Getting older, feeling safe, taking risks

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Abstract
Risk has certainly become entrenched in the language of contemporary health care. Risk assessments are presented as part of good quality practice, reflecting the view that risk is a bad thing and should be avoided at all cost.

Keywords
taking, feeling, older, safe, risks, getting

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Management of clients with Alzheimer’s dementia and co-morbid depression

BY KAREN HARDER

An increasing rate of ageing in Australia is leading to a higher rate of diagnosis of Alzheimer’s dementia and co-morbid depression.

Both conditions have high prevalence, morbidity and mortality rates but to date, no cure (Lyketsos 2009).

When administering antidepressants and antipsychotics to treat the distress of physically and psychologically vulnerable elderly clients, health professionals must consider possible side effects which may include increasing the risk of falls and toxicity affecting quality of life.

Changes in the elderly client’s liver and kidney function predispose this group to toxicity and disorientation which is compounded by poor hydration status. Due to the association of selective serotonin re-uptake inhibitors (SSRIs) with disturbances in blood pressure, and antipsychotics with muscle rigidity, an urgent review of the use and frequency of these medications with this group of clients is required.

Similarly, limited concentration, distractibility and perceptual disturbances of some elderly clients can make effective communication difficult. Fontaine (2009) and Toughy (2008) highlight the importance of limiting environmental noise during interactions, using non-threatening eye contact and using clear basic communication.

As the client with Alzheimer’s dementia deteriorates, aphasia, apraxia and agnosia will impede their ability to communicate. The use of gestures and demonstration can assist in the daily management of these clients. It is crucial the client’s preferences are incorporated into the provision of their daily care while decreasing their combativeness when providing client-centred care.

REFERENCES

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