

## MEMORY CARE TIP

## Nutrition and Dementia

**P**eople living with dementia generally do not need to follow a special diet, unless they have comorbidities or allergies that have certain requirements. However, since dementia is a progressive condition, care providers will need to become increasingly more involved in food preparation and serving relative to the person's status of decline.

By mid-stage, dementia may cause a person to forget to eat or leave them confused about how to use appliances for food preparation. Even under assisted living or full-time care, a person with dementia needs special attention to mealtimes in order to maintain proper nutrition.

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**Vision problems.** As we age, we naturally experience a narrowing of our field of vision. For a person living with dementia, this process is on overdrive and it may cause them to not see a plate of food in front of them unless they are directly looking at it. Additionally, the ability to detect color and contrast becomes impaired; the person may have trouble, for example, seeing

(See "Dementia" on page 4)



## Best Practices for Successful Mealtimes

**M**ealtimes are important because they provide a welcome break in the day. If it is not too distracting for the person in your care, meals can be eaten with friends or family. It is important that mealtimes be enjoyable, so that the person will look forward to eating.

**First, create a calm environment.** This might mean feeding young children in the home at a different time or location, so that you avoid distractions and too much noise. Similarly, turn off the television and instead play relaxing music, perhaps tunes from a senior person's favorite era.

**Prepare the area** by making sure all items are within easy reach. Supply easy-to-hold eating utensils, such as those with a wide grip. Avoid cuts by inspecting cups and plates for chips that can tear fragile skin.

**Avoid a fussy presentation,** especially for someone who has poor vision. Place the same foods in the same spot on the plate every time (e.g., salad at 1 o'clock, protein at 6 o'clock, etcetera). Use simple plates and bowls, preferably of a solid color. Keep in mind that people with weakened vision may have difficulty distinguishing between items of the same color; for example, mashed potatoes on a white plate may be difficult to see, so a darker plate would work better by providing strong contrast. Vision deficits can also lead to confusion if a plate of food is placed on a tablecloth or place mat with a busy design.

**Consider eating aids** for patients with impaired movement. Online retailers and big-box stores alike carry such items as spoons that swivel for those who have trouble with wrist movement, dishes with high sides that make it easier to scoop food onto a spoon, food-warming dishes for slow eaters, and mugs with two handles.

**Lastly, be patient.** Allow 30 to 45 minutes for eating. If the person feels rushed, he or she may start to associate negative emotions with mealtimes, which can increase care challenges. ➔

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## Tips for Assisted Feeding

**W**hether you are a professional caregiver or a first-time family care partner, feeding an adult person who cannot feed themselves takes special attention. With practice, the activity can go smoothly for you both. Take a deep, calming breath and give these tips a shot:

- Greet the patient with a smile, eye contact, and a simple explanation that it's mealtime. Your engagements need to remain age appropriate. Do not use a "baby voice" or otherwise speak to the person like you would a child. Even when a person has become non-verbal or is extremely incapacitated, they still have emotions, so being treated with respect goes a long way toward fostering a positive relationship between care provider and recipient. It is your duty to preserve their dignity and treat them with utmost compassion.
- Name the food being offered.
- Check food temperature often. The person may not have the ability to tell you if it's too hot or cold.
- Feed at a steady pace, alternating food with drink.
- Be gentle with utensils. A rubber-tipped baby spoon works well.
- Remove a spoon from the person's mouth very slowly. If the person clenches the spoon, let go of it and wait for the jaw to relax.
- Give simple instructions such as "Open your mouth," "Move your tongue," "Now swallow."
- If the person refuses food or spits it out, provide a drink and try again in 30 minutes.
- Between meals, provide a nourishing snack, such as stewed fruit or finger foods. ➡

## Boosting Food Intake When the Appetite Is Poor

Some older adults or otherwise frail individuals struggle with mealtimes due to a lack of appetite. Not eating can contribute to unsafe weight loss, malnutrition, and other health problems. Disinterest in food could be caused by something minor, like a side effect of medication. Or, it could be a symptom of something more serious that needs medical attention. After a doctor has ruled out causes for concern, the caregiver can try some simple tactics to boost calorie intake in a healthy way.

- Offer more food at the time of day when the person is most hungry or less tired. This varies from person to person, so be flexible. Individuals who are living with advanced dementia may be more irritable in the late afternoon or early evening, a situation called sundowning. In this case, breakfast and a lunch are the best times to attempt the larger meal(s).
- If the person won't tolerate a large meal, offer smaller snacks throughout the day instead.
- Some elderly experience a reduction of taste and smell senses. Foods with strong aroma and extra seasoning can be helpful in these cases. However, be aware that some people are extra sensitive to strong odors and may become nauseated if smells are too intense. If you are serving meals in a mixed setting, like an assisted living facility, keep this in mind.
- Increase calorie intake by using milk or cream instead of water in soups and cooked cereal.
- Add saturated fat by using butter, margarine, or olive oil on foods.
- Nut butters are an easy way to add healthy fats and calories, and they're easier to digest than whole nuts. Serve on toast or mix into hot cereal.
- Add nonfat powdered milk, sour cream, or whipped cream to semisoft foods like yogurt, mashed potatoes, soups, and pudding.
- Adding grated cheese accounts for a couple hundred calories per serving.
- Some patients may do better using their fingers instead of utensils.
- Meal-replacement/supplement drinks may have high sugar content and artificial ingredients. Consult with a doctor.
- Rule out dysphagia (see box below).



**DYSPHAGIA** is a term that means difficulty swallowing. It typically results from the weakening of mouth and throat muscles, and it can present worse in people who have certain diseases, including Alzheimer's and cancer. For people with severe dysphagia, getting proper nutrition and/or enough calories is a challenge. It's important to work with a nutritionist to ensure dietary needs will be met. With a specialist's help, you can learn how to make nutrient-rich purées and thickened soups that will have quality ingredients and be of an appropriate thickness for an individual with dysphasia. ➔

## QUICK QUIZ

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

1. People with dementia eat best when a variety of food items are placed in front of them on the table.

True or False

2. A severely disabled person who requires assisted feeding still experiences emotions and should be treated as an adult.

True or False

3. Nut butters are an easy way to add healthy fats and calories.

True or False

4. Offer water-dense foods like melons and tomatoes to increase hydration.

True or False

5. If someone who requires assisted feeding refuses or spits out food, then give up for the day.

True or False

6. Seniors love to engage with young children, so kids should always join them at the dinner table.

True or False

7. Agitation or aggression toward a care provider can be a sign of an unmet medical need, like a UTI.

True or False

8. People with dementia are more prone to having dysphagia.

True or False

9. Determine the time of day when the patient has the most energy or hunger and feed larger meals at this time.

True or False

10. Playing soft music at mealtimes helps create a positive environment.

True or False

*Find the quiz answers at the bottom of page 4.*



food on a plate of the same shade and, thus, think they've finished the meal. If this happens enough times, the person will start to drop weight.

**Communication challenges.** As dementia worsens, the person may become nonverbal and instead rely on facial expressions, grunts, and emotional commotions to express needs. When it comes to eating, be aware that such behaviors may be their way of telling you that the food temperature is not right or that they're just not a fan of what's being served for dinner.

Agitation or aggression toward the care provider can be a symptom of any number of problems that need to be addressed—pain, constipation, and UTIs are common—but simple dislike is also a strong possibility.

When it comes to food, start with known favorites and see if mealtime goes more favorably.

Dysphagia (trouble swallowing) is also a common condition among people living with certain diseases that cause dementia. Read more in the blue box on page 3.

**Avoid distractions.** Individuals with dementia can become easily distracted. Although a care provider shouldn't rush meal consumption, it's important to redirect focus onto the task at hand. Too much activity like eating in a group dining hall, eating with young children at the table, or having excessive background noise may make mealtime more stressful. That said, there's no harm in friends and family joining at the dinner table if it contributes to a positive

experience.

Keeping the table set minimally will help keep the person's focus on their meal. Provide a pre-served plate rather than bringing family-style platters of food items for serving at the table.

**Hydration concerns.** Those living with dementia are more susceptible to becoming dehydrated, as they commonly experience a declining ability to sense thirst.

Care providers can help increase water intake in a couple ways: First, encourage drinking by offering a variety of beverages such as decaf hot or iced tea and water flavored naturally with fruit. Offer water-dense foods like pineapple, melons, cucumber, and tomatoes to sneak in additional hydration. ➔



## Senior-Care Education

**H**ope Hospice is committed to helping our community offer the best care to seniors. Our experts are available to present complimentary educational seminars to professionals in the medical field and to the public. If you oversee a team of care providers or senior living community who would benefit from a refresher on such topics as hospice, best practices in dementia care, or any of the other subjects listed at right, please connect today to discuss your needs. We are available to present in-person at your facility or over Zoom teleconference. ➔

### Available Topics

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

### FOR MORE INFORMATION

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