



Dementia and the Holidays

As fun as the coming holidays can be, they can be packed with hazards for people with dementia. It means caregivers and families need to be especially vigilant about the safety.

Many decorations look like food and may even smell like the real thing. For instance, a Christmas tree decoration that looks like a gingerbread man may be even scented with gingerbread smell—making doubly appealing to try to eat. Other small decorations can be choking hazards. Artificial fruits, vegetables and nuts can look very real.

Candles that smell like pumpkin or apple pie can be a fire hazard if tipped over if a person reaches into it. Poinsettia leaves, contrary to popular belief, are not poisonous—but they will make a resident nauseated if he or she eats them.

People with dementia need routines—the same activities, in the same place, at the same time. Families should consider this carefully before deciding to take a loved one home for a holiday. The excitement, the car ride, change in surroundings and many people talking can cause the confused person with dementia to become agitated or upset.

Here are some tips for family members planning to take a loved one home for a holiday.

PLANNING

- Plan ahead. Let the facility staff know several days ahead so they have time to obtain medications and clothes.
- Allow extra time for everything, don't rush the person.
- Try to keep as much as possible to their daily routine.

DECORATIONS

- Use ribbon instead of sharp hooks when hanging decorations.
- Holly and mistletoe can be poisonous and berries pose a choking hazard.

FESTIVITIES

- Begin new traditions by letting another family be the host but try to go to a place familiar to your loved one.
- Assign tasks to other family members so you do not become overloaded and stressed, which in turn causes your loved one to be stressed.
- Provide a nap before festivities. If you know the day will be long, you may want to attend only the most important part of the event.
- Plan for a quiet place for your loved one to go to if he or she becomes overwhelmed.
- Avoid alcohol.
- Be aware of their diet and diet restrictions. Cut up food into small bites.

(OVER)

VISITORS

- Let your loved one know who is coming to visit.
- Have visitors and family call ahead to determine best time to visit.
- Small groups of visitors or family is advisable. Have them wear name tags as this might help with recognition.
- Reintroduce yourself as necessary. “Mary, my name is Betty.” And when she asks, “Are you my granddaughter?” say “yes” and shake her hand and act very comfortable about this introduction.
- If your loved one begins talking about the past, try not to reorient him or tell him he is wrong. Enter his reality and live his truth. Ask about the past memory.

ACTIVITIES

- Reminisce about the past.
- Play holiday music familiar to your loved one.
- Read holiday cards aloud.
- Stuff stockings, watch a holiday video, look at family slides or pictures or albums, read scriptures, etc.

THE KITCHEN

- Monitor your loved one while in the kitchen.
- Give your loved one task to help with baking or decorating. Try baking cookies, making pudding, folding napkins, polishing silver, etc.
- Always check the microwave before turning on in case something was put in that is flammable.
- Check all trash cans before throwing out garbage

SHOPPING

- Don't leave your loved one in the car or in the front of the store. If you can't take them in with you, try to arrange for someone to stay with your loved one.
- Shop during hours when stores less crowded.
- Dress your loved one in a bright yellow shirt which is easy to see if you become separated from your loved one. Be sure they have a purse or wallet with identification.
- Shop in smaller stores rather than the mall.

TRAVEL

- People with dementia should never travel alone. Hire a personal care aid to travel if a family member is unable to accompany the resident.
- Be aware of balconies and other hazards in hotels.
- Travel may not be appropriate even with a companion if the person has:
 - Consistent disorientation or agitation in familiar settings
 - Wanting to go home when away from home on short visits
 - Delusional, paranoid, aggressive or disinhibited behavior
 - Problems managing continence
 - Teary, anxious, withdrawn behavior in crowded, noisy settings
 - Agitated or wandering behavior

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