

### Part 3: Caregiving and Alzheimer's Disease

According to the Alzheimer's Association (2008), Alzheimer's is a progressive and degenerative disease that affects not only the person but their care partners as well. The National Institute on Aging (2008) statistics on Alzheimer's disease reflect that 5.1 million persons in the United States have Alzheimer's disease and the Alzheimer's Association (2008) statistics report that 140,000 in Massachusetts and New Hampshire have Alzheimer's disease. Future statistics are expected to increase due to the fact that the baby boomer generation is advancing in age.

Alzheimer's disease poses significant challenges for both the person afflicted with AD and their care partners (caregivers). Historically, the medical field referred to AD by such terms as organic brain syndrome, senility, and hardening of the arteries. It has not been until recently that these terms have come to be associated with what we now call Alzheimer's disease. While there is no definitive way to formally diagnose Alzheimer's, with the exception of a biopsy of the brain at death, MRI and CAT scans of the brain can assist health care professionals in the medical treatment of Alzheimer's.

I have dealt with Alzheimer's disease on both a professional and personal level. I agree with professionals when they term Alzheimer's as being the "long good-bye" and a "maze of endless confusion". Alzheimer's disease poses significant challenges to both the person afflicted with the disease as well as their care partners. Presently, there is no cure for Alzheimer's but there are

medication and psychosocial interventions available to assist the person with Alzheimer's as well as their care partners.

Dr. Paul Raia and Joanne Koenig Coste are staunch advocates of the habilitation therapy model which is a psychosocial intervention which seeks to capitalize on the remaining skills of persons afflicted with Alzheimer's disease. This method specifically focuses on validating patient's emotions: maintaining dignity, creating moments for success, and utilizing all of the patient's remaining skills (Koenig-Coste, 2003). Dr. Raia's and Joanne Koenig Coste's main premise is that while the behaviors of Alzheimer's patients cannot change, the emotions behind them can by practicing habilitation therapy. The four tenets of habilitation therapy include: make the physical environment work, focus only on remaining skills, live in the patient's world, and enrich the patient's life.

All caregivers in the Suffolk County Caregiver Alliance have been trained in the tenets of habilitation therapy and one other caregiver advisor and myself have taken the habilitation therapy course through the Alzheimer's Association. Any one of my colleagues within the Caregiver Alliance and I would be willing to assist you, answer your questions, and provide you with referrals and resources on Alzheimer's disease. Please feel free to contact anyone of us through Boston Elder Information at 617-292-6211. There are also care advisors who are bilingual in several languages and persons available to help with interpretation.

The Caregiver Alliance of Suffolk County provides caregivers with assistance by establishing service plans as well as identifying services, referrals, and resources that will best meet your individual needs. The services provided by the caregiver advisor are free to all caregivers who live in Suffolk County. In addition, caregiver advisors also make appropriate referrals as needed for home care services (personal care services and homemaking services) that assist caregivers with day-to-day household and personal care activities for their loved one.

Please feel free to visit the Caregiver Alliance of Suffolk County website at <http://www.caregiveralliance.org> or call the Boston Elder Information Hotline at 617-292-6211 to learn more about services that will make a positive difference in your role as a caregiver.

Next month's featured article will focus on caregiver resources.