

PARKINSON'S DEMENTIA AND REACTIVE BEHAVIOURS

In the later stages of Parkinson's disease, many people will experience cognitive changes, sometimes leading to dementia. Along with these cognitive impairments, some people can exhibit reactive behaviours, usually involving anxiety, anger, and aggression. This can include verbal outbursts such as shouting, swearing, or name-calling, or physical contact, such as scratching, pushing, kicking, or hitting. Carepartners should take extra care to watch for signs of aggressive behaviour, and respond appropriately.

*Talking about dementia can be frightening. It is very important to remember that **not everyone with PD will experience cognitive changes**. While over half of people diagnosed with PD do experience a degree of cognitive decline, not all among these go on to develop dementia. As will all symptoms of PD, everyone is different.*

Determining the Cause

In many cases, behaviours have meaning – the challenge is to figure out its root cause, in order for the behaviour to be managed, deescalated, or diverted. Common causes of aggressive behaviour can include:

- increased fears regarding loss of control of one's life and environment
- medication side effects
- missed or incorrect doses of PD medications
- cognitive decline, including memory loss
- depression, hallucinations, or delusions
- physical discomfort and pain
- other health problems, such as infections
- changes in routine
- busy, chaotic surroundings
- fear and discomfort with activities, such as personal care
- anxiety around new people visiting, or involved in care
- hunger and fatigue

Managing Aggressive Behaviour

One way of managing behaviours is to develop strategies to prevent them in the first place. Problematic behaviours are often associated with triggers, such as those noted above. If you can determine what the triggers are, and control them, you may be able to avoid the behaviour. Keep a log of when the behaviour occurs, and what you think may have been the trigger. Learn early warning signs, such as:

- the onset of fear or frustration
- changes when medication is wearing off, or if dosage has been changed
- specific times of the day when problems tend to arise
- specific activities that are troubling

Another way to reduce reactive behaviours is to establish a routine, and give the person time to complete tasks. Following a routine helps to limit choices and demands. Similarly, you may want to look to reduce distractions in the environment. Turn off the TV or radio, and avoid multitasking, so that you can focus on communication. Also examine whether the room is too hot or cold, noisy, cluttered, or crowded. These factors can cause distractions and confusion, making the person feel unsafe. At home, keep furniture in the same place to avoid confusion.

When aggressive behaviour occurs...

- Stay calm.
- Review the PD medication schedule to see if a dose has been missed or taken incorrectly.
- Give the person space to cool down. Try to leave about 5 feet between you.
- Ask what is troubling the person so that you can identify the cause of the emotion and behaviour.
- Listen to the person. Resist arguing or being confrontational, but provide reassurance. For example, “I know it is really frustrating when you can’t control what is happening...”
- Speak slowly, and in a clear, confident, and reassuring voice. Raising your voice may escalate the situation.
- If you know what has triggered the behaviour, share the explanation. For example, “I noticed you took your medication a short while ago – maybe it hasn’t kicked in yet. Can I sit with you until it does?”
- Redirect the person to focus away from the issue causing aggression. Offer to take a walk, or do a calming activity together.
- If your safety is threatened, leave the situation, and return after a few minutes.

Regardless of when or why aggressive behaviour occurs, try not to take it personally. Gather the information you need, and put a plan in place to help manage the behaviour in the future. If the person you care about is in a care facility, report the difficult behaviour to the staff. If they are at home, let their doctor know about the changes. In either case, ask for help.

Additional Resources

Responsive Behaviours | Alzheimer Society BC | bit.ly/2PWiy89

Cognitive Impairment & Communication | Parkinson Society BC | bit.ly/pddcommunicationchallenges