Implementing non-pharmacological interventions

Non-pharmacological interventions are first line for management of behavioural and psychological symptoms of dementia and should be continued if drug therapy is trialled.¹

BPSD includes disinhibited behaviours, wandering, nocturnal disruptions, vocally disruptive behaviours, agitation and aggression.

When implementing non-pharmacological interventions

- Use the patient’s background, likes and dislikes, cultural, linguistic and religious factors, and life experiences to guide interventions²,³
- Consider the skills and resources available at the residential aged care facility³
- Document the target behaviour(s) and evaluate patient response

Categories for specific non-pharmacological interventions³

**Social contact: real or simulated**
- Individualised social contact
- Simulated interactions (eg, family videos)
- Reminiscence therapy

**Structured activities**
- Recreational activities
- Outdoor walks
- Physical activities
- Established routines (eg, for dressing and bathing)

**Training and development**
- Staff education on verbal and non-verbal communication behaviours
- Staff support

**Sensory enhancement/relaxation**
- Massage and touch
- Individualised music
- Sensory stimulation (eg, aromatherapy)

**Environmental modifications**
- Wandering areas
- Light therapy
- Reducing excess noise, people or clutter

**Behaviour therapy**
- Differential reinforcement
- Stimulus control

For more information visit: www.nps.org.au/professionals/antipsychotic-medicines

References


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