

Therapy program improves daily functioning and reduces caregiver burden, Dutch study shows

By Lorena Tonarelli, M.Sc.
Care Guide research reporter

Currently available medications are often limited in their effectiveness at easing the symptoms of dementia, which gradually leads to loss of independence and poor quality of life in residents, and causes stress, social isolation and depression among caregivers.

Now, researchers in The Netherlands have developed an occupational therapy program that improves functioning in activities of daily living in elders with mild to moderate dementia, and also reduces caregivers' burden, according to the Nov. 17, 2006, issue of the British Medical Journal.

The findings on the new program come from a randomized study led by Dr. Maud Graff, of the University Medical Center of Nijmegen, involving 135 older adults aged 65 and more, who were randomized to either 10 one-hour sessions of occupational therapy, held twice a week for five weeks, or no occupational therapy.

Occupational therapy (OT) aims to promote residents' independence and active social life, by maximizing performance in activities of daily living.

This can include activities such as eating, preparing meals, taking medications, toileting, dressing, and bathing.

It has been consistently found to provide benefits to older people with dementia, especially of the Alzheimer's type.

At the same time, OT aims to improve the sense of competence of caregivers by teaching them practical skills, communicating strategies, and effective approaches to cope with patients' behaviors and the burden of care.

"In the first four sessions [of the study]... patients and caregivers learned to choose and prioritize meaningful activities they wanted to improve," explain the researchers.

Then, the therapist evaluated possible ways for adapting the environment and activities of daily living to the elder's cognitive disabilities (i.e., environmental and compensatory strategies).

"In the remaining six sessions, patients were taught to optimize these strategies to improve their performance.

"Caregivers were trained, by means of cognitive and behavioral interventions, to use effective supervision, problem solving, and coping strategies to sustain the patients' and their own autonomy and social participation."



Gardening was made easier, and therapeutic, by providing help as needed, but letting the elders do as much on their own as possible. (USDA photo.)

Better functioning and less burden

The team found significant differences, at one week after the program ended, between the control and the therapy group.

Patients in the occupational program functioned significantly better than those who were not, and had significantly better skills and less need for assistance, as indicated by higher scores in the Assessment of Motor and Process Skills (AMPS) scale and lower scores in the Interview of Deterioration in Activities of Daily Living in Dementia (IDDD) scale, respectively.

In addition, the program lessened the burden of care on caregivers, who felt significantly more competent than caregivers in the control group, as shown by higher scores in the Sense of Competence Questionnaire (SCQ).

All the improvements were maintained at three months after completion of the program, possibly “because a component of the intervention was to train caregivers in providing the supervision patients needed to sustain their performance of daily living,... [and to provide them with] individualized support,” say the researchers.

Occupational therapy: A step-by-step example

Graff and colleagues give an insight into how the occupational therapy program was actually used to achieve optimum performance in older persons with dementia in a case study presented in the Feb.-Nov. issue of the journal *Dementia*.

The case was that of a 71-year-old man whose physical and cognitive disabilities had made it difficult to perform activities once familiar, like dressing, helping with food preparation, singing, and gardening.

As a result, the elder “had become passive, and had lost interest and took little pleasure in his previous activities,” say the researchers. His wife had taken over all the things he enjoyed doing before the disease, which had significantly increased her burden.

The occupational program intervention involved the following main steps.

Observing. The therapist observed both the elder and his caregiver spouse in order to identify what behavioral and environmental modifications were needed.

Setting the goal. A goal was then set for the caregiver to learn how to better supervise the elder during the various activities, so that the latter could work more safely and independently, and she could have more time for herself as a result.

Improving the caregiver’s supervising skills.

This required the caregiver to:

- Avoid taking over those activities that the person could perform.
- Simplify the activities, by breaking them down into simple steps; preparing them in advance; and providing clear instructions and plenty of visual clues, as well as making the necessary environmental changes.
- Improve communication, by providing encouragement and showing sincere appreciation for the patient’s achievements, no matter how small.

For example, gardening was one of the preferred activities of the elder of this case study; so his wife was taught to prepare the activity in advance, by placing red tapes to sign the part of the garden her husband should work on, a kneel-sit-rest, and a chair to sit down for a break, and giving him an alarm clock so that he could remember when it was time for a break.

Dressing was made easier by placing Velcro behind buttons, or teaching the elder how to use a buttonhook for buttoning his shirt, and how to use a paper clip on his trousers’ zip.

As a result, the elder was able to carry out many activities by himself. Not only this improved his self-esteem and sense of satisfaction, but it also meant that he was more tired and needed more rest during the day, which gave his wife the opportunity to enjoy her own activities, like seeing neighbors and friends.

“One important result of this case study was the conclusion that, despite the... cognitive decline of the older patient with dementia, [his] daily performance and quality of life... improved after OT intervention,... [and so did] the sense of competence and quality of life of the primary caregiver,” say Graff and colleagues.

“This OT intervention might therefore prove to be of great value, because of the enormous problems in daily performance and the decrease in the quality of life that dementia causes for patients suffering from this disease and for their caregivers.” END



Give your elders lots of praise and encouragement, simplify their activities as much as possible, but also let them do as much as they are able. (AOA photo.)