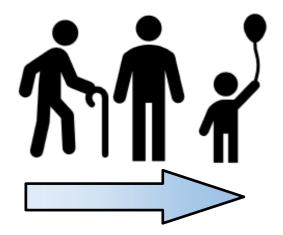
#### Centre intégré de santé et de services sociaux de Laval



# MAJOR NEUROCOGNITIVE DISORDERS: DEMENTIA

Programme régional ambulatoire de gériatrie (PRAG)

## LIVING IN THE PAST



#### WHAT DOES IT MEAN TO LIVE IN THE PAST?

- ❖ A mailman, who has been retired for several years, wakes up at four o'clock in the morning with the idea of going to deliver his letters...
- ❖ An elderly woman ends a card game with her friends because she has to pick up her children up at the end of the school day...
- ❖ An 85 year old man who has been living in a residence for ten years says he wants to go back to his parents' house...
- ❖ A woman recognizes her spouse in wedding pictures, but not when he is standing in front of her...



As the disease progresses, your loved one may become disoriented in time. It is as if he or she is living in the past.



#### **HOW THIS PHENOMENON CAN BE EXPLAINED?**

Memory is one of the brain functions that is most affected during the course of the disease. This process is explained by the progressive **loss of neurons** (the cells that transmit information in the brain).

**Episodic memory**, which contains memories of different life events (for example: your 16th birthday, your wedding, the birth of your first child, the death of a loved one, etc.) gradually fades, **starting with the most recent memories.** 

**As a result,** your loved one can no longer create new memories and refers to their old memories. He or she can then relive these memories as if they were presently happening.

#### In other words:

Imagine that throughout his life, your loved one has recorded each year on a cassette. With the onset of the disease, he stopped creating new cassettes. As the disease progresses, your loved one will be unable to replay the recent cassettes. As time moves forward, the most recent cassettes will be deleted and he will replay his older cassettes.



#### HOW TO DEAL WITH LIVING IN THE PAST?

### First, take a moment to review the document "The Adapted Approach"

- ❖ Avoid confronting them. Your loved one is living in their own reality and trying to orient them in the present can only create frustration. For example, you should not say, "Come on, you've lived here for 10 years!"
- ❖ Try to validate the emotion your loved one is experiencing. For example, if your spouse says she wants to see her parents (who are deceased), you can say, "Do you miss your parents?" Then try to shift the discussion to a related topic. In this case, you might say, "I understand that you miss them. What about your sister, how is she doing? We could call her to check in on her!

- ❖ Find activities he or she enjoys and offer them to redirect their attention. For example, playing cards, looking at a photo album, sorting objects. If disorientation usually occurs around 5:00 p.m., start an activity around 4:30 p.m. as a preventative measure.
- ❖ Try to recreate tasks that your loved one used to do at work. For example, a mailman could sort letters, an accountant could organize old bills by date, a knitter could roll up balls of wool, etc.
- ❖ Create a fake retirement letter in your loved one's name that they can read if the urge arises to go to work.
- ❖ If your loved one persists in wanting to return home despite attempts to distract them, you can "agree" to help them. For example, you could go out with them, walk with them and talk about something else. You could get in your car, drive a few minutes to distract him, talk and come back home. The goal is to avoid triggering a crisis by saying "no" and to take his mind off things.

#### IMPORTANT!

Some people may feel uncomfortable making up stories and using "white lies" with their loved one. The strategies in this guide are suggestions. Respect your boundaries so that you can be comfortable with your interventions.

In the event that your loved one exhibits behaviors that concern you, do not hesitate to contact:

- Info-Santé/Info-Social 811
- Your assigned worker at the CLSC
- Discussion with the health care team
- A doctor

The proposed strategies are suggestions for possible solutions to explore. Be creative and adapt them to your loved one, because you know your loved one the best!

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