

Hallucinations

<p>Identify the Problem</p>	<p>PROBLEM: Hallucinations (seeing or hearing things that are not there)</p> <p>GOAL/EXPECTED OUTCOME: To increase caregiver’s capacity to cope with and manage hallucinations</p>
<p>Educate Yourself</p>	<p>ASSESS FURTHER:</p> <p>Understand the possible triggers of the problem:</p> <ul style="list-style-type: none"> • Does the person not recognize his/her environment? • Does the person not recognize his/her reflection in windows or mirrors? • Does the person not recognize family members/caregivers? • Is there something in the environment that upsets the person? • Has the person’s routines changed? • Does the person have problems with hearing, seeing, or tasting? • Is there a problem with the person’s medications? • Does the person have a physical illness, such as an infection? • Has the person recently fallen or hit his/her head? • Has the person not been eating enough or drinking enough fluids? <p>Understand the possible meaning of the problem to the person with Alzheimer’s:</p> <ul style="list-style-type: none"> • Does the person feel frightened? • Does the person feel unsafe? • Is the person reliving a trauma from the past? <p>Understand the possible meaning of the problem to the caregiver:</p> <ul style="list-style-type: none"> • Does the caregiver feel frustrated? • Does the caregiver feel like he/she does not know how to help?
<p>Adapt</p> <p>Problem solve with interventions and actions</p>	<p>TEACH PROBLEM-SOLVING STRATEGIES TO CAREGIVER:</p> <ul style="list-style-type: none"> • Change the environment <ul style="list-style-type: none"> ○ Remove or adjust items that may upset the person ○ Cover mirrors and windows if the person does not know who is in the mirror or window ○ Turn on lights to reduce shadows that may look frightening ○ Turn off the TV if it is distracting. The person might also be confused about whether the TV episode is reality ○ Use contrasting colors, such as red plates on white table clothes, to help the person see differences in objects ○ Minimize busy patterns that might appear as an obstacle or barrier • Make sure the person’s glasses and/or hearing aides are on and working • Offer simple explanations, such as where sounds might be coming from • Do not argue about whether what’s happening is real; remember, it’s real to the person • Be comforting and reassuring; remind person that he/she is safe

	<ul style="list-style-type: none"> • Go for a walk or find another enjoyable activity • Make sure the person is eating and drinking enough fluids • NOTE: You may not be able to stop the experience from happening because it might be part of the disease, but the goal is to help make it less scary and upsetting for the person
	<p><u>CLINICAL SUPPORT:</u></p> <ul style="list-style-type: none"> • Refer to PCP to evaluate possible medication reactions/interactions or assistive equipment needs such as glasses or hearing aides • Test for illness, infection, and/or injury
	<p><u>CAREGIVER SUPPORT AND COMMUNITY RESOURCES:</u></p> <ul style="list-style-type: none"> • Listen empathically to caregiver and evaluate for level of distress • Refer to Alzheimer's Greater Los Angeles for support groups, disease education, and care consultation <ul style="list-style-type: none"> ○ ALZ Direct Connect referral ○ Provide 24/7 Helpline #: 844.HELP.ALZ 844.4357.259 ○ Website: www.alzpla.org • Send literature: <ul style="list-style-type: none"> ○ Quick Fact Sheet – Hallucinations (English and Spanish) ○ Topic Sheet – “Hallucinations, Delusions, Paranoia”
	<p><u>FOLLOW UP:</u></p> <ul style="list-style-type: none"> • Schedule a phone call with caregiver to discuss outcomes and provide additional support
	<p><u>NOTES:</u></p> <hr/> <hr/> <hr/> <hr/>