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Manifestations of grief in patients with dementia and management considerations: A review of current literature

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Introduction: Grief can present differently in patients with dementia with many clinical and ethical considerations compared to patients without dementia. Patients with dementia often have co-morbid medical and psychiatric illnesses which can complicate the presentation and subsequent management of grief in those patients.

Aim: This review aims to look at the different presentations of grief in patients with dementia and review of literature on existing management considerations both clinically and ethically.

Method: A literature search was conducted to look for current literature on the presentation and management of grief in patients with dementia.

Results: There has been much literature written on the process of grief in caregivers of patients with dementia. There is a paucity of literature on the presentation of grief in patients with dementia as well as the best management practices. Presentations of grief in patients with dementia were varied with many physical and psychological symptoms after they were told about the loss. This included complaint ranging from anxiety, depression and aggression to increased complaints of somatic symptoms. Ethical dilemmas were also encountered by staff involved in the care of patients with dementia ranging from many aspects including false reassurances, the usage of psychotropic medication and conflicts with family members.

Conclusion: The presentation of grief in patients with dementia is varied and presents many clinical and ethical challenges to the practicing clinician. Targeted research should be conducted in this field to determine the best practices for the management of the grief process in patients with dementia.

Recent Publications:

1. A K Johansson and Grimby A (2012) Grief among demented elderly individuals: a pilot study. *The American Journal of Hospice and Palliative Medicine* 30(5):445–9.
2. Cindy J G and David D M (2006) Bereavement in cognitively impaired older adults: case series and clinical considerations. *Journal of Geriatric Psychiatry and Neurology* 19(4):209–215

Biography

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jiali.lau@mohh.com.sg

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