NUHS@HOME
National University Health System

Advanced Dementia



Conditions

Advanced Dementia

Advanced dementia is the final stage of dementia.

Signs Of Advanced Dementia:

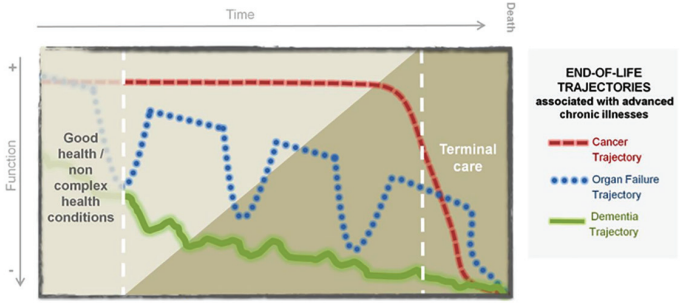
- Bedbound
- Minimal verbal communication.
- Dually incontinent
- Dependent for their activities of daily living.
- Reduced oral intake/food refusal.
- Swallowing problems
- Increased sleep/ drowsiness.

Complications Of Advanced Dementia:

- Bedsores
- Recurrent urinary tract infection.
- Recurrent lung infection.
- Food refusal/reduced food intake.
- Increased frailty/ dependence.

How Much Time Does My Loved One Have?

It can be difficult to determine how long this final stage may last. Decline at the end of life in patients with dementia can be slow and take place over a long period of time. Understanding this trajectory of decline can help families better prepare for care during this stage.



Recommendations During This Stage

Goals of Care and Advanced Care Planning (ACP)

- The main goal of care at this stage is keeping the patient comfortable.
- It is good to have discussions about a person's wishes and preferences early, while the patient are still able to express themselves This is because

many patients may have problems with communication as their disease progresses.

- One way to document this is through Advanced Care Planning (ACP). Please approach the healthcare team for more information on ACP.

Recurrent Hospitalisations

- Due to the complications from advanced dementia, recurrent hospitalisations may happen. More frequent hospitalisations indicate that the person is very frail and at risk of passing on.
- As dementia continues to deteriorate to a very advanced stage, the benefits of repeated investigations and antibiotics may be less helpful at this stage. The goals and approaches to patients suffering with advanced illnesses need to be tailored according to individual needs and responses, to minimise suffering.
- Some patients may wish to be cared for at home and arrangements to facilitate this can be discussed with the healthcare team.

Poor Oral Intake

- Food refusal or poor oral intake is very common in this stage. Caregivers are encouraged to feed slowly with a spoon, as much as the person is willing to take. Sometimes syringe feeding is necessary. Tube feeding is not advisable as it is uncomfortable, may be removed repeatedly by the patient and ultimately does not prolong life in advanced dementia.
- Towards the end of life, some patients may refuse food completely. Giving intravenous (IV) fluids is only a temporary measure which can be uncomfortable due to repeated injections and does not change the course of the dementia.

Caring for persons during this stage can be stressful. The multi-disciplinary team is here to help with recommendations and supporting families during this stage. We hope that by initiating conversations early, anticipating symptoms and understanding the disease trajectory of dementia, families will be better able to cope during this difficult time. So please allow the AH team to journey with you. Together, we hope that we can provide better care to the patients.

Need more information?
Message us via your dedicated WhatsApp group or email asknuhsathome@nuhs.edu.sg.

This publication is for general information and educational purposes only, and is not to be regarded as specific professional medical advice. It is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Information in this publication is correct at the time of printing but may be subject to revision without prior notice.

NUHS@Home | 60 Jurong West Centreal 3, Singapore 648346 | NUHSatHome
www.for.sg/nuhsathomesite