



CareTalk

A Publication of Hope Hospice, Inc.

MEMORY CARE TIP

Why Dementia Affects Balance and Coordination

Any of several conditions can explain why a person living with dementia is experiencing problems with balance and coordination. Let's consider common reasons.

Vision deficits are one issue.

A variety of dementias cause narrowing of the field of vision and trouble with depth perception—well beyond that of the normal aging process. This can explain why a person pauses upon reaching a dark doormat, thinking it is perhaps a hole in the ground to be avoided, and tries to overstep it.

Loss of balance is particularly problematic for patients with late-stage Alzheimer's Disease, when the **brain loses the ability to process information** about one's physical surroundings. In these individuals is where we commonly see a shuffled gait, a result of declining vision and muscle control.

Caregivers should be alert, as patients in this stage are extra susceptible to falls.

Medications

(including memantine that is prescribed to address cognition decline) can cause dizziness, which may affect equilibrium as well. ➔



COVID-19 and Lung Disease

Having a chronic lung disease puts a person in the high-risk category for severe illness and complications from COVID-19. The virus can damage the lungs, heart, and brain, increasing the risk of persistent health problems. COVID can scar the lungs' tiny air sacs and cause long-term breathing difficulty, even if the scars partially heal.

If the person in your care is having a flare-up from lung disease or experiencing new symptoms, call the primary care doctor (or specialist, if already assigned). During this time, it is more important than ever to maintain control of chronic lung disease, including taking medications as prescribed.

When lung disease (such as COPD) progresses to the point that the lungs can't supply enough oxygen to meet the needs of the body, the doctor may prescribe home oxygen therapy. Symptoms that show oxygen may be needed:

- excessive sleepiness
- morning headaches and irritability
- poor concentration
- worsening shortness of breath
- swelling of the feet, ankles, and legs

Some people think that using supplemental oxygen will reduce their independence, or that they will become addicted to it. However, oxygen therapy can greatly improve energy levels, the ability to breathe, and overall quality of life. Using this therapy can add years to a person's life. The doctor will use various tests to find out when, and how much, oxygen is needed.



Hope Hospice, Inc.
6377 Clark Ave., Suite 100
Dublin, CA 94568-3024
(925) 829-8770
HopeHospice.com

LEADERSHIP TEAM

Jennifer Hansen
Chief Executive Officer

Satu Johal
Chief Financial Officer

Jatinder Pal Singh Marwaha, MD, HMDC
Medical Director

Epi DeLeon, MD
Associate Medical Director

Kuljeet Multani, MD, HMDC
Associate Medical Director

Kshitija Kari, MD
Associate Medical Director

Arlene Baldwin
Director of Grief Support Services

Gia Barsell
Manager of Dementia Services

Maria Iglesias
Chief of Human Resources

Kathy Nouri, RN, BSN, MPH
Chief of Quality Compliance

Raul Perez, RN, BSN, PHN
Chief of Patient Care Services

Kari Rayford, LVN, CHPLN
Director of Outreach

Kendra Strey
Director of Communications

Nikki Tildesley
Manager of Volunteer Services

Elsei Ye-Arling, RN, BSN, CCM
Director of Patient Care Services



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Lung disease (continued from page 1)

Supplemental oxygen comes in different kinds of containers and is given through a nasal cannula (soft prongs inserted into the nose), or through a tube surgically inserted into the throat.

Liquid oxygen is stored at a very low temperature in an insulated container. When released, the liquid changes to a gas that is breathed. The liquid can be transferred to small portable containers.

A **concentrator** is an electrically powered device that separates the oxygen from the air, concentrates it, and then stores it; a tank of oxygen is needed in case of power failures.


Oxygen tanks store oxygen under pressure with a regulator that controls the oxygen flow rate; the tanks can be large or portable.

The doctor will prescribe a specific flow rate of oxygen, and you will need to make sure that not too much, or too little, is given. Different flow rates may be given for sleeping and when active. Care must be taken to avoid having anything flammable in the room where the oxygen container is kept, such as a cigarette lighter or gas range.



Conserve Energy

People with COPD must conserve their energy so they don't become exhausted. Encourage the person to:

- sit while doing chores
- avoid lifting and bending; keep household items within easy reach
- rest after eating
- use a cart with wheels to carry things
- use helping devices such as a long-handled reacher or tongs
- use a bath bench and hand-held shower head in the bathtub 

Safety Tips: Avoiding Irritants

People living with COPD may be affected by irritating substances in the air, or they may have allergies to airborne allergens (substances that are carried on the air that cause allergic reactions like sneezing or watery eyes) such as pollen. Any kind of air pollution inside or outside of the home should be avoided, including dust, smoke, fumes from wood or coal-burning stoves, and strong odors in general. Some people are highly allergic to mold and may have trouble breathing if they are exposed to it.

The most important thing a person with lung disease can do is to stop smoking and/or avoid being near anyone who is smoking. Smoking is the number one cause of COPD and can make any kind of lung disease worse. Medications are available that can help a person stop smoking. Sometimes even multiple medications may be needed. Eating a healthy diet, drinking plenty of water, and taking vitamin supplements can make withdrawal easier and less uncomfortable. ➔

Smoking is the number one cause of COPD and can make any kind of lung disease worse. Even a non-smoker should avoid being around others who smoke.

Breathing Exercises

Breathing is performed subconsciously, so it's common to be unaware of whether you are taking quality breaths. In the same way that anaerobic exercise helps strengthen muscles and improve balance, breathing exercises can improve lung performance—especially for individuals living with a lung disease like COPD or chronic asthma. It's important to perform the following exercises while calm and relaxed, never when feeling short of breath.

Diaphragmatic breathing, also known as belly breathing, helps a person to relax and get more air out of the lungs. Have the person in your care practice this breathing technique while seated in a comfortable chair or lying down. Have her put one hand on her abdomen and one hand on her chest. As she breathes in, have her notice how the abdominal muscles relax and then, as she exhales, tell her to tighten the abdominal muscles to help push air out. The chest should not move. The exhalation should always take longer than the inhalation; try for a count of four on the inhale and eight on the exhale.



Pursed-lip breathing helps to keep the breathing tubes open during exhalation and to improve the ability to slowly get more air out of the lungs. This type of breathing is used mainly for people with COPD. To practice this technique, have the person take a breath in through the nose and slowly let the breath out through pursed lips (as if she were whistling). Pursed-lip breathing and belly breathing are done together.

You can watch video demonstrations of each exercise at www.lung.org/lung-health-diseases/wellness/breathing-exercises. ➔

QUICK QUIZ

Read the issue and answer True or False to the questions below.

1. Loss of balance can be attributed to the brain losing ability to process information about one's surroundings.

True or False

2. Diaphragmatic breathing, or belly breathing, can help improve lung performance.

True or False

3. Encourage a person with COPD to exercise vigorously to help improve lung strength.

True or False

4. Smoking is the number one cause of COPD.

True or False

5. Improved vision in patients living with dementia causes dizziness and makes them more likely to fall.

True or False

6. Patients with COPD aren't in any real danger by living with someone who is a smoker, as long as the patient himself doesn't smoke.

True or False

7. Researching long-term care options for your adult child living with a disability is important as you age and become less able to provide full care.

True or False

8. If someone in the home is on oxygen therapy, do not have anything flammable in the room where the oxygen is kept.

True or False

9. Someone who has a lung disease is at a higher risk for complications from and long-term effects of COVID-19.

True or False

10. A UTI is the most common explanation for a shuffled gait in a person living with dementia.

True or False

Find the quiz answers at the bottom of page 4.

Family Caregiver Tips: Caring for Adult Children

Being a caregiver to a family member or other loved one comes with unique considerations. In many cases, the care recipient and care provider live together, leading to a feeling (or reality) of being on-duty 24/7.

While caring for an aging loved one can be anticipated as our family members get on in years, some families have unplanned circumstances that leave a child in need of care for the whole of his or her life. Tragedies such as an accident in childhood or condition at birth can inflict an individual with an incurable disabling condition. Maybe the adult child suffers from progressive conditions such as

multiple sclerosis or Huntington's disease or has developmental disabilities.

As the family caregiver ages, it will be more difficult to give the same level of care. Your energy level, strength, and other abilities will decline naturally over time as part of the aging process. Be careful if caregiving is taking a physical toll on your health; realize your physical limitations and ask for help. Call your local Agency on Aging to find out about respite programs.

It's important to have conversations as a family to evaluate long-term care decisions for your adult child. Knowing your options before the need arises is the best way to prepare. ➔



RESOURCES

Family Caregiver Alliance

caregiver.org

This website is one of the most reliable and comprehensive sources of information for those providing care for loved ones. In addition to articles, videos, and webinars on just about every possible aspect of the caregiving journey, the site offers online support groups and strategies to connect with other families with similar experiences.

Parents Helping Parents

php.com/adult-child-with-special-needs/

PHP supports and educates families and the community to build bright futures for youth and adults with special needs. Peruse the site for educational and networking opportunities.



Let's Zoom!

In-Service Training During COVID-19

As a safety measure during the pandemic, Hope Hospice has made our **in-service educational seminars available via Zoom teleconference**. We remain a resource to local hospitals, SNFs, board-and-care homes, and assisted living residences for complimentary education about senior-care topics. We want to help you maintain physical distancing at your facility and still offer valuable education to your staff and residents.

Please connect with us to discuss your needs and the logistics of offering these seminars remotely. ➔

Available Topics

- Dementia care
- Pain in the elderly
- Skin care of the elderly
- Fall prevention
- Senior nutrition
- Medication administration
- Respiratory concerns
- MRSA/C-Diff
- Body mechanics
- Hospice education
- Agitation/terminal restlessness
- Advance healthcare directives

For More Information

Please connect with Hope Hospice Director of Outreach, Kari Rayford, LVN, at karir@hopehospice.com or (925) 829-8770 to discuss your team's needs.