

Dementia

About dementia

If you're becoming increasingly forgetful, particularly if you're over the age of 65, it may be a good idea to talk to your DOCTOR about the early signs of dementia.

As you get older, you may find that memory loss becomes a problem. It's normal for your memory to be affected by age, stress, tiredness, or certain illnesses and medications. This can be annoying if it happens occasionally, but if it's affecting your daily life or is worrying you or someone you know, you should seek help from your DOCTOR.

How common is dementia?

In three people over 65 will develop dementia, and two-thirds of people with dementia are women.

The number of people with dementia is increasing because people are living longer.

What is dementia?

Your risk of developing dementia increases as you get older, and the condition usually occurs in people over the age of 65.

Dementia is a syndrome (a group of related symptoms) associated with an ongoing decline of the brain and its abilities. This includes problems with:

memory loss

thinking speed

mental agility

language

understanding

judgement

People with dementia can become apathetic or uninterested in their usual activities, and have problems controlling their emotions. They may also find social situations challenging, lose interest in socialising, and aspects of their personality may change.

A person with dementia may lose empathy (understanding and compassion), they may see or hear things that other people do not (hallucinations), or they may make false claims or statements.

As dementia affects a person's mental abilities, they may find planning and organising difficult. Maintaining their independence may also become a problem. A person with dementia will therefore usually need help from friends or relatives, including help with decision making.

Your DOCTOR will discuss the possible causes of memory loss with you, including dementia. Other symptoms can include:

increasing difficulties with tasks and activities that require concentration and planning

depression

changes in personality and mood

periods of mental confusion

difficulty finding the right words

Most types of dementia can't be cured, but if it is detected early there are ways you can slow it down and maintain mental function.

Why is it important to get a diagnosis?

An early diagnosis can help people with dementia get the right treatment and support, and help those close to them to prepare and plan for the future. With treatment and support, many people are able to lead active, fulfilled lives.

Symptoms of dementia

Dementia is not a disease but a collection of symptoms that result from damage to the brain. These symptoms can be caused by a number of conditions. The most common cause of dementia is Alzheimer's disease.

Common symptoms of Alzheimer's disease and other forms of dementia include: memory loss, especially problems with memory for recent events, such as forgetting messages, remembering routes or names, and asking questions repetitively

increasing difficulties with tasks and activities that require organisation and planning

becoming confused in unfamiliar environments

difficulty finding the right words

difficulty with numbers and/or handling money in shops

changes in personality and mood

depression

Early symptoms of dementia are often mild and may get worse only very gradually. This means that the person with dementia and those around them may not notice these signs or take them seriously for some time. Also, people with dementia sometimes do not recognise that they have any symptoms.

Dementia is progressive. This means that the person's brain will become more damaged and will work less well over time, and their symptoms will tend to change and become more severe.

For this reason, it is important to talk to your DOCTOR sooner rather than later if you are worried that you may have problems with your memory.

The speed at which symptoms get worse and the way that they develop will depend on the cause of the person's dementia, their overall health and their circumstances. This means that the symptoms and experience of dementia can vary greatly from person to person.

Some people may also have more than one condition – for example, they may have Alzheimer's disease and vascular dementia at the same time.

The symptoms listed above are common in all forms of dementia. However, some types of dementia have other distinctive features. These are explained below.

Symptoms of vascular dementia

The symptoms of vascular dementia can sometimes develop suddenly and quickly get worse, although they can also develop gradually over many months or years. People with vascular dementia may also experience stroke-like symptoms, including muscle weakness or paralysis on one side of their body.

Symptoms of dementia with Lewy bodies

Dementia with Lewy bodies shares many of the symptoms of Alzheimer's disease and people with the condition typically also experience the following:

periods of alertness and drowsiness or fluctuating levels of confusion

visual hallucinations

becoming slower in their physical movements

Symptoms of frontotemporal dementia

Early symptoms of frontotemporal dementia typically include changes in emotion, personality and behaviour. For example, someone with this type of dementia may become less sensitive to other people's emotions, perhaps making them seem cold and unfeeling.

They may also lose some of their inhibitions, leading to behaviour that is out of character, such as making tactless or inappropriate comments.

Some people with frontotemporal dementia also have language problems. This may include not speaking, speaking less than usual or having problems finding the right words.

Symptoms in the later stages of dementia

As dementia progresses, memory loss and difficulties with communication often become very severe. In the later stages, the person is likely to neglect their own health and require constant care and attention.

Memory symptoms in dementia

People with advanced dementia may not recognise close family and friends, they may not remember where they live or know where they are. They may find it impossible to understand simple pieces of information, carry out basic tasks or follow instructions.

Communication problems in dementia

It is common for people with dementia to have increasing difficulty speaking and they may eventually lose the ability to speak altogether. It is important to keep trying to communicate with them and to recognise and use other, non-verbal means of communication, such as expression, touch and gestures.

Problems with mobility in dementia

Many people with dementia gradually become less able to move about unaided and may appear increasingly clumsy when carrying out everyday tasks. Some people may eventually be unable to walk and may become bedbound.

Incontinence

Bladder incontinence is common in the later stages of dementia and some people will also experience bowel incontinence.

Eating, appetite and weight loss

Loss of appetite and weight loss are common in the later stages of dementia. It's important that people with dementia get help at mealtimes to ensure they eat

enough. Many people have trouble eating or swallowing and this can lead to choking, chest infections and other problems.

Getting a dementia diagnosis

If you are worried about your memory or think you may have dementia, it's a good idea to see your DOCTOR. If you're worried about someone else, you should encourage them to make an appointment and perhaps suggest that you go along with them.

Just because you are forgetful, it doesn't mean you have dementia. Memory problems can also be caused by depression, stress, drug side effects, or other health problems. Your DOCTOR will be able to run through some simple checks and either reassure you, give you a diagnosis or refer you to a specialist for further tests.

A diagnosis of dementia affects both the person with the condition and those close to them. An early diagnosis gives you both the best chance to prepare and plan for the future, as well as receive any treatment that may be possible. With treatment and support, many people are able to lead active, fulfilling lives.

What to expect when you see your DOCTOR about dementia

Your DOCTOR will ask about your symptoms and other aspects of your health, and will give you a physical examination. The doctor will organise some blood tests and ask about any medication you are taking, as these can sometimes cause symptoms similar to dementia.

You will also be asked some questions or given some mental exercises to measure any problems with your memory or your ability to think clearly.

Referral to a dementia specialist

Dementia can be difficult to diagnose, especially if your symptoms are only mild. If your DOCTOR is unsure about your diagnosis, they will refer you to a

specialist such as a neurologist (an expert in treating conditions that affect the brain and nervous system), an elderly care physician, or a psychiatrist with experience of treating dementia.

The specialist may be based in a memory clinic alongside other professionals who are experts in diagnosing, caring for and advising people with dementia and their families.

It's important to make good use of your consultation with the specialist. Write down questions you want to ask, make a note of any medical terms the doctor might use, and ask if you can come back if you think of any more questions you want to ask. Taking the opportunity to go back can be very helpful.

The specialist will organise further tests, which may include brain scans such as a computerised tomography (CT) scan, or preferably a magnetic resonance imaging (MRI) scan.

If they are still not certain about the diagnosis, you may need further brain scans, a lumbar puncture to measure levels of certain proteins in the spinal fluid or, rarely, an operation to remove a small sample of brain tissue for testing.

Getting your dementia diagnosis

Once you've had the necessary tests, your doctor should ask you if you wish to know your diagnosis and if there is anyone else you would like to be told.

They should explain what having dementia might mean for you, and should give you time to talk more about the condition and ask any questions you may have.

Unless you decide otherwise, your doctor or a member of their team should explain to you and your family:

the type of dementia that you have, or if it is not clear, what the plan to further investigate will entail. Sometimes, despite investigations, a diagnosis may not be clear, in which case the doctors will review you again after a period of time to reassess you

details about symptoms and how the illness might develop

treatments

care and support services in your area

support groups and voluntary organisations for people with dementia and their families and carers

advocacy services

where you can find financial and legal advice

You should also be given written information about dementia.

Questions to ask about your dementia diagnosis

please tell me about the type of dementia that I may have

please give me more details about the tests or investigations I should have

how long will I have to wait until I have these tests?

how long will it take to get the results of these tests?

what will happen after I get the results?

Ongoing dementia assessment

Once you have been given a diagnosis, your DOCTOR should arrange to see you from time to time to see how you're getting on. Because dementia is a progressive condition, the doctor may arrange another appointment with the specialist, perhaps after six months or a year. The DOCTOR and the specialist may also jointly prescribe medications that may be helpful in treating some of the symptoms of dementia.

However, not everybody will benefit from these drugs.

Tests for diagnosing dementia

A range of tests and diagnostic procedures is needed to diagnose dementia. The following are the most commonly used.

Assessing mental abilities to diagnose dementia

Questionnaires are often used to help test the mental abilities of the person with symptoms of dementia, and how severe they are. One widely used test is the mini mental state examination (MMSE). The MMSE assesses a number of different mental abilities, including:

short- and long-term memory

attention span

concentration

language and communication skills

ability to plan

ability to understand instructions

The MMSE is a series of exercises, each carrying a score with a maximum of 30 points. Example exercises include:

memorising a short list of objects and then repeating the list

writing a short sentence that is grammatically correct, such as "the dog sat on the floor"

correctly identifying the current day of the week, followed by the date, the month, the season and the year

The MMSE is not a test to diagnose dementia. However, it is useful for assessing the level of mental impairment that a person with dementia may have.

Test scores may be influenced by a person's level of education. For example, someone who cannot read or write very well may have a lower score, but they may not have dementia. Similarly, someone with a higher level of education may achieve a higher score but still have dementia.

Blood tests for dementia

A person with suspected dementia may have blood tests to check their overall level of health and to rule out other conditions that may be responsible for their symptoms, such as thyroid hormones and vitamin B12 levels.

Dementia brain scans

Brain scans are usually used for diagnosing dementia. They are needed to check for evidence of other possible problems that could explain a person's symptoms, such as a major stroke or a brain tumour.

Several types of brain scan can be used to help diagnose dementia:

Computerised tomography (CT) scan

A computerised tomography (CT) scan can be used to check for signs of stroke or a brain tumour. However, unlike an MRI scan, a CT scan cannot provide detailed information about the structure of the brain.

Magnetic resonance imaging (MRI) scan

The National Institute for Health and Care Excellence (NICE) recommends using a magnetic resonance imaging (MRI) scan to help confirm a diagnosis of dementia.

An MRI scan can provide detailed information about the blood vessel damage that occurs in vascular dementia, plus any shrinking of the brain (atrophy). In Alzheimer's disease, the whole brain is susceptible to shrinking, whereas in frontotemporal dementia the frontal and temporal lobes are mainly affected by shrinking.

Other scans and procedures

Other types of scan, such as a single photon-emission computed tomography (SPECT) scan or a positron emission tomography (PET) scan, may be recommended if the result of your CT or MRI scan is uncertain. These scans look at how the brain functions and can pick up abnormalities with the blood flow in the brain.

In some cases, an electroencephalogram (EEG) may be taken to record the brain's electrical signals (brain activity).

A lumbar puncture may also be used to check the protein levels in the brain. This procedure involves taking a sample of spinal fluid from the lower back for testing.

Benefits of early dementia diagnosis

Dementia, and the difficulties it causes, is one of the most feared health conditions. People with dementia and their families are sometimes reluctant to seek advice when concerned about memory or other problems. But there are many potential benefits to getting medical advice if you're worried. Being diagnosed early is important for many reasons. It helps you to get the right treatments and to find the best sources of support, as well as to make decisions about the future.

Diagnosis can help uncertainty

It may not be clear why someone has problems with memory or has a change in behaviour. These problems may be because of dementia, or down to other reasons such as poor sleep, low mood, medications or other medical conditions. This uncertainty can be distressing for both the person experiencing difficulties, and their family and friends. While a diagnosis of dementia can be devastating news, an explanation of what the problem is and what can be done about it can help people feel empowered and reduce some of the worry caused by uncertainty. Some people find it helpful to discuss with doctors and nurses how the dementia may affect them or their loved one in the future, and there is advice available about how to stay independent and live well with dementia.

Accessing treatments

Dementia is not a single condition – it refers to difficulties with thinking and memory that may be caused by several different underlying diseases. This is one reason why not everyone with dementia experiences the same problems.

Identifying that there is a problem, and then diagnosing the underlying cause is important for guiding treatment and accessing services.

Some causes of dementia are treatable and reversible (either partially or fully, depending on the nature of the problem). Conditions such as anxiety and depression, some vitamin deficiencies, side effects of medications and certain brain tumours fall into this category.

Alzheimer's disease and dementia with Lewy bodies are neurodegenerative conditions, which means they gradually damage the brain. Cholinesterase

inhibitor medications have been shown to have benefit in Alzheimer's disease and dementia with Lewy bodies. These treatments (donepezil, rivastigmine and galantamine) improve symptoms by making the remaining brain cells work a bit harder. Memantine is another medication that can help in Alzheimer's disease. Although not a cure, these medications can make a significant difference to day-to-day living and functioning.

Treating high blood pressure, high cholesterol and poorly controlled diabetes is also important, as is stopping smoking and keeping to a healthy weight. These factors (known as risk factors) all contribute strongly to vascular dementia, and may make Alzheimer's disease worse. Your DOCTOR will be able to assess your risk factors, advise if treatment is needed and monitor you.

Medications for other conditions can be reviewed in case they are having a negative effect on cognitive functioning.

Advice and support for other medical conditions

If doctors and nurses are aware that a person has a condition causing dementia, this is also helpful when treating other medical problems. This includes taking extra time to explain things to patients in a way they can understand, setting up safer ways of taking medication (for example, dosette boxes to help people remember when to take tablets), and understanding and offering extra support if someone has to come into hospital as an inpatient for another reason.

Research and planning services

Getting the right diagnosis is also important for research and understanding more about the causes of dementia. Better recognition of how important and common the causes of dementia are is vital for planning services to provide the help and support people need, both locally and nationally.

What to do if you've just been diagnosed with dementia

Whether your diagnosis came as a shock, or confirmed what you've suspected for some time, it's important to plan ahead while you're still able to make clear decisions for yourself.

You've just had a diagnosis of dementia, and you're probably feeling numb, scared and unable to take everything in. Give yourself a little time to adjust. It might help to talk it through with family and friends.

Once the initial feelings have passed, it's time to move on and create an action plan for the future. Dementia is a progressive illness, so the sooner you take care of legal, financial and healthcare matters the better. These are the key things to think about:

Making a will

It's a good idea to make a will if you haven't already. This ensures that when you die, your money and possessions go to people of your choosing. A person with dementia can still make or change a will, providing you can show that you understand what you are doing and what the effects of it will be. Your solicitor will decide if this is the case.

Putting your papers in order

Make sure that all your important papers can be easily found. These might include bank and building society statements, mortgage or rent documents, insurance policies, your will, tax and pension details, bills and guarantees.

Consider setting up direct debits or standing orders for your regular bills. This will mean that they are paid automatically from your bank account each month.

Lasting power of attorney

You can appoint one or more people as "attorneys" to manage your affairs, including your finances, property and medical treatment, should it become

necessary. You can choose anybody you trust to be your attorney, usually a close friend or family member, but they must be over 18.

Advance care planning

You may wish to make an advance care plan so that you can have a say in your future medical care. It enables you to refuse, in advance, a specific medical treatment or procedure should you become unable to decide for yourself in the future.

Take care of your mental health

If you're depressed or feeling very down, talk to your DOCTOR. Depression is very common in early dementia and there are a range of treatments, including talking treatments, that can help.

Staying well

As with other long-term conditions, when you have dementia it's important to look after yourself by stopping smoking, eating healthily and taking regular exercise. Ask your DOCTOR if you would benefit from flu and pneumonia vaccination.

Memory books

Memory books can be a helpful way of stimulating your memory and reconnecting you with your loved ones in the future. Essentially, it's a "this is your life" compilation of photographs, notes and keepsakes from your childhood through to the present day. It can be either a physical book or a digital system like a photo book.

Living well with dementia

Dementia can affect the whole life of the person who has it, as well as their family. If you have been diagnosed with dementia, or you are caring for someone with the condition, remember that there is advice and support available to help you live well.

Even if you have suspected for a while that you or someone you love might have dementia, the diagnosis may come as a shock. People with dementia should try to remain as independent as possible and continue to enjoy their usual activities.

The symptoms of dementia will usually get gradually worse. How quickly this occurs will depend on the general health of the person with dementia and on the type of dementia they have.

Over time, people with dementia will need help to cope at home and they may eventually need residential care in a nursing home. It is natural to feel worried about the future, but you are not alone – whether you have dementia or you care for someone with the condition.

Look after your health

Living a healthy lifestyle is important for everyone, including people with dementia, and is the best way to help prevent dementia. Eating well and exercising are important for everyone to live well.

Changes in eating habits can occur, particularly if someone with dementia is struggling to find the words to ask for food, which can result in weight loss and poor nutrition.

Maintain a social life

It's easy to feel isolated and alone if you or someone you care for has dementia. Keeping in contact with others is good for people with dementia because it helps them to keep active and stimulated. Some people find it difficult to talk about their own or a family member's dementia, or want to help but don't know how.

If a friend or a family member finds it hard to talk to you, don't lose touch. Make the first move, explain that you still need to see them and tell them how they can help you. You may also find it helpful to join a local group of people with dementia and their families. You may not be someone who would normally join a group, but being part of a community of people with dementia or a group for families who have a member with dementia can be helpful. You are likely to be able to share experiences and gain insight and useful tips from others who are going through or have been through similar situations.

Practical tips

keep a diary and write down things you want to remember

pin a weekly timetable to the wall

put your keys in an obvious place such as a large bowl in the hall

have a daily newspaper delivered to remind you of the date and day

put labels on cupboards or drawers

place helpful telephone numbers by the phone

write reminders to yourself – for example, put a note on the front door to take your keys

programme people's names and numbers into your phone

install safety devices, such as gas detectors and smoke alarms

put bills on direct debit so you don't forget to pay them

a dosset box can be helpful for remembering which medications to take and when

Try to sleep well

People with dementia often experience disturbed sleep. They may wake up during the night or be restless. These problems may get worse as the illness progresses. People with dementia may also have painful illnesses, such as arthritis, that cause, or contribute to, sleep problems.

Some medication can cause sleepiness during the day and interfere with sleep at night. Sleeping pills can be used with care in people with dementia. However, "sleep hygiene" measures are best for people with dementia. These rules include having no naps during the day, keeping regular bedtimes and avoiding alcohol or caffeine at night.

Feeling down

People with dementia can experience mood swings. They can feel sad or angry at times, or scared and frustrated as the disease progresses. If you or a family member have dementia, you may find it difficult to stay positive. Remember that you are not alone and that help and support are available. Talk to someone about your worries. This could be a family member or friend, a member of your local dementia support group or your DOCTOR, who can refer you to a counsellor in your area.

Keep active and occupied

People with dementia should continue to enjoy their hobbies and interests. These activities are enjoyable and keep people alert and stimulated so they maintain an interest in life. Do not rule out an activity simply because you or your family member have dementia. Activities may change as the illness gets worse, but people with dementia can and should continue to enjoy their spare time.

Self care

Self care is an integral part of daily life and involves taking responsibility for your own health and wellbeing with the support of those involved in your care. It includes the actions you take every day to stay fit, maintain good physical and mental health and prevent illness or accidents, as well as the effective care of minor ailments and long-term conditions.

People living with long-term conditions can benefit enormously from receiving self care support. They can live longer, have less pain, anxiety, depression and fatigue, have a better quality of life and be more active and independent.

Staying independent with dementia

Being diagnosed with dementia will have a big impact on your life. You and your family may worry about how long you can care for yourself, particularly if you live alone. People with dementia can remain independent for some time, but will need support from family and friends.

Living at home

In the early stages of dementia, many people are able to look after their homes in the same way as before their diagnosis. However, as the illness gets worse, it is likely that someone who has dementia will find it difficult to look after their home and they may need help with daily activities, such as housework and shopping. The home of a person with dementia may also need to be adapted to enable them to stay safe, mobile and independent.

Living alone with dementia

It's good to stay independent for as long as possible. Many people with dementia continue to live successfully on their own for some time. Be aware though that, as your condition progresses, you will need extra support to help you cope and it's better to get this in place early.

Talk to family, friends and your health professionals about how they can help you stay independent. They can advise you about how to cope with practical tasks such as shopping. And find out about the local support services that can help you manage in your home, for example by doing laundry and supervising meals.

Working

Coping at work can be worrying for people with dementia. You should speak to your employer as soon as you feel ready.

You could continue to work or return to work by asking your employer if you can change your workload.

Driving

People with dementia must give up driving when their symptoms become bad enough to make them unsafe on the road. This is to protect themselves, their passengers and other road users.

Assistive technology

Assistive technology is available for people with dementia or other conditions that affect memory. AT Dementia is an organisation that provides access to technology aimed specifically at people with dementia, including:

daily living aids – special utensils to help people eat and drink

stand-alone devices – aids that can be used without being linked to a monitoring centre or carer, such as picture telephones and calendar clocks

telecare – sensors or detectors that automatically send a signal to a carer or monitoring centre by telephone.

Activities for dementia

Keeping up an active social life is key to helping someone with dementia feel happy and motivated. There are clubs and activities designed to help people in the same situation, which can be rewarding for both the person with dementia and their families and carers.

Activity is essential to a person's wellbeing and gives purpose and enjoyment to their day. Encouraging someone with dementia to do something creative, some gentle exercise, or take part in an activity helps them to realise their potential, which improves their self-esteem while reducing any feelings of loneliness. People with the early stages of dementia may enjoy walking, attending gym classes for older people, or meeting up with understanding and supportive friends.

If you care for someone who has dementia, a shared activity can also give you a chance to do something that makes both of you happier and able to enjoy quality time together.

Multisensory activities can help dementia

If the person you care for has become very withdrawn, you may want to explore different ways of connecting with them. The Alzheimer's Society has more advice about how people with dementia can keep active and stay involved, by gardening, baking or doing puzzles. There are also ideas for remembering the past in a happy way, such as visiting a favourite place or putting together a memory box.

A multisensory approach to interacting is particularly important when someone has advanced dementia. This is because bright colours, interesting sounds and tactile objects can all catch their attention in a way that other activities, such as making conversation or reading, may not any more.

Getting out and about

Home environment and dementia

The design of the home environment can have a big impact on someone with dementia.

Symptoms of memory loss, confusion and difficulty learning new things means that someone with dementia may forget where they are, where things are and how things work.

If they're able to stay in their own home, the familiar objects will be reassuring, and it's not advisable to make major changes or adaptations to their homes overnight.

However, there are simple, affordable things you can do that may help them to continue living independently and safely.

Better lighting can help people with dementia

Dementia tends to affect older people, who are likely to have poorer eyesight. People with dementia can also feel disorientated in the dark, so leaving a nightlight on can help.

Most people with dementia benefit from better lighting in their home – it can help avoid confusion and reduce the risk of falls. Using higher wattage light bulbs will boost the lighting in your home, but remember to first check the maximum level that the fitting can take.

Increase natural light in a room by making sure that the curtains are open and that unnecessary nets or blinds are removed. Cut back hedges or trees if they overshadow the window and block out sunlight. Lighting is particularly important on the stairs and in the toilet. Light switches should be easily accessible and straightforward to use.

Reducing excess noise may help with dementia

Reduce background noise by turning the television or radio off if nobody is paying attention to it.

Carpets, cushions and curtains improve the acoustics of a room by absorbing background noise. If you have laminate or vinyl flooring, simply walking across the room can be very noisy. If the person you care for wears a hearing aid, it will magnify these sounds and can make it uncomfortable for them.

If their hearing has deteriorated with age, make sure they get regular hearing checks and are fitted with hearing aids if necessary.

Safe flooring and dementia

Avoid shiny or reflective flooring as this may be perceived as being wet and the person with dementia may struggle to walk over it.

Try to avoid rugs or mats on the floor, as some people with dementia may become confused and think the rug or mat is an object that they need to step over, which could lead to trips or falls.

Contrasting colours may help with identification

Contrasting colours on the walls and floors can give the person with dementia a sense of depth and perspective in a room. Having furniture in contrasting colours can make it easier for them to find and use.

Doors and banisters painted in a different colour to the walls will make them stand out. Toilet seats that contrast in colour with the rest of the room will help the person with dementia find the toilet. Similarly, tablecloths that are a different colour to the plates will help them to see their food better.

Bed linen, towels, soft furnishings and wallpaper should be bold colours rather than pastels, which blend together easily. Patterns should be avoided as they can be disturbing for people with dementia. They may see faces or shapes in the patterns, which can be confusing for them.

Reflections can be troubling

If the person you care for doesn't recognise their own reflection, they may think that the face they see in the mirror or the person reflected in the window is a stranger. This can be distressing for them. It can help to cover mirrors with a roller blind or curtain and close curtains in the evening so they can't see their own reflection in the glass.

Labels may help someone with dementia navigate

It's a good idea to label drawers, cupboards and doors to show what's inside them. For example, you could put a photo of the toilet on the toilet door, a photo of the cups on the cupboard that contains the cups, and so on.

Alternatively, transparent cupboard doors can be of great help to someone with dementia as they will be able to see what's inside.

Dementia-friendly household items

It's possible to get household items that are specifically designed for people with dementia. For example, these items can include cups with two handles, clocks with large LCD displays, telephones with big buttons, devices to open jars, and so forth.

You may find that the person you care for prefers traditional fixtures and fittings, such as taps, a toilet flush or bath plugs. Sleek modern designs may be confusing.

Ensure that any tables are stable and have round, smooth edges. They should be at a suitable height so that food and drink can be seen and a wheelchair can fit underneath if needed.

Think about outside space needs

Like everyone else, people with dementia may benefit from going outside to get some fresh air and exercise.

Ensure that walking surfaces are flat to prevent any trips or falls. The outdoor space should be secure to stop the person you look after from wandering.

Raised flower beds can help people with restricted mobility actively look after their garden by doing watering, planting or weeding.

Providing sturdy, sheltered seating areas will allow the person you care for to stay outside longer. You can further encourage their participation in the outdoors by using bird feeders or tables and bat, bird or bug boxes to bring more wildlife into the garden.

The ideas above may not be suitable for all individuals with dementia. As their carer, you will know them best and will be able to decide which changes might give the most benefit.

Looking after someone with dementia

If you have dementia, or you are looking after someone who does, you will experience a range of practical issues.

People with dementia can feel vulnerable as their condition progresses and they increasingly rely on other people to do things for them. It is important that people who have dementia feel reassured and supported, while retaining some level of independence. Although some symptoms are common to many people with dementia, each person's experience of the disease will be different.

Below is a list of issues you may begin to encounter after a dementia diagnosis.

Helping someone with dementia with everyday tasks

When a person with dementia finds that their mental abilities are declining, they're likely to feel anxious, stressed and scared. They may be aware of their increasing clumsiness and inability to remember things, and this can be very frustrating and upsetting for them.

If you are looking after someone with dementia, you can help them feel more secure by creating a regular daily routine in a relaxed environment where they're encouraged and not criticised.

Involving the person you look after in everyday tasks may make them feel useful and improve their sense of self-worth. They could help with the shopping, laying the table or sweeping leaves in the garden, for example.

As the illness progresses, these tasks may become harder for them to manage independently, and you may need to give them more support.

How you can help

Offer support sensitively and try not to be critical of their attempts. It can be very important for the person with dementia to feel that they're still useful.

In the early stages, memory aids can be used around the house to help the person remember where things are.

For example, you could put pictures on cupboard doors of what's inside, such as cups and saucers. This may help to trigger their memory and enable them to retain their independence a little longer.

Keeping up hobbies and interests when someone has dementia

Many people with dementia will still enjoy their hobbies or interests. For example, if they like cooking, they may be able to help make a meal. Going for a walk or gardening can provide exercise and fresh air. Or they may prefer listening to music or playing a board game. Caring for a pet cat or dog can bring a lot of pleasure to some people.

If the person you care for was very sociable and outgoing, or if they have a large family, they may really enjoy visits from one or two family members or friends. But remember that they may struggle to keep up with conversations if they have a lot of visitors at the same time.

Maintaining good health and nutrition in someone with dementia

It's important that the person you care for eats healthily and gets some exercise. The longer they stay fit and healthy, the better their quality of life will be.

If the person you care for doesn't eat enough or eats unhealthy food, they can become susceptible to other illnesses. People with dementia can become more confused if they get ill.

Common problems for people with dementia include:

not recognising foods

forgetting what food they like

refusing or spitting out food

resisting being fed

asking for strange food combinations

This behaviour is usually due to confusion, or irritation in the mouth caused by dental problems, rather than wanting to be awkward. If you're concerned about the person's eating behaviour, speak to your DOCTOR.

How you can help

Involve the person you care for. For example, if you feed them, you could put the cutlery in their hand and help guide it to their mouth. You could also involve them in preparing food if they are able to.

Try to stay calm. If you feel stressed at mealtimes, the person you care for will probably be stressed too. Make sure you have plenty of time for meals so you can deal with any problems that arise.

Try to accommodate behaviour changes. It's likely that the person you care for will change their eating patterns and habits over time. Being aware of this and trying to be flexible will make mealtimes less stressful for both of you.

If you think the person you care for may have health or dental problems, get help from your DOCTOR or dentist. You could also contact a local carers' group to speak to other people who may have experienced similar difficulties.

If someone with dementia smokes, replace matches with disposable lighters to lower the risk of them accidentally causing a fire.

If the person you care for drinks alcohol, check if this is recommended alongside any medication they make take. If in doubt, ask your DOCTOR.

Dealing with incontinence in someone with dementia

Incontinence can be difficult to deal with and can be very upsetting for the person you care for. It's common for people with dementia to experience incontinence. This can be due to urinary tract infections, constipation causing added pressure on the bladder, or medication.

A person with dementia may also simply forget to go to the toilet, or may forget where the toilet is. They may also have lost the ability to tell when they need the toilet.

How you can help

It's important to be understanding, retain a sense of humour and remember that it's not their fault. You may also want to try the following:

put a sign on the toilet door, such as a photo of the toilet

keep the toilet door open and make sure that the person you care for can access it easily

make sure they can remove their clothes – some people with dementia can struggle with buttons and zips

look out for signs that they may need to go to the toilet, such as fidgeting and standing up and down

get adaptations to the toilet if necessary – you may be able to get these through a community care assessment

If you're still having problems with incontinence, ask your DOCTOR to refer you to a continence advisor who can advise on things like waterproof bedding or incontinence pads.

Helping someone with dementia with their personal hygiene

People with dementia can become anxious about certain aspects of personal hygiene and may need help with washing. For example, they may be scared of falling when getting out of the bath, or they may become disorientated in the shower.

The person you care for may not want to be left alone or they may resist washing because they find the lack of privacy undignified and embarrassing. Try to do what's best for them.

Helping someone with dementia sleep well

People with dementia often experience disturbed sleep. They may wake up during the night or be restless. These problems may get worse as the illness progresses. People with dementia may also have painful illnesses such as arthritis that cause, or contribute to, sleep problems.

Some medication can cause sleepiness during the day and interfere with sleep at night. Sleeping pills can be used with care in people with dementia.

However, "sleep hygiene" measures are best for people with dementia – for example, no naps during the day, regular bedtimes and avoiding alcohol or caffeine at night.

Taking care of your own wellbeing

If you or a family member has dementia, you may find it difficult to stay positive. Remember that you are not alone and that help and support is available. Talk to someone about your worries. This could be a family member or friend, a

member of your local dementia support group, or your DOCTOR can refer you to a counsellor in your area.

It is important for a carer's physical health and psychological wellbeing that they are able to take a break (respite) from care. Carers may also need respite care if they have to go into hospital or meet other important commitments.

Friends, relatives and neighbours can provide respite care at home. You can also arrange home respite care through home care agencies or, in some areas, your local authority. Care away from home can confuse some people with dementia, both while they are away and when they come back. If you decide on respite care away from the person's home, it is a good idea to visit beforehand to check that it meets the needs of the person with dementia.

Dementia and your relationships

As dementia progresses, your relationships are almost certain to change. From a carer's point of view, you may find the person with dementia becomes unable to perform certain tasks or roles that they once did, such as handling bills or general household tasks. Therefore, it's important to start making plans as soon as possible after a dementia diagnosis.

We need to communicate to express our needs, likes and dislikes. If communication is a problem, then it can be very frustrating for the person involved, and may result in them behaving in a challenging way. If this behaviour helps the person with dementia get what they want, they may repeat this behaviour in future.

From a patient's point of view, it's important to tell your family and friends if you have dementia so they understand what is happening. If you find this difficult, you could ask your doctor to discuss your symptoms with your family. This way, as your symptoms progress, your family may better understand why you may not always remember them.

Dementia does not necessarily prevent you from continuing to enjoy your relationships and sex life. Some couples find that they can still be close even if other abilities have deteriorated. However, sometimes dementia can increase or reduce previous sexual feelings and you or your partner may find this distressing.

People looking after people with dementia can also feel grief even though the person they're caring for is still alive. This could happen because dementia is a life-limiting condition (that is, it stops you doing things you would normally do, without reasonable hope of a cure) or perhaps the personality of the person with dementia has been affected by their condition. Although not everyone experiences this 'anticipatory grief', people who do can feel the same emotions and sense of mourning as if the person had actually died.

You may have a wide range of emotions, such as loss, dread, guilt, and anxiety. Everyone reacts differently, and it's good to accept that your coping method is unique. You can read more about grieving while a person is still alive in our Care and support section.

Talk to your family and friends if you feel able to, or other people with dementia. Alternatively, your DOCTOR will be able to help you find a counsellor or therapist who can advise you.

Intimate relationships, dementia and residential care

Going into residential care is a difficult decision for anyone, regardless of the age or the level of disability of the person going into care. And, although by going into care they enter a protected environment, this doesn't stop their ordinary human needs, desires or temptations. As a carer, wanting to continue having a loving relationship with a partner, whether physical or not, will not automatically stop. If it is a son, daughter or parent entering residential care, they may wish to continue their existing relationships too, and they may develop new ones in their new residence.

Dealing with physical relationships in residential care requires sensitivity and tact by all to achieve a balance between the protection of vulnerable adults and their right to a fulfilling emotional and sexual life.

The Alzheimer's Society has detailed information about dementia and sexual relationships, including adapting to changes in sexual behaviour, capacity to consent to sexual relationships and what to do in cases of suspected sexual abuse. For more information on sex and care homes, see Carers Direct – physical relationships and residential care.

A social life with dementia

It is easy to feel isolated and alone if you or someone you care for has dementia. Keeping in contact with others is good for people with dementia because it can help to keep them active and stimulated.

Some people find it difficult to talk about their own or a family member's dementia, or want to help but do not know how. If a friend or family member finds it hard to talk to you, don't lose touch. Make the first move, explain that you still need to see them and tell them how they can help you. You may also find it helpful to join a local group of people with dementia and their families.

Communicating with people with dementia

Dementia is a progressive illness that over time will affect a person's ability to remember and understand basic everyday facts, such as names, dates and places. Dementia will gradually affect the way the person communicates. Their ability to present rational ideas and to reason clearly will change.

If you are looking after a person with dementia, you may find that as the illness progresses you'll have to start discussions in order to get the person to make conversation. This is common. Their ability to process information gets progressively weaker and their responses can become delayed.

Encouraging communication

Try to start conversations with the person you're looking after, especially if you notice they're starting fewer conversations themselves. However, there are other ways to encourage communication:

- speak clearly and slowly, using short sentences

- make eye contact with the person when they're talking, asking questions, or having other conversations

- don't make them respond quickly, because they may feel pressured if you try to speed up their answers

- encourage the person to join in conversations with others where possible

don't speak on behalf of the person during discussions about their welfare or health issues, as this can make them feel invisible and they may not speak up for themselves in other situations

don't patronise the person you're looking after, or ridicule what they say

don't dismiss what the person you're looking after says if they don't answer your question or it seems out of context – instead, show that you've heard them and encourage them to say more about their answer

avoid asking the person to make complicated choices – keep it as simple as possible

you may find that you'll need to use other ways to communicate, and you may have to rephrase questions because the person can't answer in the way they used to

These are not the only hints that can help. Use the dementia carers' tips video wall (see below right) to find out how others have dealt with difficulties caring for a relative with dementia.

The Alzheimer's Society has several information sheets to help, including Progression of dementia and Communicating.

Body language and physical contact

Communication isn't just talking. It also involves gestures, movement, facial expressions and other non-verbal means. Body language and physical contact become more significant when communication is difficult. There are several ways to make communication easier:

being patient and remaining calm can help the person communicate more easily

keep your tone of voice positive and friendly where possible, because tone is also a means of communication

don't stand too close to the person while talking as it can intimidate them – either be on the same level or lower than they are, which is less intimidating

patting or holding the person's hand while talking to them can help to reassure them and make you feel closer – watch their body language and listen to what they say to see whether they're comfortable with you doing this

It's important that you encourage the person to communicate what they want however they can. Remember, we all find it frustrating when we can't communicate effectively, or are misunderstood because of language or cultural differences.

Communication is a two-way process. Not only is it important that the person you're looking after is encouraged to use different skills to communicate, as a carer you will probably have to learn to 'listen' differently too.

You may need to be more aware of non-verbal messages, such as facial expressions and body language. You may have to use more physical contact, such as reassuring pats on the arm, or smile as well as speaking. The following tips may help to improve communication between you and the person you're caring for.

Active listening

We all find it easier to understand someone else if we listen carefully. When communicating with the person you're looking after, use active listening skills:

use eye contact to look at the person, and encourage them to look at you when either of you are talking

try not to interrupt them, even if you think you know what they're saying

if possible, stop what you're doing so you can give the person your full attention while they speak

minimise distractions that may get in the way of communication, such as the television or the radio playing too loudly, but always check if it's OK to do so

if you're not sure what's being said, repeat what you heard back to the person and ask if it's accurate, or ask them to repeat what they said

Speak clearly

you may need to speak more slowly

'listen' in a different way – shaking your head, turning away or murmuring are alternative ways of saying no or expressing disapproval

sometimes the person may feel unhappy that they can't communicate in the way they would like to – being able to express these feelings may be very important to them, and they may find it reassuring if you just listen rather than try to cheer them up

try not to finish the person's sentences – instead, look for clues in their body language, expression and tone to suggest words, and check with them to see whether you've understood them correctly

If you are looking after someone with dementia, you probably know them better than most people. These are only a few tips that you can build upon based on your own knowledge and experience.

Coping with dementia behaviour changes

Dementia can have a big impact on a person's behaviour. It can make them feel anxious, lost, confused and frustrated. Although each person with dementia handles these feelings in their own way, certain behaviour is common in people with the disease. This includes:

repeating questions or carrying out an activity over and over again

walking and pacing up and down

aggression, shouting and screaming

becoming suspicious of other people

If you are experiencing these behaviours, or are looking after someone who behaves in this way, it's important to remember that this is an attempt to communicate how they're feeling and that they are not being deliberately difficult. If you stay calm and work out why they're expressing themselves in this way, you may be able to calm them down.

If you recognise early warning signs, you may be able to prevent behavioural outbursts. For example, if the person with dementia becomes anxious or agitated in large groups, you could arrange for them to be in a smaller group or have one-to-one support. Some people find that a distraction can focus a person's energies elsewhere and prevent them from displaying challenging behaviour.

Your doctor may recommend behavioural therapies to help the person you care for. These therapies can be straightforward. For example, the person you care for may behave in a particular way because they're bored and have built up too much energy. A routine involving regular exercise could help solve both of

these issues. Find out more about living well with dementia and things you can do to stay active.

Repetitive behaviour in dementia

People with dementia often repeat questions or carry out certain actions over and over again. This may be due to:

memory loss

boredom

anxiety

side effects of medication

If you think they're bored, try engaging them in an activity they enjoy, such as listening to music. Most people with dementia feel anxious at some point and will need to be reassured of your love and support. If you're concerned about the medication the person you care for is taking, contact their DOCTOR for advice.

Walking or pacing is a common behaviour in people with dementia. It is very common for people at certain stages of dementia to pace up and down or leave their homes for long walks. This is usually a phase and doesn't normally continue for a prolonged period.

There can be a number of reasons why they walk. They may leave the house intending to go to the shops or visit a friend and then simply forget where they're going. They may be bored or uncomfortable sitting at home and want to use up some energy, or they may be confused about what they should be doing and where they should be.

One of the main concerns for carers of people with dementia is that the person they look after will be unable to find their way home if they leave the house and get lost. You can minimise the risk of this happening by letting trusted local shopkeepers and neighbours know about the person's condition. Give them a contact number to call if they're concerned about the person's behaviour.

Some types of assisted technology devices may be of use to you and the person you care for. These include tracking devices and alarm systems, such as Telecare. Find out more about equipment and alarms in Carers Direct.

Alternatively, you could accompany them on their walk and gently encourage them to return home.

People with dementia may exhibit aggression

Aggressive behaviour by the person you care for can be scary and upsetting. It can be distressing to see such a change in someone's personality and is generally considered to be a far more upsetting effect of dementia than loss of brain functions, for example.

There are many causes of aggressive behaviour in dementia, including:

fear or humiliation

frustration with a situation

depression

no other way to express themselves

loss of judgement

loss of inhibitions and self-control

You may want to keep a note of anything that could trigger aggressive behaviour in the person you care for. This may take some trial and error, but if you can identify these triggers, you can avoid them. The most common form of aggressive behaviour is shouting, screaming or using offensive language. This can include continually calling out for someone, shouting the same word or screaming over and over again.

If the person you care for shouts out at night, a night light in their room will make them feel less anxious. If they're calling for someone from their past, try talking to them about this period in their life.

During an episode of aggression, it's important not to make the situation worse by arguing with them or adopting an aggressive pose as this may make them lash out. It may help to count to ten or remove yourself from the situation by leaving the room. One way to stay calm is to remember that even if the aggression seems personal or intentional, it is the result of the illness.

When the person has calmed down, act normally towards them. The person you care for may forget the incident quickly, or may feel awkward about it. Acting normally can help you both move forward. If you think they are in pain or ill, contact their DOCTOR.

People with dementia may become suspicious of others

Dementia can make some people become very suspicious. This can be due to memory loss, lack of recognition of familiar faces and general confusion caused by the effects of the disease on the brain.

The person you care for may accuse you or their friends and neighbours of taking their possessions. They may believe that everyone is out to get them. If they lose items, they may panic and convince themselves that they have been burgled. Their behaviour may seem delusional and paranoid, but as their carer, try to remember that the way they feel is very real.

Listen to their worries, calm them down and, if you're sure that their suspicions are unfounded, try to change the subject.

Drug treatment for dementia-related behaviour

In extreme circumstances, such as if the person's behaviour is harmful to themselves or others, and all methods of calming them have been tried, a doctor may prescribe medication. If you want information about drugs to help manage behavioural symptoms of dementia or if you're concerned about the side effects of medication, speak to the person's DOCTOR.

If you are looking after someone with dementia

Sources of help and support

A dementia diagnosis can come as a shock to the person with the condition and those around them. However, there are sources of help and support for everyone involved. It's natural to worry about the future, but it's important to remember that you're not alone.

Get an assessment

One of the first steps to take is to get a health and social care assessment. This assessment is how a person with dementia, and the person or people looking after them, gets help and support from their local authority social services department. The assessment is carried out by social services to find out what help and support you need – such as healthcare, equipment, help in your home, or residential care. Services can include:

disability equipment and adaptations to your home

day centres to give you or the person who cares for you a break

care homes

Care options for people with dementia

Many people with dementia stay in their own home if they have adequate support, either from family carers, community nurses or paid care workers. Being in familiar surroundings can help people cope better with their condition.

If the person you care for moves into residential care, try to make their room as familiar as possible. For example, put photos of family and friends where they will see them every day. Favourite pictures, furniture and ornaments could also make them feel more at home.

You may be able to arrange a trial period in a care home for the person you care for.

Some people with severe dementia may need palliative care in a hospice, where they can receive good nursing care and pain control.

Caring for someone with dementia at home

With the right support, someone who has dementia may be able to continue living at home for a long time.

Although having dementia can reduce a person's ability to live independently, there is a variety of support available to help them. If you care for someone with dementia and want to help them to continue to live at home, you can find advice and resources below in the following areas:

Feeding

Dressing

Washing and bathing

Moving and handling

Mobility

Safety in the home

Telecare technology

Advance care planning

General support services that can help someone with dementia

Helping someone with dementia to feed themselves

When it comes to mealtimes, a person with dementia may stop recognising the food in front of them. They may also struggle to use a knife and fork if their dementia affects their physical co-ordination, and find it hard to chew or swallow food. Further behaviour problems can result in the person with dementia refusing help with eating.

These factors can result in a limited diet for someone with dementia, which, in extreme cases, can lead to malnutrition. However, there are steps that can be taken to prevent this from happening.

Dressing someone with dementia

As dementia progresses, a person's concentration and co-ordination decreases and they need more help with dressing. It's important that they are able to carry on deciding what they wear for as long as possible, but if they do need help, try to offer it with tact and sensitivity.

Make sure the person with dementia wears clothes that are suitably warm or cool depending on the weather, that they have on layers if necessary and that they are dry.

If you're helping them to buy new clothes, encourage them to choose clothes that are easier to manage, for example, clothes which have poppers instead of buttons.

Helping someone with dementia to wash and bathe

For most adults, washing is a personal and private activity, so it can be hard for the person with dementia to adjust to having someone help them with this. It can also be challenging for you as a carer to adjust to this level of caring if you're new to it. Try to approach it in a positive and open-minded way, as this will help prevent it from being a difficult experience for either of you.

There are also practical things to consider. A person might have difficulties getting in and out of the bath, lose recognition of the importance of personal hygiene, or resist help because of a desire for dignity and autonomy.

Help with sitting, standing, moving and lifting

If you care for someone with advanced dementia, there will be many situations where you will need to physically handle them, for example, to help them in and out of bed, the bath, going to the toilet, or perhaps to lift them up if they have fallen.

However, unless you take the necessary precautions while lifting or moving someone, you may be at risk of injury, for example you may injure your back.

If you start having to move someone regularly because they are unable to move themselves, contact your local authority to ask for a community care assessment for the person with dementia. This is the best way to access help, equipment and training for moving a person.

Mobility problems in dementia

If the person with dementia develops mobility problems, they may benefit from using a wheelchair outside the home. They are more likely to need an attendant-

propelled wheelchair, in which case, as a carer, you will need to consider what works for you as well as the person sitting in it. This includes issues such as whether you want a wheelchair that can be folded to fit into a car.

Safety at home and dementia

Someone with dementia is more at risk of being involved in accidents at home, particularly as the dementia progresses. This is because their sense of balance and ability to react quickly is reduced. Their memory and judgment are both increasingly affected too.

Stress and confusion experienced by the person with dementia, or tiredness on the part of their carers, can also increase the chances of an accident occurring. Furthermore, having memory loss and difficulty learning new things means that someone with dementia may forget where they are, where things are and how things work.

For all these reasons, it's worth taking simple steps to help the person with dementia to navigate their home more easily and safely. But try not to make major changes overnight as this can be alarming or upsetting to the person with dementia.

Installing specialist equipment and facilities can go a long way towards helping someone with dementia to continue living at home safely. Read this advice about how the home environment can be adapted for someone with dementia.

How telecare technology can help with dementia

Telecare is a term used to describe personal alarms and health-monitoring devices that can help people with disabilities and long-term conditions to live more independently. Telecare can be particularly helpful if you're caring for someone with dementia.

Telecare and telehealth services can give peace of mind to the person with dementia and their relatives, by confirming that they are safe at home and their health is stable. For example, telecare can help reassure you – from a distance – that the person you care for has got out of bed (through a bed pressure sensor) but hasn't left the house (front door sensor).

Find out more about telecare and telehealth, including what's available.

Advance care planning for people with dementia

'Advance care planning' (ACP) is a way to ensure that people get the support they want. ACP means that everyone involved in looking after someone with dementia, including doctors, care workers, family carers and the person themselves, needs to think about, discuss and then record the person's wishes regarding their ongoing care.

By ensuring that everyone understands what the person's preferences are, it is more likely that the person will be supported as they would like to be, even if they are unable to say this in the future. For someone with dementia this is particularly important, as it can reduce anxiety, which can be a cause of challenging behaviour.

Dementia and managing money

People with dementia need to organise their financial and legal affairs while they are able to make decisions. It is a good idea to get professional advice about wills, pensions, how to manage any financial assets that you have, and how to ensure that any partner or children are protected and financially secure.

If you have dementia, you may want to consider appointing a person to manage your money in case you are no longer able to do so yourself. This is called Lasting Power of Attorney, and can be also be done to enable the nominated person to make decisions about health and welfare matters on your behalf.

If you are looking after someone with dementia, you may find yourself helping to manage their daily finances and paying their bills. This may be dependent on the person's disability or mental capacity and should be discussed with them in advance.

Anyone who is looking after someone with dementia should also check whether they can claim Carer's Allowance. You can get advice and help about

claiming benefits from your local social security office, voluntary organisations and support groups.

Power of attorney

There may be a time in the future when your symptoms mean you are no longer able to give consent. You may wish to give a relative you trust the power to make decisions about you if you are unable to. This is known as power of attorney.

There are three different types of power of attorney:

lasting power of attorney (LPA) for matters relating to property and affairs

LPA for matters relating to the person's welfare

The LPA has to be made in a fixed legal way and is not legally recognised until it is registered with the Office of the Public Guardian. The person making a power of attorney for property and affairs can register the LPA while they are able to make decisions for themselves, if desired. A personal welfare LPA may only be registered when a person has lost capacity. Separate powers of attorney can be made for either LPA, or both LPAs can be appointed to the same attorney.