

Attentive caregiving: Discovering and reporting changes in your elders is an important factor in preventive care

Current, evidence-based training and education

Your knowledge and attentiveness can make the difference between life and death... and much suffering

Published by Freiberg Press Inc.,
PO Box 612, Cedar Falls IA 50613.
Ph: 319-553-0642.

www.care4elders.com

Publishers of:

- Nurse Aide/VIP
- Current Nursing in Geriatric Care
- Alzheimer's Care Guide
- Current Activities in Longterm Care

For over 20 years:
"Excellence in Caregiver Education"

Notice: We attempt to be as accurate as possible, but the information contained here should not be implemented without checking current guidelines from your own medical and supervisory personnel.

Copyright 2009, by Freiberg Press Inc. It is against Federal law to reproduce any part of this newsletter in any form without permission. Subscribers can make reprints for use within their individual facilities.

Your role as a frontline caregiver places you in a critical position relative to discovering important changes in your elders. And reporting them immediately.

Your alert actions on spotting these changes early-on can be extremely significant in helping them avoid needless pain and suffering.

This is because, among all healthcare workers, you are the ones in closest and most frequent contact with them.

This means you may well be the most likely caregivers to be the first to spot potential problems with their health.

That is why you need to know about the most common diseases and other conditions in your elders, and symptoms that you can recognize early-on... before they become much more serious.

By identifying and immediately reporting such changes to your supervisor, you make

it possible for your elders to receive prompt treatment... and avoid complications that might lead to pain and suffering, or even put their life in danger.

The fact is, your knowledge and attentiveness can make the difference between life and death.

In their book, *Paraprofessionals in Aging, A Guidebook for Those who Care for Older People*, professors Kathryn Braun and Michael Cheang, of the University of Hawaii, write: "Successful caregivers observe and report what they see.

"They notice changes in the elder, and they share their observations with the health professionals who can help interpret them."



Once you have gotten to know the elder in your care, it's important that you watch for certain changes in their mood, behavior, and functioning. Your attentiveness and compassion can make the difference between life and death, and allow them to enjoy a happier and longer life.

♥istockphoto-app

So, you need to be alert for anything unusual your elder has, such as bruises that weren't there before, or physical changes, such as holding an arm like it was hurting.

Also, listen carefully to what the elder says. They may complain about not being hungry, for example, or about feeling un-well every time they take a certain medicine. These situations may indicate a health problem.

And the sooner you report them to your supervisor, the greater the chances they can be successfully resolved before they become serious problems.

Here is a list of the most common changes in body functions, behavior, and mood that should alert you for a possibly developing health problem.

Record your observations in a notebook. This will come handy, especially if it will be a while before you can report to your supervisor.

Excessive thirst and drinking water. This can be a sign of worsening diabetes, that needs immediate attention. Other signs of this include: excessive hunger and blurred vision.

Urination problems. Excessive urination may be also be due to worsening diabetes.

Also, very frequent urination in men may be due to an enlarged prostate, and an increase in this frequency may mean a worsening of his prostate problem.

Numb face, arms, or legs. If accompanied by vision and speaking difficulties, these can be the signs of stroke, especially if it comes on suddenly.

Alert your supervisor immediately. Other signs of stroke include sudden severe headache, difficulty walking, dizziness, and loss of balance.

Also, numbness of the hands and feet can be signs of a serious circulation problem.

Circulation problems, especially in those with diabetes, are a leading cause of amputation of the hands and feet, so you need to be especially vigilant for this type of thing in your elders with diabetes.

Your alertness may save them from a very serious health situation, including death.

Worsening of shortness of breath. Your elders with certain types of lung and heart conditions may regularly have shortness of breath.

This is true if they have COPD, heart failure, asthma, emphysema, and other lung conditions.

Often, these elders need an oxygen tank to help with their breathing.

In cases where you notice that the shortness of breath is worsening... either very suddenly or gradually... you should also notify supervisors, since that can be a sign that the elder's ongoing disease or condition is getting more serious.

Where the shortness of breath worsens suddenly, and is accompanied by chest pain that irradiates to the neck and shoulders, notify supervisors immediately, as the elder may be having a heart attack or other serious situation.

Increase in bladder/bowels accidents. Accidents may occur, occasionally. However, if you notice that they are getting worse, or have become a situation involving diarrhea, notify medical personnel right away.

Alert your supervisor if you spot any of the following in your elders:

- Higher than normal temperature or blood pressure.
- Excessive thirst/drinking.
- Urination problems.
- Bladder/bowels accidents or diarrhea.
- Numb arms, legs, or face.
- Difficult breathing.
- Blurred vision.
- Complaints of any pain.
- Poor appetite.
- Excessive tiredness.
- Dizziness.
- Confusion and forgetfulness.
- Complaints of loneliness.
- Uncontrolled crying.
- Skin injuries
- Any worsening... such as pain, redness or oozing... of a sore, wound, or surgery site.
- Redness or irritation at a catheter or ostomy site.
- Complaints of headache
- Evidence or complaints of falling.
- Sleep problems.
- Swelling of the hands or feet.
- An itchy, painful rash

Increasingly difficult hand, wrist, or knee movements accompanied by pain. This can indicate that the elder's arthritis may be worsening.

Some forms of arthritis can flare up, and cause permanent joint damage if not immediately treated.

Often, this is accompanied by redness, swelling, and warmth around the joints.

Another possibility: a fall.

Answers to quiz

- | | | |
|----------|------------|-------|
| 1. T | 6. a,b,c,d | 11. T |
| 2. T | 7. F | 12. T |
| 3. a,b,c | 8. F | 13. T |
| 4. T | 9. a,b,c,d | 14. T |
| 5. F | 10. F | 15. T |

Dizziness. Dizziness is relatively common in many elders, and often no cause can be determined.

But, if it comes on suddenly, and is severe, it could mean a serious health problem, such as a stroke.

And, even in cases of relatively routine, ongoing, dizziness, the elder may be at substantially increased risk of falling, so this, too should be reported.

Falls are a leading cause of injury and death in elders.

Skin injuries. Skin injuries are a deadly situation with elders.

Even minor skin injuries can develop into a pressure ulcer, and a huge 90 percent of elders who develop a pressure ulcer within three months of being admitted to a facility die, according to research.

It's therefore important that you check your elders' skin for bruises and tears.

If the elder has diabetes, the situation is even worse, as diabetes often causes healing to be very difficult, and even small sores can eventually get so serious that they lead to amputation.

Also, skin injuries may also indicate that the elder has had a fall.

Shingles. A reddened skin rash that is very sensitive to touch, and is itchy or painful, may be due shingles.

And here's the problem with shingles: it can damage the nerves so severely, that the elder may have a lifetime of severe, often debilitating, pain that destroys their quality of life.

This condition is called postherpetic neuralgia (PHN) and without early treatment it may cause very severe pain for years. Over one-third of elders who get shingles, also get PHN, if treatment is not prompt.

Very early treatment, within the first few hours of discovery, with anti-viral medications, can prevent this serious shingles condition from developing.

Many caregivers, including physicians, often do not take shingles seriously enough, or don't diagnosis it early, and the proper medication is not given soon enough.

So take any rash seriously, and become an advocate for your elder in getting proper treatment.

Poor appetite and tiredness. These are common in people with depression, COPD, and cancer. If you notice an increase in these symptoms, notify medical personnel.

Confusion and forgetfulness. For example, your elder can no longer find their way back to their room, asks the same question over and over, or has forgotten their children's names. These can be signs of a stroke, or early signs of dementia.

Loneliness. Older persons may avoid company because they feel depressed, or suffer from something that embarrasses them when other persons are present. This is often the case with elders who cannot hear or see well, those with incontinence, or elders with early dementia.

Depression and anti-social tendencies can be helped considerably, by getting proper attention to the problem, as soon as possible.

Never be discouraged

As a young man Daniel Webster, who would eventually become a leading American statesman, was about to begin his study of the law.

Well-meaning advisers suggested he not to go into the field, noting that it was already a crowded profession.

Webster, however, replied, "There is room enough at the top!"

No elder should be left alone, and unhappy, without attempts being made to solve their problems.

Uncontrolled crying. This is common in depressed persons, who also tend to have feelings of hopelessness, and lack of interest in things they used to enjoy. If untreated, depression may have severe complications, including suicide. And, for sure, this type of depression can completely destroy the quality of life of the elder in their later years.

In most elders, depression and loneliness can be successfully treated.

Eyesight problems. Elders can suffer from a variety of eyesight problems, including glaucoma and macular degeneration... both of which can cause blindness if not treated early on. You need to watch the eyesight of your elders with diabetes very carefully, because diabetes can cause blindness if early treatment is not initiated.

Things to watch for include complaints of fuzzy or blurry vision, or the inability to see things from the sides.

Do not delay in reporting these symptoms, as early treatment can often prevent a worsening of the disease, and blindness.

Problems with hearing. Improper hearing is one of the main causes of a reduced quality of life for elders.

It can cause them to retreat from your social activities, and lead to an isolated and lonely life for the elder, and possibly even depression.

Many hearing problems can be corrected, or other special measures can be used to help the elder cope with the disability.

Do not assume that poor hearing is just a normal part of aging, and that nothing can be done.

Help them open up

And here's an important tip: it's not as easy as you might think to spot many of these potential problems in your elders.

One of the biggest challenges, is that many elders do not want to mention their problems, and will attempt to keep them a secret.

Two major reasons for this, are that they do not want to be a bother to you; or that they are simply afraid to talk about their problem. Research shows that even those elders in severe pain, are often reluctant to talk about it.

So, in order to properly keep an effective ongoing assessment of your elders and their potential health situations, you need to become a skillful conversationalist so that you can get them to tell you when they are having problems.

This is an important caregiving skill: It may save an elder's life, or prevent years of suffering.

Often, it's just a matter of simply asking "How are things?"

But, when that doesn't work, you need to pursue things further.

Your elder is more likely to tell you about their concerns if you show that you really care about them. And there are some things you can do to show this:

- Be friendly and cheerful when you enter their room. Smile, and ask how they are. Show them that you care about their welfare
- For longer conversations, sit down, and directly face them when speaking. This shows that you are truly interested in what they have to say.
- Hold their hands, look them in the eye, and smile.
- Call them by their name.



Showing a genuine interest in your elders through interested and compassionate conversation... with good eye contact, and using their names and showing them respect... is a must if you're to become a good reporter on their changing conditions. Reason: Many elders do not want to talk readily about their problems, and will keep them a secret if possible.

(AOA photo.)

- Ask them directly how they're feeling, and if everything is okay, if they have any pain or problems that they'd like to talk about, and so on.

If you suspect they have a problem, but do not want to admit it, gently ask them for more specific information about their situation.

Note: Don't expect to get all your answers at once.

You may need to make several attempts, and get to know them quite well, before determining that they do have some sort of problem that needs further investigation.

Be compassionate in your caregiving

"Compassionate communication" is an important factor in successful caregiving.

It means talking with your elders in the same way as you would with a loved family member, for example: with a caring and gentle tone of voice, which makes them feel loved and safe, and that you have a genuine interest in their welfare.

"A look, a touch, a joke, an acknowledgement that maybe you're not having such a great day either... that momentary connection, whether it's just visual or just fleeting, makes all the difference," reports Darshak M. Sanghavi, MD in *the Joint Commission Journal on Quality and Patient Safety*.

Compassionate communication also means showing consideration for the person's feelings.

For example, the elder may feel embarrassed to talk about a certain problem.

Let them know that you understand what they are going through that you want to help them... and perhaps they will find the confidence to talk about it.

Lastly, consider that elders have needs that younger people don't have.

It may take longer for them to understand and think, so you need to talk slowly, maybe repeat yourself a few times, and allow them time to respond.

"Commit yourself to a dream ... Nobody who tries to do something great, but fails, is a total failure. Why? Because he can always rest assured that he succeeded in life's most important battle—he defeated the fear of trying."—Robert H. Schuller

Many elders do not want to mention their problems, and will attempt to keep them a secret

Good advice: Always try to start a conversation with your elders... even if they don't seem to want to talk. This is the only way you can get important medical information from them.

They may need a little bit of persuasion, now and then, and may have difficulties hearing or seeing well.

Being sensitive to such needs is an all-important part of compassionate communication.

Recognizing changes in dementia elders

Elders with dementia have additional problems, which further challenges their ability to communicate.

For example, they may be in pain but cannot tell you because they cannot talk, or do not even know that they are in pain.

In these elders, be alert for things like frowning, grimacing, fidgeting, and pulling away, as well as not wanting to be touched... or such things as sweating, and shaking. These can indicate the presence of pain.

Pain a serious problem

And pain is a serious problem in elders with dementia.

Research studies continually show that a high percentage of dementia patients are in unresolved pain, and often their caregivers don't even know it.

It's also important to look for sudden physical and behavioral changes that can be a sign of delirium, which can be serious, and need immediate treatment.

Also, nearly 90 percent of people with dementia develop delirium, but because the symptoms of this condition are so similar to dementia, it often goes undetected.

In one study, certified assistants didn't recognize delirium in 88 percent of their elders with dementia.

So, if the person in your care suddenly appears more confused than usual, has more frequent hallucinations and delusions, is particularly sensitive to light and noise, and starts slipping in and out of consciousness, you should call your supervisor immediately.

"Compassionate communication" is an important factor in successful caregiving and reporting.

Follow through

Whatever your elders' problems, once you have reported your observations, you should follow through to make sure that the necessary steps are taken.

Your compassionate caregiving, and attentiveness to changes in your elders' functioning and behavior are paramount, because they allow them to have a much better quality of life as they age.

And by observing and reporting what you see, you may gift them with a longer and happier life.

The best advice:

- **Be alert and caring.**
- **Get to know your elders and their health conditions.**
- **Report any suspicious changes in their medical condition, regardless of how minor they may seem.**

Watch for shingles in your elders

You should notify medical personnel immediately, at the very first sign of shingles.

Reason: Early treatment, with antiviral drugs, can help prevent a very serious condition from developing, called post-herpetic neuralgia (PHN.)

One out of three of those elders who get shingles get PHN.

And, its pain can be devastating to them, last for years, and destroy their quality of life. The pain can be so severe that even the gentlest touch or breeze can feel excruciating.

Immediate attention is necessary, as the antivirals don't work unless given in the early stages of a shingles attack... within 72 hours.

Shingles occurs when the chickenpox virus, which has been lying dormant in the body for decades, suddenly comes back to life and attacks certain nerves.

The National Institutes of Health (NIH) reports that the major sign of shingles is a painful, itchy red rash with fluid-filled blisters, which generally appear on just one side of the body or face.

The rash looks similar to chickenpox, and can last from 3 to 5 weeks.

The NIH says that 1 million Americans get shingles each year, so it's fairly common, and caregivers should be on the lookout for it, in order to get early treatment.

Also note that a shingles vaccine is now available, which studies show can reduce the pain of shingles and PHN.

The NIH recommends that all of those age 60 or older, get the vaccine.

Always remember there are two types of people in this world: Those who come into a room and say, "Well, here I am!" and those who come in and say, "Ah, there you are!" —Frederick L. Collins

Quiz yourself

Reporting changes in your elders' medical conditions

Major objectives:

- To understand why recognizing and reporting changes in your elders' mood, functioning and behavior is important.
- To learn which changes, in particular, you should look out for.
- To understand the importance of asking your elders about their problems.
- To learn what to watch for in elders with dementia.
- To understand the importance of compassionate communications in caregiving.

- 1. True, False.** Often, elders will not readily tell you if something's wrong, because they are afraid, or don't want to be a bother.
- 2. True, False.** Blurred vision, drinking excessive water, increased hunger and frequent urination may indicate that your elder's diabetes is worsening.
- 3. You should alert medical personnel if:** (Check all that apply.)
 - a. The elder can't breathe and has pain in their chest.
 - b. Has numbness of legs, arms, hands, feet or face.
 - c. Has developed a skin sore.
- 4. True, False.** A worsening shortness of breath can be a serious symptom that needs reporting immediately.
- 5. True, False.** Something as simple as a red, painful rash probably does not need to be reported, as it will probably soon go away.
- 6. Which one of the following should be reported to your supervisor?** (Check all that apply.)
 - a. Increase in joint pain and redness.
 - b. Dizziness.
 - c. Increase in bowel/bladder accidents.
 - d. Skin injuries.
- 7. True, False.** Since crying and loneliness are common with many elders, they do not need to be reported.
- 8. True, False.** It is recommended that you not ask your elders directly if something is wrong, as they may provide confusing answers.
- 9. Compassionate communication means:** (Check all that apply.)
 - a. Using a gentle tone of voice.
 - b. Respecting their feelings while speaking with them.
 - c. Speaking slowly, repeating things if necessary.
 - d. Looking them directly in the eye and showing interest when talking to them.
- 10. True, False.** You can ignore sudden changes in elders with dementia, as they probably are just the symptoms of the disease getting worse.
- 11. True, False.** An alert caregiver, who spots early changes in an elder's eyesight, may possibly prevent that elder from becoming blind.
- 12. True, False.** Skin injuries and sores can become deadly and life-threatening in elders, so always need reporting.
- 13. True, False.** Numbness of the hands and feet can mean that a circulation problem is present, which could lead to amputation if not reported promptly.
- 14. True, False.** Problems with hearing should always be reported, since poor hearing is a major cause of depression, isolation and a poor quality of life in elders.
- 15. True, False.** Compassionate caregivers should always be very alert, and very caring, and report anything suspicious, regardless of how minor it may seem.

Name _____

Date _____

Score _____