

**How well is their  
brain burning  
fuel?**

**Red – 100%**

**Yellow – midrange**

**Light Blue –**

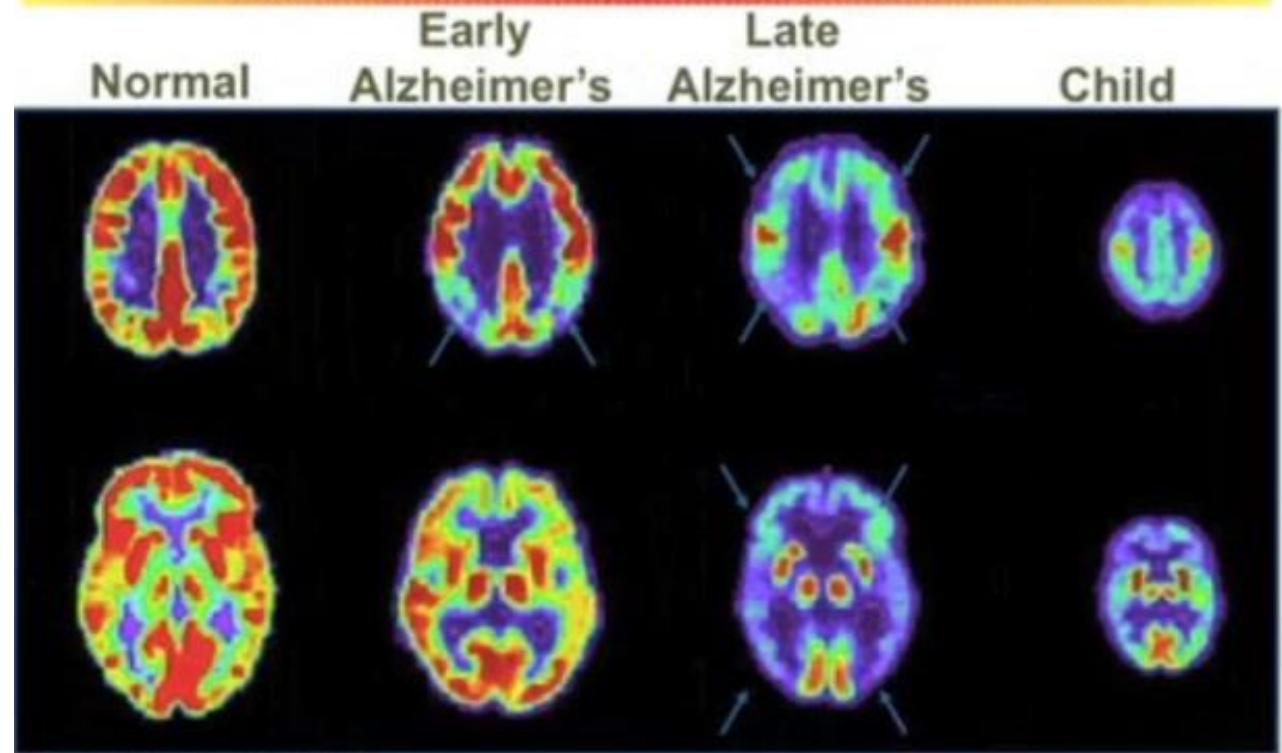
Burners on but  
you haven't

applied any gas

**Dark Blue – Zero**

burn = no brain  
cells in those  
areas.

## Positron Emission Tomography (PET) Alzheimer's Disease Progression vs. Normal Brains



G. Small, UCLA School of Medicine.

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# Left vs. Right – Brain Function

## Rhythm

- **Retains on the Right**
  1. Automatic social chitchat
  2. Special Skills – Forbidden words (vocabulary you are not allowed to use in public. i.e.: swear words, sex talk, racial slurs, ugly words for other groups (Race, gender, etc. Bad news? Race is visual), ugly words: fatso, retarded, ugly, etc. These words are “Preserved” words.
  3. Prayer, Poetry and Music
  2. Rhythm – they get and give it; Even if no content.

## Language

- **Loses on the left**
  1. Vocabulary
  2. Comprehension
  3. Speech Production

## Normal Aging

- Slower to think
- Slower to do
- May hesitate more
- More likely to “look before you leap”
- Will know a person but not their name
- May pause when word finding
- New data reminds me of old data

## Not Normal Aging

- Unable to think the same
- Unable to “do” as I did before
- Unable to start tasks
- Will get stuck in a moment of time
- Unable to “think” things through
- Unable to successfully recall a person’s identity
- Words won’t come even with visual, verbal or touch cues
- Will be confused about past and present
- Personality and/or behaviors will be different

# Hand Under Hand – Guidance and Assist

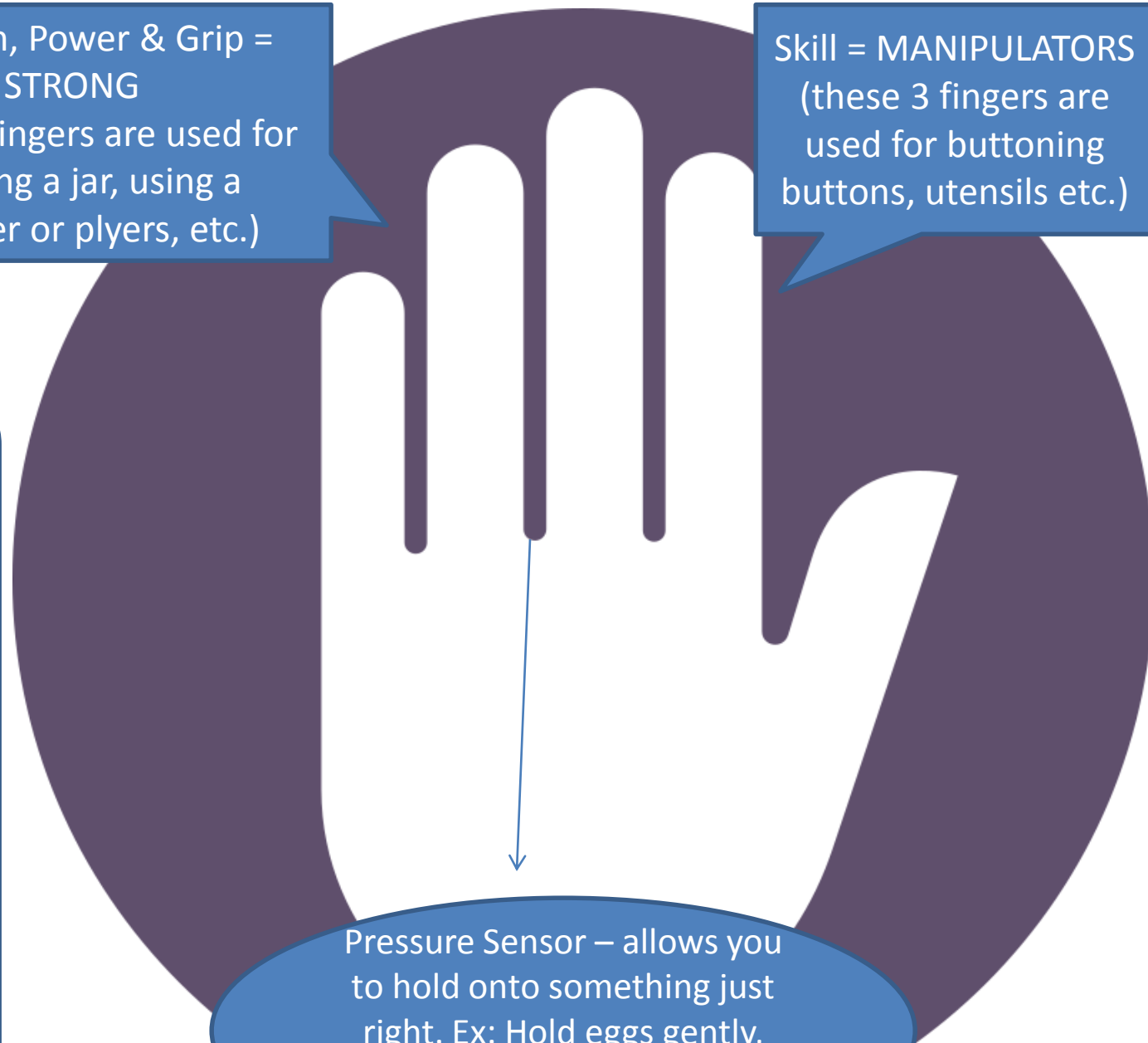
- Hand Under Hand requires doing “**With**” someone not doing “**To**” someone.
- Lastly, be patient. This takes time.
  - Because a new brain synapse must be created, **it takes approximately 6-8 weeks practicing a new behavior to change a habit.** This mean YOU the CAREGIVER!

*“It’s not about what was... It’s about what can be... You did the best you could with what you knew... but come tomorrow you have new skills.” –Teepa Snow*

Strength, Power & Grip =  
**STRONG**  
(these 2 fingers are used for  
opening a jar, using a  
hammer or pliers, etc.)

Skill = **MANIPULATORS**  
(these 3 fingers are  
used for buttoning  
buttons, utensils etc.)

Dementia  
will rob you  
of  
**SKILL**  
before it  
will rob you  
of  
**STRENGTH**



Pressure Sensor – allows you  
to hold onto something just  
right. Ex: Hold eggs gently,  
Pull a rope hard)

Rub this area to reduce stress.

# What is Hand Under Hand?

Dementia can affect the functioning of many body systems such as the ability to carry out everyday tasks and communicate needs and preferences. Eating food or enjoying a beverage becomes a difficult task for many people in the late stages of dementia. As a person living with dementia loses cognitive and functional abilities, feeding him or herself becomes nearly impossible, and it is up to a healthcare worker or family member to help the person living with dementia eat. The hand-under-hand method involves placing your hand under the person's hand respectively, and gently moving the utensil into the patient's mouth. The direct hand feeding technique involves holding the utensil and spooning the food directly into the patient's mouth. You can help people living with dementia maintain their dignity and well-being in a very vulnerable stage of life with this disease."

# Hand Under Hand – Guidance and Assist

- Being on the person's dominant side and lining up with their midline makes a difference when eating.
- Proprioceptive input to the shoulder or to the elbow joint while holding plate decreases mistakes in Care Partnering.
- Don't be a "Beach ball" by throwing things toward someone with Dementia.
- Be the "Skill" and they "Movement".
  - They're brain relaxes figuring out what we are doing and why and where we're going and why.
  - This skill allows the Care Partner to help the person living with dementia's brain understand a task that it can no longer figure out.

# Hand Under Hand – Guidance and Assist

- If the person you are caring for is left handed, it is more likely to be their dominant side. When assisting them, sit on their left side using your left hand to connect in the Hand Under hand position.
- Place your other hand onto their shoulder when assisting (“Closed circuit” more secure to the person you are caring for. This quiets the nervous system. Tricks the brain to tolerate a fair amount of movement).



# Dementia

- 50% of people with early signs of dementia have no awareness they are affected.
- Another 50% of people living with dementia have awareness that something is happening to them. They will typically respond 1 of 2 ways: React with anger related to anxiety or withdraw (Fight or Flight).

# Understanding Dementia

- Taking a “time-out” will improve a Caregiver’s thinking ability. It’s important to respond, and not to react, to dementia.
- Know your agenda but don’t show your agenda.
- Do not reinforce to them that they are losing it cognitively.
- Reality orientation has no place in Dementia care because the reality is their brains are dying!

# Understanding Dementia

- When surprised by unexpected behaviors, it is important to “Pause” and “Breathe” before reacting.
- When seeing a new behavior (ex: brushing teeth with a brush rather than a toothbrush) you may begin the 5 stages of grief:
- **Denial** – “She knows how to brush her teeth, what is she thinking?”
- **Anger** – “Oh come on! What is she doing?”
- **Bargaining** – “Maybe I’ll just tell her”
- **Sadness** – “Oh my God...”
- **Acceptance** – “I am what I am, I’m me but I’m different.”
- *It is okay and important to grieve the loss of the person you are caring for. However, this needs to happen away from, not in front, of them.*

# Reacting to Behavioral Expressions

- Notice if you are a person who points out the “Mistakes” of someone living with Dementia.
- Change this habit!
- They are doing the best they can with what they have left.
- Stop at 6ft, say their name with your hand extended. Give them a moment to break their attention from what they are doing to acknowledge you. Once they take your hand stand to their dominant side.
- Offer them something else. Remember the value of substitution.
- **APPROACH. CONNECT. REDIRECT.**

# Reducing Falls in Dementia

- 9 out of 10 people with dementia will develop monocular vision and, therefore, lose depth perception.
  - If a person with Dementia is observed trying to pick something up from the floor, gently (do not startle them by calling out their name) pick up the item off the floor or kneel down to their level and offer them your hand. “Okay... something is there let me pause and think about it”.
- “A Care Partner can actually reduce the risk of falls by approach and intervention”.

# Reducing Falls in Dementia

- Why are they trying to get up?
- Could it be what they're...:
  - What they're seeing, hearing, feeling or not feeling.
  - What they are tasting or smelling?
  - What is driving their behavior

There are 5 physical and emotional “Unmet” needs that typically drive the behavior of someone living with Dementia. Our job is to figure out what they are.

# Key Steps to Remember with Cueing and Helping

When approaching someone living with  
Dementia remember:

- **Visual** first
- Then add the **Verbal**.
- And only when you have those connection,  
**Touch**
- **NO TOUCHING FIRST = Bad Outcomes**

# Dementia

- Create a relationship in the moment and let go of the old one.
- Be willing to have a different relationship with the person.
- Be willing to understand them in their new stage of Dementia.

*“I am who I was but I’m different” – Teepa Snow*

