

Tips for Spousal Caregivers

by Lori Lataille

Alzheimer's disease, the most prominent form of dementia, is a progressive and degenerative mental disorder that affects cognitive function, memory, and even physical attributes. In general, dementia is a blanket term used to refer to a group of symptoms that involve the loss of cognitive functioning and behavioral abilities that interfere with daily life. Alzheimer's disease is just one of many forms of dementia. Unfortunately, Alzheimer's and other forms of dementia is something that primarily affects older individuals and seniors.

Because these disorders are progressive, symptoms may start small but as time passes, they can become more and more severe and lead to problems performing day-to-day tasks. If this occurs, dementia patients will likely have to enlist the help of a caregiver or an assisted living facility.

For many married couples, when a husband or wife begins to show signs of serious dementia the spouse will oftentimes become the caregiver for their loved one. With that said, dementia caregiving can be a burdensome thing and lead to many challenges and obstacles in a relationship. If you don't know how to navigate the issues properly, it can lead to problems and rifts in the relationship.

Common Relationship Problems

For many, these problems in the relationship can lead to tension and even loss of relationships. Dementia is stressful, not only for the patient but for the caregiver as well. In fact, caregivers for those with dementia are at an increased risk of stress, depression, and many other health complications.

The Journal of Family Nursing conducted a study and overview of spousal caregiving to look at some of the common problems in the relationships that led to issues.

Some of the common themes in testimonies that they received found communication problems like not being able

to talk and or socialize. Moreover, when the disorders got in the way of plans that they've had for a long time, such as travel, it can dramatically interfere with the relationship. Agitation, a common symptom of dementia, is another problem that often interferes with and can lead to strained relationships.

When a spouse cares for their loved one with Alzheimer's disease, it can lead to the spouse caregiver feeling overburdened and even depressed. This can work to exacerbate the problems between the couple and create a rift in the relationship that can sometimes be irreparable.

Some testimonies from the study found that many couples ended up losing their relationship.

"It's like he doesn't...have anything to offer... it's...it's different," one testimony read. "We had planned to travel some after he retired... It's a lot different... And just our life

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Mission

To provide a comprehensive and coordinated system of services designed to promote the independence and dignity of older persons and their families in Muskegon, Oceana, and Ottawa – a mission compelling us to target older persons in greatest need but to advocate for all.



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has changed dramatically. And it will continue to. We have more bad days than good days now...you just try to make the best of it and go on.”

Despite these common problems that many spousal caregivers face, there are ways to improve the outcome and hopefully avoid detrimental effects on the relationship.

According to a report from the University of Buffalo, spouses becoming caregivers for their ailing partners is quite common in America.

The study found that when caregivers believe that their help is appreciated it leads to increased health benefits and happier moods. This means that clear and open communication with loved ones suffering from dementia can help.

“This study adds to a growing body of evidence showing that it is important to target emotional communication between spouses in daily support interactions to improve psychological well-being in the context of chronic conditions and disability,” the report said.

Moreover, one of the things that can often lead to tension in the relationship is caregiver stress. Caregiver stress is a problem that many caregivers deal with in which they experience issues such as impatience, difficulty sleeping, loss of appetite, changes in mood, and more. Unfortunately, these issues can cause caregivers to take their frustrations out on their spouse, putting more tension on the relationship.

Caregivers can make a few lifestyle changes to help reduce their levels of stress. For example, getting a well-balanced diet and proper exercise will help improve mental and physical health. Caregivers can also make these lifestyle changes along with their partner, which will not only improve their mood but can help to strengthen and solidify the relationship between the spouses.

Dementia poses several problems for the patient and the caregiver, especially if the caregiver is a spouse; it can lead to rifts in the relationship. Caring for a loved one with dementia or Alzheimer’s may be one of the most difficult challenges you face; hopefully, these tips can help you and your loved one find the best way to work through the challenges and keep a strong relationship. ❖



Dementia
Friends

**Join a growing movement of people like you who are helping family or fellow community members living with dementia. A little support can make a big difference in their lives.
Be a Dementia Friend!**

What Makes You a Dementia Friend and How to Become One?

Attend a FREE one-hour informational session where you’ll learn what dementia is, what it’s like to live with it, tips for communicating with people who have dementia and how you can support them with the changes in thinking in memory. Schedule your session TODAY by emailing:

dementiafriends@seniorresourceswmi.org

Tips and Techniques for Dealing with Stress

by Dr. Rita Nachen Gugel

Change is an expected part of our daily lives today. Dealing with it so that YOU control IT rather than vice versa is an important and positive force in controlling your life. Try a few of these tips.

1. Accept what you cannot change. Take a tip from AA. Change what you can if it bothers you. But, if you cannot change it, learn to live with it.
2. Face up to your problems. Sort them out, and see which ones are real and which are simply imagined. Deal with them as they are, and not what you think they are.
3. Deal with one problem at a time. Sort out your priorities, and deal with them in the order of their importance to you.
4. Be flexible. Give in once in a while. If you do, others will too.
5. Don't hold all your worries inside yourself—talk it out. Frequently we swallow our unhappiness (along with candy, cake, ice cream, etc.) because we can't let the problems out. Talk to someone. A burden shared is much less of a burden.
6. Work off Stress. Physical outlets for stress help your body to fight off many of the negative results of stress.



7. Get enough rest/relaxation/sleep. Give your body a chance to recover from day to day. Lack of sleep and rest will only make matters worse for you.
8. Avoid “self-medication.” A “spoonful of sugar” may make the “medicine go down,” but it does your body no good. Sugar, alcohol, nicotine, and ice cream may all feel good going down, but they make matters worse— from the inside. They add to your body's physical stresses, thus making dealing with external stresses much harder.
9. “Take time to smell the roses.” Have some fun. Relax.
10. Think about and do something for others. A little altruism never hurt. It even makes people feel better about themselves.
11. Be the “captain of your ship.” If you are not happy with your life, think about what's wrong or missing, and then plan the necessary actions to change it to coincide with your needs and desires for your life.
12. Work on your relationships with those who share your life. Don't hold back your feelings. Share them with your family and friends and co-corkers. It can help to decrease tensions. ❖



April's Website

www.thecaregiversvoice.com

Quotes

You can cut all the flowers, but you cannot keep Spring from coming.
— Pablo Neruda

“Some men see things as they are and say why. I dream things that never were and say why not.”
— Bobby Kennedy

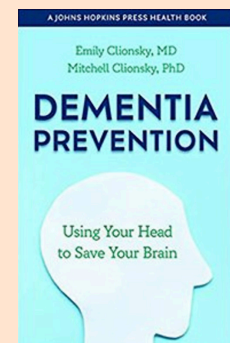
“Obstacles don't have to stop you. If you run into a wall, don't turn around and give up. Figure out how to climb it, go through it, or work around it.”
— Michael Jordan

This Month's Book

Dementia Prevention

by Emily Clionsky, MD & Mitchell Clionsky, PhD

Want to cut your dementia risk in half? This book represents 45 years of clinical practice and research by a physician and neuropsychologist couple who cared for their parents with dementia, created a dementia test used by doctors, and have treated more than 25,000 patients with cognitive impairment. Dementia Prevention uses the most current science about Alzheimer's disease and other dementias with a self-assessment and practical ways to improve your brain's future.



Don't Get Mad, Get Funny

by Leigh Anne Jasheway-Bryant, M.P.H

No matter how much we love them, caring for family members can be a very stressful job. And all that stress can take its toll on our health and make our role as family caregivers even more difficult.

One of the best ways to reduce stress and feel better about your caregiver role is to laugh. Laughter has been shown to improve both physical and emotional health and to help us feel renewed and rejuvenated.

Here are six simple ways to add more laughter to your life:

1. Make funny friends. People who make you laugh not only give you the gift of laughter, but they also help teach you how to change your perspective on life and lighten up yourself.
2. Read funny greeting cards especially if you've had a stressful day. Greeting cards are great because they deliver a laugh almost immediately and they represent a diversity of types of humor.

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4 Tips for people living with Lewy Body Dementia

Source: National Institute on Aging

Coping with a diagnosis of Lewy body dementia (LBD) and all that follows can be challenging. Getting support from family, friends, and professionals is critical to ensuring the best possible quality of life. Creating a safe environment and preparing for the future are important, too. Take time to focus on your strengths, enjoy each day, and make the most of your time with family and friends. Here are some ways to live with LBD day to day.

1. Create a support system

Your family and close friends are likely aware of changes in your thinking, movement, or behavior. You may want to tell others about your diagnosis so they can better understand the reason for these changes. For example, you could say that you have been diagnosed with a brain disorder called Lewy body dementia, which can affect thinking, movement, and behavior, and that you will need more help over time. By sharing your diagnosis, you can build a support team to help you manage LBD.

As LBD progresses, you will likely have more trouble managing everyday tasks such as taking medication, paying bills, and driving. You will gradually need more assistance from family members, friends, and perhaps professional caregivers. Although you may be reluctant to get help, try to let others partner with you so you can manage responsibilities together. Remember, LBD affects your loved ones, too. You can help reduce their stress when you accept their assistance.



Finding someone you can talk with about your diagnosis — a trusted friend or family member, a mental health professional, or a spiritual advisor — may be helpful.

2. Take steps to be safe

LBD causes changes in thinking and movement that can lead to safety issues. Consider these steps:

- Fill out and carry the LBD Medical Alert Wallet Card and present it any time you are hospitalized, require emergency medical care, or meet with your doctors. It contains important information about medication sensitivities.
- Consider subscribing to a medical alert service, in which you push a button on a bracelet or necklace to access 911 if you need emergency help.
- Address safety issues in your home. Consider areas of fall risk, poor lighting, stairs, or cluttered walkways. Think about home modifications that may be

needed, such as installing grab bars in the bathroom or adding stairs with ramps. Ask your doctor to refer you to a home health agency for a home safety evaluation.

- Talk with your doctor about LBD and driving. Have your driving skills evaluated, if needed.

3. Plan after a Lewy body dementia diagnosis

There are many ways to plan after a diagnosis of LBD. Here are some things to consider:

- Start conversations early. Soon after your diagnosis, start conversations with your family and doctors about the care you'd like to receive in the future.
- If you are working, consult with a legal and financial expert about planning for disability leave or retirement. Symptoms of LBD will interfere with work performance over time, and it is essential to plan now to obtain benefits you are entitled to.
- Consult with an attorney who specializes in elder law or estate planning to help you write or update a living will, health care power of attorney, will, and other documents.
- Identify local resources for home care, meals, and other services before you need them.
- Explore moving to a retirement or continuing care community where activities and varying levels of care can be provided over time, as needed. Ask about staff members' experience caring for people with LBD.



4. Participate in activities you enjoy

Despite the many challenges and adjustments that come with an LBD diagnosis, you can have moments of love, humor, tenderness, and gratitude with the people closest to you. Your attitude can help you find enjoyment in daily life.

Make a list of events and activities you can still enjoy — then find a way to do them! For example, listen to music, exercise, or go out for a meal with family and friends. If you can't find pleasure in daily life, talk with your doctor or another health care professional about effective ways to cope. Let your family know if you are struggling emotionally so they can offer support. ❖

Don't Get Mad, Get Funny, continued from page 4



3. Have five of your favorite funny movies saved so you can watch them when you're feeling overwhelmed by stress. Consider funny movies to be part of your emergency first aid humor kit. If you can't think of your favorites offhand, check out the American Film Institute's list of 500 funniest movies of all time.
4. Wear a funny button in public. Wearing a funny button communicates to everyone who sees you that you have a sense of humor and are open to hearing about their humorous experiences.
5. Look for the funny. Instead of focusing on life's miseries, try to find the laughter in everything that goes on around you. Most things we laugh at come from spontaneous situations that aren't meant to be funny. Think of it as looking at the world through a pair of Groucho glasses.
6. Fake it. Studies show that you don't have to feel like laughing to get the benefits! It's just like exercise; if you work out, you'll get fitter whether you feel like working out or not. Only if you fake laughter, chances are you'll soon feel like laughing for real. ❖

Emergency Care Versus Urgent Care

Understanding the difference between emergency care and urgent care is important, especially in the stressful moments of an unexpected health crisis. With many hospitals at or near capacity, the American College of Emergency Physicians (ACEP) is sharing tips to help simplify the decision about where to seek care when immediate medical attention is needed.

“The emergency department is the best option for concerning symptoms, severe illness or injury, and we’re open 24/7, 365,” said Christopher S. Kang, MD, FACEP, president of ACEP. “Emergency physicians are ready to help anyone who needs them—we are trained to treat every kind of medical emergency.”

Emergency departments are outfitted with advanced medical equipment and staffed to handle more complex care for severe health issues. Some of the most common reasons to seek emergency care include trouble breathing, chest pain, uncontrolled bleeding, seizures, severe abdominal pain, head injuries, sudden severe headache or dizziness, and sudden confusion or disorientation. Emergency physicians are experts trained to evaluate and manage any mystery injury or ailment.

Urgent care is a vital part of the health care system and can be a good option for common minor medical issues that require timely attention, especially during after-hours or weekends when an appointment with a physician is unavailable. Urgent care is likely appropriate for a modest cough, runny nose, sore throat, rashes, minor cuts, upset stomach, minor bone fractures, pink eye, and other seemingly mild symptoms.

However, since most urgent care centers do not have the full suite of medical equipment or specialized staff typically found in an emergency department, they are likely not a substitute for emergency care. Another difference is that emergency departments—unlike urgent care—centers, are required by law to treat or stabilize anyone who seeks emergency care, regardless of their ability to pay or insurance status, whereas most urgent care centers accept health insurance but require payment when services are delivered.

“Knowing when and where to go in a health emergency can save a life,” continued Dr. Kang. “If you need care for a severe illness or injury, or if you’re unsure about what’s wrong and your regular physician is not available, an emergency physician will always be there for you.”

Always call 911 or go to the nearest emergency department if a medical emergency is suspected.

The American College of Emergency Physicians (ACEP) is the national medical society representing emergency medicine. Through continuing education, research, public education, and advocacy, ACEP advances emergency care on behalf of its 40,000 emergency physician members, and the more than 150 million people they treat on an annual basis. For more information, visit www.acep.org and www.emergencyphysicians.org.

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Go to the emergency department or call 911 if you experience the following:



Trouble breathing



Facial drooping or weakness in a limb



Chest pain



Bleeding lasting longer than 10 minutes



Seizures



Head Trauma



Sudden acute headache or dizziness



Major broken bones



Coughing or vomiting blood



Sudden confusion or disorientation



Severe abdominal pain



Swallowed a foreign object

Call your doctor's office or, on evenings or weekends, go to an urgent care for the following:



Regular cough



Sneezing or runny nose



Sore throat



Muscle or body aches



Headaches



Vomiting



Upset stomach or diarrhea



Rash



Minor bone fractures



Pink eye



Minor Cuts



Earache

Anyone who thinks that they are having a medical emergency should not hesitate to seek care. Federal law ensures that anyone who comes to the emergency department is treated and stabilized, and that their insurance provides coverage based on symptoms, not a final diagnosis.

 American College of
Emergency Physicians®
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Welcome

APRIL

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filled with love & happiness.

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