



# Health Bulletin



## Tips for Coping with Behavior Changes in Alzheimer's Patients

(NAPSA)—Alzheimer's disease (AD) is a progressive, neurodegenerative disease characterized by memory problems that eventually lead to severe cognitive and functional impairment. As AD progresses, individuals may also experience changes in personality and behavior. Caring for an individual with AD can be challenging and, at times, overwhelming. From the moment of a patient's diagnosis of AD, the family begins an unfamiliar journey as the caregiver. Caregivers can spend numerous hours a week caring for a loved one with AD, and often must miss work and surrender their interests. However, most caregivers of the 4.5 million Americans are not prepared for the increased stress and emotional impact that changes in a loved one's behavior can have on their ability to provide the best care for their loved one and themselves.

"The behavioral problems generally seen in the later stages of Alzheimer's disease range from aggression to sleep disturbances and can often lead to placing patients in nursing homes," said Jeffrey L. Cummings, MD, Professor of Neurology and Psychiatry/Biobehavioral Sciences, David Geffen School of Medicine, UCLA.

As AD progresses, it damages parts of the brain that regulate a person's mood, perceptions, or ability to control impulses. When a person reaches the moderate to severe stages of AD, they can begin to show significant behavior changes, such as increased withdrawal, apathy, depression, hostility, anger, and aggression.

John Covilli, whose mother Nellie is in the moderate to severe stages of AD, says, "When Mom was diagnosed with Alzheimer's, she became extremely hostile and



**Caregivers often spend up to 17 hours a week helping loved ones who have Alzheimer's.**

agitated during regular daily activities, like eating and having a conversation. Mom's outbursts of anger broke our hearts."

### Coping with Behavior Changes\*

Because there is no cure for AD, caregivers must learn how to cope with behavior changes. Helpful tips for caregivers:

- Accept the behavior as a reality and try to work through it.
- See actions from patient's point of view; look for reasons for each behavior.
- Do not approach suddenly from behind or the side to avoid element of surprise.
- Avoid over or under stimulation, such as playing loud music or rushing around.
- Talk in simple terms about each step or action as you help them dress or bathe.
- Ask your physician about treatments for AD.

A number of treatments are currently available to treat AD, but a recently approved drug, Namenda® (memantine HCl), is

the only treatment approved for the moderate to severe stages of AD and has shown a positive impact on behavioral symptoms in this stage.

"Studies show that Namenda diminishes behavioral symptoms of AD, which eases caregiver burden and potentially keeps a patient at home with his or her family longer," said Dr. Cummings.

Data published in *The New England Journal of Medicine* reported that caregivers of patients receiving Namenda estimated that they spent significantly less time (45.8 fewer hours per month) involved in the care of patients compared to those caring for patients receiving placebo. Recently, new data in the *Journal of the American Medical Association* evaluated the treatment of patients with moderate to severe AD with memantine in patients on stable donepezil treatment (commonly known as Namenda® and Aricept®, respectively). Results demonstrate that patients receiving the combination of Namenda and donepezil experienced an overall reduction in behavioral disturbances and psychiatric symptoms compared to placebo and donepezil.

"Since Mom began taking Namenda, she has been less agitated and more alert and involved in family activities and discussions. We have back a bit of the Mom we knew," said Covilli.

Namenda is now available by prescription to patients in the U.S. If someone you know may benefit from Namenda, ask your physician or health care provider. For more information, log on to [www.Namenda.com](http://www.Namenda.com) or call 1-877-2-NAMENDA (1-877-262-6363) or the Alzheimer's Association at 800-272-3900 or at [www.alz.org](http://www.alz.org).

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*Note to Editors: Namenda is contraindicated in patients with known hypersensitivity to memantine HCl or to any excipients used in the formulation. The most common adverse events reported with Namenda vs placebo (≥5% and greater than placebo) were dizziness, confusion, headache, and constipation. In patients with severe renal impairment, the use of Namenda has not been systematically evaluated and is not recommended.*

\*Alzheimer's Association, Steps to Understanding Challenging Behaviors

\*\*Namenda® is a registered trademark of Forest Laboratories, Inc.

\*\*\*Aricept® is a registered trademark of Eisai Co., Ltd.