



PBO 930022142 NPO 049-191

## Agitation

*The term agitation is used to describe a large group of behaviours associated with Alzheimer's disease or dementia. As the disease progresses, most people with Alzheimer's experience agitation in addition to memory loss and other thinking symptoms.*

### Agitated behaviours

In the early stages of the disease, people with Alzheimer's may experience personality changes such as irritability, anxiety, or depression. As the disease progresses, other symptoms may occur, including sleep disturbances, delusions (firmly held belief in things that are not real), hallucinations (seeing, hearing or feeling things that are not there), pacing, constant movement or restlessness, checking and rechecking door locks or appliances, tearing tissues, general emotional distress, and uncharacteristic cursing or threatening language.

### Possible causes of agitation

Agitation may be caused by a number of different medical conditions and drug interactions or by any circumstances that worsen the person's ability to think. Situations that may lead to agitated behaviour include moving to a new residence or nursing home, other changes in the environment or caregiver arrangements, misperceived threats, or fear and fatigue resulting from trying to make sense out of a confusing world.

Please contact the DEMENTIA SA Office

Support | Awareness | Education | Counseling | Training | Resource centre | Advocacy  
[info@dementiasa.org](mailto:info@dementiasa.org) or [support@dementiasa.org](mailto:support@dementiasa.org) [www.dementiasa.org](http://www.dementiasa.org)

**National Helpline 0860 MEMORY / 0860 636 679**

## Treating agitation

A person exhibiting agitated behaviour should receive a thorough medical evaluation, especially when agitation comes on suddenly. The treatment of agitation depends on a careful diagnosis, determination of the possible causes, and the types of agitated behaviour the person is experiencing.

With proper treatment and intervention, significant reduction or stabilization of the symptoms can often be achieved.

There are two distinct types of treatments for agitation: behavioural interventions and prescription medications. Behavioral treatments should be tried first. In general, steps to managing agitation include (1) identifying the behaviour (2) understanding its cause and (3) adapting the caregiving environment to remedy the situation.

- *Simplify tasks and routines.*
- *Allow adequate rest between stimulating events.*
- *Allow adequate rest between stimulating events.*

## Preventing agitation

General caregiving strategies to prevent or reduce agitated behaviours include the following:

Create a calm environment: remove stressors, triggers, or danger; move person to a safer or quieter place; change expectations; offer security object, rest or privacy; limit caffeine use; provide opportunity for exercise; develop soothing rituals; and use gentle reminders.

Avoid environmental triggers: noise, glare, insecure space and too much background distraction including television.

Monitor personal comfort: check for pain, hunger, thirst, constipation, full bladder, fatigue, infections and skin irritation; ensure a comfortable temperature; be sensitive to fears, misperceived threats and frustration with expressing what is wanted.

Simplify tasks and routines.

Allow adequate rest between stimulating events.

Use lighting to reduce confusion and restlessness at night.

Please contact the DEMENTIA SA Office

Support | Awareness | Education | Counseling | Training | Resource centre | Advocacy  
[info@dementiasa.org](mailto:info@dementiasa.org) or [support@dementiasa.org](mailto:support@dementiasa.org) [www.dementiasa.org](http://www.dementiasa.org)

**National Helpline 0860 MEMORY / 0860 636 679**

## Identifying agitation triggers

Correctly identifying what has triggered agitated behaviour can often help in selecting the best behavioural intervention. Often the trigger is some sort of change in the person's environment:

- Change in caregiver
- Change in living arrangements
- Travel
- Hospitalization
- Presence of houseguests
- Bathing
- Being asked to change clothing

## During an episode of agitation

**Do :** redirect the person's attention, back off, and ask permission, use calm positive statements, reassure, slow down, use visual or verbal cues, add light, offer guided choices between two options, focus on pleasant events, offer simple exercise options, or limit stimulation.

**Do not :** raise voice, take offense, corner, crowd, restrain, rush, criticize, ignore, confront, argue, reason, shame, demand, condescend, force, explain, teach, show alarm, or made sudden movements out of person's view.

**Say :** May I help you? Do you have time to help me? You're safe here. Everything is under control. I apologize. I'm sorry that you are upset. I know it's hard. I will stay until you feel better.

## Safety measures

Equip doors and gates with safety locks

Remove guns from the person's environment

Please contact the DEMENTIA SA Office

Support | Awareness | Education | Counseling | Training | Resource centre | Advocacy  
*info@dementiasa.org or support@dementiasa.org* *www.dementiasa.org*

**National Helpline 0860 MEMORY / 0860 636 679**

## Notes:

---

---

---

---

---

---

---

---

---

---

### Contact us:

3rd Floor,  
State House,  
3 Rose Street,  
Cape Town

P.O. Box 16421  
Vlaeberg  
8018

Tel: (021) 421 0077/78  
Email: [info@dementiasa.org](mailto:info@dementiasa.org)  
Or [support@dementiasa.org](mailto:support@dementiasa.org)



[www.dementiasa.org](http://www.dementiasa.org)

Please contact the DEMENTIA SA Office

Support | Awareness | Education | Counseling | Training | Resource centre | Advocacy  
[info@dementiasa.org](mailto:info@dementiasa.org) or [support@dementiasa.org](mailto:support@dementiasa.org) [www.dementiasa.org](http://www.dementiasa.org)

National Helpline 0860 MEMORY / 0860 636 679