

# There's no cure for dementia – Hoogeveen

WORKING WITH people with dementia requires a focus on three domains – the medical, psychological and social. But unfortunately, many care models, including those in New Zealand, focus exclusively on the first and ignore the other two.

This was the basis of the message brought to New Zealand last month by psychologist Frans Hoogeveen, from the Netherlands. His New Zealand visit was organised by Care-Metric and largely sponsored by the DAA Group, a designated audit agency in Wellington. Hoogeveen ran five seminars, three of them (Wellington, Auckland and Christchurch) sponsored by the DAA Group, with one in Cambridge sponsored by Resthaven and one in Porirua sponsored by Bupa. Around 150 health professionals attended in total. Each seminar looked at a different aspect of caring and enhancing the quality of life for people with dementia.

Hoogeveen, who is associate professor of psychogeriatrics at the Hague University of Applied Sciences, believes far too much effort and resources are put into researching dementia with the hope of “curing” it and conducting psychological examinations.

“These sorts of examinations are usually irrelevant. What is important is for carers to get to know the person and to understand their needs. Knowing what kind of dementia a person has is not really important, for the differences between people with dementia are as varied as they are in people without dementia.

“People with dementia are just people – they are not their illness. Their needs are the same as for people without dementia. They need a sense of purpose and they need to know the people around them love them.”

Part of Hoogeveen's role is to improve the learning ability of people with dementia, and coaching those who care for them, whether family members or health professionals.

“When a person is first diagnosed with



**‘People with dementia must continue to be included in society’ – psychologist Frans Hoogeveen on his visit to New Zealand last month.**

dementia, their level of functioning will be good. But five years later, limitations will be evident. However, we must still look for the possibilities and teach people new things so their quality of life is improved. To be effective, we must also make sure new skills are taught in a way where errors are avoided.”

When a new resident is referred to one of the care homes Hoogeveen is associated with, family members and friends are invited to meet the staff and share those things that have been important in the new resident's life. Together, they identify how the person's quality of life could be improved.

A national support programme is also available, where people with mild dementia and their partners can meet in small groups up to three times a week to talk about their lives.

There is no cure for dementia, Hoogeveen says. It is simply part of the ageing process and the body accumulating damage.

“Dementia is the price we pay for our higher life expectancy. Once past 65, our chances of getting dementia double every five years. On the other hand, the brain condition of elderly people today is better now than 20 years ago. We can postpone dementia by continuing to do difficult things, leading an active, healthy life, and maintaining a good diet. We'll never be able to eradicate dementia. We must simply learn to live with it and make sure people who have it continue to be included in society.” •