

Massaging a Client with Dementia

Continuing Education E-Book



By Melissa Wood, ND, MTI, LMT



**MASSAGING A CLIENT WITH DEMENTIA
FOR LICENSED MASSAGE THERAPISTS**

6 CE HOURS

Approved By Texas Department of Licensing & Regulation



Massaging a Client with Dementia

for Licensed Massage Therapists

6 CE Hour Continuing Education Class

Welcome!

This online class is developed to educate licensed massage therapists about dementia and how to massage a client with the condition. Dementia affects the individual's physical and mental well-being, requiring a sensitive and informed approach to care. Understanding dementia allows you, as a massage therapist, to tailor your techniques to the client's specific needs while being mindful of the challenges. By being knowledgeable about dementia, massage therapists can create a safe, comforting environment that enhances the therapeutic benefits of massage, helping to improve the client's quality of life and provide much-needed relief from physical and emotional stress.

This course comprehensively explores the condition, including its symptoms and stages, along with evidence-based research and practical considerations for clients with dementia. Learning about dementia increases awareness and allows massage therapists to understand its impacts.

This course will enhance your expertise to help you remain competitive in the field of massage therapy. Continuing education and expanding your skill set are essential aspects of professional development for massage therapists. It is my hope that this course material will be interesting, educational, and a valuable resource to assist you with your massage therapy clients and to help you maintain a long and rewarding career in the massage therapy industry.

About the Instructor



My name is Melissa Wood, and I am a Naturopathic Doctor, Massage Therapy Instructor, and Licensed Massage Therapist located in Sherman, Texas. I have been studying alternative and natural medicine for over 30 years.

My mission is to enable everyone on this planet to be healthy and to be actively involved in their health and healing. My goal is to offer information that will provide you with new insights that are useful in your path to wellness. I envision a time when everyone will seek out herbs, essential oils, vitamins, minerals, nutritional supplements, and whole foods (not processed food!) to help heal themselves, as these are very powerful tools for enhancing your health and well-being.

APPROVED MASSAGE THERAPY INSTRUCTOR

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Disclaimer

I am a Naturopathic Doctor (N.D.), Massage Therapy Instructor (MTI), Licensed Massage Therapist (LMT), and an Approved CE Provider in the State of Texas. I am NOT a Medical Doctor (M.D.). I have been trained in holistic and natural therapies for the body and do not diagnose any medical condition nor prescribe any medications. Should you need immediate medical or psychiatric assistance, please telephone 911 or seek immediate treatment at a hospital emergency room. Nothing listed within this e-book class should be considered as medical advice for dealing with a given problem. You should consult your health care professional for individual guidance for specific health problems. It is understood that the author is solely responsible for the content of this work and is **NOT** responsible for your usage of said information, either personally or professionally, with your clients. In addition, you should ALWAYS encourage your clients to see their health care professionals for help with any medical issues they are having.

I encourage you to make your own health care decisions based on your research and in partnership with a qualified healthcare professional. The use of this information, suggestions, recommendations, products, or services should be based on your own due diligence, and you agree I am not liable for your success or failure.

Melissa M. Wood, ND, MTI, LMT



GOALS & OBJECTIVES

1. Learn about types of dementia, symptoms, and how they affect cognitive and physical functions to help therapists recognize the unique challenges faced by clients with this condition.
2. Acquire communication strategies and techniques tailored to clients with dementia, focusing on methods that build trust and ensure the client's comfort during massage sessions.
3. Acknowledge the safety protocols and ethical considerations necessary when working with dementia clients.
4. Understand which adjustments are needed to tailor massage sessions to meet the specific needs of dementia clients.
5. Establish how to create a therapeutic environment that enhances the effectiveness of the massage and protects the client and the therapist.
6. Emphasize the importance of working with caregivers and family members to ensure that massage therapy complements other care strategies.
7. Validate the need for self-care and highlight strategies to manage emotional and physical well-being when working with dementia clients.



T E X A S
M A S S A G E C E U

Massaging a Client with Dementia

for Licensed Massage Therapists

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“Do all the good you can, by all the means you can, in all the ways you can, in all the places you can, at all the times you can, to all the people you can, as long as ever you can.”

-John Wesley



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CHAPTER 1

Introduction

Dementia and Its Impact on People and Their Families

WHAT IS DEMENTIA

Dementia is a complex condition characterized by a decline in cognitive function that interferes with daily life and activities. More specifically, **dementia is an overall term for a set of symptoms that cause several conditions** affecting the brain, making it harder for a person to remember things, think clearly, or make decisions.

Dementia causes more than memory loss. Dementia is a journey that many people and their families find themselves on, and it can bring challenges that require patience, understanding, and compassion. For the individual, it often starts with mild memory problems, like forgetting names or where things are, but over time, it can get worse, causing confusion, mood changes, and difficulty with everyday tasks. People with dementia may struggle to communicate and might not recognize familiar faces or places. Dementia is a serious condition that can change how a person behaves and interacts with others, and it requires special care and understanding.

While dementia can make it harder for someone to remember things or communicate clearly, it's important **to remember that the person is still there, with their own feelings, experiences, and a need for connection.** Dementia profoundly impacts not only those diagnosed but also their families and caregivers. It is a challenging condition that requires comprehensive care and support, as it affects every aspect of a person's life, from their cognitive abilities to their emotional and social well-being. Understanding what dementia is and how it progresses is essential for providing compassionate and effective care to those living with this condition. By learning about dementia, we can better support those living with it, helping them to feel safe, valued, and cared about.



Importance of Understanding Dementia for Massage Therapy

This continuing education course is designed to equip massage therapists with the knowledge and skills necessary to provide effective and compassionate care for clients with dementia. Dementia affects not only cognitive abilities but also emotional and physical well-being, making it necessary for you--as a massage therapist who will likely encounter clients with dementia--to recognize and respond to the unique challenges these clients face.

KNOWLEDGE TO TAKE ON THIS GLOBAL CHALLENGE

Dementia is becoming increasingly prevalent worldwide due to the aging population. According to the World Health Organization (WHO), the number of people living with dementia is projected to nearly *triple* by 2050 to be around 139 million people with dementia.¹ The growing prevalence is linked to factors such as longer life expectancy and advancements in medical care, allowing more people to live into the age groups most affected by dementia. **With more individuals entering these age brackets, the likelihood of massage therapists encountering clients with dementia rises significantly.**

As the incidence of dementia increases, massage therapists working in general practice, senior care facilities, or community settings will find that clients with dementia make up a more significant portion of their clientele.



This growing demand emphasizes the importance of therapists pursuing continuing education like this class in dementia care, **ensuring you can provide safe, supportive, and effective treatments** while enhancing the quality of life

for clients affected by cognitive decline.

Having a deeper understanding of dementia enables you to recognize the signs of dementia and understand the progression of the disease so you can adapt your techniques to meet the specific physical and emotional needs of these clients. Your modified approach can accommodate communication barriers, cognitive impairment, and behavioral challenges, offering both physical relief and emotional comfort, ensuring safer and more effective treatments.

This continuing education class will also equip you with non-pharmacological strategies for alleviating common symptoms of the disease, such as anxiety, agitation, and depression. **Your gift of touch is a much-needed therapy, offering far more than relaxation.**

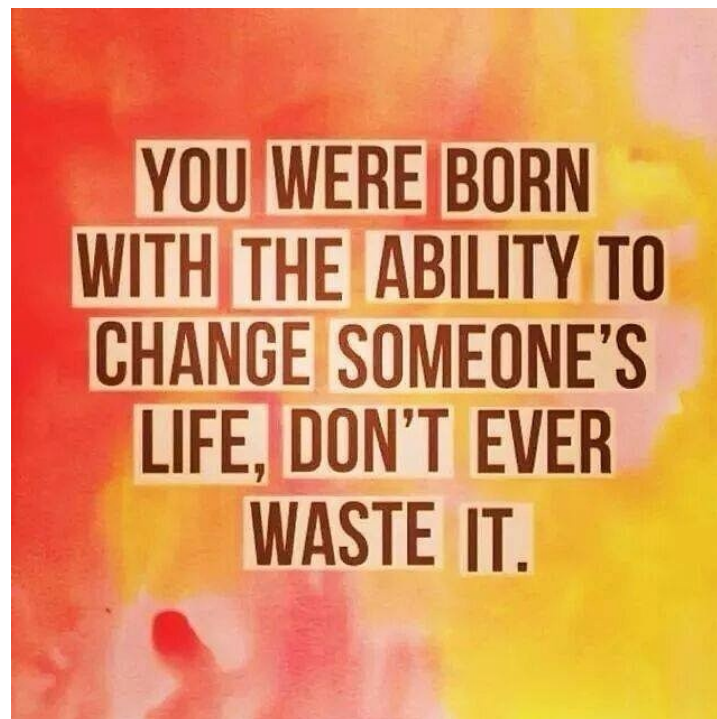
Additionally, being well-versed in dementia care enables you to collaborate more effectively with other healthcare professionals. Understanding dementia not only helps in managing the client's immediate physical symptoms but also provides insights into their broader healthcare needs, ensuring holistic, person-centered care. This expertise can differentiate your practice, opening up new opportunities in specialized care environments, such as memory care facilities, or even broadening your client base in your general practice.

This course will explore the stages of dementia, from the early signs of cognitive decline to the more advanced stages, where individuals may require significant assistance with daily activities.

You will learn to identify appropriate massage techniques that align with each stage of dementia and how to modify the techniques and communication style according to the client's current stage, ensuring that the massage is both therapeutic and soothing. These skills will help you offer a more comprehensive care plan with meaningful support that enhances the physical, emotional, and psychological health of your clients.

By comprehending how **dementia affects memory, communication, and behavior**, you can equip yourself with the knowledge to handle the unique challenges these clients face and have the ability to choose and apply the right massage techniques for each stage of the condition.

By the end of this course, you will gain the knowledge to create a therapeutic environment that provides a safe, supportive, and beneficial experience for them. You will likely recognize which strengths you can build on to market your services better **to this particularly needy and growing population**. Moreover, a deeper understanding of dementia allows you to contribute positively to the client's overall well-being and quality of life, which will make your work even more meaningful.



The first step to reducing the stigma and promoting the health of this population is understanding what dementia is.

WHAT EXACTLY IS DEMENTIA?

Dementia, scientifically, is a syndrome caused by various brain diseases that result in progressive and irreversible cognitive decline. **Alzheimer's disease is often used synonymously with dementia as it is the most common form of dementia.**

Dementia arises from the death of brain cells and the deterioration of their connections. The loss of neurons leads to atrophy in specific brain regions, such as the hippocampus, in Alzheimer's disease—the most common type of dementia. The hippocampus is a small part of the brain but plays a key role in learning, memory, and spatial awareness. The hippocampus is often one of the first areas of the brain to be damaged by Alzheimer's disease and other types of dementia.² This damage can make it difficult to form new memories or learn new information.



Dementia is clinically diagnosed when cognitive deficits interfere with daily life and represent a decline from previous functioning. Symptoms often worsen over time due to the progressive nature of brain damage.

Research has identified amyloid plaques in the brain as one of the hallmarks of Alzheimer's disease. Amyloid plaques are protein fragments that accumulate between nerve cells, disrupting communication. Another target for

treatment is tau, a protein that forms tangles inside brain cells, impairing function. Advanced diagnostic tools like PET scans, cerebrospinal fluid analysis, and genetic testing help identify specific biomarkers, such as amyloid-beta or tau proteins, that indicate the type and progression of dementia.

In recent years, studies have highlighted other connections, including iron metabolism abnormalities, as potentially key to understanding dementia.³ Today's research often takes a more **holistic approach, looking at lifestyle, environmental, and genetic factors alongside traditional biomedical research.**⁴ These developments reflect an evolving understanding of dementia, shaping current research and the support systems available to those affected.

THE STATISTICS

Globally, over 55 million people are living with dementia, a number that is **expected to reach 139 million by 2050 as the population ages.**⁵—*that is more than double!*

In the United States, about 6.7 million people have Alzheimer's disease and related dementias, which includes 5.6 million people aged 65 and older.⁶ By 2060, the number of Alzheimer's disease cases is predicted to rise to an estimated 14 million people,⁷ and Alzheimer's is only one kind of dementia!

Minority populations are being affected the most, with cases of Alzheimer-related dementia among Hispanics increasing seven times over today's estimates and cases among African Americans increasing four times over today's estimates.⁸ Among people 65 and older, African Americans have the highest prevalence of Alzheimer's and related dementias (13.8%), followed by Hispanics (12.2%), non-Hispanic whites (10.3%), American Indian/Alaska Natives (9.1%), and Asian/Pacific Islanders (8.4%).

Women are disproportionately affected by dementia, both directly and indirectly. Women experience higher disability-adjusted life years and mortality due to dementia but also provide 70% of care hours for people living with dementia.⁹

Stats at a Glance

By the Alzheimer's Association

[alz.org](https://www.alz.org)

- An estimated 6.7 million Americans over age 65 are living with Alzheimer's dementia in 2023.
- About 1 in 9 people (10.8%) over age 65 have Alzheimer's dementia.
- Two-thirds of Americans over age 65 with Alzheimer's dementia (4.1 million) are women.
- Deaths due to Alzheimer's disease between 2000 and 2019 have more than doubled, increasing 145%.
- 1 in 3 seniors dies with Alzheimer's disease or another dementia.
- In 2022, more than 11 million caregivers of people with dementia provided an estimated 18 billion hours of unpaid care, a contribution valued at \$339.5 billion.
- Nearly half of all caregivers (48%) who provide help to older adults do so for someone with Alzheimer's or another dementia.
- 55% caring for people living with Alzheimer's report there are not enough dementia care specialists in their communities.



Considering the affliction of dementia on the population, the numbers of actual individuals with cases do not account for the many who are also impacted by the condition—meaning the families, the caregivers, the medical workers, the housing facilities, and so on. Dementia has a profound impact not only on those diagnosed but also on their families and caregivers, with an estimated 16 million Americans providing unpaid care for individuals with dementia, contributing to a combined total of over 18.5 billion hours of care annually.¹⁰



There are over 10 million new cases of dementia each year worldwide, implying one new case every 3.2 seconds.¹¹

The Population is Aging

The proportion of people aged 65 and older is growing faster than the population under 65. By 2050, the number of people aged 65 and older is expected to double to 2.1 billion, and the number of people aged 80 and older is expected to triple.¹²



By 2050, the number of individuals over 65 across the world will be twice the number of children under age five and almost equivalent to the number of children under 12 years.¹³ **Our aging population is expected to become one of the most significant social impacts on nearly every industry, including massage therapy.**

Crediting the successes of improved health care over the last century, many are now living longer and healthier lives, and so the world population has a greater proportion of older people. That said, dementia rates rise sharply with age. As of 2024, it was estimated that 5-8% of people over 65 have some form of dementia.¹⁴ This percentage is now considered to double about every 5 years after age 65, meaning that "as many as half of people in their 80s have some loss of thinking ability," according to WebMD.

Alzheimer's is also the fifth-leading cause of death among Americans age 65 and older, and one in three older Americans dies with Alzheimer's or another dementia.¹⁵

Dementia mainly affects older people, although there is a growing awareness of cases that start before the age of 65.

CHAPTER 2

Historically Uncommon

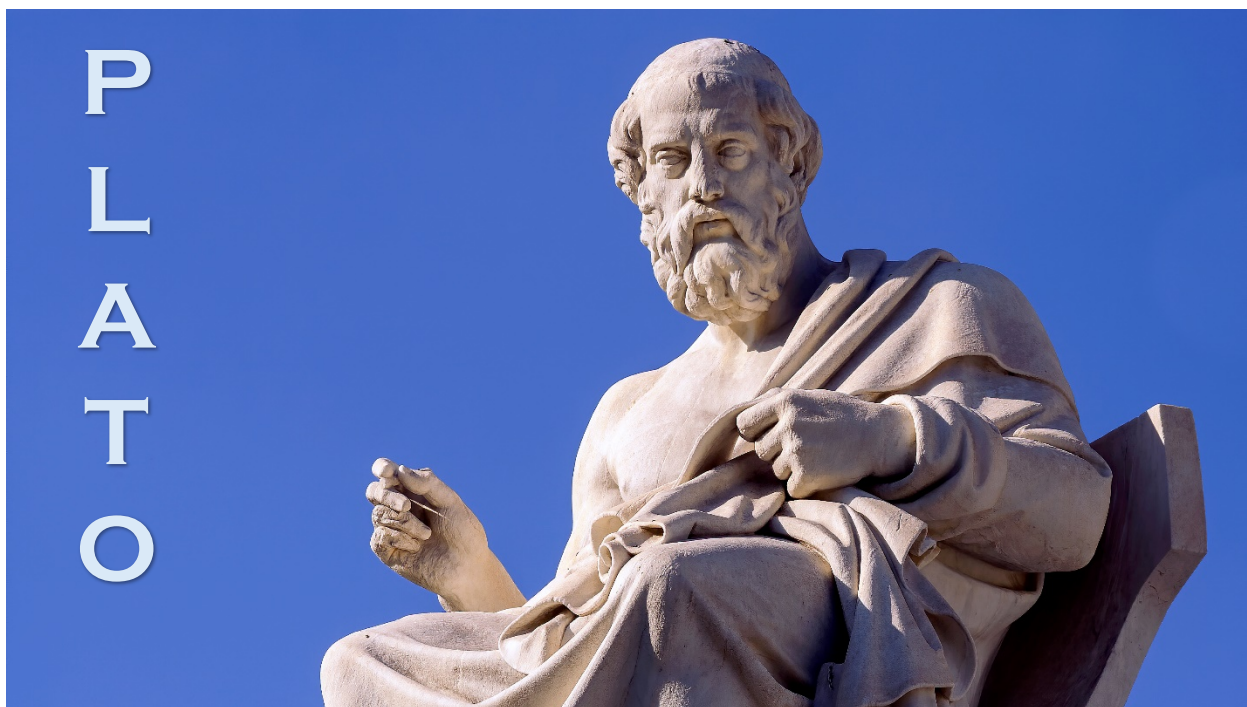
The History of Dementia Care

It may seem like age-related dementia has always been a part of human history, even reaching back to ancient times. However, as widespread as dementia is today, an examination of classical Greek and Roman medical writings reveals that **severe memory loss was quite rare** 2,000 to 2,500 years ago.¹⁶



Ancient Times

There are no ancient medical texts dedicated to the advanced deterioration of intellectual abilities. However, the few references to symptoms of cognitive disabilities attribute them to age or spiritual digression. During the Middle Ages, mental decline in older adults was often misunderstood or **attributed to supernatural causes, such as possession** or "melancholia." There was little focus on biological explanations for cognitive issues, and treatments were primitive and largely ineffective.



In ancient Greece, between 570 and 495 BCE, philosophers like Plato, Pythagoras, and Aristotle touched upon mental decline as a consequence of aging.¹⁷ Aristotle referred to dementia-like symptoms as a decline in memory and reasoning in older adults. These references are thought to be in regard to mild cognitive impairment, but not the major loss of memory, speech, and reasoning that are the known progression of modern dementia. Ailments such as insomnia, deafness, and dizziness were mentioned as symptoms of physical decline in association with old age in the writings of Hippocrates,¹⁸ who was regarded as a renowned physician. Still, his only mention of cognitive disorders was as a result of brain injury.

Dementia in the Modern Sense

The term “dementia” comes from the Latin word ‘demens,’ which means “senseless” or “**being out of one's mind.**” The term was first known to be used around 600 AD by Saint Isidore, the archbishop of Seville, in his book *Etymologies*.¹⁹ The term has been used since the 13th century to mean all kinds of mental illness. However, dementia was first mentioned in the modern sense—as a declining cognitive condition—to the medical community in the 18th century by the French psychiatrist Philippe Pinel, and he is, therefore, credited with coining the term.



Alois Alzheimer

Pinel became known for his humane treatment of the mentally ill and established that a patient's **mental illness did not mean the patient was sinful, deserving of punishment, or demonically influenced.** He suggested that the cognitive decline was due to social stresses, heredity, and psychological damage.²⁰

At the turn of the 20th century, the concept of dementia evolved significantly. In 1906, **German psychiatrist Alois Alzheimer** made the landmark discovery of abnormal brain plaques and neurofibrillary tangles in a woman named Auguste Deter, a patient suffering from severe memory loss and confusion. This condition became known as Alzheimer's disease, which provided a new way of understanding **dementia as a specific pathological condition rather than just a natural part of aging.**²¹

Dementia Developments

Throughout the 20th century, researchers uncovered key details about the biological underpinnings of dementia. In 1976, the discovery that Alzheimer's patients exhibited lower levels of the neurotransmitter acetylcholine was pivotal in the development of cholinesterase inhibitors, which are still used to manage symptoms today.

Genetic breakthroughs in the early 1990s linked the build-up of amyloid plaques to Alzheimer's, helping to define the "amyloid cascade hypothesis," which continues to influence treatment development.

Recent advances in dementia research focus on biomarkers, genetic testing, and inflammation as key areas of study, with the hope of diagnosing and treating dementia earlier and more effectively. As research continues, the emphasis on **preventing** cognitive decline and improving the quality of life for those affected by dementia remains central to modern healthcare efforts.

Why is Dementia More Common Today?

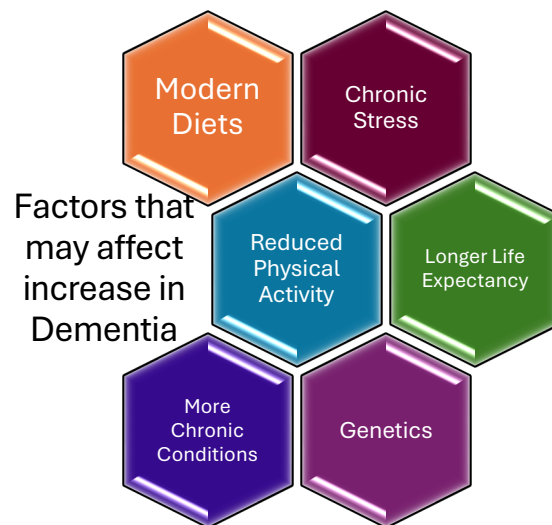
Historically, dementia was ‘Exceptionally’ rare...“The findings suggest that today's epidemic of dementia, experienced by numerous nations around the world, could very well be a product of modern life. Indeed, recent studies have tied dementia and its most common subtype, Alzheimer's disease, to cardiovascular issues, air pollution, diet, and disadvantaged neighborhoods in urban environments, all of which are common afflictions of modernity.”²² –Science Alert

Dementia and cognitive decline may be more common today because of the **increased life expectancy**. People are living longer now than they did in the past, and aging is the greatest risk factor for dementia. With more individuals reaching older ages, the number of dementia cases has risen, making it more prominent in today's society.

Additionally, **improvements in medical understanding and diagnostic tools** mean dementia is recognized and discussed more often. In earlier times, symptoms of cognitive decline were often attributed to “senility” or simply the natural process of aging, without distinguishing them as symptoms of a specific disease. With better awareness today, dementia is more readily identified, contributing to the perception of its increased prevalence.

Today's lifestyles, with more sedentary habits, increased consumption of processed foods, and greater exposure to pollutants, may contribute to cognitive decline. Factors like modern diets, chronic stress, and reduced physical activity are certainly impacting brain health over time.

Finally, the **higher prevalence of chronic health conditions** in today's society, such as diabetes, cardiovascular disease, and obesity, may be contributing to the rise in dementia cases. Although genetics alone do not account for the rise, they add a layer of understanding to its prevalence today.

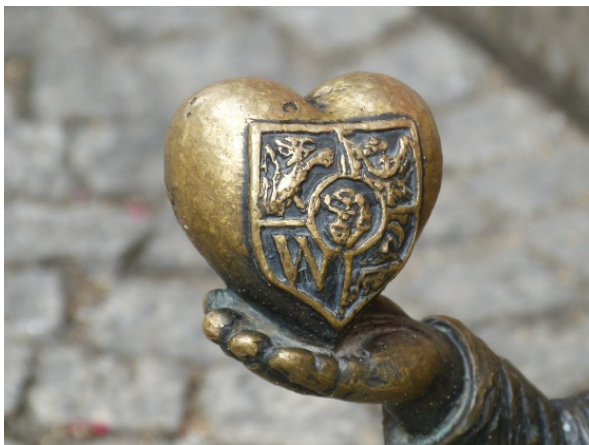


The History of Massage Therapy Used in Dementia Care

Massage therapy has long been recognized for its therapeutic benefits, particularly in reducing stress, anxiety, and muscle tension.

The use of massage as a therapeutic intervention for individuals with dementia has its roots in ancient healing practices but gained focused attention in modern times as the global population began aging. Massage therapy, historically used to promote relaxation, improve circulation, and alleviate stress, has been adapted to meet the needs of individuals experiencing cognitive decline. Ancient practices, such as Ayurvedic and Chinese medicine, emphasized the mind-body connection, recognizing touch as a powerful tool for healing. These principles are the foundation for modern approaches to dementia care.

Over time, research and evidence have highlighted the positive effects of massage on reducing agitation, improving mood, promoting relaxation, and improving health. The history of massage for mental health reflects the evolving societal views on alternative and complementary medicine, which is helping massage become more and more accepted and utilized as a respected component of healthcare.



In the 20th century, research into dementia care began to emphasize non-pharmacological interventions, including massage. Studies revealed that massage could help reduce agitation, anxiety, and depression—common symptoms in individuals with dementia. Its benefits are enhanced by the power of touch, which can help reduce stress, improve mood, and provide comfort to those living with dementia.

Research suggests that massage interventions can have a calming effect on individuals with dementia, leading to a reduction in wandering and other agitated behaviors. This positive response is boosted in part by the **social and physical isolation** that many dementia clients experience, especially in residential care settings where physical touch might be limited.



Massage therapy also has a long history of helping relieve **chronic pain**, which is often underreported in people with dementia due to communication challenges.

By reducing pain, massage can further decrease the frequency and intensity of agitated behaviors. The sense of comfort that results

from massage may also improve overall quality of life, restoring a sense of dignity to individuals with dementia.

The low-risk nature of massage, combined with its potential benefits, has always, and will always make it a valuable non-pharmacological option for managing symptoms like dementia-related indications.

Today, massage therapy is increasingly integrated into holistic care plans for individuals with dementia, emphasizing the importance of touch in maintaining quality of life as cognitive functions decline. In today's high-stress, fast-paced world, massage therapy has become essential for its well-documented ability to reduce stress, relieve pain, and promote overall well-being.

From ancient civilizations to its modern-day professionalization, massage has continuously adapted to meet society's changing needs. **As the world is becoming more afflicted with dementia, it becomes necessary for the practice of massage to be adapted, too.**

CHAPTER 3

Understanding Dementia

Recognizing Dementia

Remember that dementia is not a single disease but rather a broad term used to describe a range of symptoms that can occur when someone is living with various conditions, such as Alzheimer's disease. Dementia symptoms cover a range of neurological conditions that affect the brain, leading to a decline in cognitive functions such as memory, thinking, reasoning, and the ability to perform everyday activities. **Unlike normal aging, where some cognitive abilities slow down, dementia represents a more severe and progressive impairment** that interferes significantly with a person's daily life.

Dementia occurs when brain cells become damaged, leading to a deterioration in the brain's ability to communicate with itself and manage cognitive processes. This damage can be caused by a variety of factors, including diseases such as Alzheimer's, vascular issues like strokes, or other conditions that impact the brain.



The diseases that fall under the umbrella of "dementia" are the result of abnormal changes in the brain. These changes lead to a decline in cognitive abilities—such as thinking, memory, and decision-making—that is severe enough to interfere with daily life and the ability to function independently. In addition to affecting cognitive skills, dementia also impacts behavior, emotions, and relationships.

SIGNS OF DEMENTIA

Recognizing dementia in clients is crucial for massage therapists to provide appropriate care and adjust their techniques accordingly. While a formal diagnosis is made by healthcare professionals and is out of the scope of being a massage therapist, some signs can help you identify when someone may be experiencing cognitive decline associated with dementia. Here's what to look for:

Behavioral Signs

- Changes in Mood or Personality
- Apathy or Withdrawal
- Uncharacteristic Behavior

Cognitive Signs

- Memory Loss
- Confusion
- Difficulty Communicating
- Poor Judgment

Physical Signs

- Coordination Issues
- Appearing Disoriented
- Hygiene or Grooming Neglect

Emotional Signs

- Frustration
- Fear
- Anxiety
- Reliance on Others
- Outbursts or Anger Issues

DEMENTIA IS MORE THAN JUST AGING

Approximately 40% of people experience some degree of memory loss as a normal part of aging.²³ With age, gradual changes occur in both the body and brain, including the potential loss of neurons—nerve cells that communicate messages throughout the body. However, this memory loss does not interfere with daily living or independence for most individuals.

This mild memory decline, referred to as age-associated memory impairment, presents in ways that:

- Do not disrupt daily life
- Do not hinder the ability to complete normal tasks
- Do not impair the ability to learn or retain new information
- Are not caused by any underlying medical condition.

A small percentage of people may develop dementia as they age. Unlike those with typical age-related memory loss, individuals with dementia experience progressively worsening memory problems that eventually prevent them from being able to care for themselves.

Age-related forgetfulness	Signs of dementia
Having poor judgment or making a bad decision occasionally	Having poor judgment and making bad decisions often
Missing a monthly payment	Problems taking care of most monthly bills
Forgetting which day of the week it is	Losing track of the date and time of the year
Sometimes forgetting the right word	Struggles to have a conversation
Losing things once in a while	Misplacing things often and unable to find them

Dementia affects each person differently, and no two people will develop symptoms in the exact same way. The individual's personality, general health, and social situation are all unique factors that determine the impact dementia is likely to have. With that said, the condition is typically divided into stages: early, middle, and late. Each stage presents different challenges and requires different approaches in massage therapy.

The Difference Between Dementia and Alzheimer's Disease

There are many kinds of dementia, and **Alzheimer's is the most common type.**

About 70%-80% of people with dementia have Alzheimer's.²⁴

Diagnosing dementia involves assessing symptoms, medical history, and cognitive testing. The type of dementia is diagnosed based on patterns of symptoms, brain imaging (e.g., MRIs, CT scans), and sometimes lab tests to rule out other conditions. Alzheimer's is diagnosed through all of the same processes as the dementia screening, but sometimes with added testing for specific biomarkers (e.g., amyloid or tau levels in cerebrospinal fluid).

While Alzheimer's disease is the most common form of dementia, there are other types as well. There are as many as 50 different forms of dementia.²⁵ Other forms include vascular dementia, Lewy body dementia, and frontotemporal dementia, each with its own unique characteristics and progression patterns.



Common Types of Dementia

While all types of dementia share some cognitive symptoms, their causes, symptomatology, and progression differ significantly, which has important implications for diagnosis, treatment, and care.

ALZHEIMER'S DISEASE

The most common form of dementia is Alzheimer's disease, which accounts for 60-80% of cases. Because Alzheimer's disease is the most common form, the terms "Alzheimer's" and "dementia" often get used interchangeably, but they have different meanings. Alzheimer's disease is a type of brain disease, just as coronary artery disease is a type of heart disease.²⁶ It is characterized by the buildup of plaques and tangles in the brain (specifically amyloid plaques and tau tangles), which disrupt nutrient transportation between brain cells. This damage begins in the part of the brain that controls memory and gradually spreads to other areas, affecting a person's ability to think, **reason, and eventually carry out the simplest tasks.**

"Alzheimer's disease is thought to progress for at least 18 years before any symptoms are apparent with small changes occurring in the brain that are unnoticeable to the person affected. Only after years of brain changes do individuals experience noticeable symptoms, such as memory loss and language problems.

"Symptoms occur because nerve cells (neurons) in parts of the brain involved in thinking, learning, and memory (cognitive function) have been damaged or destroyed.

"Individuals typically live with Alzheimer's symptoms for years.

"Over time, symptoms tend to increase and start interfering with individuals' ability to perform everyday activities. At this point, the individual is said to have dementia due to Alzheimer's disease, or Alzheimer's dementia. As the disease progresses, neurons in other parts of the brain are damaged or destroyed. Activities that used to be core to the individual's identity, such as planning family events or participating in sports, may no longer be possible. Eventually, neurons in parts of the brain that enable a person to carry out basic bodily functions, such as walking and swallowing, are affected. People in the final stages of Alzheimer's disease are bed-bound and require around-the-clock care. Alzheimer's disease is ultimately fatal."²⁷-- Alzheimer's Society.



While Alzheimer's and other forms of dementia involve cognitive decline, the symptoms can differ depending on the type of dementia. Alzheimer's typically begins with memory loss and confusion, particularly about recent events, while other types of dementia may initially affect judgment, movement, or speech.

Alzheimer's disease follows a pattern of progression, beginning with mild memory loss and advancing to severe

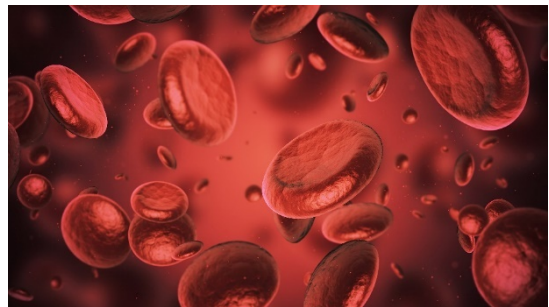
cognitive impairment and physical decline. Other forms of dementia may progress differently; for example, vascular dementia often progresses in a stepped manner following strokes.

Alzheimer's disease is diagnosed based on specific criteria, including a detailed medical history, cognitive tests, brain imaging, and sometimes biomarkers. Dementia, on the other hand, is diagnosed based on a broader set of symptoms without necessarily identifying the specific underlying cause unless further investigation is done.

VASCULAR DEMENTIA

The second most common type of dementia is vascular dementia. Vascular dementia is also a general term for describing problems with thinking processes. This form of dementia results from microscopic bleeding and blood vessel blockage, thereby reducing blood flow to the brain.²⁸

The reduced blood flow to the brain deprives brain cells of the oxygen and nutrients they need to function properly. This condition often occurs after a stroke or series of mini-strokes (transient ischemic attacks), which damage blood vessels in the brain. Over time, this damage can lead to a decline in cognitive abilities, such as memory, reasoning, and judgment; unlike Alzheimer's disease, where memory loss is typically the first and most prominent symptom, vascular dementia may initially present with more subtle signs, such as difficulty with planning, organizing, or making decisions.



The progression of vascular dementia can vary depending on the severity and location of the blood vessel damage, and it often occurs alongside other types of dementia, such as Alzheimer's, in a condition known as mixed dementia.

LEWY BODY DEMENTIA

Lewy body dementia (LBD) is distinct from both vascular dementia and Alzheimer's disease in several ways, particularly in its underlying pathology, symptoms, and progression. Lewy body dementia is characterized by the presence of abnormal protein deposits called "Lewy bodies" in the brain. These deposits disrupt the brain's normal functioning and affect cognitive abilities, movement, behavior, and sleep. One of the hallmark features of LBD is its fluctuation in cognitive abilities, where a person might experience sharp variations in alertness and attention throughout the day. Additionally, LBD often presents with vivid visual hallucinations and Parkinsonism—symptoms similar to Parkinson's disease, such as tremors, stiffness, and slow movement—which are less common in Alzheimer's and vascular dementia.



FRONTOTEMPORAL DEMENTIA

Frontotemporal dementia (FTD) is a type of dementia that primarily affects the front and sides of the brain, areas that control behavior, personality, and language. Unlike Alzheimer's disease, which often begins with memory loss, FTD usually starts with noticeable changes in a person's behavior, such as becoming more impulsive, lacking empathy, or socially inappropriate, or with difficulties in speaking and understanding language. Over time, these changes become more pronounced, making it challenging for individuals to manage everyday tasks and interactions.

FTD tends to occur at a younger age than other forms of dementia, often affecting people in their 50s or 60s. This type of dementia is characterized by changes in personality and behavior and can also make it difficult to use language. It's caused by abnormal amounts of tau and TDP-43 proteins in the frontal and temporal lobes of the brain.

YOUNGER-ONSET DEMENTIA

Younger-onset dementia refers to any form of dementia that develops in individuals under the age of 65. It can include conditions like Alzheimer's disease, frontotemporal dementia, and others, but the key difference is the age of onset. Because younger people are typically in the midst of their careers and family life, younger-onset dementia can be particularly disruptive. The symptoms are similar to those in older adults but may be misdiagnosed or overlooked because dementia is less expected in this age group. This form of dementia often requires specialized support and resources to help those affected navigate the unique challenges of dealing with dementia at a younger age.

MIXED DEMENTIA

Mixed dementia occurs when a person develops more than one type of dementia simultaneously. The most common combination is Alzheimer's disease and vascular dementia, though other forms can also be involved. Mixed dementia can lead to a broader range of symptoms, as different types of dementia affect the brain in different ways. For example, a person might experience the memory loss typical of Alzheimer's disease along with impaired judgment or difficulty with decision-making that is more characteristic of vascular dementia. Diagnosing mixed dementia can be challenging, and treatment may need to address multiple underlying conditions simultaneously.

OTHER TYPES OF DEMENTIA

- **Alcohol-Related Dementia:** Chronic alcohol abuse can lead to alcohol-related dementia, where prolonged alcohol consumption damages brain cells and leads to cognitive decline. The condition can present with memory problems, difficulty with problem-solving, and changes in behavior. Wernicke-Korsakoff syndrome, a severe form of alcohol-related brain damage, is one example where thiamine deficiency is often due to alcohol abuse.
- **HIV-Associated Dementia:** This type of dementia occurs in some individuals with advanced HIV/AIDS. The virus can damage brain cells and lead to cognitive impairments, including memory loss, difficulty concentrating, and changes in mood and behavior. Early antiretroviral treatment can reduce the risk of developing HIV-associated dementia.
- **Dementia Caused by Huntington's Disease:** Huntington's disease is a genetic disorder that causes the progressive breakdown of nerve cells in the brain. In addition to movement problems, Huntington's can lead to cognitive decline and dementia. Symptoms often include difficulty with thinking, memory, and judgment, along with mood swings and changes in personality. Since Huntington's disease is hereditary, family members may also be at risk.

- **Creutzfeldt-Jakob Disease (CJD):** CJD is a rare and rapidly progressive form of dementia caused by abnormal prion proteins in the brain. It typically leads to a rapid decline in mental function, including memory loss, confusion, and changes in behavior, as well as physical symptoms like muscle stiffness and twitching. CJD progresses much more quickly than other types of dementia, often leading to severe disability or death within a year of onset.
- **Traumatic Brain Injury (TBI).** TBI is a significant cause of neurological damage and has been linked to an increased risk of developing dementia later in life. The relationship between TBI and dementia is complex and involves various biological and pathological processes that can contribute to cognitive decline. Traumatic brain injury is commonly caused by repeated head trauma, often seen in boxers, football players, or soldiers. The symptoms of dementia resulting from TBI vary depending on the area of the brain affected. TBI can lead to depression, sudden outbursts, memory loss, and speech difficulties. It may also cause slow movement, tremors, and stiffness. In some cases, these symptoms may not emerge until years after the injury.



DELIRIUM VS. DEMENTIA

- **Delirium** is a sudden, severe change in brain function that, like dementia, causes confusion, disorientation, and problems thinking and remembering. However, delirium usually comes on much more quickly, typically within a day or two.²⁹ Dementia takes months and years to manifest. Delirium can cause some people to be drowsy or withdrawn, while others will be agitated and distressed. Changes in activity levels—hyperactivity with too much activity, hypoactivity with too little activity, and sometimes both changing throughout the day—can be symptoms of delirium. Contrastingly, dementia steadily worsens over time.

SENILITY VS. DEMENTIA

- Historically, "senility" referred to cognitive decline associated with aging. The term is now considered outdated and vague, as it does not specify any underlying medical condition or cause. It was often used in a way that stigmatized older adults, implying that cognitive decline was an inevitable and untreatable consequence of aging, which we now know is not true. Dementia, on the other hand, is a medical diagnosis with progressive symptoms caused by neurodegenerative conditions.

CHAPTER 4

Causes and Risk Factors

Unchangeable vs. Modifiable Risk Factors

Dementia has various causes and risk factors, which can be grouped into several main categories. Understanding these can help clarify how dementia develops and who might be at higher risk.

Identifying and addressing modifiable risk factors, such as cardiovascular health, lifestyle habits, and mental well-being, can be key in lowering the risk or delaying the onset of dementia.



Some factors, such as age, are unchangeable, while others can be managed to lower the risk. Other factors for dementia include family history, Down syndrome, poor diet filled with processed and ultra-processed foods, excessive alcohol consumption, cardiovascular issues, depression, air pollution, head trauma, sleep problems, and low vitamin levels. Although dementia cannot be fully prevented, maintaining mental and physical activity, quitting smoking, managing health

conditions, and eating a healthy diet with an emphasis on getting sufficient vitamin D, B-6, B-12, and folate may help reduce risk.

As mentioned previously, Alzheimer's Disease is the most common cause of dementia. **Dementia occurs from nerve cell death in the brain.** Therefore, the other progressive forms of dementia, which worsen over time, include vascular dementia--which results from damage to the brain's blood vessels are often linked to strokes, high blood pressure, or diabetes. Lewy body dementia occurs due to abnormal protein clumps in the brain, affecting cognition and motor skills. In contrast, frontotemporal dementia targets the brain's frontal and temporal lobes, leading to personality, behavior, and language changes. And, with mixed dementia, more than one type, such as Alzheimer's and vascular dementia, coexist.

Furthermore, conditions linked to dementia include Huntington's disease, traumatic brain injury, Creutzfeldt-Jakob disease, and Parkinson's disease dementia. Other conditions, including chronic traumatic encephalopathy (CTE), HIV, or alcohol-related brain damage (Korsakoff syndrome), can also result in dementia or dementia-like symptoms.

Additionally, infections, metabolic disorders, nutrient deficiencies, and medication side effects can cause dementia-like symptoms that may improve with treatment. Understanding the risk factors and preventative strategies for dementia can significantly benefit you as a massage therapist working with dementia clients. For instance, **knowing that cardiovascular health and regular physical activity can influence dementia progression, you might incorporate gentle movement techniques that promote circulation and mobility, supporting overall brain health.**

Awareness that **stress and poor sleep** are risk factors allows you to design sessions that focus on relaxation, stress relief, and improved sleep, all of which are crucial for managing dementia symptoms.

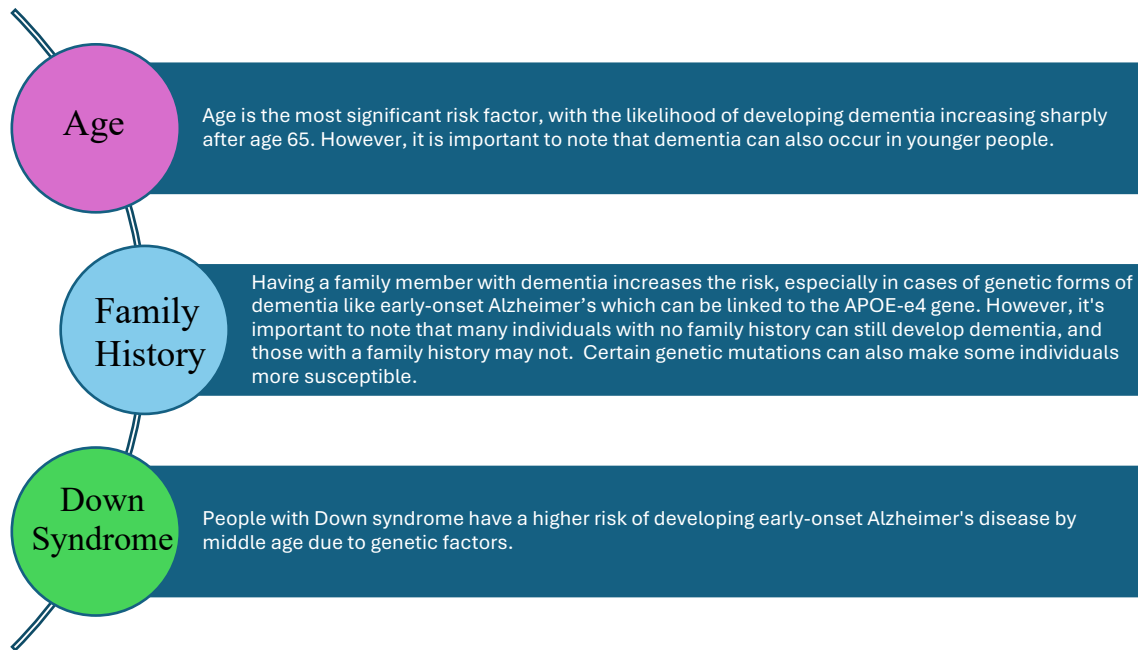


Hearing loss is associated with increased risk of dementia

Furthermore, understanding these risk factors enables you to approach clients with **greater empathy and awareness of how lifestyle choices impact their condition.** If a client has a **history of social isolation or limited physical activity, you can encourage engagement in social or movement-based activities.** Being informed about how factors like **poor diet or hearing loss**

can worsen dementia helps you identify underlying concerns, offering advice or referring clients to additional resources when appropriate. This comprehensive approach will enhance the effectiveness of your massage treatments.

Genetic Factors



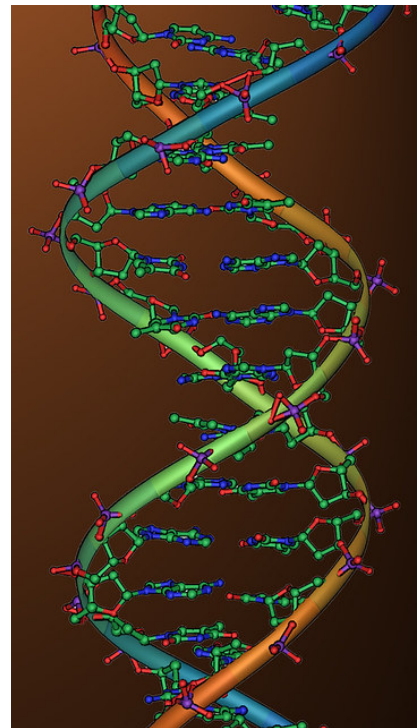
Age: Age is the most significant risk factor, with the likelihood of developing dementia increasing sharply after age 65. However, it is important to note that dementia can also occur in younger people.

Gender: Women are more likely to develop Alzheimer's disease than men, possibly due to a combination of genetic, hormonal, and longevity factors.

Family History: Having a family member with dementia increases the risk, especially in cases of genetic forms of dementia like early-onset Alzheimer's, which can be linked to the APOE-e4 gene. However, it's important to note that many individuals with no family history can still develop dementia, and those with a family history may not. Certain genetic mutations can also make some individuals more susceptible.

Down Syndrome: People with Down syndrome have a higher risk of developing early-onset Alzheimer's disease by middle age due to genetic factors.

While some dementia risk factors, such as age and genetics, cannot be controlled, adopting a healthy lifestyle, managing chronic conditions, and staying mentally and socially active can help lower the risk of developing dementia.



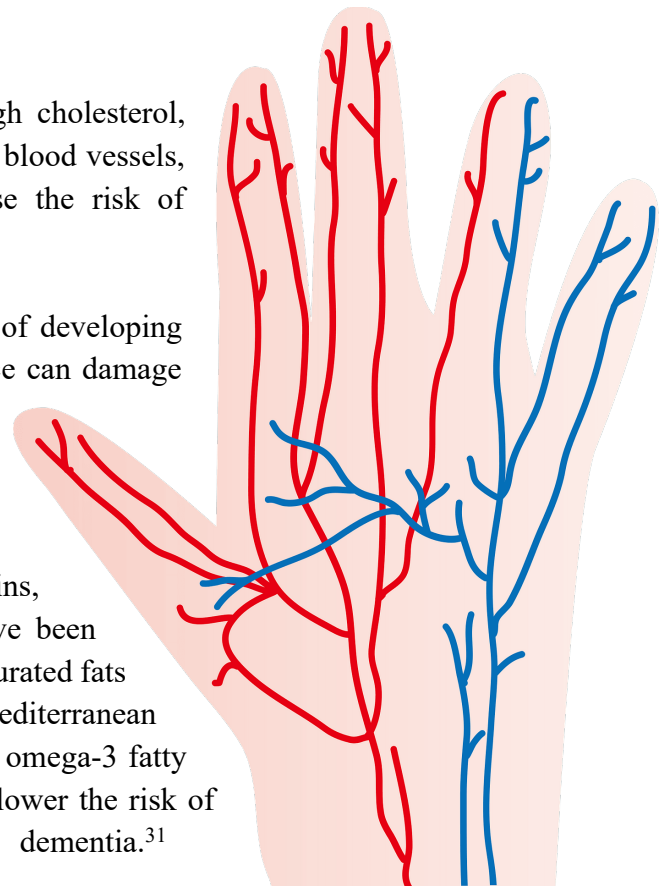
VASCULAR FACTORS

Cardiovascular Health: High blood pressure, high cholesterol, and a history of stroke or heart disease can damage blood vessels, which may lead to vascular dementia or increase the risk of Alzheimer's.

Diabetes: People with diabetes have a higher risk of developing dementia, as high blood sugar and insulin resistance can damage the brain over time.

LIFESTYLE FACTORS

Diet and Nutrition: Deficiencies in vitamins, particularly vitamin D, B-6, B-12, and folate, have been linked to increased dementia risk.³⁰ Diets high in saturated fats and sugars can negatively affect the brain, while a Mediterranean diet rich in vegetables, fruits, and healthy fats (like omega-3 fatty acids commonly found in fish and nuts) may help lower the risk of dementia.³¹



Physical Inactivity: Sedentary lifestyles are associated with a higher risk of dementia, whereas regular exercise can help protect brain health.

Smoking and Alcohol Use: Smoking damages blood vessels and raises the risk of vascular dementia, while alcohol use can cause brain damage that leads to dementia.

Sleep Disturbances and Sleep Apnea: [Research](#) shows that sleep apnea is significantly linked to cognitive impairment in dementia participants.³²

ENVIRONMENTAL FACTORS

Research also suggests that exposure to air pollution, particularly traffic-related pollutants, may accelerate brain degeneration and increase the risk of dementia.

NEUROLOGICAL CONDITIONS AND TRAUMA

Traumatic Brain Injury (TBI): Repeated head trauma, as seen in contact sports or through accidental injuries, can increase the risk of dementia and lead to chronic traumatic encephalopathy (CTE).

Parkinson's Disease and Other Neurological Disorders: Diseases that affect the brain, like Parkinson's disease and Huntington's disease, are associated with higher risks of dementia.

MENTAL HEALTH FACTORS

Depression and Anxiety: Ongoing mental health issues, especially in later life, can contribute to cognitive decline and increase the risk of dementia.

Social Isolation: Loneliness and lack of social interaction are linked to cognitive decline, possibly due to reduced mental stimulation and engagement.



OTHER HEALTH CONDITIONS AND FACTORS

Sleep Disorders: Chronic sleep issues, including sleep apnea, are linked to higher dementia risk, likely due to the effects on brain health and memory consolidation.

Hearing Loss: Studies show that untreated hearing loss can increase dementia risk, possibly due to the cognitive strain and reduced social interaction it causes.

Chronic Inflammation and Autoimmune Disorders: Inflammation in the brain, often associated with autoimmune diseases, is implicated in some types of dementia, such as Alzheimer's.

Complications of Dementia

Dementia can also affect various bodily systems, leading to:

Nutritional Deficiencies: As dementia progresses, individuals may eat less or have difficulty chewing and swallowing.

Pneumonia: Swallowing difficulties can lead to aspiration of food or liquids, increasing the risk of pneumonia.

Inability to Perform Daily Activities: Those with dementia often struggle with basic self-care, such as bathing, dressing, and taking medication.

Safety Issues: Everyday activities like driving, cooking, or living alone can become hazardous for people with dementia.

Death: Dementia, especially in its late stages, can lead to complications such as infection, which may ultimately result in death.

Alzheimer's & Type 3 Diabetes

Researchers have long recognized that being overweight and having Type 2 diabetes elevate the risk of developing Alzheimer's disease. Recently, however, attention has turned to what some are calling **Type 3 Diabetes**, which is linked directly to Alzheimer's. Type 3 Diabetes is not an officially recognized health condition but is proposed as a term for when brain neurons lose their ability to respond to insulin, an essential hormone for processes like memory and learning.

Some experts suggest that insulin deficiency may play a central role in the cognitive decline seen in Alzheimer's disease.³⁰



CHAPTER 5

Signs and Symptoms of Dementia

Dementia as a Multifaceted Condition

Symptoms of dementia will vary widely from person to person but may include a combination of cognitive, behavioral, physical, and emotional symptoms.

COGNITIVE SYMPTOMS

A decline in memory	<ul style="list-style-type: none">• Forgetting names or recent events
Changes in thinking skills	<ul style="list-style-type: none">• Losing or misplacing things• Getting lost in familiar places
Poor judgment and reasoning skills	<ul style="list-style-type: none">• Losing track of time• Difficulty solving problems or making decisions
Reduced orientation	<ul style="list-style-type: none">• Difficulty performing familiar tasks• Misjudging distances to objects visually
Decreased focus and attention	<ul style="list-style-type: none">• Problems following conversations, repeating questions, and finding words
Changes in behavior	<ul style="list-style-type: none">• Using unusual words to refer to familiar objects
Changes in language	<ul style="list-style-type: none">• Unable to follow what is being said
Symptom	What the symptom looks like

BEHAVIORAL SYMPTOMS

The behavioral symptoms of dementia vary depending on the type and stage of dementia and can be challenging for both the individual and caregivers, requiring management and support.

Agitation and Restlessness: Individuals with dementia may become easily upset, fidgety, or anxious, especially in unfamiliar environments or situations.

Aggression: Verbal or physical aggression may occur, sometimes triggered by confusion, frustration, or an inability to express needs or emotions.

Wandering: People with dementia might wander or get lost, even in familiar surroundings. This behavior can stem from disorientation or restlessness.

Repetitive Behaviors: They may repeat speech, actions, or questions due to memory loss.

Mood Swings and Irritability: Dementia can cause rapid changes in mood, with individuals swinging from calmness to irritability, anger, or sadness without a clear reason.

Paranoia and Delusions: People with dementia may develop false beliefs (delusions) or become suspicious of others, believing they are being stolen from or harmed.

Hallucinations: Some individuals may see or hear things that aren't there, which can be distressing for both them and their caregivers.

Social Withdrawal: They may become less interested in social activities, avoiding friends, family, or activities they previously enjoyed.

Sleep Disturbances: Disrupted sleep patterns, such as insomnia or excessive daytime sleeping, are common in dementia, often exacerbating other symptoms.

Apathy: A loss of interest in daily activities, hobbies, or personal care is typical as the disease progresses, leading to decreased motivation and participation.

Inappropriate Behavior: Individuals with dementia may exhibit behaviors that are out of character or socially inappropriate, such as inappropriate language, undressing in public, or acting impulsively.

Depression and Anxiety: Emotional symptoms like sadness, hopelessness, or chronic worry are common, especially in the early stages of dementia, as individuals become aware of their cognitive decline.



Anosognosia refers to a condition where individuals are unaware that they have any illness or impairment. They are unable to recognize that something is wrong, despite medical tests and clear evidence provided by doctors. Essentially, they don't register that they have any issues with their health.

Anosognosia, a condition where a person is unaware of their own cognitive decline, can make it challenging to establish trust and for caregivers to provide care. **A person with anosognosia may not realize they have dementia and could resist or misunderstand your intentions**, interpreting the massage as unnecessary or invasive. As a result, you must approach these clients with extra sensitivity, patience, and skill to create a safe, reassuring environment.

From a practical standpoint, you need to recognize that traditional communication strategies may not work effectively with clients who have anosognosia. **Verbal cues or explanations about the therapeutic benefits of massage may be ignored or dismissed by the client, who doesn't believe anything is wrong with them.** Instead, you should focus on non-verbal cues, gentle touch, and calming techniques to ease any discomfort or agitation the client might feel. The use of massage as a non-invasive, comforting intervention can reduce anxiety and stress, even if the client is unaware of their cognitive decline.

PHYSICAL SYMPTOMS

Clients with dementia may have heightened sensitivity to touch, difficulty expressing discomfort, or may not fully understand the purpose of the massage.

Movement Difficulties: Many people with dementia, particularly in later stages, experience difficulties with movement, such as unsteadiness, poor coordination, or difficulty walking. They may shuffle or have an altered gait.

Muscle Weakness or Stiffness: Muscle rigidity or weakness is common, especially in types of dementia like Parkinson's disease dementia or Lewy body dementia. This can result in difficulty with basic tasks like standing up, dressing, or getting out of bed.

Tremors: In certain types of dementia, such as Lewy body dementia or Parkinson's disease dementia, tremors (uncontrolled shaking) can occur, primarily in the hands or arms.

Fatigue: Dementia can lead to physical exhaustion due to mental strain, sleep disturbances, or the overall impact on the brain's functioning, making it hard to maintain one's usual energy levels.

Loss of Motor Skills: Fine motor skills (e.g., writing, buttoning clothes, or using utensils) may decline, making everyday tasks difficult.

Swallowing Difficulties: In advanced stages, people with dementia may have trouble swallowing, a condition known as dysphagia, which increases the risk of choking or aspiration pneumonia.

Incontinence: Loss of bladder or bowel control is common in later stages, often due to both physical and cognitive impairments affecting recognition of bodily signals or mobility to reach the bathroom in time.

Seizures: While less common, seizures can occur in some individuals, particularly those with advanced dementia or Alzheimer's disease.

Weight Loss: Unintentional weight loss often happens as the ability to eat and recognize hunger diminishes. Poor nutrition and loss of appetite are common, especially as swallowing and digestion become more challenging.

Sleep Disturbances: Physical restlessness, such as pacing, and sleep disturbances like insomnia or excessive daytime sleepiness can be symptoms of dementia.

These physical symptoms often emerge as the brain's ability to control various bodily functions deteriorates. The type and severity of these symptoms can vary greatly depending on the underlying cause of the dementia, its progression, and the overall health of the individual.

EMOTIONAL SYMPTOMS

Emotional symptoms of dementia are varied and complex, often reflecting the brain's changes in function, particularly in areas that regulate mood and behavior.

Mood Swings: People with dementia may experience rapid and unpredictable changes in mood. They can become happy one moment and then suddenly sad, angry, or frustrated without a clear reason.



Anxiety: Increased feelings of worry, nervousness, or fear are common. This may be due to confusion, a sense of lost control, or difficulty understanding their surroundings.

Depression: Many people with dementia experience depression, especially in the early stages. They may feel hopeless, lose interest in activities they once enjoyed, or withdraw from social interactions.

Irritability and Agitation: Dementia can cause individuals to become easily frustrated, leading to irritability or agitation. This can occur in response to confusion, communication difficulties, or changes in routine.

Paranoia: People with dementia might develop suspicious feelings or beliefs. For example, they may accuse loved ones of theft or feel that others are plotting against them, even though there is no basis for these beliefs.

Apathy: A loss of interest in socializing or activities they used to enjoy is another emotional symptom. A person with dementia might seem withdrawn, passive, or indifferent to things happening around them.

Fear and Insecurity: Because dementia affects memory and understanding, individuals may feel scared, unsure of their environment, or worry about getting lost, being alone, or forgetting important things.

Emotional Outbursts: Dementia can sometimes cause people to react with unexpected emotional outbursts, such as crying, yelling, or becoming overly upset over small matters.

Confusion and Disorientation: Confusion about time, place, and people can lead to emotional distress. They may not recognize familiar faces or places, which can provoke fear, sadness, or anger. Quick or jarring motions around them can be confusing or startling, leading to distress.

Delusions and Hallucinations: In some types of dementia, particularly Lewy body dementia, individuals may experience hallucinations (seeing things that aren't there) or delusions (firmly believing things that aren't true), which can evoke strong emotional responses.



These emotional symptoms often accompany the cognitive decline associated with dementia, and they can vary in intensity and frequency depending on the stage of the disease and the individual.

Building rapport through empathy, a soothing presence, and a consistent routine can help minimize resistance and enhance the client's experience.

It is important to identify the symptoms, emotional tolls, and psychological challenges associated with dementia to help create a safe, supportive environment that minimizes confusion and promotes a sense of security and well-being. In essence, this knowledge equips you to provide care that addresses physical needs and honors the dignity and humanity of the individual.

CHAPTER 6

Stages of Dementia



A Guide for Care at Each Phase

Dementia is a progressive condition, meaning that it typically starts with mild symptoms that worsen over time. Understanding the stages of dementia can provide insight into the journey individuals and their loved one's experience as the condition progresses. **Whether one is a caregiver, healthcare provider, or family member, knowing what to expect at each stage can be essential for navigating this complex and often challenging condition.**

Each stage of dementia comes with its unique challenges and symptoms, from mild forgetfulness in the early stages to more profound cognitive and physical impairments in the later stages.

The stages of dementia don't always fit into clear categories, and symptoms can differ from person to person. However, they serve as a useful framework to help plan care for a loved one or tailor your massage services to a client. These stages illustrate the disease's progression, offering guidance for healthcare decisions and caregiving strategies.

By breaking down dementia into stages, we can better understand the anticipated changes, prepare for the level of care required, and offer the most appropriate support and interventions tailored to each phase.

Early-Stage Dementia

Early-Stage Dementia

Dementia typically begins subtly, with brain changes that occur years before any noticeable symptoms emerge. During this early stage, individuals show no outward signs of the disease. Early-stage dementia is often **characterized by subtle symptoms** that may initially be mistaken for normal aging or stress. Brain imaging tests are often the only way to detect these early changes in brain function. As the disease progresses, more and more changes occur.

Individuals often experience **mild memory loss**, disorientation, and slight changes in language abilities. They can perform most daily tasks with some support, maintain some social connections, and **often communicate their needs, feelings, and preferences effectively**. At this stage, they may **feel frustrated or anxious about their symptoms, leading to mood fluctuations**, but they can still engage meaningfully in social and therapeutic activities with guidance.

Short-term memory is frequently affected first. People may **repeatedly ask the same questions**, forget recent conversations, or misplace items, often unable to retrace their steps to find them.



In Early-Stage dementia, most tasks can be performed with some support

Completing tasks that require multiple steps, such as following a recipe or managing finances, can become challenging. They may find it hard to follow familiar routines or handle complex tasks that were once simple for them.

Losing track of dates, seasons, or the passage of time is common. Some people may forget where they are or how they got there, especially in unfamiliar environments.

Using machine learning, a [new test](#) that scans MRIs can predict dementia with 82% accuracy, and up to nine years before diagnosis, according to researchers at Queen Mary University of London in the U.K.²⁸

People may **struggle to find the right words**, pause frequently in the middle of sentences, or substitute incorrect words. Holding conversations may become difficult, as they might lose track of the topic or repeat themselves.

Uncharacteristic behavior, such as an individual giving away large amounts of money or neglecting personal hygiene, can signal early-stage dementia. People might make decisions that seem out of character or display less consideration of risks.

Early dementia can cause **shifts in mood**, increased irritability, anxiety, depression, or withdrawal from activities and social interactions. Personality changes can also occur, sometimes making people more passive or withdrawn than before.

Routine activities like driving to familiar locations, managing bills, or remembering the rules of a favorite game may become difficult. They may **rely on reminders** or help more than before to complete these everyday tasks.

CHARACTERISTICS OF EARLY-STAGE DEMENTIA

1. Memory Loss
2. Difficulty with Planning and Problem-Solving
3. Confusion with Time or Place
4. Language and Communication Challenges
5. Poor Judgment or Decision-Making
6. Mood and Personality Changes
7. Difficulty with Familiar Tasks



Identifying these symptoms early and consulting a healthcare provider can lead to an early diagnosis, allowing for better planning, treatment options, and support for the individual and their family. For Alzheimer's disease, the early stage is often referred to as "**mild Alzheimer's.**"

In the early stage of all dementia, clients may still have good cognitive function but may start showing signs and symptoms such as mild memory loss that disrupts their daily life. **They may keep losing items like their phone or glasses, misplacing them in odd places.**

Showing **slight challenges in concentration and difficulty thinking** through complex problems like paying bills and handling financial matters is also an early symptom. They may have shortened attention spans and increased confusion. These symptoms are frustrating for the individual and can aggravate an already-increased level of anxiety and, sometimes, aggression.

Poor judgment that leads to bad decisions is often a symptom that helps those around them realize something is wrong. Not knowing their current location may lead to wandering and getting lost. Having difficulty recalling recent events, the date, or the names of family and friends are the most common early signs. Forgetfulness will be more common and more prolific than the occasional age-related moment.³⁵

Language and communication may become difficult. A person may struggle to find the right words or understand what is being talked about. Repeating questions and forgetting recently learned information can add to their confusion. This memory impairment may also show up as difficulty in making schedules, planning, or decision-making.

During this stage, they might also begin to **withdraw from social activities**, feeling embarrassed or frustrated by the changes they're noticing in themselves. Loss of spontaneity and a lack of initiative may happen as the symptoms gradually increase.

In the early stages, individuals may experience minor memory lapses or difficulty concentrating, but they can still function independently with some support.

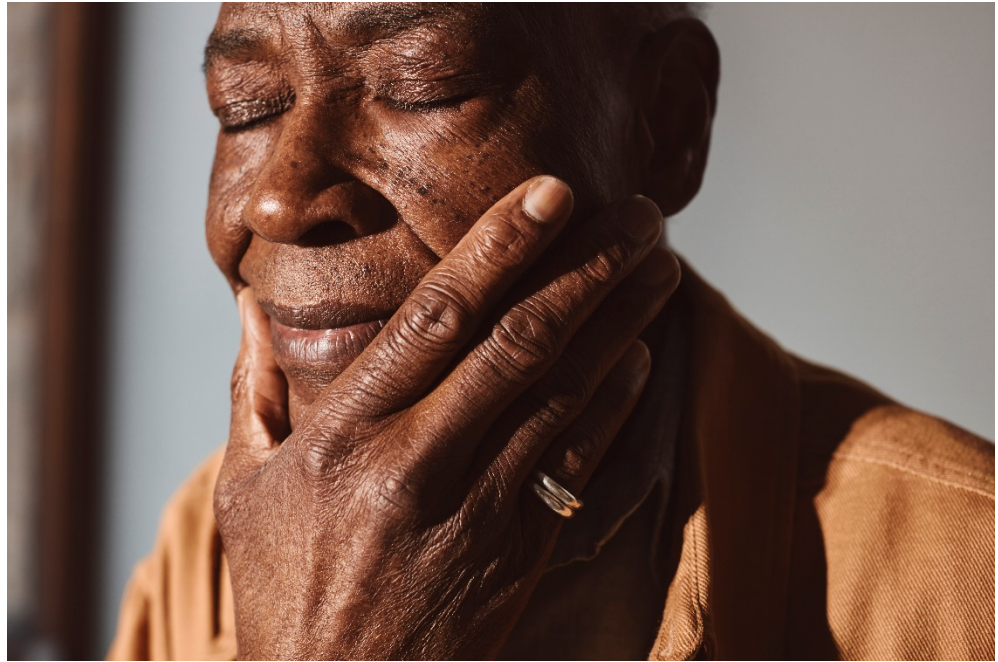


They may start to rely on notes, reminders, or help from loved ones

HOW A MASSAGE THERAPIST CAN HELP: EARLY-STAGE DEMENTIA

You can support clients in the early stages by focusing on relaxation and stress reduction.

Gentle massage techniques, **such as Swedish massage**, can help alleviate any tension or anxiety that the client may be experiencing. Regular sessions can also promote a



sense of normalcy, offering the client a familiar and comforting routine. You should communicate clearly and respectfully, ensuring that the client feels understood and supported.

Extra patience is paramount. If you feel rushed, you will likely make them more anxious and flustered. They may need a longer time filling out their intake paperwork. They might need you to repeat your questions or take extra time to pay their bill.

Their conversation may feel strained, shift to unusual topics or wording, or stop abruptly as cognition declines. Confusion about the current date, future plans, or even where they are might be alarming. Being gentle, reassuring, and professional will go a long way to soothe them.

Keep in mind that **Alzheimer's clients often experience heightened sensitivity to touch**, anxiety, and confusion, which requires a more gentle and deliberate approach. **The focus is typically on providing comfort and relaxation** rather than deep tissue work or therapeutic manipulation. Sessions are often shorter, with the therapist carefully observing the client's responses to ensure that the massage remains soothing and non-threatening.

Remember that the goal is to reduce stress, enhance well-being, and provide a sense of security and comfort rather than addressing specific physical ailments as in a typical massage session.



Massage Environment

In addition, **the environment plays a crucial role** in the effectiveness of massage therapy for dementia and Alzheimer's clients. Setting up an environment that is more conducive to dementia clients is mentioned in additional detail further in the course, but there are several measures you can take that will help reduce dementia clients' anxiety and add safety to your massage space.

Older adults, especially those with dementia, often have a reduced ability to regulate their body temperature, making them **more sensitive to cold**. Have an extra blanket close and **set the temperature in your room to be warm** and comfortable—typically around 74 degrees Fahrenheit (23 degrees Celsius).

Creating a calming atmosphere with **soft lighting** that doesn't create dark shadows can reduce stress, especially for those with

diminished eyesight or those who might get confused and frightened.

Soothing music and familiar scents can also help ease anxiety and prevent overstimulation. Incorporating gentle sensory stimulation through massage (e.g., using **essential oils** or varying textures) can **engage different parts of the brain**, offering a form of cognitive stimulation. This can help maintain sensory and cognitive pathways that might otherwise degrade. As always, be sure you ask your client if they are comfortable with using scents.

Your communication may also need to be adapted to **use simple language, clear instructions, and non-verbal cues** to guide the session. If you make a follow-up appointment or want them to do stretches or ask their doctor about something, you should **write that down** for them and ensure they take the note with them.

Identifying the symptoms, emotional tolls, and psychological challenges associated with dementia will help you create a safe, supportive environment that minimizes confusion and promotes a sense

of security and comfort. **Massaging dementia clients is a profound way to provide care that not only addresses their physical aches and pains but also honors their dignity and humanity.**

Middle-Stage Dementia

Middle-Stage Dementia

As dementia progresses to the middle stage, symptoms become more pronounced. The middle stage is often considered the most significant because the symptoms become more noticeable.³⁶ While some cognitive abilities are still present, the decline is significant enough that ongoing care and supervision are usually needed.

Individuals may **struggle with daily tasks**, such as dressing, cooking, or managing finances, and may need more help from caregivers and family members. Occupational therapists can work on preserving independence in daily tasks such as dressing, grooming, and bathing. They may use adaptive devices, like long-handled reachers or bath chairs, and break down tasks into manageable steps, guiding the person through each action to increase comfort and capability.

CHARACTERISTICS OF MIDDLE-STAGE DEMENTIA

1. More Pronounced Memory Loss
2. Often Confused
3. Difficulty with Communication
4. Increased Dependence on Others
5. Behavioral and Mood Changes
6. Poor Judgment or Decision-Making
7. Sleep Disturbances

family members or familiar environments.

Memory loss worsens, leading to **confusion about time, place, or personal identity**. **Communication becomes more difficult, and mood swings, agitation, or behavioral changes, such as wandering or repetitive actions**, may occur.

Middle-stage dementia, often referred to as moderate dementia, is characterized by a noticeable decline in cognitive abilities and **increased difficulty with daily tasks**. At this stage, individuals require more support as memory, thinking, and reasoning abilities worsen.

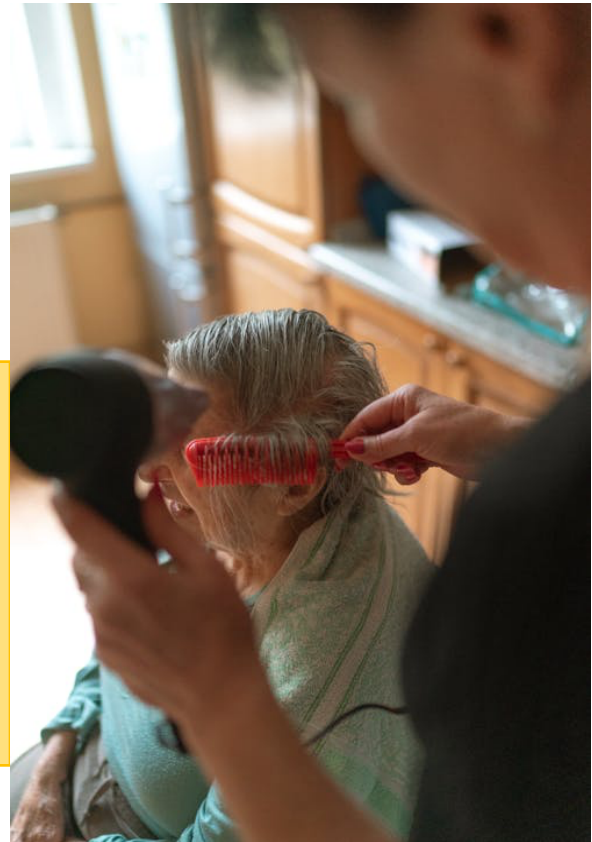
As **memory issues manifest more often**, individuals may forget personal details like their address, phone number, or even important events. They may experience confusion about the time of day, place, or people, sometimes not recognizing close

Speech becomes more challenging as finding the right words or forming coherent sentences becomes difficult. Repeating words or phrases, losing track of conversations, and struggling to follow instructions are common.

Daily tasks such as cooking, cleaning, dressing, and personal hygiene become harder to manage without help. **Individuals may need assistance with activities they used to handle** independently, such as grooming, bathing, or managing medications.

The middle stage can be emotionally challenging, as the individuals still have moments of self-awareness about their condition, which can lead to frustration, anger, or withdrawal—or outbursts and aggressive behavior.

The confusion and frustration of middle-stage dementia often bring increased **anxiety, depression, and paranoia.**



Daily tasks such as bathing and grooming, become harder

Sleep disturbances are common, with individuals often experiencing disrupted sleep, frequent waking during the night, or even sleeping during the day and being more awake at night.

Wandering, restlessness, or repetitive actions may also occur. Individuals may **become disoriented in familiar places**, leading to an increased risk of getting lost, even in their own homes or neighborhoods.

People in this stage of dementia **struggle with decision-making** and may exhibit poor judgment, such as becoming vulnerable to scams or making unsafe choices (e.g., leaving the house unsupervised or driving despite significant cognitive decline).

As dementia progresses, memory loss, confusion, mood changes, and difficulty with communication all of which can make daily interactions and activities, including massage therapy, more challenging.

HOW A MASSAGE THERAPIST CAN HELP: MIDDLE-STAGE DEMENTIA

Massage therapy is particularly beneficial for individuals in the middle stage of dementia, offering unique advantages that may surpass those seen in the early stages. As dementia progresses, challenges like heightened anxiety, confusion, and physical discomfort become more prominent, making massage a valuable therapeutic tool for both emotional and physical relief.

In middle-stage dementia, individuals often **experience more frequent bouts of agitation, anxiety, and emotional distress** due to their cognitive decline and frustration with daily tasks.

What to do if a client has behavioral issues: Mood swings, agitation, or confusion, which can affect their response to therapy. To navigate these changes, **adapt techniques and pressure, pause when needed, and most importantly STAY CALM to de-escalate stressful moments.**

Your skilled hands can help soothe them by calming their nervous system, reducing their stress hormone (cortisol), and promoting the release of feel-good hormones like serotonin and oxytocin.

As **language and communication skills decline**, individuals may struggle to express their needs, leading to feelings of isolation or frustration. Sometimes, they will ask the same question repeatedly. Answering gently and consistently each time can ease their anxiety. Massage offers a non-verbal form of connection, allowing individuals to feel **cared for and understood through touch**. This tactile engagement can build trust and foster emotional comfort when words are no longer as effective.



Your skilled hands can offer:

1. Reduction of Agitation and Anxiety
2. Non-verbal Communication
3. Relief from Physical Discomfort
4. Improvement in Sleep Patterns
5. Emotional Connection
6. Enhanced Circulation and Mobility
7. Sense of Security

People in the middle stages of dementia may **become less mobile, resulting in stiff joints, muscle tension, and other discomforts.**

Gentle massage can improve circulation, relieve muscle tension, and increase flexibility, helping individuals feel more comfortable in their bodies. This can also support better sleep patterns and reduce the physical pain that may contribute to emotional distress. Improving blood flow will also help reduce swelling and support better joint flexibility. By stimulating the body in this way, massage may also help prevent complications like bedsores and muscle atrophy that can arise from prolonged inactivity.



Sleep disturbances are common in middle-stage dementia, with individuals often **experiencing increased restlessness and difficulty sleeping through the night.** Massage can help regulate sleep by promoting relaxation and soothing the body and mind, reducing the need for sedatives or sleep aids.

As **cognitive abilities decline and confusion increases,** individuals may feel more vulnerable and less in control of their environment. Massage therapy, when done with sensitivity and care, can provide a consistent source of comfort and emotional well-being. Regular sessions create a sense of routine, which can offer security in an otherwise disorienting world.

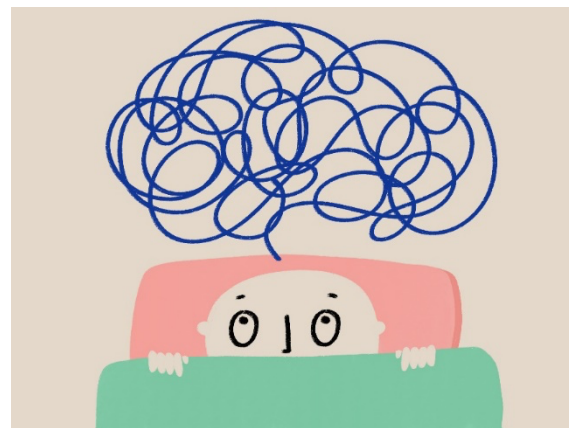
You can provide a compassionate, gentle, and effective way to address the growing emotional, mental, and physical needs of individuals in the middle stages of dementia, helping to improve their mental and emotional health in ways that may not be as critical in the earlier stages.

Late-Stage Dementia

Late-Stage Dementia

In late-stage dementia, individuals experience **severe cognitive and physical decline**. **Memory is profoundly impaired**, often with loss of recognition of loved ones, surroundings, and sometimes even their own identity. **Communication becomes very limited, often reduced to a few words or sounds, and some lose the ability to communicate verbally altogether**. **Physical abilities decline, and many individuals become bedridden and largely dependent on others** for their care.

Late-stage dementia differs significantly from earlier stages, with noticeable changes in cognition, communication, physical abilities, and emotional responses. Remember that in the early and middle stages, individuals often experience memory loss, disorientation, and changes in language abilities and sometimes have mood swings and get frustrated or anxious about their symptoms.



CHARACTERISTICS OF LATE-STAGE DEMENTIA

1. Pronounced Cognitive Decline
2. Little to No Verbal Communication
3. Significantly Diminished Physicality or Immobile
4. At Higher Risk of Illness and Infection
5. Less Responsive Emotionally
6. Decline in Awareness and Sensory Perception

In the earlier stages, memory loss and confusion primarily affect recent events and complex tasks, but people may still retain a sense of personal identity and have moments of clear thinking. In the late stages, however, **memory loss is profound**, with individuals often unable to recognize loved ones, remember personal history, or orient themselves in time and space.

Verbal communication may be very limited or lost entirely by late-stage dementia. Individuals might **respond only to tone of voice, facial expressions, or gestures rather than words**.

Recall that in the earlier stages, individuals can usually walk, bathe, dress, and feed themselves with minimal assistance. Whereas in late-stage dementia, **physical function deteriorates, often resulting in immobility**. Individuals may require full assistance with eating, dressing, toileting, and other daily activities, and they may be **at higher risk for infections** or physical complications like bedsores or pneumonia.

Late-stage dementia is **also characterized by greater vulnerability to infections and physical complications** due to reduced mobility and awareness of pain or discomfort. Emotional expression often shifts, too, with individuals primarily responding to sensory input rather than verbal interaction.

A high degree of support and care is necessary at this stage, focusing on comfort, gentle sensory stimulation, and non-verbal forms of communication to provide reassurance and improve quality of life. Emotional responses may be less frequent but unpredictable, as individuals may experience apathy or even sudden agitation despite reduced awareness. **Sensory perception often declines**, making people less responsive to environmental stimuli. **Touch, music, and familiar scents may still provide comfort, but responses are often subtle** and may require careful observation to detect. Self-awareness is diminished, which can reduce distress but also limit engagement with surroundings, leading to a more withdrawn or unresponsive state.



HOW A MASSAGE THERAPIST CAN HELP: LATE-STAGE DEMENTIA

For clients in the late stage of dementia, your massage therapy can be a gentle and compassionate way to provide comfort and connection. At this stage, **care is focused on comfort and quality of life**. Sensory-focused therapies, such as gentle massage, music, or soft touch, are valuable, as they offer comfort without requiring cognitive engagement.

You can use very light touch or simply hold the client's hand, which can offer reassurance and **reduce feelings of isolation**. Massage can also help with circulation, reduce muscle stiffness, and alleviate pain, contributing to the client's **overall comfort**. You should work closely with the client's family members and/or caregivers to ensure that the massage is adapted to the client's physical condition and that it aligns with the broader care plan.

Massage is certainly beneficial for individuals in the late stage of dementia due to the profound changes they experience physically, cognitively, and emotionally.

As cognitive abilities and verbal communication diminish, individuals in late-stage dementia may have difficulty expressing themselves verbally or understanding others. As they are less able to communicate their needs or discomforts, it makes non-verbal therapies like massage crucial in providing comfort, reducing anxiety, and enhancing their quality of life.

Massage offers a way to connect through touch, providing a comforting, non-verbal interaction that **can foster feelings of safety, reassurance, and emotional support**, alleviating feelings of isolation or frustration.

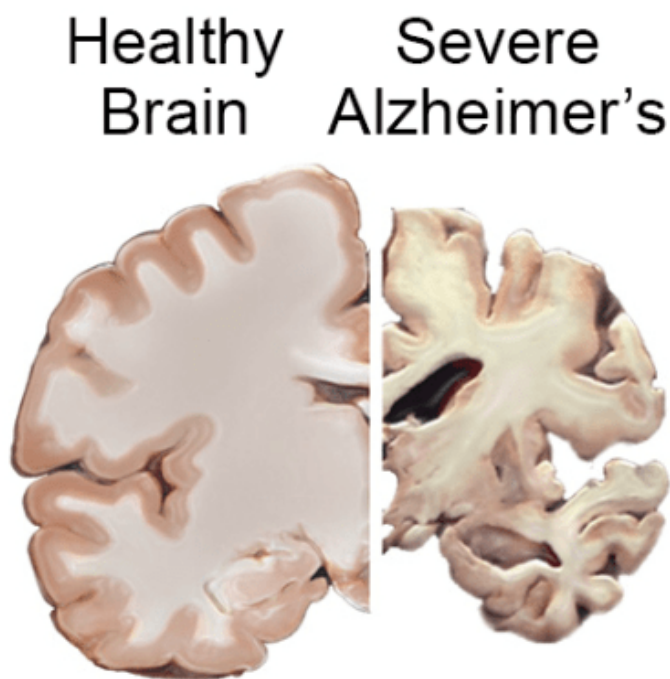
Late-stage dementia often brings increased agitation, restlessness, and confusion. Gentle massage can help reduce anxiety and stress, promoting relaxation. The calming effect of touch stimulates the parasympathetic nervous system, which **can lower heart rate and promote a sense of peace**.

Many individuals are immobile or bedridden, which can lead to poor circulation, stiffness, and discomfort. Massage can help improve circulation, reduce muscle stiffness, and prevent pressure sores. Even light, gentle strokes can offer relief from the physical discomforts associated with immobility, promoting better skin health and comfort.



Many may be **unable to express pain** due to communication challenges. Massage, especially when focused on areas prone to tension (such as the back, neck, or legs), can alleviate physical discomfort and pain that may go unnoticed or untreated otherwise.

Sleep disturbances are common in late-stage dementia, but the calming effects of massage can help promote better sleep patterns. By reducing stress and soothing physical discomfort, massage can encourage a more restful state, improving overall well-being.



As individuals with late-stage dementia lose the ability to engage in many activities, **physical touch becomes one of the few meaningful ways to offer comfort and care.**

Massage can evoke positive emotional responses, such as feelings of being nurtured or cared for, which can improve mood and decrease emotional distress.

The primary goals of massage are comfort, connection, relaxation, and promoting dignity through nurturing touch. While cognitive benefits may be limited at this

stage, the physical, emotional, and social aspects of massage provide essential support for individuals who may otherwise feel disconnected from their environment.

Research is still developing drugs and methods to slow the progression of the disease. However, at the moment, there is no cure for Alzheimer's disease or dementia. Therefore, in each stage of dementia, you, as a massage therapist, can play a crucial role in enhancing the client's well-being, offering physical relief and emotional support through the power of touch and human connection.

CHAPTER 7

Treating Dementia



Slowing the Progression

Dementia, in all of its forms, including Alzheimer's, is a progressive neurodegenerative condition. Still, several treatments can help manage symptoms, improve emotional health, and slow its progression to help individuals with dementia maintain their daily functions and feel more comfortable.

Early diagnosis and treatment of the underlying issues are crucial in slowing the progression of the condition and enhancing the individual's quality of life.

While there is no cure for any type of dementia, there are several treatments that can help individuals manage the condition more effectively.

The Pros and Cons of Common Treatments

As you are likely to have dementia clients, it is important to be aware of what treatments they may be undergoing. Keeping the scope of massage therapy practice in mind, you may be able to use the following information to better inform your client and their families so they can be aware of non-medication treatments that may help.

Aside from brain injuries, the causes of **nerve cell death in the brain that causes dementia** are not fully understood. However, known contributing factors include abnormal protein build-up of amyloid plaques and tau tangles, as well as factors like genetics, health, lifestyle, environment, and age. **Currently, dementia treatments aim to manage symptoms** and improve quality of life but vary in effectiveness depending on the dementia stage and individual factors.

Medications

If your client lists any of the following prescribed medications on their intake paperwork, you should be alerted to the possibility that they are being treated for dementia. Many medications are used for multiple purposes, so as with all provided medical information, take precautions, but do not make assumptions!

The most common medications prescribed are called cholinesterase inhibitors, such as donepezil, rivastigmine, and galantamine, which work by boosting levels of acetylcholine, a neurotransmitter important for memory and learning.³⁷ These medications are typically used in the early to moderate stages of Alzheimer's and can help improve cognitive functions or slow their decline. For more advanced stages, memantine is often prescribed. Memantine works by regulating the activity of glutamate, another neurotransmitter that plays a role in memory, thought, and learning. These medications may be used alone or in combination to manage symptoms.

Drug Name	Brand Name	Possible Side Effects
Donepezil	Aricept	Nausea, diarrhea, vomiting, constipation, upset stomach, reduced appetite, weight loss, low heart rate, headache, dizziness, or confusion.
Rivastigmine	Exelon	
Galantamine	Razadyne	Less frequent issues include fatigue, sleep difficulties, and muscle cramps.
Memantine	Namenda	

At this time, there are no over-the-counter medications specifically approved to treat dementia or its symptoms. However, some dietary supplements and alternative treatments, like melatonin and vitamin E, are sometimes used to support overall brain health or manage related symptoms such as insomnia or oxidative stress. Their effectiveness and safety can vary, especially in individuals with dementia.



- **Pros:** - Symptom Management: Drugs like cholinesterase inhibitors (e.g., donepezil, rivastigmine) and NMDA receptor antagonists (e.g., memantine) can help slow cognitive decline and improve memory and attention in some patients, especially in early to mid-stage Alzheimer's.

- Behavioral Symptom Reduction: Some medications can reduce symptoms like aggression, mood swings, or psychosis, improving both patient and caregiver quality of life.

- **Cons:** - Limited Effectiveness: Medications cannot cure or halt dementia; they only manage symptoms temporarily, often with benefits lasting only 6–12 months. Most medications primarily address the symptoms rather than halting or reversing dementia. Their effectiveness often declines as the disease progresses and may provide only modest improvements.

- Side Effects: Common side effects include nausea, diarrhea, vomiting, and loss of appetite, which can exacerbate frailty and weight loss. Headaches, dizziness, and, in some cases, worsened cognitive symptoms also occur, which can complicate care and worsen the very symptoms they're meant to treat. Medications, like those used to address mood or behavioral symptoms (e.g., antipsychotics and sedatives), can increase the risk of falls. This is particularly concerning because falls are a significant cause of injury and mortality among people with dementia.

Furthermore, the medications carry a risk of sedation and can lead to a decrease in a patient's quality of life by reducing their alertness, engagement, and ability to interact with others, **raising ethical questions about autonomy and quality of care.** For example, sleep aids containing diphenhydramine and treatments for urinary urgency may negatively impact memory. There can be an overemphasis on medications, which can lead to missed opportunities to improve health through holistic, person-centered care strategies.



Non-Drug Therapies

Non-drug treatments play a crucial role in treating dementia. Cognitive therapies, such as memory exercises and problem-solving activities, can help mental functions and keep the brain active.



Games, puzzles, and sorting can stimulate the brain

Cognitive Stimulation Therapy (CST)

Cognitive Stimulation Therapy is an evidence-based, group, or individual intervention designed to improve cognitive function and quality of life for individuals with mild to moderate dementia. Structured, engaging activities target memory, language, problem-solving, and social interaction.



WORD GAMES AND PUZZLES

- Crossword puzzles, word searches, and memory games can enhance language skills and encourage word recall. Participants often engage in group discussions about various words or create simple stories together using selected words.



ORIENTATION EXERCISES

- Exercises like discussing the current date, time, season, or recent news events, which help participants stay grounded in their surroundings and connected to current events.



REMINISCENCE ACTIVITIES

- These activities might involve discussing personal memories or sharing stories about past experiences, often prompted by photos, music, or objects from different eras. This can foster emotional connection, social interaction, and long-term memory recall.




ART AND MUSIC THERAPY

- Creative activities, such as painting, drawing, singing, or listening to familiar songs, stimulate cognitive and sensory functions. Music, in particular, can evoke emotional memories, often helping with mood and engagement.



PROBLEM-SOLVING TASKS

- Activities such as sorting objects, categorizing items, simple math puzzles, or discussing potential solutions to hypothetical problems help strengthen problem-solving abilities and attention.



PHYSICAL AND SENSORY FOCUS

- Light exercise, yoga, and sensory stimulation activities like handling textured objects or identifying scents can support both cognitive and physical engagement, improving focus and mindfulness.

These Cognitive Stimulation Therapy activities can be tailored to participants' abilities and preferences to make sessions engaging and relatable.



- **Pros:** Helps maintain mental function, memory, and problem-solving skills, which can improve mood and reduce apathy in early stages.

- Engages people on an emotional level, often sparking positive memories and reducing anxiety or depression without medication.

- **Cons:** Not effective for late-stage dementia; benefits may decline as the disease progresses.

Occupational Therapy

Occupational therapy for dementia focuses on promoting independence, safety, and quality of life by adapting tasks and environments to the individual's needs.

Examples: Memory aids (calendars, labels, sticky notes), Sensory stimulation (fabrics, textured objects, aromatherapy), self-care training (dressing, grooming, bathing—sometimes with the use of assistive devices like long-handled reachers and bath chairs).



- **Pros:** Trains individuals with dementia to perform daily activities independently for as long as possible, which can help maintain a sense of autonomy.

- **Cons:** Requires regular engagement, which can be tiring or frustrating for individuals with advanced dementia.

Lifestyle Modifications



Structured Routines

Establishing a daily routine helps create structure and predictability, which reduces confusion and stress. Having consistent times for meals, sleep, and activities makes it easier for individuals to navigate daily life, providing a sense of stability and security.



Regular Physical Activity

Exercise promotes cardiovascular health, which directly benefits brain health by increasing blood flow and reducing risk factors associated with dementia, like hypertension and diabetes. **Engaging in physical activities, like walking, swimming, or tai chi, helps maintain overall health and can improve mood.** Physical activity also improves motor skills, muscle retention, and balance to promote overall mobility.



Mental Stimulation

As mentioned previously, Cognitive Stimulation Therapy should be integrated into daily routines. Cognitive activities like reading, puzzles, word games, and learning new skills can stimulate the brain, helping to maintain cognitive functions longer. The ripple effect of CST helps individuals with dementia to stay mentally and socially active, easing the responsibilities of caregivers, improving the effectiveness of healthcare providers, and supporting a society that values holistic, compassionate dementia care.

Social Interaction



Social engagement, like playing card games or engaging in discussions, also provides cognitive benefits while reducing isolation. **Participating in leisure activities, like art projects, gardening, or simple games, can enhance social interaction and stimulate cognitive functions.** Tailoring these activities to match the person's interests and abilities can provide both a sense of accomplishment and an opportunity for social engagement.



Healthy Diet


A diet rich in fruits, vegetables, whole grains, lean proteins, and healthy fats supports brain health. The Mediterranean and DASH diets, both high in antioxidants and anti-inflammatory foods, are especially beneficial. Omega-3 fatty acids from fish and nuts are thought to promote cognitive health, and reducing processed foods can help manage overall well-being. Working to eliminate processed foods and sugary-items can help as well.

Sleep Routine



Good sleep hygiene is vital, as poor sleep can worsen cognitive symptoms and mood. Going to bed, waking up at consistent times, creating a calm bedtime routine, and avoiding stimulants like caffeine in the afternoon can improve sleep quality. Keeping the bedroom environment dark, cool, and quiet is also helpful.



 **-Pros:** Routine and structure reduce confusion and stress, providing a sense of security and predictability for those with dementia.

-Cons: Implementing these lifestyle changes requires consistency and may need caregiver supervision, adding to caregivers' responsibilities and stress. **Not all individuals respond equally to these changes; some may experience little or no improvement, especially if there are advanced physical limitations or additional health conditions.**

Environmental Modifications

Safety and Comfort

Simplifying and organizing living spaces can reduce confusion and help individuals feel more at ease. For example, removing clutter, sharp objects, and tripping hazards like loose rugs will make a more navigable environment. Labeling common items, drawers, and cabinets with pictures or text is another useful modification. Also, secure cleaning supplies, medications, and tools in locked cabinets. Enhancing lighting and using contrasting colors to make important objects more visible can create a safer and more engaging space.



Adding labels to household items reduces confusion



- Pros: -Simple changes like organizing the living space, adding labeling, improving lighting, and implementing routines can reduce confusion and accidents, especially in early and mid-stage dementia.

: Promotes independence and preserves dignity by creating a familiar, comforting environment.

- Cons: -These modifications are less effective as dementia progresses and cognitive function declines severely.

- Caregivers often need to implement and monitor these modifications, which can be challenging as symptoms progress.

Behavioral and Psychological Interventions

Behavioral therapies and environmental modifications are also important in managing symptoms like agitation, anxiety, and sleep disturbances. Validation therapy helps individuals with dementia focus on acknowledging their feelings, even if they are confused or disoriented. This approach reduces anxiety and frustration by creating an atmosphere of acceptance rather than correction.

Likewise, behavioral therapy targets specific behaviors such as aggression, agitation, or wandering by identifying their triggers and making environmental adjustments and CST activities to reduce the frequency of distressing behaviors. **Teaching coping strategies such as relaxation techniques and structured routines can help reduce confusion and create a more predictable environment.**



- Pros: - Approaches like cognitive-behavioral therapy can help manage mood symptoms, especially in early-stage dementia, and can reduce anxiety and depression.



- These non-invasive interventions avoid the risks associated with medications, like side effects or drug interactions.

- Cons: - These interventions are typically provided by trained professionals and can be difficult for family caregivers to administer, and even then, they have reduced benefits in later stages.

Emerging Treatments

While these treatments are still experimental, they offer hope for slowing the progression of dementia and potentially even preventing or reversing certain symptoms in the future.

Gene Therapy & Stem Cells

Gene-editing techniques are being investigated for dementia, particularly for genetic forms of Alzheimer's and other types of dementia. Similarly, stem cell treatments can be used to replace damaged neurons or promote brain regeneration.

Brain Stimulation Techniques

Transcranial magnetic stimulation is a non-invasive technique that uses magnetic fields to stimulate neurons in specific parts of the brain, potentially improving cognitive functions like memory and language.³⁸ Another technique is deep brain stimulation, which involves implanting electrodes to stimulate specific brain regions associated with memory and learning. While it's still experimental, it shows potential for reducing symptoms in some dementia cases.



Neuro-Inflammatory Compounds

Nutraceuticals and anti-inflammatory compounds (like curcumin from turmeric) and other compounds (such as resveratrol) for their potential anti-inflammatory and antioxidant effects, which may help reduce brain inflammation and slow cognitive decline.

Research on the gut microbiome is increasingly recognized as playing a role in brain health.³⁹ Emerging studies suggest that changes in gut bacteria could influence dementia progression, and interventions aimed at restoring gut health through diet, probiotics, or other treatments may provide therapeutic benefits.



- Pros: - New approaches that aim to modify disease mechanisms rather than just symptoms, offering hope for longer-term benefits with the potential to slow or halt disease.

- Research on emerging treatments contributes to knowledge about dementia's underlying biology, which could lead to more targeted therapies.

- Cons: - These treatments are experimental, often expensive, and restricted to clinical trials, and they may have serious side effects and not be suitable for all dementia types or stages.

Alternative and Complementary Therapies

Complementary therapies can be used alongside conventional medical treatment. **They may help you, your loved ones, and your clients to feel better, heal faster, and cope better with illnesses, conditions, and medical treatments.**

With individualized application and very few side effects or contraindications, they are suitable for individuals of all ages and provide a holistic way to promote health and well-being, addressing not only physical ailments but also psychological challenges.

Acupuncture, acupressure, reflexology, aromatherapy, music therapy, and, of course, massage therapy are increasingly used to support dementia care, particularly in managing symptoms such as anxiety, agitation, and depression.

COMPLEMENTARY CARE, especially for dementia, means that it is **essential to work with caregivers and family members** to gather relevant health information, understand the client's daily routines, and ensure the therapy complements other care strategies—not replaces them.

These therapies provide a gentle, non-pharmacological approach that can improve overall health and quality of life. Fortunately, science and medicine are implementing these useful therapies as complementary medical care. This scientific evidence contributes to our credibility and acceptance among healthcare providers and the public.



Acupuncture and Acupressure

Acupuncture and acupressure can also support relaxation, pain relief, and sleep improvement. These techniques can help balance the body's energy and promote calmness. For dementia clients, simplified acupressure (such as applying gentle pressure to the hands or feet) may be more practical and accessible. For some clients with dementia, acupressure may be a preferable option to acupuncture because of the avoidance of needles.

Reflexology

Reflexology provides a positive and gentle touch on the hands and feet, which can have a calming effect, help alleviate loneliness, and provide a sense of comfort and security. This treatment also helps balance energy and correspond to the internal organs--including the different areas of the brain—in a completely accessible and non-invasive manner. The rhythmic pressure and thumb-walking techniques can stimulate the nervous system, encouraging the release of endorphins and other "feel-good" chemicals promoting calmness. Reflexology also provides a natural and enjoyable way to foster deep relaxation, which is especially helpful for individuals who experience anxiety, restlessness, or agitation.

Reflexology may improve blood flow and lymphatic circulation to help reduce swelling, pain, and discomfort. For those with dementia, especially in later stages, circulation and comfort become crucial, as they may be less mobile.

Beyond just a soothing massage, reflexology helps to ease stress and tension, enabling the recipient to also achieve deep, restorative sleep. Working on the reflex points in the toes associated with the brain can help clients stimulate brain function while also helping them reach a calm state, making it easier to fully unwind and drift into sleep.



Aromatherapy

Aromatherapy utilizes essential oils to stimulate the olfactory senses, which can positively affect emotions and memories. Certain scents, such as lavender and chamomile, are known for their



calming effects, which can help reduce anxiety and improve sleep. Lavender and lemon balm are common choices for relaxation, while rosemary and peppermint are sometimes used to enhance alertness and cognitive focus. Oils can be used in a diffuser to scent a room, or they can be mixed with a carrier oil for gentle skin application. Always consider dilution and any allergies, as some individuals may be sensitive to strong scents. Be sure to check

with your client and their family, if scents are OK to use...some people can be VERY sensitive to smells.

Music Therapy



Music therapy taps into musical memory, which is often preserved longer than other cognitive functions in people with dementia. Listening to familiar songs can trigger positive memories, reduce agitation, and improve engagement. Additionally, singing or simple rhythmic activities can boost mood and social interaction. Music therapy

is most effective when personalized, using songs that the individual recognizes from their youth or significant life events. This approach promotes more emotional responses and connections.

Massage Therapy

As massage therapists, we know that regular massage therapy can help humanity in so many ways—these benefits are especially applicable to dementia clients and their families!

Throughout this course, the benefits of massage and how you can help have been discussed to show how massage therapy is continually a welcomed treatment over other options.

Massage therapy is a valuable complementary treatment for individuals with dementia, offering both physical and emotional benefits. Physical touch is a gift that can be calming and helps reduce agitation, anxiety, and physical discomfort. Therapeutic touch can significantly enhance the well-being of individuals with Alzheimer's or other dementia, offering them moments of peace and comfort in the face of a challenging condition.

Massage therapy provides a form of non-verbal communication, fostering a sense of connection and comfort, especially in clients who may have difficulty with verbal communication. Massage sessions also lessen feelings of loneliness and enhance mood through relaxation and the release of endorphins. Being non-invasive and having relatively no adverse effects, massage is also individualized to the client, offering completely tailored sessions, which is an excellent way to encourage feelings of connection and show you care!

Goals to Help Slow



1. Reduce Stress and Anxiety



2. Improve Sleep Quality



3. Enhance Circulation and Cardiovascular Health



4. Encourage Regular Physical Activity



5. Foster Social Interaction



6. Promote Nutrient Absorption and Digestion



7. Provide Cognitive Stimulation

As discussed, massage can help in a myriad of ways for helping a client with dementia, but perhaps the most valuable is by reducing stress. Chronic stress exacerbates cognitive decline and negatively impacts overall well-being. Stress triggers the release of cortisol, a hormone that, at elevated levels over long periods, can damage the hippocampus, a brain region critical for memory and learning. For individuals with dementia, whose cognitive function is already compromised, this additional stress-related damage can worsen symptoms such as memory loss, confusion, and disorientation.

Additionally, chronic stress often heightens behavioral and psychological symptoms of dementia, including agitation, anxiety, depression, and aggression. These symptoms not only lower the quality of life for people but also make caregiving more challenging, potentially leading to caregiver burnout. Stress also disrupts sleep patterns, further accelerating cognitive decline and contributing to physical health problems such as weakened immunity and cardiovascular strain—particularly negatively affecting blood pressure and heart rate—spurring further health concerns.

Besides reducing stress, massage therapy can improve sleep—and, more importantly, sleep quality—by promoting relaxation, reducing muscle tension, and regulating sleep patterns, which are essential for brain health and cognitive function. Sleep disturbances, including sleep apnea, are linked to an increased risk of dementia progression, so attaining better sleep is a key goal.

Vascular health is closely tied to dementia risk, and poor circulation can worsen cognitive symptoms. Massage **helps improve blood flow to the brain** and the rest of the body to deliver oxygen and nourishing nutrients, improving health and reducing risks related to vascular dementia.



While massage therapists aren't physical trainers, you can **encourage clients to remain physically active** by using techniques that improve joint mobility and reduce pain. Massage can also enhance body awareness and ease discomfort, making it easier for clients to engage in gentle exercise, which is essential for reducing dementia risk.

Social isolation is a more commonly known risk factor for dementia that, through your caring touch and interaction, you can help **reduce the sense of isolation** in clients. The therapeutic relationship can offer a form of emotional support and engagement that stimulates mental activity.

Massage can help **improve digestive function**, which is crucial for nutrient absorption. Vitamin deficiencies are associated with cognitive decline, so by supporting overall digestion, you can help clients maintain better nutrient levels. Furthermore, massage can improve digestion by promoting relaxation and stimulating the parasympathetic nervous system, often called the "rest and digest" system, which enhances blood flow to digestive organs, improving their function. Additionally, massage can indirectly support digestion by relaxing muscles in the lower back and pelvis, which might reduce tension affecting digestive function.

While you're not directly involved in medical treatment, you can offer holistic care that addresses many lifestyle factors known to affect dementia progression. Your role in enhancing physical and emotional well-being is crucial in supporting the quality of life and slowing cognitive decline in dementia clients.



- Pros: These complementary and alternative therapies are non-invasive and can work alongside other therapies. They rarely have negative side effects and generally have many positive effects. Improved physical and emotional health with reduced anxiety, agitation, and pain are incredible gifts!

- Treatments can be tailored to individual preferences and sensitivities, offering a comforting, familiar experience for personalized care.

- Cons: - **Sensory overload.** If touch or specific massage techniques cause distress, massage may not be suitable, or you may need to use minimal touch, focusing only on areas the client is comfortable with. With diminished communication abilities, clients might react negatively to touch, especially if startled. Quick or jarring motions can be confusing or startling, leading to distress. Therefore, be cautious of sudden movements or strong pressure and ensure clear communication (such as verbal or non-verbal cues) to help the client feel at ease. Understand that a client might appreciate touch when in the beginning stages of dementia, but as the disease progresses, they can become very anxious about being touched.



- Possible Risks with Comorbidities: Some therapies, like aromatherapy, may pose risks for individuals with allergies, respiratory conditions, or skin sensitivities. Skin changes, especially

Contraindications

those associated with age, like thinning and bruising easily, requiring gentle techniques as overly firm pressure could also be uncomfortable or even painful.

All contraindications for massaging any client obviously also apply to dementia clients. Infections, skin conditions, unhealed wounds, recent surgeries, and medical devices like pacemakers are contraindicated for massage therapy.

Cardiovascular Issues: Many individuals with dementia are also at increased risk for cardiovascular problems, such as hypertension or arrhythmias. It's important to avoid positions or techniques that might elevate blood pressure excessively. For example, clients with unstable blood pressure or other heart-related concerns should not be placed in positions that could exacerbate these conditions.

A Combined Approach

Many people with dementia benefit most from a combined approach that includes medications, lifestyle adaptations, and non-drug therapies. As the disease progresses, the focus often shifts to comfort and quality of life rather than aggressive symptom management, emphasizing personalized care, supportive environments, and interventions that address emotional well-being and physical comfort.

All of the current dementia treatments, though beneficial in many cases, come with notable downsides and limitations. The cost and availability of each treatment are significant deterrents for families dealing with a loved one with a dementia diagnosis. Medications can be prohibitively expensive, creating a financial burden for families and limiting access to those with limited resources or insurance coverage. Ongoing treatment also requires regular visits to specialists, which can add further costs and logistical challenges.

The psychological impact of treatment regimens is also an overlooked side effect. Frequent doctor visits, medication schedules, and ongoing treatments can add stress for both patients and their family and caregivers, particularly as dementia progresses, and the individual may struggle with understanding why they are receiving treatment. This can result in frustration, confusion, and sometimes refusal to cooperate with care.



Giving **false hope** is a concern to be aware of in your practice! While some treatments may offer symptom relief, they may inadvertently create unrealistic expectations among families and those with dementia about disease progression. Families may assume treatments will drastically slow down or cure dementia, leading to disappointment when the disease inevitably progresses.

Despite these challenges, dementia treatments can provide meaningful symptom management, especially when combined with non-medical interventions, holistic care approaches, and strong family or community support.

Caregiver education—like this class—combined with support are essential components of treatment, as they help families cope with the emotional and practical challenges of caring for someone with Alzheimer's or any form of dementia.

As a massage therapist, you can play a valuable role in helping clients with dementia mitigate their risk of disease progression by incorporating therapeutic practices that promote better health.

Ethics and Boundaries

You knew ethics and boundaries HAD to be mentioned, right?! Massage therapists working with dementia clients must carefully honor several boundaries to ensure safety, comfort, and respect. Physical boundaries are at the top of the list, meaning you should obtain clear consent, even if this requires adapting communication techniques to the client's cognitive level. When appropriate, **consult with caregivers or family members** to understand the client's needs, preferences, and medical history. Clearly document consent procedures and any input from caregivers to ensure ethical and legal compliance.

During a session, regularly checking for non-verbal cues, such as signs of discomfort or agitation, helps ensure ongoing consent. Therapists should also **avoid techniques that might be overwhelming or misunderstood** by clients with dementia.

Accurate documentation ensures continuity of care, tracks changes in the client's condition and provides valuable information for caregivers and medical professionals. Recording details about



the session, including responses and observations, is essential, as well as **documenting behavioral changes and session outcomes.**

Emotional boundaries are equally important. Clients with dementia may experience heightened sensitivity or confusion, so **you must maintain a calm, professional**

demeanor and avoid engaging in emotionally charged discussions. Ensuring the session remains a safe and relaxing space is crucial.

Finally, environmental and privacy boundaries must be respected. Creating a familiar and soothing setting can reduce anxiety, and allowing caregivers to be nearby if needed ensures clients feel secure. Adhering to ethical guidelines and professional standards further reinforces trust and promotes the best outcomes for the client.

GENTLE ADVICE

When working with clients who have dementia, it is crucial to understand the boundary between offering gentle advice and stepping into the realm of medical or prescriptive recommendations. Massage therapists can play an important role in supporting the well-being of clients, but you must remain within the scope of practice, offering suggestions rather than formal medical advice.

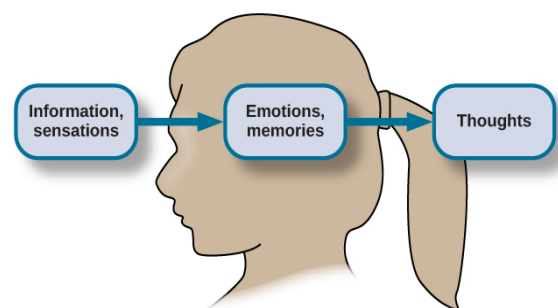
You can provide general lifestyle tips that align with promoting relaxation, enhancing mobility, or supporting overall mental health, such as encouraging regular physical movement, mindfulness, or social engagement. These suggestions should be presented as options for enhancing quality of life rather than as treatments or interventions for dementia. Always make it clear that any significant changes in lifestyle, mainly when they involve medical considerations (such as changes to diet, medication, or exercise), should be discussed with their healthcare provider.

By maintaining this boundary, you can ensure your advice remains within the ethical standards of massage therapy, supporting your clients' health while respecting the role of medical professionals.

The greatest gift you can give someone is your TIME.

When advising a client with dementia about lifestyle changes to improve mental longevity, you need to take a compassionate and gentle approach, keeping the client's cognitive abilities and emotional state in mind. Establishing a calm, supportive environment where the client feels safe is essential, as this helps foster openness to conversation. Using clear, simple language that is easy to understand can ensure the message is received without causing confusion or frustration.

Starting with small, actionable suggestions is often the best way to guide lifestyle changes. For example, you might gently suggest the importance of regular **physical activity**, such as light stretching or walking, which can improve circulation, boost mood, and support cognitive function.



Incorporating sensory activities, like **aromatherapy or simple mindfulness exercises**, could also be beneficial for mental stimulation. You could demonstrate these during the session, emphasizing how the client can easily integrate them into daily routines. Moreover, **encouraging social interaction** is another important aspect. You can suggest staying connected with family and friends or joining community programs to keep the mind active. This can be framed as a way to maintain emotional well-being, which positively impacts cognitive health. Overall, the advice should be tailored to the client's individual preferences, helping them make adjustments in ways that feel comfortable and achievable while always fostering a sense of dignity and empowerment.

Lifestyle Factors Contributing to Dementia and Preventative Measure to Slow Progression

LIFESTYLE FACTORS	PREVENTATIVE MEASURES
<p>Poor Diet: A diet high in unhealthy fats, sugars, and processed foods can increase the risk of dementia. Elevated cholesterol levels can contribute to plaque buildup in blood vessels, potentially leading to strokes and vascular dementia. Deficiencies in vitamins, particularly vitamin D, B-6, B-12, and folate, have been linked to increased dementia risk.</p>	<p>Better Diet: Adopt a Mediterranean-style diet rich in fruits, vegetables, whole grains, fish, and healthy fats. This reduces cholesterol buildup, supports cardiovascular health, and ensures adequate intake of essential vitamins (D, B-6, B-12, and folate) to lower the risk of cognitive decline and dementia.</p>
<p>Lack of Physical Activity: Sedentary lifestyles are associated with a higher risk of dementia. Regular physical activity improves blood flow to the brain, reduces cardiovascular risk, and can protect against cognitive decline.</p>	<p>Get Physical Activity: Incorporate regular physical activity into routines. This improves brain blood flow, protects against cognitive decline, and reduces the risk of dementia.</p>
<p>Cardiovascular Health: High Blood Pressure, also called chronic hypertension, can damage blood vessels in the brain, leading to an increased risk of vascular dementia.</p>	<p>Care for Your Heart: Manage blood pressure by eating a heart-healthy diet, exercising regularly, and avoiding excessive salt intake. Controlling hypertension reduces risk of vascular dementia (damaged brain blood vessels).</p>
<p>Excessive Alcohol Consumption: Heavy drinking over a long period can lead to brain damage and increase the risk of dementia, particularly early-onset dementia.</p>	<p>Decrease Alcohol Consumption: Limit alcohol intake or avoid it entirely to protect brain health and lower risk of early-onset dementia.</p>
<p>Smoking: Smoking damages blood vessels and reduces oxygen flow to the brain, increasing the risk of vascular dementia and Alzheimer's disease.</p>	<p>Quit Smoking: Stopping smoking improves cardiovascular and brain health and will enhance blood oxygen flow and reduce the risk of vascular dementia and Alzheimer's disease.</p>
<p>Head Injuries: Severe or repeated head trauma increases the risk of dementia, particularly Alzheimer's. Traumatic brain injury also raises the risk of cognitive decline.</p>	<p>Wear Helmets: Protect your head during risky activities and taking precautions to avoid falls. Preventing head trauma can lower the risk of traumatic brain injury (TBI) and dementia.</p>
<p>Social Isolation: A lack of social engagement can worsen cognitive decline. Social separation increases depression, a risk factor of dementia.</p>	<p>Be Socially Active: Maintain and build relationships and engage in community activities to engage cognitively with others.</p>

LIFESTYLE FACTORS	PREVENTATIVE MEASURES
<p>Chronic Stress: High levels of stress over time can negatively affect memory and brain function, potentially leading to cognitive decline.</p>	<p>Reduce Stress: Manage stress through relaxation techniques and massage. Reducing chronic stress can help preserve memory and brain function, lowering the risk of dementia.</p>
<p>Poor Sleep: Sleep disturbances, particularly sleep apnea, are linked to an increased risk of dementia. Sleep is essential for brain health and memory consolidation.</p>	<p>Improve Sleep Quality: Prioritize good sleep hygiene, aiming for quantity <i>and</i> quality sleep each night. Address sleep disorders like sleep apnea, as proper rest is essential for brain health and memory consolidation.</p>
<p>Untreated Hearing Loss: Hearing loss has been associated with cognitive decline and may increase the risk of dementia.</p>	<p>Get Hearing Aids: Get regular hearing checks and use hearing aids if necessary. Treating hearing loss early can reduce cognitive decline and decrease the risk of developing dementia.</p>
<p>Chronic Inflammation: Ongoing inflammation, which may result from lifestyle factors or chronic diseases, has been suggested as a contributing factor to dementia.</p>	<p>Reduce Inflammation: Combat inflammation by following a healthy diet rich in antioxidants, staying physically active, and managing any underlying conditions. This can reduce the risk of dementia linked to ongoing inflammation.</p>
<p>Certain Medications: Some medications, such as sleep aids containing diphenhydramine and treatments for urinary urgency, may negatively impact memory. It's important to consult a healthcare provider about any medications that could worsen cognitive function.</p>	<p>Scrutinize Medication Information: Review your medications with a healthcare provider, especially if taking sleep aids or medications for urinary urgency. Adjusting medications can help avoid cognitive side effects that may increase the risk of dementia.</p>



CHAPTER 8

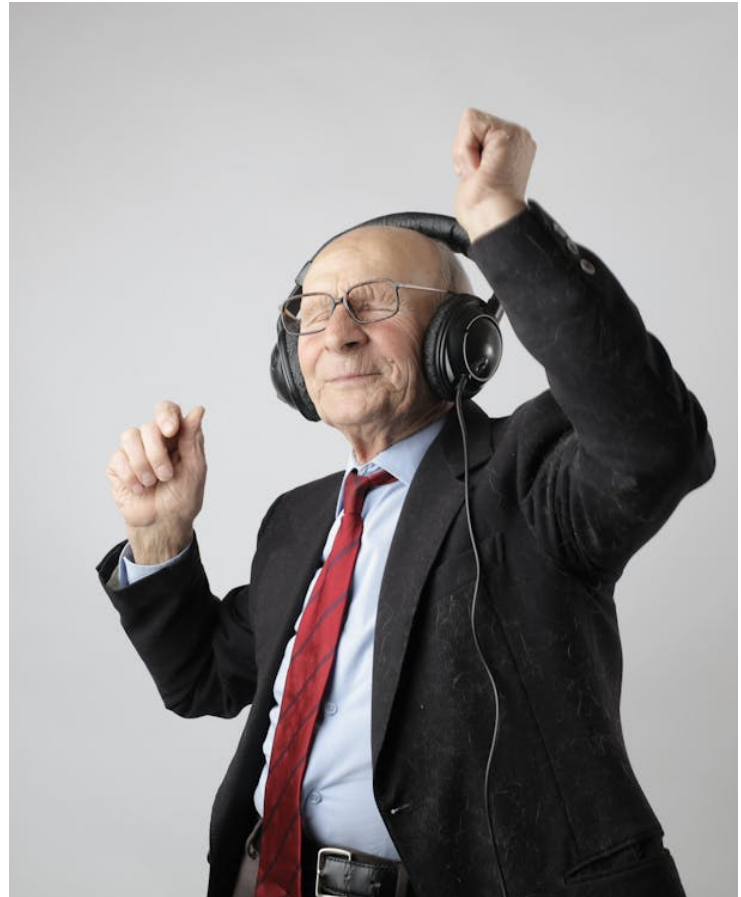
Recap and Special Considerations

Adjustments for Clients with Dementia

Incorporating massage therapy into the care plan for someone with dementia, including those with Alzheimer's, can help manage symptoms holistically, addressing both the mind and body to offer services that go far beyond the immediate relief of muscle tension.

Recognizing the unique needs of this population and the profound impact that thoughtful, informed care can have on their quality of life will enable you to provide your skillful services and care effectively and compassionately.

Understanding that a dementia client may have difficulty remembering recent events or recognizing familiar faces helps you communicate more clearly and patiently, avoiding frustration on both sides. Knowing that certain behaviors, such as agitation or withdrawal, are symptoms of the condition rather than deliberate actions allows you to respond with empathy rather than judgment. Cognitive decline presents certain challenges, but keep in mind that dementia clients retain the ability to respond emotionally to caring touch. Therefore, massage therapy can increase body awareness, reduce confusion and anxiety, build trust, and relieve feelings of loneliness and isolation. Even in the advanced stages of Alzheimer's, clients respond positively to simple, familiar touch.



However, unlike standard therapeutic massage, massage for dementia clients must be tailored to account for the cognitive, emotional, and physical needs. **Memory loss, confusion, mood changes, and difficulty with communication can make client-therapist interactions challenging—and rewarding!**

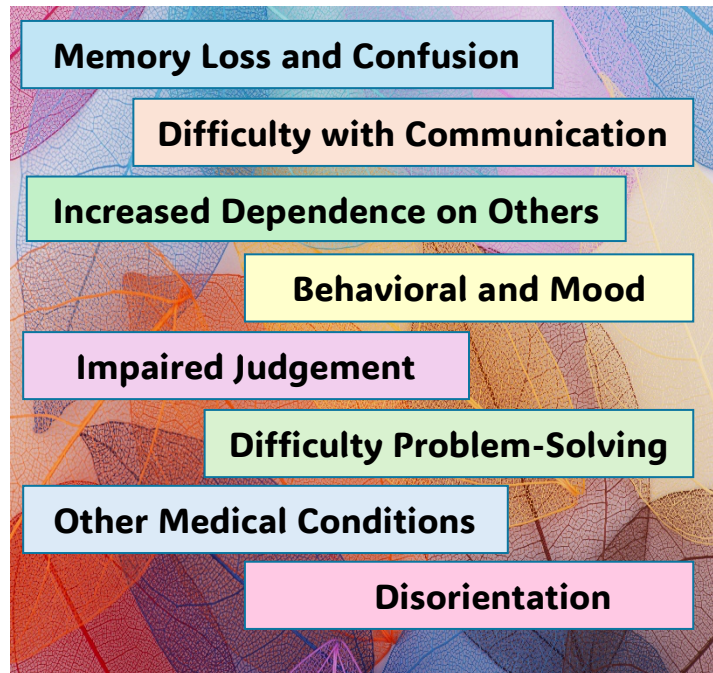
SCHEDULING A SESSION

To address the physical, emotional, and psychological health of dementia clients, you must consider extra measures before the client even arrives.

Your sessions may need to be shorter to accommodate the client's potential for reduced attention span or tolerance. However, allow them extra time to complete their intake paperwork. They might need you to repeat your questions. Your understanding of dementia will add compassion as they may struggle with tasks like making their payment and booking follow-up appointments. Write down all instructions you give them for after-care and their next appointment, and ensure they take the note with them.

Even the timing of the appointment can matter! The best time of day for scheduling a massage session with a dementia client is typically in the late morning or early afternoon. This timeframe often aligns with when individuals with dementia are more alert, cooperative, and less prone to symptoms of "sundowning," a state of confusion and agitation that can occur in the late afternoon or evening. Early scheduling also avoids interfering with mealtimes or rest periods, helping the client feel calm and receptive to the session. **The importance of working with caregivers and family to gather relevant health information, understand the client's daily routines, and ensure that massage therapy complements other care strategies cannot be emphasized enough!** Adjustments can be made based on the client's specific routine and preferences, but maintaining a consistent schedule is key to minimizing confusion.

Let's say it again: **extra patience is paramount!** If you feel rushed, you will likely make them more anxious and flustered. For repeat clients, you should maintain a consistent routine during sessions to help the client feel secure and comfortable. Middle-stage dementia clients may have days when they're more receptive to touch than others, so flexibility and attention to their mood are essential.



MEDICAL AND PHYSICAL CONSIDERATIONS

Many dementia clients face additional health challenges, such as mobility restrictions, frailty, or skin sensitivity, which require careful positioning and pressure adjustments. Therapists must also account for potential contraindications, such as medications or comorbid conditions. Always follow universal precautions, particularly with clients who have fragile skin, limited mobility, or other health issues.

COMMUNICATION

Clear, simple, and slow communication is essential! You should use a soothing tone, **simple explanations**, and predictable routines to foster trust and emotional security. Their conversation may seem strained, shift to unusual topics or wording, or be confusing for you to follow, but stay calm and focused. Explaining each step before beginning, using non-threatening, reassuring tones, can help them feel more prepared and cognitively engaged. For example, saying, "I'm going to gently massage your hands now," helps build trust. Regularly checking in with open-ended, simple questions like "Does this feel okay?" can also help bridge communication gaps. **If a client repeatedly asks the same question during a session, answer gently and consistently each time.**

BODY LANGUAGE

You should be attuned to the client's non-verbal cues, as verbal communication may be challenging. Furthermore, the client may have **anosognosia** and not realize they have dementia.

If dementia clients struggle with verbal communication, it will be vital to rely on non-verbal cues, such as body language and facial expressions, to gauge comfort and consent. Being hyper-observant and in tune with **facial expressions** like **grimacing** and **frowning** may help you know their preferences and comfort levels. **Body language, including eye movement, restlessness, tension, flinching, or changes in breathing**, can indicate that the massage pressure or technique needs adjustment. Avoiding eye contact or showing wide, startled eyes could be a sign of discomfort or confusion. Fidgeting, shifting positions frequently, or becoming visibly unsettled can indicate that the client is not comfortable with the massage or specific techniques. **Vocalizations such as moaning, groaning, sighing, or even sudden silence can often convey more than actual words!** Watch closely for these cues and others so you can adjust your approach, ensuring the client feels safe, comfortable, and respected throughout the session.



TOUCH AND PRESSURE

Clients with dementia may have heightened sensitivity to touch, difficulty expressing discomfort, or may not fully understand the purpose of the massage.

Overall, the focus is on enhancing the client's well-being, providing comfort, reducing anxiety, and fostering a sense of connection through compassionate touch rather than solely addressing physical issues. Avoid direct pressure on bony areas such as the spine joints and fragile spots like the knees or elbows, as clients may have conditions like osteoporosis or arthritis. Pressure on the abdomen can cause discomfort or exacerbate digestive issues. Remember to be cautious of skin that appears fragile, bruised, or inflamed due to aging, medications, or other health conditions.

Focusing on one area for too long can cause discomfort or lead to restlessness in clients who have difficulty staying still. Conversely, quick or jarring motions can be confusing or startling, leading to distress. As dementia progresses, **lighter touch** techniques, such as gentle effleurage or holding, may be more suitable to avoid overstimulation or agitation.

FAMILIARITY

You will also need to tailor the session for clients with memory loss to ensure the client's safety, comfort, and engagement during the session. You can minimize unfamiliar stimuli by **maintaining a consistent, quiet, and peaceful space with gentle lighting, soothing music, and familiar scents** (like lavender) to help clients feel at ease and reduce anxiety.

Build familiarity with a dementia client by maintaining consistent routines during sessions and using sensory cues like familiar scents, music, or verbal reassurances. If you have positive previous shared experiences, remind them of that time. **Engaging the client in conversation about familiar topics, such as family, hobbies, or past experiences, can help them feel more**



connected and relaxed during the session. This approach helps create a sense of trust and recognition, which can reduce anxiety and enhance the therapeutic relationship. If the client responds positively to specific actions (e.g., massaging a hand), you might choose to focus on these areas to create comfort and recognition.



ENVIRONMENT

Creating a peaceful and predictable environment can help the client feel safe and relaxed. For dementia clients, the massage environment must be soothing and free of sudden changes, as they are more susceptible to confusion and distress. This involves not only physical safety—such as ensuring the massage table is stable, and the room is free of hazards—but also emotional and psychological safety. The environment should be calm, quiet, and familiar to reduce anxiety.

- **Reduce Environmental Stressors**
 - Keep the room quiet, dimly lit, and at a comfortable temperature. Remove clutter to avoid overstimulation or confusion.
- **Monitor Physical Safety**
 - Use bed bolsters, adjustable tables, and non-slip mats to prevent falls or discomfort during transitions.
- **Be Prepared for Emergencies**
 - Have a plan for handling medical or behavioral emergencies, including contact information for family members and/or caregivers and first-aid supplies.

If the client would be more comfortable with their caregivers present during the massage, provide a chair for them.

Safety Considerations

Small modifications to your workspace can make it more calming and less confusing for clients with dementia—and everyone else! Consider the path the client must take to get from the parking lot to the front door, to the bathroom, and to your massage room. What safety scenarios need to be addressed?

Lighting & Visibility

Is the lighting evenly distributed to reduce dark shadows and increase visibility? Good lighting is particularly helpful in stairways and bathrooms. Use soft, indirect lighting to reduce glare and harsh shadows that might confuse or distress a client with dementia. Dimmer switches allow for adjustment based on the client's preferences.

Contrasting colored items can help make important items more distinguishable, such as using a different colored reminder note than their appointment reminder.

Clear Signage

Can your clients easily find their way to your massage room, the bathroom, and the front door? Label doors, cupboards, and important areas with clear, large, and contrasting text or images.

Mitigate Falls

What measures are in place to mitigate falls? Falls are a significant risk for people with dementia, especially in the later stages. Occupational therapists can conduct assessments to identify and reduce hazards and make recommendations. Especially in wet areas, like bathrooms, non-slip flooring, and anti-skid strips can prevent slips. Grab bars and hand railings, especially in hallways, near stairs, and in bathrooms, provide extra support and stability.

Can the tripping hazards be reduced, such as by removing rugs or power cords? Clear walkways of clutter and ensure furniture doesn't move or tip if suddenly grabbed to steady oneself or if bumped into. Is there space for mobility aids, like walkers, to get around all the furniture?

Cleanliness

How often are the tables, chairs, counters, floors, linens, and other surfaces disinfected? Dementia clients generally have weakened immunity to viruses and germs and may be prone to skin infections. Additionally, individuals with dementia may not have the cognitive ability to understand hygiene protocols, such as handwashing. It's crucial to maintain a sanitary environment and ensure that you follow all standard infection control practices.

Other Dangers

For their safety and yours, secure cleaning supplies, medications, and tools in locked cabinets.

Appeal to All of the Senses

Once physical safety is ensured, consideration should be given to sensory elements, such as soft lighting, soothing music, and the use of comforting scents like lavender or chamomile. Adapting the environment to the client's needs can enhance their relaxation and overall experience.

Temperature

Older adults, including those with dementia, often have a reduced ability to regulate their body temperature, making them **more sensitive to cold**. Have an extra blanket close and **set the**



temperature in your room to be warm and comfortable—typically around 74 degrees Fahrenheit (23 degrees Celsius). Ensure good air circulation without drafts, as sudden bursts of air or cold spots can be unsettling.

Lighting

Lighting can significantly impact the comfort and relaxation of dementia patients during a massage. Harsh or overly bright lights can be overstimulating and may cause discomfort or agitation for individuals with dementia. Diffused lighting helps create a calming environment. Use lamps with frosted bulbs, warm-toned LED lights, or shaded fixtures to soften the light. Be conscientious of dark shadows and areas that might frighten or confuse dementia clients, likewise for glares from shiny surfaces.

Sound

The right sounds can enhance relaxation and reduce anxiety. Always keep sounds at a low volume to prevent overwhelming the client. Whenever possible, ask the client or their caregiver about preferred sounds to personalize the experience. Gentle instrumental music, such as piano, harp, or classical melodies, helps create a serene atmosphere. It avoids lyrics that might be distracting or overstimulating. Familiar tunes from the client's youth can evoke positive memories and provide comfort, but these should be soft and soothing rather than upbeat.

Scent

When massaging a dementia client, aromatherapy can boost the massage experience to a multi-sensory experience for a dementia client. Essential oils add more than a beautiful scent as each oil invokes therapeutic properties. It is beneficial to use scents from pure essential oils that are soothing, non-overwhelming, and intentionally chosen for the situation.

Always consider dilution and any allergies, as some individuals may be sensitive to strong scents. Be sure to ask if this is OK with the client.

Essential oils can be used in a diffuser to scent a room, or they can be mixed with a carrier oil for gentle skin application.



It is important that the essential oils are pure--meaning only when they are extracted from plants through methods like distillation or cold pressing without the use of additives, synthetic substances, or dilution, ensuring they retain their natural chemical composition. Consult the client or their caregiver to identify scents that evoke positive memories or associations when possible. Use essential oils sparingly to avoid overwhelming the client. Aromas can evoke positive memories, reduce anxiety, and enhance relaxation, but sensitivity to smell should always be considered. Lavender is known for its calming properties and helps reduce anxiety, promote relaxation, and improve sleep. Chamomile also has a light floral scent that can reduce feelings of stress and restlessness.

These considerations will provide a soothing, supportive environment to contribute to a better quality of life for individuals with dementia, complementing medical treatments and offering additional avenues for emotional and physical relief.

Taste

Many individuals with dementia may not recognize their thirst, so offering water before or after a massage can be a helpful gesture. Always ensure they are capable of drinking independently or have a caregiver present if assistance is needed.

Appropriate Dementia Massage Techniques

Massage techniques need to be carefully selected based on the client's stage of dementia, medical conditions, and current temperament. Reducing muscle tension and stiffness, which are common in people with dementia due to reduced mobility or physical activity, is important, but remember to keep the focus on establishing a sense of comfort rather than symptom management.

In the early stages, a more traditional approach to massage might be appropriate, **such as Swedish massage**, to help alleviate any tension or anxiety that the client may be experiencing with emphasis on relaxation and stress reduction, while in the middle stages of dementia, you may use gentler, more soothing techniques to alleviate anxiety and agitation.

Adjusting the techniques and pressure to have gentle, slow, and repetitive strokes are often favored, as they are less likely to overwhelm or startle the client. By prioritizing calming the nervous system, providing physical comfort, and gently stimulating cognition, you can provide comfort. Techniques such as slow, rhythmic strokes or holding can be especially beneficial, offering a calming sensory experience that is calming and less intrusive. **Effleurage** on the arms, legs, and back can create a sense of warmth and comfort, promoting relaxation without overstimulation. Likewise, **reflexology, hand, and foot massage** are often less invasive and can help ground clients in the present moment and offer an engaging sensory experience. Techniques like gentle circular thumb pressure and light stretching are effective.



Applying slow, gentle compression along the shoulders or upper back may provide a comforting sensation. The rhythm and pressure can help the client feel secure and connected to their body, especially if they struggle with motor coordination.

If the client is familiar with or accepting of acupressure to target specific points, this method can reduce anxiety and promote relaxation. Areas such as the shoulders, neck, and temples work well for gentle acupressure. However, communication is crucial, as the pressure may need to be lighter than usual.

Some clients respond well to breathwork cues. Encourage slow, deep breaths to accompany gentle touch, which helps with overall relaxation and can help improve body awareness.

For clients in the late stages of dementia, you should aim to provide comfort through light touch or holding, ensuring that the massage is safe and effective even when verbal communication is limited.

Marketing Your Services

The unique needs and the benefits massage offers create a niche for skilled therapists to serve this population. The therapeutic nature of massage offers a very desirable, safe, and non-invasive way to enhance the quality of life for persons with dementia, making it a valued service!

A good place to start marketing your skills with dementia clients is by building relationships with long-term care facilities. This requires effort. Start by researching potential workplaces, networking at senior health fairs, and identifying decision-makers. When presenting your services, be prepared to explain the specific benefits of massage for residents, including potential benefits to the facility's reputation and competitive standing. Perhaps mention how incorporating your reliable services into daily or weekly routines is good for those needing memory care. Discuss how massage can enhance resident satisfaction, family peace of mind, and staff morale.

Schedule in-person meetings and leave behind printed materials and business cards. Following up after your initial meeting with a thank-you note or call can make a positive impression.

Perhaps becoming more familiar with Cognitive Stimulation Therapy (CST) can be incorporated into services you offer as part of a structured healthcare program involving massage therapy. CST has been shown to help with memory, problem-solving, and communication skills in people with mild to moderate dementia

As with all business transactions, payment arrangements can vary. Some facilities may hire you as an employee, while others might engage you as an independent contractor. **Do not undervalue yourself!**



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Overview of Each Stage

CHARACTERISTICS OF EARLY-STAGE DEMENTIA

1. Memory Loss
2. Difficulty with Planning and Problem-Solving
3. Confusion with Time or Place
4. Language and Communication Challenges
5. Poor Judgment or Decision-Making
6. Mood and Personality Changes
7. Difficulty with Familiar Tasks



CHARACTERISTICS OF MIDDLE-STAGE DEMENTIA

1. More Pronounced Memory Loss
2. Often Confused
3. Difficulty with Communication
4. Increased Dependence on Others
5. Behavioral and Mood Changes
6. Poor Judgment or Decision-Making
7. Sleep Disturbances

CHARACTERISTICS OF LATE-STAGE DEMENTIA

1. Pronounced Cognitive Decline
2. Little to No Verbal Communication
3. Significantly Diminished Physicality or Immobile
4. At Higher Risk of Illness and Infection
5. Less Responsive Emotionally
6. Decline in Awareness and Sensory Perception

Prioritize Self-Care

Working with dementia clients **can be a deeply rewarding but emotionally and physically taxing experience**. These clients often require tailored care, empathy, and heightened sensitivity to their unique needs. While providing this care, you may encounter emotional challenges, such as witnessing cognitive decline or managing clients who struggle with communication and memory. Over time, this can lead to caregiver fatigue or even burnout if self-care is neglected. Validating the importance of self-care allows you to remain healthy, present, and effective.

Please recognize that your emotional state impacts those around you!

Take care of yourself so you can **approach each session with clarity, patience, and compassion**. Regular self-care practices are essential for recharging emotionally and physically,

SET BOUNDARIES AND MANAGE EXPECTATIONS

You must set clear professional boundaries with clients and caregivers to prevent emotional overinvestment. Learning to say no or delegate tasks when overwhelmed helps preserve emotional energy. Stay within your legal scope of practice and abide by all ethical codes. There is inner peace in being transparent and compliant.

PRACTICE STRESS-RELIEF TECHNIQUES

Routinely do activities that promote relaxation, such as mindfulness meditation, yoga, or personal massage sessions. Incorporate regular breaks and leisure activities into your routine. Whether it's taking a walk, reading, or spending time with loved ones, downtime is crucial for mental rejuvenation. These can help you reset your mental and emotional balance, particularly after challenging client interactions.

STAY PHYSICALLY HEALTHY

Regular exercise, proper hydration, and balanced nutrition are essential for managing the physical demands of massage therapy. Strengthening core muscles can reduce strain during physically intensive sessions, and a healthy diet supports your immune system.

SEEK SUPPORT

Build a network of colleagues or mentors who understand the challenges of working with dementia clients. Peer groups or therapy can provide emotional support and practical advice.



CHAPTER 9

Conclusion

Understanding how massage therapy has been integrated into holistic care for dementia clients will hopefully inspire you to continue developing your skills and approaches in this important area of practice. As the dementia population is growing, you can position yourself to **take on this global challenge**.

The role of massage therapy in fostering health and wellness remains as vital today as it was in the past—and is needed even more so going forward--showcasing the enduring power of touch as a therapeutic tool. Its application in dementia care has grown over the years as more is understood about the condition and the benefits of touch in maintaining physical and emotional well-being.

Working with dementia clients requires specific skills...and patience, gentleness, and adaptability!

Learning more about the risk factors of dementia will help you recognize symptoms and empower you to seek help if you suspect you or someone you know might be showing symptoms. Your awareness of dementia will enable you to work more closely with caregivers, ensuring the best possible care plan for the client.

Hopefully your understanding of dementia can aid you in being more comfortable around those with symptoms such as memory loss and disorientation. Understanding that a dementia client may have difficulty remembering recent events or recognizing familiar faces can be motivation to build a connection of comfort with them. Your efforts to communicate more clearly and patiently will help avoid frustration on both sides. Acknowledging that behaviors, such as agitation or withdrawal, are symptoms of the condition rather than deliberate actions will allow you to respond with empathy rather than judgment.

You should be mindful of your own emotional well-being when working in this field, as this work can be challenging but also very rewarding! Thank you for taking this class!



Resources and References

Suggested Resources & References

1. Alzheimer's Association – www.alz.org
2. American Massage Therapy Association (AMTA) – www.amtamassage.org
3. National Institute on Aging – www.nia.nih.gov
4. The Touch Research Institute – www6.miami.edu/touch-research

Additional Reading Suggestions

- "Dementia Care: A Guide for Families and Caregivers" by Mark H. O'Donnell
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- "Massage Therapy and Dementia Care" by Helen Annis

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