism point of view, current progress in nursing care is able to assist dementia patients both qualitatively and quantitatively. This paper will take into consideration a client of dementia and provide a brief overview of the causes, signs and symptoms, risk assessment, services available, communication strategies and its impact. The main objective of this essay is to provide the reader a broader view on addressing dementia in a successful manner.

### PATIENT/CLIENT INTRODUCTION

In the present case study an 85 year old man- named Mr. X has been admitted to the emergency department, post fall from the ladder in his living room. He was trying to get some old albums from the top shelf. After he regains his consciousness, he was unable to say how he got admitted and failed to provide any necessary medical history details of his family and his own. He was living with his wife named Alice. As per his wife's information he was suffering from dementia for last 15 years. Based upon first-hand information facilitated a mini mental status examination was carried out. The score was just 18 out of 30 which is below than cut off score of 24. This implies he has cognitive impairment. His shoulder has been dislocated following the fall which has been reduced under anesthesia.



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**Assignment Number:** 01 **Due Date:** April 2014 **Semester:** Spring 12/13

**Subject Code:** \_\_\_\_\_ **Subject Name:** Introduction to Behavioral Science, Section C

**Course Instructor:** Institute for Three Degree Program 014

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- Reference: Introduction to the study of human behavior and development by Sigmund Freud, The structure of the psyche by Sigmund Freud, The ego and the id by Sigmund Freud, The structure of the psyche by Sigmund Freud, The ego and the id by Sigmund Freud, The structure of the psyche by Sigmund Freud, The ego and the id by Sigmund Freud.

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3	_____	15 26 121		
4	_____	15 26 122		

## INTRODUCTION

Dementia is a mental disorder which affects an individual's intellectual and cognitive abilities which interfere with his/her daily activities (Birren, 2013). In general perception, this disease was thought to be a normal part of ageing, but with the advent of medical genetics and molecular biology its underlying causes are slowly revealing. Although the exact underlying causes are yet to be fully understood from the mechanism point of view, current progress in nursing care is able to assist dementia patients both qualitatively and quantitatively. This paper will take into consideration a client of dementia and provide a brief overview of the causes, signs and symptoms, risk assessment, services available, communication strategies and its impact. The main objective of this essay is to provide the reader a broader view on addressing dementia in a successful manner.

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Commented [A2]: The scope and extent of essay brought out.

## PATIENT/CLIENT INTRODUCTION

In the present case study an 85 year old man- named Mr. X has been admitted to the emergency department, post fall from the ladder in his living room. He was trying to get some old albums from the top shelf. After he regains his consciousness, he was unable to say how he got admitted and failed to provide any necessary medical history details of his family and his own. He was living with his wife named Alice. As per his wife's information he was suffering from dementia for last 15 years. Based upon firsthand information facilitated a mini mental status examination was carried out. The score was just 18 out of 30 which is below than cut off score of 24. This implies he has cognitive impairment. His shoulder has been

dislocated following the fall which has been reduced under anesthesia. He hasn't taken any food or fluid after he was shifted to ward. After his wife leaves, post evening meal he became restless and experience difficulty in finding directions.

## SYMPTOMS

Dementia symptoms, don't follow a particular trend as symptoms vary greatly. But when two of the following symptoms are observed majorly a patient can be considered as a dementia patient. Memory, loss of ability to focus, communication impairment and language difficulty, visual perception, reasoning and judgments (Savva, 2009). In the above case study, the client has memory loss and communication issues as well as loss of ability to focus and pay attention.

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## CAUSES

Dementia mostly occurs due to damage in the brain. Damage to any part of the brain leads to impairment of communication. In the present case study the client displays a significant loss of memory and cognitive abilities. It suggests his brain must be subjected to severe damage which could be due to any accident or any biophysical cause. The Hippocampus is the region in the brain, which is responsible for learning and memory. This region gets damaged first when any injury occurs in the brain. Thus, the dementia and Alzheimer disease earliest symptoms are memory loss. In most cases Alzheimer is the

originating disease which leads to dementia (Salzman, 2008). This is the most possible cause of dementia in the present case study.

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## PHYSICAL AND PSYCHOSOCIAL HEALTH ISSUES

Dementia can lead to a number of physical and psychosocial health issues. In the present case study the client is prone to malnutrition due to inadequate nutrition. Since they have a problem in remembering, eventually as the disease progresses they forget to take their meals or miss. In advance cases this might lead to loss of functional ability of chewing and swallowing. This can lead to serious issues such as choking or aspiration of food. With the progression of disease, the patient loose appetite (Sörensen, 2011).

As seen in the client in the present case study, he is unable to carry out his own work, such as bathing, brushing, using the toilet; he is more prone to fungal and bacterial infection. Unhygienic conditions such as dirty hands and food can cause food borne disorders and further affects physical health. Since, memory is affected the client fails to remember the timing of medications and tend to take wrong doses at the wrong time At times it can lead to serious medical side effects.

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As far as psychosocial changes are concerned, the patient undergoes mood and personality disorders. It is evident from the case where the patient becomes restless and impatient after his wife leaves him. He seems to be disoriented. While these effects are due to some direct changes in brain other are emotional reactions to these changes. The person faces difficulty in communicating and forgets the names of people and medications. This leads to agitation and depression. Sleep disturbances, personal safety challenges, hallucinations and delusions lead to psychosocial issues (Sörensen, 2011).

## RISKS

Due to memory loss and cognitive ability loss, in most cases, clients fail to assess their potential and ability. As a result, they tend to carry out activities which results into fall and challenge personal safety. The most prominent cause of the fall in the present case study is physical weakness and poor balance due to gait changes. Memory impairment, visual misperception are the associated causes of the fall (Härlein, 2009).

Mini mental examination - This test is usually done to assess the person's cognitive ability. This test must be carried out to assess the person's mental skills which are used on a daily basis. Score of 20 to 24 out of 30 indicates mild dementia, score of 13 to 20 indicates moderate dementia and less than 13 indicates severe dementia (Mitchell, 2009).

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## COMMUNICATION STRATEGY

The ability of perceiving information, processing it and respond accordingly becomes weaker progressively in the dementia patients. The communication strategy with such patients include five main aspects, namely orientation, the environment, body language, words and use of simple language.

The orientation consists of the right positioning of a person while conversing with dementia patients. Proper eye contact is important while conversing so that the individual is able to make dementia patients understand even through signs and make them concentrate on what is being said to them. Choosing the right environment helps in maximizing the ability of

the patient to focus and communicate properly. Extra and loud noises should be avoided along with external stimuli (Vasse, 2010). Dementia patients though, are not able to understand the words, but they are able to understand body languages, hence communicating with touch, postures, head movements and facial expressions are important. Ambiguous words should not be used while communicating. Such words should be chosen that can be related to objects which will help dementia patients to easily perceive what is being spoken to them. Simplifying communication with short questions and simple sentences and using directions helps dementia patients to think and respond easily (Vasse, 2010).

## PROBLEM SOLVING APPROACHES

For the above patient, the following approach will be carried out i.e. listing his strength and deficits, which will prevent the client's aggressive nature. At many times clients are forced to perform beyond their ability. Short sentences which are easy to understand will be used for communication. To make him more independent care strategy must integrate with physiotherapy to increase his muscle strength and enhance motor skills. Training given during leisure hours will help him in gaining confidence and appraisal will motivate him (Gitlin, 2012).

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## SERVICES AVAILABLE

A number of services are available for elderly dementia patients that can be facilitated at the client's setting or else at residential aged care homes. Similarly the aged care

assessment team can help Mr. X in assessing his mental and physical status, thereby providing him the best service available to him.

## IMPACT ON FAMILY MEMBERS AND OTHERS

The family members of a dementia patient have extreme emotional, physical and economic pressure, which results in great stress upon them and other caregivers. Hence families of dementia patients require adequate support from health, social, legal and financial systems so that they are able to cope up with the situation. Apart from this maintaining the relationship with the member suffering from dementia is also a challenge for other family members. This affects the practical and emotional capacity of the family members for coping up with the changes that occurs on a daily basis or even at every moment otherwise it adversely affects the relationships within the family often leading to the cessation of relationships.

Commented [A8]: Reason based writing is always effective.

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Criterion	Levels of achievement		
	Exemplary	Good	Poor
<b>Writing style and presentation are clear</b>			
• Introduction	Introductory statement clearly indicates the main purpose of the contribution and suggests the plan of organization, so the reader can anticipate the text that will follow.	Introductory statement indicates the main purpose of the contribution in general terms, so the reader has some idea of what will follow.	The introduction does not give an overview of the contribution so the readers are not sure what to expect as they read the text.
• Main Body	Main body of contribution makes connected points that clearly build the argument so the text flows from introduction to conclusion in a logical manner, thereby helping the reader to follow the thinking behind the text.	The main body presents a number of points that allow the reader to understand the argument, but lapses in the writing may force the reader to make some connections between the parts.	The text is not well structured so the reader must stop reading at times to try to make sense of the text.
• Conclusion	The main point of the contribution is clearly indicated and reinforced so the reader can clearly remember it.	The main point of the contribution is indicated, but may be stated in an unconvincing manner.	The concluding section does not reinforce or revisit the main point so the reader is unsure about it and likely to misinterpret or forget it.
• Written expression	Sentences and paragraphs are well structured and clear so the reader can focus on what is written. Each paragraph has a topic sentence that indicates the subject matter.	Minor lapses in sentence structure, such as run-on sentences and unnecessarily complex sentence structures, force the reader to pause and reflect on the meaning of the text. Paragraphs present a complete argument, but may not flow so well.	Many sentences are poorly structured so the reader must stop often to reflect on the meaning of the text. Many paragraphs lack topic sentences or have poor flow so the main points and linkages among explanatory text are not clear.
• Grammar, punctuation and spelling	Grammar, spelling and punctuation are flawless, which allows the reader to focus on the message.	Some minor errors in grammar, spelling and/or punctuation detract from the quality of the text, but do not impair the communication.	Many errors in grammar, spelling and/or punctuation make reading the text difficult and communication is impaired.
<b>Concepts and arguments are well developed</b>			
• Accuracy	All information is accurately reported using appropriate terminology so the information is reliable.	The information is largely accurate but imprecise language could lead a reader to misinterpret aspects of the text.	Although the gist of the information is correct, there are problems with the interpretation of it. A reader can be misled by the text.

• Relevance	Connections between the contribution and the main topic of the discussion are clearly indicated.	Connections between the contribution and the main topic of the discussion are indicated or implied, but the reader needs to pause to clarify those connections.	Although the text is relevant, this is not clearly indicated, so the reader must guess how the text relates to the main topic.
• Significance	The reason why the contribution is important to the overall discussion is clearly described and discussed so the reader takes the contribution seriously.	The reason why the contribution is important is touched on but not elucidated, so the reader must make some interpretations about the author's view of the contribution's significance.	The contribution may include significant material but this is not indicated, so the reader must guess it.
• Clarity	The main points and new technical terms are clearly described and/or explained so the reader is left with no ambiguity about what was written.	Although the text is clear to informed audiences, unexplained points may leave room for alternative interpretations of the text.	Key points and new technical terms are not explained so the reader is confused.
• Independence	The contribution is completely self-contained so the reader does not have to read other contributions or published materials to understand what was written about.	The text is sufficiently clear that the reader can understand the main point without further reading, but some parts of the text are not clear without consulting earlier contributions or other sources of information.	The text is written in a manner that presumes considerable prior knowledge, so the reader must have a thorough knowledge of what has been written about the subject in order to understand the main point of the contribution.
<b>Contribution is responsive to another contribution</b>	The writer links ideas submitted by others to their own contribution in a manner that substantially strengthens the group's efforts to resolve the main problem. This linkage can include elaboration of what was previously written, a critique or questioning of it, demonstration of linkages among two or more earlier contributions, and/or utilization of an earlier contribution as a foundation to build your own.	The writer makes references to earlier works that are a starting point for new ideas but, apart from the reference to the earlier work, not much information is incorporated	The text mentions other contributions but neither explains the reference nor substantially adds to it, so there is no clear benefit to the resolution of the main problem from citing the earlier contribution.
<b>Text is supported by references</b>			
• Sources indicated	All information and ideas that are not commonly known are supported with references to sources, so the reader has confidence that the information is not based on hearsay or the writer's opinion or assumptions alone.	Most sources are indicated, but in only a few cases the sources are not given or are ambiguous, so the reader has to check some of the sources.	Sources are cited for some specific parts of the contribution, but no references are supplied for information and ideas that are clearly not the author's, so the reader has no idea of the validity and

			authority of the information.
<ul style="list-style-type: none"> <li>• Relevant references</li> </ul>	Information, concepts and opinions are supported with references to published literature, especially primary (original) sources of information, rather than review articles or textbooks. This allows the reader to independently review the cited sources. More than one reference is cited to support key points, which adds strength and authority to the argument.	One or a few references are used to support the text. Thus the contribution is supported but this may be an idiosyncratic source. Some general references to textbooks are made that could have been replaced by primary references which are more thorough and authoritative.	Information comes from Web sites or other sources that have no recognized authority, so the validity or strength of the source is unknown.
<ul style="list-style-type: none"> <li>• Citation style</li> </ul>	References cited appropriately in the text, and the correct format is used in the text when citing information, so the reader clearly knows which information is attributable to which source.	Minor lapses in citation format do not prevent the reader from finding the sources in the reference list at the end of the contribution.	Citation format incorrect or poorly placed in the text, so citations distract from reading.
<ul style="list-style-type: none"> <li>• Bibliographic information</li> </ul>	The reference list contains complete bibliographic information (author's name(s), publication date, title, source, date web page accessed), so a reader can easily find the references for their own research. The authority of sources can be evaluated by checking them.	Bibliographic information largely complete, but some information missing so the reader may have difficulty finding some references. Most sources can still be easily checked.	Not all references are listed, information in the reference list is incorrect, or important information is missing from the reference list, so the reader is unable to find the same sources of information and the authority of sources is almost entirely unknown.

**Comments:** At a general outlook the work is good and when considered based on subject all required points of contribution have been dealt with well. Facts and contributions have been presented but little more elucidation on them would have added value.