

What is BPSD?

Behavioral and Psychological Symptoms of Dementia (BPSD) refer to a range of noncognitive symptoms and behaviors that can occur in individuals with dementia.



What are some of the symptoms of BPSD?

- Agitation: Restlessness, pacing, and constant movement.
- Aggression: Verbal or physical aggression directed towards oneself, others, or objects.
- Wandering: Aimless or repetitive walking, sometimes leading to disorientation or safety concerns.
- Anxiety: Excessive worry, fear, or unease.
- **Depression:** Persistent sadness, apathy, or withdrawal from social activities.
- Hallucinations: False perceptions, often involving seeing, hearing, or feeling things that are not there.
- Delusions: False beliefs, such as paranoia or suspicions about others.
- Repetitive Behaviors: Repeating words, phrases, or actions over and over.
- **Sundowning:** Increased confusion, agitation, or anxiety in the late afternoon or evening.



Potential Causes of BPSD?

- Pain or Discomfort: Individuals with dementia may have difficulty expressing physical discomfort, leading to frustration and agitation. Addressing pain through medication or non-pharmacological methods is essential.
- Unmet Needs: BPSD can result from unmet physical or emotional needs, such as hunger, thirst, loneliness, or a need for stimulation. Caregivers should ensure these needs are met promptly.
- **Communication Difficulties:** Dementia often impairs communication skills, causing frustration when individuals cannot express themselves or understand others. Effective communication strategies can reduce this frustration.
- Environmental Factors: Overstimulating or unfamiliar environments can trigger BPSD. Creating a calm, familiar, and safe environment is important.
- Medication Side Effects: Some medications used to manage dementia symptoms may contribute to BPSD. Regular medication reviews with a healthcare professional are essential.



Strategies for Preventing or Managing BPSD?

- Create a Structured Routine: Establishing a predictable daily routine can provide
 a sense of security and reduce anxiety. Consistency in mealtimes, activities, and
 sleep patterns can be beneficial.
- Identify Triggers: Caregivers should observe and identify specific situations or factors that trigger BPSD. Common triggers include loud noises, crowded spaces, or certain activities. Once identified, efforts can be made to avoid or minimize these triggers.
- Use Redirection Techniques: When an individual with dementia becomes agitated or upset, redirecting their attention to a different, calming activity or topic can be effective. For example, if someone is upset about leaving the house, engage them in a conversation about a favorite hobby.
- Non-Pharmacological Interventions: These can include music therapy, art therapy, aromatherapy, or sensory stimulation to soothe and engage individuals with dementia.



BPSD final thoughts:

- Communication Strategies: Use clear and simple language, provide visual cues, and give individuals with dementia time to respond. Avoid arguing or correcting their reality. Validate their emotions and feelings.
- Engage in Physical Activity: Regular physical activity can help reduce agitation and restlessness. Exercises tailored to their abilities, such as gentle stretching or short walks, can be beneficial.
- Medication Management: In severe cases, when non-pharmacological approaches are insufficient, healthcare professionals may consider medications to manage specific BPSD symptoms. However, this should be done cautiously and under close supervision.
- Family and Caregiver Education: Educate family members and caregivers about dementia and BPSD, teaching them to recognize triggers and employ appropriate interventions.

Thank you! Let's discuss your ideas...

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