Difficulty with Eating

<u>Id</u> entify the Problem	PROBLEM: Difficulty with Eating (including chewing, swallowing, dental concerns)
	GOAL/EXPECTED OUTCOME: To reduce difficulty with eating
<u>E</u> ducate	ASSESS FURTHER:
Yourself	Understand the possible triggers of the problem:
	 Is the person having a side effect of a medication that affects hunger?
	 Is the person experiencing any pain or illness? Is the person constipated?
	 Does the person have any mouth discomfort, such as painful gums, dentures not fitting right, etc.?
	Is the person really tired at meal time?
	Is the person's mouth dry?
	Are there too many steps associated with eating?
	Does the person have difficulty with chewing?
	Does the person have trouble seeing his/her food? (The food might be the
	same color as the plate and blend in
	 Is the person eating in a place he/she does not recognize?
	Are there too many distractions or too much noise around the person?
	Does the person not remember to stop and eat?
	Understand the possible meaning of the problem to the person with Alzheimer's:
	Is the person embarrassed to be fed by someone else?
	Is the person frustrated or overwhelmed?
	Understand the possible meaning of the problem to the caregiver:
	Is the caregiver frustrated?
	Is the caregiver worried?
<u>A</u> dapt	TEACH PROBLEM-SOLVING STRATEGIES TO CAREGIVER:
Problem solve with interventions and actions	Make mealtimes simple, relaxed, and calm
	Make sure the person is comfortable
	Allow ample time for eating
	Make sure the person's lips are not dry; use ChapStick as needed
	If the person wears dentures, make sure they are properly in place
	Preparing the eating area
	 Make sure the plate is a different color from the food
	 Try to avoid patterns on placemats, plates and tablecloths. They can
	be distracting
	 Increase lighting in eating area
	 Reduce the noise and distractions around the person
	Make eating simple. Try these options:
	 Serve only one food at a time
	 Use bowls instead of plates

Standardized Care Plans have been adapted from the Alzheimer's Disease Coordinated Care for San Diego Seniors (ACCESS) Project

- o Try setting the area with only utensils that are needed for the meal
- o Plastic utensils may be too light and might break. Try to avoid them
- o Use bendable straws or cups with lids
- o Serve finger foods that are easier for the person to pick up and eat
- Sit in front of the person when helping with eating. Use simple, gentle words
- For over-eating
 - Make sure the person is not sitting around with nothing to do. Try redirecting to activities that the person enjoys
 - o Try 5 or 6 small meals a day
 - Have healthy snacks available, such as apples, carrots, etc.
- For under-eating
 - o Talk with the doctor about possible illness, pain, or medication affects
 - o Check with the doctor about supplemental drinks, such as Ensure
 - o Offer the person a glass of juice before the meal to increase appetite
 - Make sure the person is getting enough exercise
 - Try to make foods the person likes
 - Try feeding all of one food before moving to the next. Some people get confused by the change in texture or taste
 - o Be flexible. Let the person eat when he/she is hungry if possible

CLINICAL SUPPORT:

- Have a good dental check-up of the person's gums, teeth and dentures
- Check with a doctor to see if problems with eating are a side effect of a medication or health problem
- Have vision or glasses checked
- Refer to PCP to evaluate for appropriate dietary needs. Request referral for swallowing evaluation (particularly important in later stages)

CAREGIVER SUPPORT AND COMMUNITY RESOURCES:

- Listen empathically to caregiver and evaluate for level of distress
- Refer to IHSS
- Refer to MSSP
- Refer to Meals on Wheels
- Refer to Alzheimer's Greater Los Angeles for support groups, disease education, and care consultation
 - o ALZ Direct Connect referral
 - o Provide 24/7 Helpline #: 844.HELP.ALZ | 844.4357.259
 - Website: www.alzgla.org
- Send literature:
 - Topic Sheet "Difficulty with Eating"

FOLLOW UP: • Schedule a phone call with caregiver to discuss outcomes and provide additional support
NOTES: