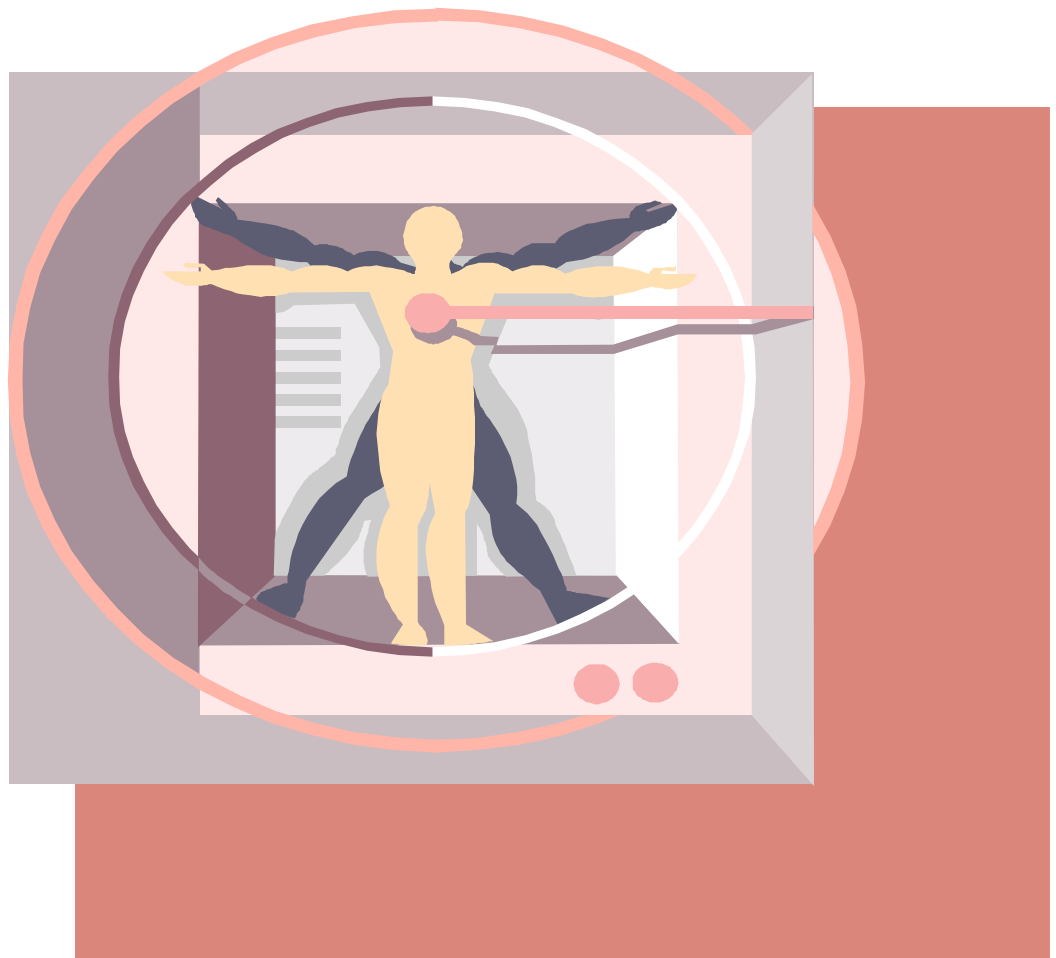


# Health





## What is a Communicable Disease?

A communicable disease is one that is spread from one person to another through a variety of ways that include: contact with blood and bodily fluids; breathing in an airborne virus, or, by having contact with a little bug called lice. For the most part, communicable diseases are spread through viruses and bacteria that live in blood and body fluids. For instance, hepatitis and human immunodeficiency virus (HIV) are examples of infections that can be carried in blood and bodily fluids. On the other hand, tuberculosis is an airborne disease. A person with tuberculosis (TB) can spread tiny germs that float in the air if they cough or sneeze without covering their nose or mouth. And, there are some communicable diseases like head lice that are caused by a live lice bug that is spread by using an infected comb or wearing a hat that is infested with lice. For more information about how to reduce potential exposure to communicable diseases, see section 7. Let's take a closer look at some communicable diseases.



# Head Lice

How is Head Lice Spread?

Head lice can infest people of all ages and economic standing. Head to head contact or simple exchange of hats, clothing, combs and other personal items can lead to the transmission of lice from one person to another. Head lice are contagious. If someone you know has head lice, do not panic.



Caregiver Tips:

## 1. Inspect for Lice and Nits

Using a magnifying glass and natural light, carefully examine hair, scalp, sideburns, eyebrows, beards and mustaches of all household members for lice and their eggs, called "nits."

Nits, which are yellowish-white in color and oval shaped, can be easier to locate than lice. Nits are glued to the side of the hair shaft and can be found throughout the hair, especially at the back of the neck, behind the ears, and at the top of the head.

Do not confuse nits with dandruff or hair casts (material from the hair follicles). Unlike a nit, dandruff can be flicked or blown out of the hair and hair casts can slide easily along the hair shaft.

- It is important to remember that no one is immune to head lice.
- Only infested household members should be treated and all on the same day.

- If you see lice walking around after treatment, do not panic. It is not unusual to see lice moving around the head after treatments. Lice control products may take a while to kill the adult lice.

## 2. How to Treat Head Lice

- Wash hair with a cleansing shampoo, i.e., Prell or Johnson's Baby Shampoo, something without any type of conditioners.
- Towel dry hair thoroughly (use a fresh towel at each stage).
- Saturate hair with a lice/nit treatment product, for example, common over-the-counter products are NIX and RID. People with long, thick, or curly hair may have to use several bottles to saturate hair completely.
- Leave product on the hair only for time stated in the directions.
- Rinse product out over sink, never in the shower. This limits exposure of pesticide to the head area.
- Do not apply any so-called nit (egg) removers, or vinegar after rinsing out the lice/nit treatment product.
- Comb out all nits with a metal fine-tooth nit comb.
- Separate the hair into 1-inch sections (as if you were setting pin curls), comb each section with metal nit comb, and pin back with a metal hair clip. This will help you keep track of what you have already combed.

### 3. Clean the Environment

Vacuuming is the most effective tool against lice in the home.

Remember to vacuum:

- Bed & mattress
- Pillows
- Base board around bed
- Couches
- Chairs
- Stuffed animals (tightly close in plastic bag for 2 days)
- Back packs
- Car seats
- Helmets/hats
- Launder washable clothing, bed linens, blankets, pillow cases.
- Soak all hair brushes and combs in hot water for 10 minutes.
- Insect sprays often sold with lice/nit products are not recommended. They are ineffective and expose household members to pesticides unnecessarily.



#### Facts about Head Lice

- Adult lice are 2 to 3 mm long (about the size of a sesame seed) and brownish to grayish white in color.
- Lice crawl; they do not jump or fly.
- Head lice do not live on pets.
- Most infestations occur in children 1-12 years old.
- Primary means of transmission occurs when sharing hats, combs, clothing, etc.
- Head lice require a blood meal every 4 to 5 hours and die in 1 or 2 days when off of a person.

Hepatitis is a liver disease that makes your liver swell up and stop working well. Hepatitis can be mild and last for a short time, or be very serious and cause liver failure and death.

## **What causes Hepatitis?**

Hepatitis is caused by viruses, bacteria, alcohol or drug abuse, some medicines, or serious harm to the liver. Millions of people in the U. S. have Hepatitis.

What are the different kinds of hepatitis and how is it transmitted?

Hepatitis A:

- By eating food and drinking water infected with Hepatitis A. This can occur when food or drinks are contaminated with feces or blood of a person infected with Hepatitis A.

Hepatitis B:

- By having unprotected sex (sex without a condom) with someone who has Hepatitis B
- By sharing needles with someone infected with Hepatitis B
- Being stuck by an infected needle
- A mother passing the virus to her child during the birthing process or breastfeeding
- Contact with bodily fluids, blood, or open wounds

Hepatitis C:

- Getting blood that is infected with Hepatitis C
- Sharing needles with someone infected with Hepatitis C
- Accidentally stuck by an infected needle
- Using tools for tattoos and body piercing that are infected with Hepatitis C

- Having unprotected sex (sex without a condom)
- A mother passing the virus to her child during the birthing process
- Contact with bodily fluids, blood, or open wounds

**Hepatitis D:** (Individuals must already have Hepatitis B)

- By sharing needles with someone infected with Hepatitis D
- Being stuck by an infected needle
- Having unprotected sex (sex without a condom)
- Contact with bodily fluids, blood, or open wounds

What are the signs of Hepatitis?

The most common early signs are:

- A mild fever
- Headache
- Muscle aches
- Tiredness
- Loss of appetite
- Nausea
- Vomiting

Some individuals with Hepatitis have no signs of the disease.

Later signs of Hepatitis are:

- Dark-colored urine and pale bowel movements
- Pain in the stomach
- Skin and whites of eyes turn yellow (jaundice)

Other serious signs of Hepatitis can include short-term, arthritis-like problems, and personality changes.

DID YOU KNOW:

- Today, Hepatitis B, Hepatitis C, and HIV are blood infections that pose the greatest infectious disease risks to healthcare workers.
- Job-related Hepatitis infection occurs much more often than job-related HIV infection among healthcare workers.

### Caregiver Tips:

**Always** use Universal Precautions when exposed to blood or bodily fluids.



# HIV and AIDS

Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) are viruses that affect the body's immune system. A person who is infected with HIV/AIDS is at increased risk of developing infections.

## HIV

Human Immunodeficiency Virus is a virus that attacks the body's immune system.

After a person is exposed to HIV, the virus attaches itself to the body's infection fighting cells in the immune system. The virus turns the immune system cells into "virus factories," making more and more viruses. Over time, the virus weakens a person's defenses against disease, leaving them vulnerable to many infections and cancers.

Being infected with HIV does not always mean you have AIDS. Being infected means the virus is in your body for the rest of your life. You can infect others if you engage in behaviors that can transmit HIV. You can infect others even if you feel fine, have no symptoms of illness, or don't even know you are infected.

## AIDS

Acquired Immune Deficiency Syndrome is a late stage of HIV infection. It is a group of symptoms and signs of the disease that are specific to this viral infection. Most AIDS defining conditions are opportunistic cancers or infections.

## How is HIV spread?

HIV is transmitted when infected blood, semen, vaginal fluids, or breast milk enter the body through the mucous membranes of the anus, vagina, penis (urethra), or mouth, or through cuts, sores, or abrasions on the skin. The highest concentrations of the virus are in the blood, vaginal fluid, and semen. Anyone who is infected can transmit the virus, whether or not they have symptoms of AIDS.

## **Caregiving Tips:**

Caregivers should always wear gloves to avoid contact with bodily fluids. This includes wearing gloves when putting linen or clothing soaked in bodily fluids in the hamper or washing machine. Be very cautious when handling a needle or syringe.



# Meningitis

Meningitis is an inflammation of the membranes that surround the brain and spinal cord. Bacteria, viruses, or fungi may cause this condition. It sometimes develops as a complication of another infectious disease. Bacterial meningitis may occur following an ear infection, a sinus infection, or in connection with a skull fracture.

The symptoms might include:

- Headache
- Fever
- Sore throat
- Stiffness of the neck
- Rash



In all forms of bacterial meningitis, the most important consideration is early detection and the use of appropriate antibiotics. Not only the patient, but also all of those exposed to the patient should be treated with antibiotics in an attempt to get rid of the germs before they spread.

During the winter months, these germs may be present in the nose and throat of perfectly healthy persons without them being aware they are carrying the germ. These healthy carriers do not get sick, but they can spread the germ to others through saliva.



## Caregiver Tips:

Avoid sharing drinking cups, water and soda bottles, lipstick, eating utensils, cigarettes, etc.

# Tuberculosis (TB)

Tuberculosis is an airborne disease caused by *Mycobacterium tuberculosis*. Although the bacteria primarily affect the lungs, TB can attack any part of the body, including the brain and internal organs.

Symptoms of active TB may include:

- Fever
- Fatigue
- Weight loss
- Persistent cough

Coughing is usually associated with TB, but may not be present at the beginning. If your consumer has symptoms of chronic or productive cough, fatigue, and/or weight loss, it should be reported to the person's doctor or relative.

## How is TB Spread?

Tuberculosis is spread person-to-person through the air. When an infected person not taking tuberculosis medication coughs or sneezes, bacteria is released into the air. These droplets of respiratory secretions are then inhaled into the lungs of another individual. Prolonged exposure is normally necessary for infection to occur.

A person with active TB may remain contagious until he/she has been on appropriate treatment for several weeks. A person with TB infection, who does not have symptoms of the disease, cannot spread the infection to others.

Tuberculosis can affect anyone. People infected with HIV/AIDS or other people with weakened immune systems, active alcoholics, and the elderly are at increased risk.

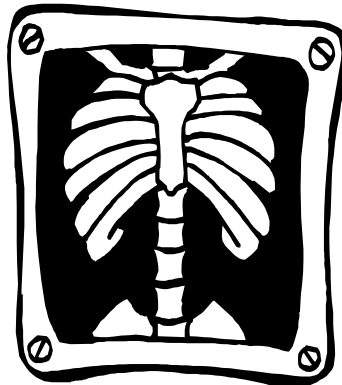
The best prevention of transmission to others is early detection. A person with active TB should also prevent the spread of droplets by covering his/her nose and mouth when coughing or sneezing and properly disposing of tissues contaminated by mucous materials.



### Caregiver Tips:

- Remember to wear a mask when working with a consumer suffering from TB since it is spread through the air.
- Caregivers should remind their consumer to cover their mouth and nose when coughing or sneezing.
- Wash your hands frequently with hot water and soap.
- **Have a Tuberculosis Screening Test\***

\*Recommended once a year for caregivers and people who work with the public.



# Normal Changes of Aging

Many changes you may see in elderly consumers are a normal part of the aging process.

Normal Changes to the Heart:

- Decreased cardiac output (decreased cardiac reserve)
- Decreased blood vessel elasticity

Normal Changes to the Lungs:

- Tissue between ribs becomes less elastic, breathing capacity decreases
- Increased residual air in lungs (less effective expiration)
- Decreased number of cilia; drying of tissue of bronchi
- Decreased effectiveness of cough



Normal Changes to Digestion/Taste/Smell:

- Decreased number of taste buds (leaving sensation of bitter and sour intact longest)
- Decline in sense of smell
- Decrease in production of saliva, enzymes, and digestive acids
- Decrease in absorption of nutrients
- Decrease in ability of liver to filter toxins

Normal Changes to Urinary Tract:

- Marked decrease in kidney function
- Kidneys less able to regulate salt and filter out waste products
- Often a decrease in bladder capacity
- Prostate gland in men enlarges

## Normal Changes of Aging (continued)

### Normal Changes to Muscle, Bones, Tendons, and Ligaments:

- Cartilage shrinks between vertebrae of spine. Discs compress with time. Loss of average of 2" in height is common.
- For those who don't exercise:
  - Bones become brittle and porous
  - Muscles lose tone and strength
  - Joints become stiff and less flexible

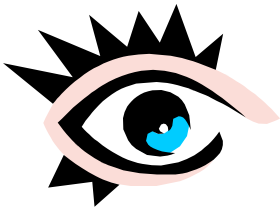


### Normal Changes to Skin, Hair, and Nails:

- Circulation to skin is decreased
- Skin loses oil glands
- Sweat glands are lost
- Epithelial layer of skin thins
- Less fatty tissue below skin in periphery
- Hair loses color and becomes coarser
- Hair thins, often disappears on body
- Nails become thicker and more brittle

### Normal Changes to Vision:

- Decreased ability to see small details
- Loss of accommodation (depth perception, light to dark)
- Visual field is smaller
- Changes in color perception (trouble distinguishing one color from another, colors less clear because of lens)
- Eye problems such as cataracts, glaucoma, and macular degeneration



### Normal Changes to Hearing:

Hearing loss is potentially the most damaging of all sensory impairments. Approximately 30-50% of all older people suffer a significant hearing loss that impacts their life. Hearing loss can cause problems in communication and relationships leading to isolation, anxiety, and depression.

- Loss of hearing of high frequency sounds
- Consonants (S, Z, T, K) are difficult to understand
- Build up of earwax



### Caregiver Tips:

- Do not shout; lower the pitch of your voice.
- Speak clearly and distinctly.
- Face the person. Place yourself at the same height as the person's eyes.
- Remove things from your mouth: gum, food, cigarettes, and hands.
- Use facial expressions, gestures, touch, and objects to clarify what you need to say.
- Reduce background noise.
- Speak toward persons' good ear (if there is one).
- Encourage effective hearing device use.

### Normal Changes to the Nervous System:

- Nerves respond more slowly to stimulation, especially when exposed to multiple stimulations.
- Nerve impulses travel more slowly to and from the brain.
- Sleep patterns change (less deep sleep, less dream sleep).
- Reduced sensitivity to pain or other discomforts (delayed response to being touched)
- Decreased production of antibodies
- Decrease of all hormones (estrogen, thyroid, insulin)
- Decreased effectiveness of ankle jerk reflex

### Normal Changes to the Brain, Intelligence, Learning, and Memory:

- Speed of recall and perfect recall decrease slowly after the age of 22.
- It takes longer for the brain to search for and retrieve information.
- Intellectual capacity, judgment, comprehension, retention of learned material does not change with age.

# Stroke, Brain Attack, Cerebral Vascular Accident (CVA)

A CVA occurs when there is a stoppage of blood to brain tissue by a clot, clogging of an artery, or bleeding into the brain. Because a part of the brain is damaged, the body part or function controlled by that part of the brain is effected. Weakness, language problems, behavior problems, swallowing problems, or other things may be involved.



## Caregiving tips:

Much of how the caregiver can assist and support the consumer will depend on what functions the stroke has affected.

With one sided weakness-

- Refer to "right" or "left", not "good" or "bad."
- Assist with ambulation and transfer by supporting the weaker side.
- Assist with dressing by dressing the weaker side first and undressing the stronger side first.
- Use adaptive equipment and clothing as appropriate.
- Allow plenty of time for any activity.
- Make sure that the home is free of tripping hazards.

With speech or language difficulty-

- Keep your questions and directions simple and one at a time.
- Try to use "yes" or "no" questions.
- Use a picture board.

- Use more nonverbal language, gestures, facial expressions, pointing to objects.
- Give the consumer a pencil and paper if he/she is able to write.



With swallowing difficulty-

- Use soft foods or thickened liquids, thin liquids like water is very hard to swallow without choking.
- Allow plenty of time for meals.

A stroke can be devastating to the consumer and cause frustration, anger and depression. Learning to do things again that they have always been able to do is a difficult and slow process. Be supportive and positive whenever the person makes progress.

Support the consumer in keeping their therapy appointments and doing their exercises.

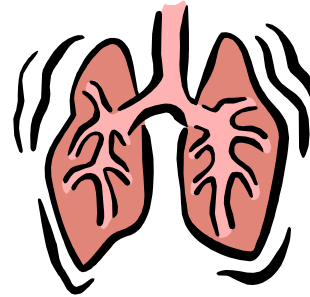
# Chronic Obstructive Pulmonary Disease (COPD)

This is a progressive and irreversible condition where the person has difficulty breathing due to a problem in the lungs or bronchi. Asthma, Chronic Bronchitis and Pulmonary Emphysema are examples of COPD. The most common cause is smoking.



## Caregiving Tips:

- Avoid perfume
- Ask about cleaning product odors, like bleach
- Encourage nutrition and small frequent meals
- Allow plenty of time for activities
- Plan for frequent rest periods
- Understand that the consumer will have good days and bad days



## Cardiovascular Disease (heart disease)

This is any disease that affects the heart or blood vessels in the body. This is the leading cause of death in our country and many people may need care because of this condition.

**Heart Attack (Myocardial Infarct or MI)** occurs when there is a stoppage of blood to the heart muscle itself; either by a clot or a clogging of an artery feeding the heart muscle itself. This causes heart tissue to die and gives the consumer chest pain (ANGINA). Depending on what part of the heart is affected, heart attack can cause the heart to stop beating.

**Congestive Heart Failure (CHF)** occurs when the heart muscle does not pump efficiently and fluid backs up in the lungs and/or lower legs. This can cause shortness of breath and/or swollen ankles and legs. A person with CHF needs to follow his medical regime and reduce the salt in their diet.

### Caregiving Tips:

- Track consumer's weight and document.
- Support the consumer in choosing a lower salt diet, if MD has ordered.
- Assist the consumer in conserving their energy as they do their daily activities.
- Be aware if the consumer has or uses nitroglycerin tablets (NTG) and/or aspirin.
- Encourage the consumer to keep all medical appointments.



# Coronary Artery Disease (CAD)

CAD is hardening of the arteries (arteriosclerosis) or forming plaques in the blood vessels (atherosclerosis) that narrows the space for blood to go through. This is a condition that occurs over time and requires medical assessment and treatment.

**Hypertension (High Blood Pressure)** is called the “silent killer” because the signs are not readily visible. High blood pressure damages body systems over time and can cause very serious disease.

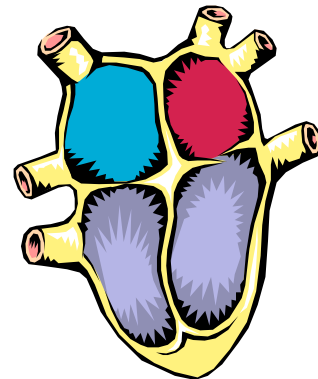


## Caregiving Tips:

- Support the consumer in reducing their dietary salt intake per MD, eliminating caffeine and nicotine, exercising moderately, reducing fatty foods, reducing stress, getting their blood pressure checked regularly and taking prescribed medications.
- Support the consumer in maintaining their ideal body weight.

These are the signs and symptoms of a heart attack  
It is an emergency and you should call 911

- Sudden, severe pain in the chest, maybe going down the left arm or up to the jaw. Often described as crushing, pressure, tightness
- Sweating
- Nausea
- Difficulty breathing
- Dizziness
- Agitation or anxiety
- Skin may be pale or grayish, cool and clammy
- Weak and irregular pulse



Cancer is a general term used to describe many types of malignant tumors or cells. Malignant cells are ones that grow and invade healthy tissue. Malignant cells can also spread throughout the body.

Cancer is often treated in one of three ways:

- Surgery: the tumor and/or abnormal cells are removed from the body.
- Chemotherapy: medications are given that kill the cancer cells. These medications have many side effects and can harm the healthy cells as well.
- Radiation: is a beam that is aimed at the tumor. The radiation kills the tumor cells but also can harm healthy cells.

### Caregiving tips:

How the caregiver supports and assists the consumer with cancer will depend on how the cancer or the treatment is affecting the consumer's ability to function.

- Generally, good nutrition is very important, making sure that the consumer gets enough calories, fluids and protein.
- Comfort measures to decrease pain are also important.
- Be sensitive to the consumer's physical and emotional state.

#### The American Cancer Society's 7 Warning Signs of Cancer

1. Change in bowel or bladder habits
2. A sore that does not heal
3. Unusual bleeding or discharge from a body opening
4. A thickening or lump in the breast or elsewhere
5. Persistent indigestion or difficulty swallowing
6. An obvious change in a wart or mole



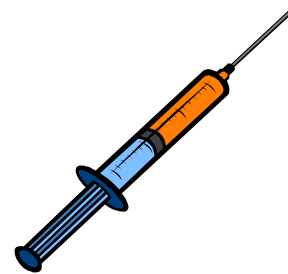
# Diabetes

Diabetes is a chronic disease of the pancreas. In diabetes, the pancreas does not produce any or enough of a hormone called insulin. Without insulin, the body cannot properly use sugar to fuel the body's cells. As a result sugar (glucose) builds up in the bloodstream.

Diabetes is a very serious health problem and can cause damage to vital organs if it is not treated properly.

## **Type One or Insulin Dependent Diabetes**

means the person must use insulin every day and follow a special diet. This type of diabetes usually starts in childhood. The causes of Type I are largely unknown but may include heredity, stress, injury, or illness.



**Type Two or Non-Insulin Dependent Diabetes** usually occurs in people over the age of 40 who are overweight and have poor eating habits. Other causes are heredity and stress. Type II is generally less severe than Type I. About 90 percent of people who have diabetes have Type II.

People with Type II diabetes often can manage their disease for a while with a modified diet, regular blood tests, exercise, and oral prescription medication. As the disease progresses, they may need to use insulin or a combination of oral and injectable treatments.

The goals of treatment for either type of diabetes are the same:

- Consistent blood sugar levels
- Good control of blood sugar in order to avoid long and short-range problems
- Weight control/overall awareness of nutritional intake
- Avoid complications of diabetes like eye disease or kidney disease
- Avoid saturated fats and cholesterol that can contribute to cardiovascular problems that are a frequent complication of diabetes

### **Caregiving tips:**

The consumer with diabetes can do many things to keep their disease under control and decrease the other complications that might occur. You as the caregiver can support the consumer by knowing and understanding some of these things.

- Meals should be eaten regularly, and in a moderate amount. Meals should not be skipped after taking insulin.
- A dietitian can often help design an appropriate diet based on what a person likes and dislikes. A dietitian can also advise a consumer on how to modify their diet when they are sick.
- Pay very close attention to skin condition, especially the legs and feet. It is best to avoid clothing that restricts circulation, like socks with tight elastic or garters or poorly fitting shoes.



- Be aware that physical activity influences blood sugar. When doing new or unusual physical activity, have the consumer carry a form of fast-acting sugar.
- Medic Alert Diabetes bracelet or necklace could get help quicker for the consumer in an emergency where they were not able to speak for themselves.
- Low blood sugar can be a very dangerous emergency situation. The consumer should have a plan in place for what to do when their blood sugar gets too low.
- Monitor blood regularly.
- Help the consumer inspect their feet daily.

# Dementia and Alzheimer's

Dementia refers to a general loss of intellectual functions (i.e., memory, reasoning, concentration, attention, abstract ability, and reduced language function), plus personality changes (though not always disorientation).

Whether related to Alzheimer's, Parkinson's Disease, or another medical condition, dementia comes on gradually and has no known cure. The condition progresses through several stages:

- The person may experience loss of memory, insight and judgment, personality changes, mental confusion, language disturbances, and severe disorientation.
- The person may eventually become incontinent, wander, and have behavioral changes.
- The person will eventually become totally dependent on others.

The beginning of Alzheimer's disease is subtle. It can begin at any age but there is a higher frequency of getting the disease as persons age into their 80's and 90's. Persons who get the disease at a younger age (in their 50's and 60's) experience a more rapid decline. Average time that someone lives with the disease is 7 to 8 years, although 3 to 15 years can be considered normal course.



### **Caregiver Tips:**

- Install alarms on doors and windows.
- Be aware that some individuals with dementia have super physical strength. Their physical strength is apparent when they grab onto a railing or the caregivers arm.
- Speak in short and simple sentences.
- Caregivers need to give constant gentle reminders to those suffering with dementia to help them stay focused.
- Caregivers need to be patient when working with someone with dementia.

Mental illness is a disease just like disorders that involve physical functioning are physical diseases. Mental illnesses have signs and symptoms, affect the body's ability to function, and are treatable. There are over 100 types of mental illness.

Mental illness may be caused by physical problems such as a chemical imbalance, a physical problem in the brain, or the cause may be unknown. Medications are often very helpful. Remember that the behaviors of a person with mental illness may be caused by the illness.

Be sure to look at specific behaviors, not the diagnosis. Some types of mental illness can be phobias, depression, paranoia, abnormal thinking (schizophrenia), or bipolar disease (formerly called manic-depressive disorder).

Basic classes of mental illness

1. Schizophrenic disorders
2. Mood (affective) disorders
3. Personality disorders

## Schizophrenia

Schizophrenia is a serious, usually chronic mental disorder that affects the person's ability to think and communicate clearly, make decisions, and understand reality. A person with schizophrenia may have several combinations of symptoms and have different symptoms at different times.

Thought disorder:

The diminished ability to think clearly and logically. Often language is disconnected and nonsensical and makes it difficult for the person to participate in conversations.

Common signs include:

- Delusions - when the person may believe that he/she is being conspired against or that others hear his/her thoughts. Delusions may cause bizarre behavior.
- Hallucinations are when something is heard, seen, or felt only by that person. Voices may warn him/her of danger or tell him/her what to do. He/she may hear several voices carrying on a conversation.
- Withdrawal from interaction with others
- Flat affect- Lack of emotional expression
- Apathy



Although schizophrenia cannot be cured it can usually be controlled. Some people with schizophrenia will consume large amounts of caffeine and cigarettes (sometimes up to 7-8 packs a day). The IHSS Social Worker can help you work with the person if this is a problem. The risk of suicide is high for this group.

### Mood Disorders

**Mood Disorders** are disturbances in mood. The two basic mood disorders are depression and bipolar illness.

**Depression** is a "low mood." A depressed person may show a loss of interest in usual activities or have changes in appetite, and sleep patterns. The person may show feelings of despair, worthlessness, and suicidal thinking. The symptoms of

depression may be very similar to those of dementia at times. Depression is considered chronic or clinical after three months of symptoms.

Behavioral Changes:

- Crying, tearfulness, or inability to cry
- Social withdrawal
- Psychomotor retardation
- Agitation
- Suicide attempt

Cognitive (mental process of knowing, thinking, learning, and judging) changes:

- Negative self-concept/feeling inadequate
- Negative expectations for the future
- Self-blame
- Indecisiveness
- Helplessness
- Hopelessness
- Decline in attention/concentration
- Memory loss
- Constricted or “tunneled” thinking

Emotional Changes:

- Sadness
- Guilt
- Anxiety
- Anger

Physical Changes:

- Sleep disturbances
- Eating disturbance
- Constipation
- Weight loss or weight gain
- Low energy or chronic fatigue

- Pain, unexplained origin
- Vague physical complaints

Treatment:

Depression is one of the most treatable of mental disorders. Some people can be completely cured. The treatments used include medication and psychotherapy.

Bipolar (manic-depressive illness)

This disorder causes periods of mania (greatly elated moods or excited states) as well as periods of depression. This condition requires long-term medication management.

### Personality Disorders

A personality disorder exists when a person's usual patterns of thinking, behaving, perceiving, and feeling are inflexible and maladaptive.

Personality disorders are characterized by a rigid, inflexible behavior, and difficulty adapting that impairs a person's ability to get along with others and function in society.

Some types of personality disorders are: Obsessive-compulsive, anti-social, narcissistic, histrionic, avoidant, dependent, and borderline. Some disorders benefit from medications



### **Caregiver Tips for helping consumers with mental illness:**

- Be compassionate and empathetic.
- Caregivers should avoid taking behaviors or attitudes personally when working with someone suffering from a mental illness.
- Caregivers should acknowledge their consumer's frustration with empathy.

# Depression

19 million people are affected with a Depressive Disorder yearly. A Depressive Disorder sufferer's thoughts, mood, body, sleeping and eating habits may all be affected. The manner in which individuals think and feel about themselves, may also be impacted by a Depressive Disorder. Depressive illness, many times, interferes with a person's ability to function normally, which in turn not only can cause the individual to suffer, but also has a great impact on the person's loved ones.

It is important to remember that an individual who suffers from a Depressive Disorder needs treatment. A person cannot be expected to snap their fingers, and the depression will instantly be gone.

Older adults have a 50 percent higher suicide rate than young adults, or the nation in general. Of the older adult population, white males, 85 years and above have the highest rate of suicide.

An individual who is has suicidal thoughts, or a family member who suspects a loved one is contemplating suicide, could contact the primary doctor, mental health professional, the emergency room, or the local suicide prevention hotline.



The Sacramento County Suicide Prevention (Crisis Services Program) can be reached 24 hours a day, 7 days a week at (916) 368-3111.

## Recognizing Signs of Depression & Possible Suicide

- **Talking About Dying** — any mention of dying, disappearing, jumping, shooting oneself, or other types of self-harm.
- **Recent Loss** — through death, divorce, separation, broken relationship, loss of job, money, status, self-confidence, self-esteem, loss of religious faith, loss of interest in friends, sex, hobbies, activities previously enjoyed.
- **Change in Personality** — sad, withdrawn, irritable, anxious, tired, indecisive, apathetic.
- **Change in Behavior** — can't concentrate on school, work, routine tasks.
- **Change in Sleep Patterns** — insomnia, often with early waking or oversleeping, nightmares.
- **Change in Eating Habits** — loss of appetite and weight, or overeating.
- **Diminished Sexual Interest** — impotence, menstrual abnormalities (often missed periods).
- **Fear of losing control** — going crazy, harming self or others.
- **Low self esteem** — feeling worthless, shame, overwhelming guilt, self-hatred, "everyone would be better off without me."
- **No hope for the future** — believing things will never get better; that nothing will ever change.

Courtesy of San Francisco Suicide Prevention- [www.sfsuicide.org](http://www.sfsuicide.org)

## Suicide Prevention: Myth or Fact

*People who talk about suicide don't do it — suicide happens without warning...*

**MYTH:** Although suicide can be an impulsive act, it is often thought out and communicated to others, but people ignore the clues.

*Talking about suicide may give someone the idea...*

**MYTH:** Raising the question of suicide without shock or disapproval shows that you are taking the person seriously and responding to their pain.

Suicide rates are higher for people of low income...

**MYTH:** Suicide shows little prejudice to economic status. It is representative proportionally among all levels of society.

More men commit suicide than women...

**FACT:** Although women attempt suicide twice as often as men, men commit suicide twice as often as women.

*Most suicidal people are undecided about living or dying, and they gamble with death, leaving it to others to save them...*

**FACT:** Suicidal people are often undecided about living or dying right up to the last minute; many gamble that others will save them.

*Once a person is suicidal, he/she is suicidal forever...*

**MYTH:** People who want to kill themselves will not always feel suicidal or constantly be at a high risk for suicide. They feel that way until the crisis period passes.

Most suicides are caused by a single dramatic and traumatic event...

**MYTH:** Precipitating factors may trigger a suicidal decision; but more typically the deeply troubled person has suffered long periods of unhappiness, depression, lack of self respect, has lost the ability to cope with their life and has no hope for the future.

*There is no genetic predisposition to suicide...*

**FACT:** There is no genetic predisposition to suicide - it does not "run in the family."

*Improvement following a serious personal crisis or serious depression means that the risk of suicide is over...*

**MYTH:** The risk of suicide may be the greatest as the depression lifts. The suicidal person may have new energy to carry out their suicide plan.

*It's unhelpful to talk about suicide to a person who is depressed...*

**MYTH:** Depressed persons need emotional support and empathy; encouraging them to talk about their suicidal feelings can be therapeutic as a first step.

Courtesy of San Francisco Suicide Prevention- [www.sfsuicide.org](http://www.sfsuicide.org)

# Epilepsy

Epilepsy is a disease characterized by seizures. A seizure is a sudden increase in the electrical activity in one portion of the brain. The seizure can occur in one area with specific and localized symptoms or it may spread to the entire brain, resulting in loss of consciousness and the body shaking. This sudden discharge of electrical activity can have several causes, ranging from epilepsy to head injury. There are many types of seizures. They can be mild or severe. Medication use is helpful.

## Caregiving Tips:

- Do not put anything in the consumer's mouth during a seizure.
- If possible, roll consumer on his/her side to minimize danger in the event of vomiting.
- Do not give anything to eat or drink.
- Support the consumer in consistent medical care, including taking their medications as prescribed.
- Keep a record of seizures- time, date, how long they last and how the consumer is after the seizure.
- Dial 911 (unless the consumer's doctor has provided other instructions).



# Dysphagia

Dysphagia is a condition where a consumer has difficulty chewing and swallowing foods. Dysphagia is usually the result of a stroke or another neurological condition like Lou Gehrig's disease, multiple sclerosis or Parkinson's disease. Sometimes consumers with developmental disabilities have trouble swallowing as well. A consumer with dysphagia needs their food prepared in a way that they do not choke or aspirate and are able to keep the food in their mouth.

When feeding a consumer with dysphagia, remember these points:



## Caregiver Tips:

- Have the consumer sitting as straight as possible. Take special care when feeding individuals who are not alert and responsive.
- Make sure the consumer's head is forward and his/her chin is down.
- Never feed a consumer who is lying down.
- Sit level with the consumer, eye to eye. This will keep consumer from having to look up or down to receive their food, possibly causing them to lose the food from their mouth or to choke on a bite.
- Watch for pocketing of food (storing in the cheek). If this happens, remove the pocketed food and have consumer slow down.
- Feed the consumer slowly. Don't rush. Be certain to make eating a pleasant experience. Don't talk to others, speak to the consumer you are helping to eat.
- You may need to prompt the swallowing process with statements like "chew thoroughly," "swallow twice," "hold your breath while you swallow," and "clear your throat."

Solid foods are most appropriate; these are foods that stick together in the mouth or form. Some examples are:

- Egg dishes like soufflés or quiches
- Casseroles
- Meat, egg or tuna salad
- Canned fruits
- Soft cheeses like cottage or cream cheese
- Moist soft meats (may need grinding or pureeing)
- Custards and puddings
- Cheesecake, pies, cakes (may need to soak with milk)
- Hot cereals
- Most vegetables in sauces or casseroles
- Gelatin

Solid foods that are problematic for some consumers include those, which fall apart such as:

- Dry bread; crackers
- Chips and nuts
- Thin, pureed applesauce
- Plain rice
- Thin, hot cereal
- Plain ground meats that break into chunks when chewed
- Cooked peas or corn

Other solid foods which can be a problem include very bulky or sticky foods difficult to swallow, for example:

- Fresh white bread
- Peanut butter
- Plain mashed potatoes
- Banana
- Refried Beans

- Bran cereals
- Chunks of plain meats
- Raw vegetables and some fruits

Liquids are most difficult if they are thin, like water or apple juice. Some individuals need liquids thickened to be able to use them. Use a starch-based rather than a gum or fiber based thickener so the consumer is able to break the thickener down during the digestive process. Some liquids are naturally a little thicker and may be easier to swallow:

- Vegetable juice, frozen juices, pureed fruits
- Nectars, puddings
- Ensure Plus; Sustacal HC; Nutren 2.0, or other supplements
- Cream soups
- Milkshakes, eggnog, yogurt
- Some liquids are spoon-thick
- Ice cream or sherbet

Each consumer will need to be evaluated by an occupational therapist or a speech therapist to determine what they can and cannot handle. Commercial thickeners are very helpful because they can be added until the food holds its shape. Other thickeners include:

- Instant mashed potato powder, infant rice cereal
- Cornstarch (must be cooked), non-fat dry milk powder
- Fruit and vegetable flakes