

Target Area: Anxiety, Depression, Stress & Adjustment / Behaviour Problems

<p>Lichtenberg, Kemp-Havicam, MacNeill &amp; Johnson (2005). <i>Pilot Study of Behavioural Treatment in Dementia Care Units</i>. <i>The Gerontologist</i> 45(3): 406-410</p>	<p>PEDro score – 6/10</p>
<p>Method/Results</p>	<p>Rehabilitation Program</p>
<p>Design:</p> <p>Y Study type: RCT (one nursing home randomly selected for treatment, the other as control).</p> <p>Y Population: n=20 people with dementia (gender not specified).</p> <p>Y Groups: 2 groups:</p> <ol style="list-style-type: none"> <li>1. Treatment group: n=9 (age=84.8, SD=4.9)</li> <li>2. Usual care group: n=11 (age=85.0, SD=5.1).</li> </ol> <p>Y Setting: Nursing home, special care unit.</p> <p>Primary outcome measure/s:</p> <p>Y The BEHAVE-AD (a psychologist rated scale for behaviours such as paranoia, hallucinations, aggression).</p> <p>Y Geriatric Depression Scale (GDS).</p> <p>Y Cornell Scale for Depression in Dementia (CSDD).</p> <p>Secondary outcome measure/s:</p> <p>Y None.</p> <p>Result: People in treatment NH significantly less behavioural disturbance than control NH at post treatment. No change in depression.</p>	<p>Aim: To use behavioural treatment to improve wellbeing (i.e. depression, agitation and behavioural disturbance) in individuals with dementia in nursing homes (NH).</p> <p>Materials: Holiday post cards, letters, old photos, equipment for pampering (hair care etc), books etc.</p> <p>Treatment Plan</p> <p>Y Duration: 3 months.</p> <p>Y Sequence: 20–30 minutes, 3 times a week.</p> <p>Y Content: Imagery and breathing exercises (2–3 mins); then engagement in activity such as correspondence (letter writing etc), reminiscence, pampering (e.g. massage) 15–20 mins.</p>