



MedicAlert LIVE Healthy Hour

Caregiving in the Age of Coronavirus with Alzheimer's Association

Special Guest: Monica Moreno, Senior Director of Care & Support, Alzheimer's Association

April 15, 2020

- Melody Howard: 00:08 Hello and welcome to the MedicAlert LIVE Healthy Hour. This is a new series that we're starting to provide our members with additional resources during this unprecedented time. This is really a unique time for everyone, so we're trying something different that we haven't done before. We're grateful that you're joining us on this journey. My name is Melody Howard and I'm the Community Alliances Director here at MedicAlert and I will be your host today. I've been with MedicAlert for over 30 years, and during those years I've worked in many different areas of the foundation but it's truly the members and our mission that keep me going.
- 00:51 I'll share our agenda with you. Today I'll be sharing information about MedicAlert, followed by Caregiving in the Age of Coronavirus with Monica Moreno from Alzheimer's Association, and then we'll wrap up the session by providing some useful resources for you.
- Many of you here today already know MedicAlert, but for those who don't, I'll give a brief background. We are the original medical ID created in 1956. What's unique about MedicAlert is that we go beyond just ID. Our IDs are backed by a 24/7 emergency response team who are standing by to relay your critical medical information to first responders. And MedicAlert is the only nonprofit organization in the medical ID space. All of our revenues fund our emergency services and help provide IDs and memberships to people in financial need. Our mission is to save and protect lives by sharing vital information in our members' moments of need.
- 01:59 Here's how our service works. Your medical ID is engraved with the most vital health and identification information in an emergency. First responders contact our 24/7 emergency response team to get your full health record. Your health record includes additional health data and emergency contacts which we relay to your emergency personnel. We've trained first responders to look for your MedicAlert ID, empowering them with vital information. When first responders have information about your medical condition and history, they can provide you with fast and accurate care. Now more than ever given the current pandemic, it's so important for first responders to know

about any existing conditions so that they can give you the best possible care. In an emergency, MedicAlert is your voice when you need us most.

Next, I'd like to introduce you to our guest speaker today, Monica Moreno, Senior Director of Care and Support at the Alzheimer's Association. Ms. Moreno oversees all national programs and strategies serving early stage constituents and their families. She has over 20 years of experience working with people with dementia and their families, including more than 10 years in the long-term care setting. I will hand this over to Monica at this time.

Monica Moreno: 00:00

Alzheimer's and MedicAlert Foundation have been working together for over close to 10 years and so we really appreciate the opportunity to continue our work together, and to be able to share this really important information with families. The Alzheimer's Association was started in 1980 and our mission is to lead the way to end Alzheimer's disease and all other dementias - and the way that we're doing that as an organization is a number of focuses. The first being to accelerate global research. The Alzheimer's Association is the leading nonprofit funder of research for Alzheimer's disease and other dementias next to the Chinese and the US government. It's critical that we find treatments that are able to cure this disease and stop its progression.

We also carry out our mission by driving risk reduction and early detection. We know that we have to find ways that help to minimize the risk of developing a cognitive impairment. But we also encourage people to get detected earlier and get a diagnosis earlier, because we know that there are benefits in doing that. And then we also focus on maximizing quality care and support to all families who are impacted by this disease through our network of 75 chapters across the country. Our vision as an organization is that one day, we will have a world without Alzheimer's and all other dementias. And if you'd like to learn more about our organization, you can visit our website at alz.org or call (800) 272-3900.

Melody Howard: 01:32

Great. Thank you, Monica. Now we'll move on to question and answer segment of today's session. Thank you to everyone who pre-submitted questions. We do hope to cover as many of those as possible today. And if time permits, we'll take new questions. I apologize in advance that we won't be able to get to

everyone's questions, but we'll tackle it just as many as we can. Let's get started. Okay.

So the first question is submitted by Deborah and the question is about Alzheimer's.

Q. What is the difference between Alzheimer's and dementia?

Monica Moreno: 02:09

So Melody, I have to say that this is probably the number one question that I and my colleagues get asked all the time - what's the difference between Alzheimer's and dementia? And you may hear these terms used interchangeably, but there is a significant difference in the meaning of both of these terms. Dementia is an umbrella term that's used to describe symptoms such as memory loss, problems with reasoning, thinking, executive function. The Alzheimer's disease is a brain disease. It's a progressive brain disease that actually causes the symptoms of dementia. It accounts for between 60 and 80% of all dementia cases. So it's important to know the difference between them. I will say that when families come up to me and tell me that their mother or their father has dementia, the next question that I always ask is what's the disease that's actually causing their symptoms of dementia. So that's the difference between those two.

Melody Howard: 03:15

Great. Thank you so much. Our next question submitted by Corey and Howard.

Q. How do you tell the first signs of Alzheimer's versus normal aging? And are there ways to tell if your memory is slipping?

Monica Moreno: 03:27

So we know that as people age, there are changes that happen to the brain that are normal, and there are changes to memory that are normal as well. But when memory loss starts to impact daily life in the ability to carry out daily activities, that's when there should be cause for concern. The Alzheimer's Association developed our [10 warning signs](#) and these warning signs are used as a guide so that people can help to identify these signs in themselves or in someone else. And it's important that if you recognize any one of these signs - you don't need to have all 10 of them - that you go see your doctor and talk to them about those concerns. It may be that it is Alzheimer's disease that's causing those symptoms, but we also know that there are other causes that may mimic the signs of dementia or of those symptoms.

04:24 For example, if someone is severely depressed, they may start exhibiting memory loss because the depression is causing or mimicking that symptom. When I worked in long-term care, when residents were becoming increasingly confused, suddenly we found out in many cases that it was a urinary tract infection that was causing that confusion. So there may be causes that can actually be treated to help address those symptoms, but you want to be able to make sure that you know what those 10 warning signs are - and please understand that you don't have to have all 10. This disease affects every person differently. No two people experience Alzheimer's disease in the same way, nor do they experience the same symptoms. And you want to make sure that you go see your doctor, share those concerns so that you can have an accurate and thorough workup by your clinician to determine the cause of those symptoms.

Melody Howard: 05:25 Thank you. And our next questions, again also related about Alzheimer's submitted by Laure and Diane:

Q. How can I find a local provider who can accurately diagnose Alzheimer's. And what can a neurologist do for someone with Alzheimer's that a primary care provider cannot?

Monica Moreno: 05:42 So if you start to notice any of those 10 warning signs in yourself or in someone else, again, the first contact to make is to your primary care physician. Make an appointment to see that clinician and share the concerns that you're seeing in yourself or in someone else. That clinician will then go through a thorough number of tests. They may include blood tests, scans or cognitive assessments. If the clinician feels that they need someone in this specialty to actually help to verify what the diagnosis is, then they may refer you to a neurologist. Now it's important to note that not every neurologist specializes in Alzheimer's disease, so you're going to want to make sure that in talking to that neurologist prior to your visit, you're asking questions to see what their level of experience is in detecting and diagnosing Alzheimer's disease.

06:40 It's not always necessary to see a specialist in order to get a diagnosis. You really need to leave that up to your physician and whether or not they believe that some additional testing by a specialist is necessary. And you know, one of the things that we see happening is that there's not a large number of neurologists that are available throughout the country. Certainly we've seen physicians who are studying in these specialties declining. So part of our work at the Alzheimer's Association is really to work

with these primary care physicians so that they know how to detect and diagnose Alzheimer's disease in the patients that they're seeing.

Melody Howard: 07:25 Okay. Also in the category of Alzheimer's, submitted by Arelis.

Q. My mother has dementia and doesn't have full medical coverage. Where do I begin to find a facility near NYC?

Monica Moreno: 07:39 Yeah. So, I wish I had a little bit more information on this question because the way that I read it was medical coverage. It's important to note that medical health insurance doesn't typically cover or fund stay in a long-term care community. Typically, that funding is provided by the state. So every state is going to have a different set of criteria and resources that are available to help fund the care in a long-term care community. That being said, one of the best places to start is to reach out to your local Area Agency on Aging - the triple A's. This is an agency that is located in every single state throughout the country, and they can provide you with local resources in your community to help guide you to where you need to go, and what resources may be available to help fund that individual's stay in a long-term care community as well.

08:37 A lot of the funding that comes from the states to pay for this type of care is actually through, here in Chicago we call it Medicaid. And certainly there are qualifications that you have to meet, but starting with the Area Agency on Aging is really a great start to have them guide and direct you to those resources so that you can find the best available funding for you for that care. And I also want to mention that if you are in the midst of trying to find alternative housing for the person that you're caring for, a really easy way to do that, you find out the type of funding sources that that facility accepts is to visit the Alzheimer's Association's [Community Resource Finder](#). It's a very simple to use database where you just enter in your zip code and search for long-term care communities, and it will give you a listing of all those facilities in your community. And you can actually learn in more detail, again, the type of funding and the type of care that they actually provide.

Melody Howard: 09:38 Very helpful. Thank you. These questions are submitted by Adele and Marguerite.

Q. Is Prevagen best option at present for keeping the mind sharp? And what herbs or supplements can help prevent Alzheimer's?

Monica Moreno: 09:53

Yeah, so we get this question a lot because there's a lot of supplements out in the marketplace that make claims around being able to help keep the mind sharp or prevent Alzheimer's from occurring. Unfortunately, the reality is that today there is no way to cure, prevent, or slow the progression of Alzheimer's disease. And so these supplements have not gone through the rigorous clinical testing that we typically see with medical treatments. They have not been reviewed by the FDA, the Food and Drug Administration, or gone through their review or their regulation process. So simply put, there aren't clinical studies that have been conducted that show evidence of whether the supplements work. That kind of testing is critically important in order for us to be able to find a cure. You can't just hope for one, you have to actually participate to help us find one.

10:57

And one of the biggest obstacles that we encounter, is being able to get individuals - either someone living with dementia, or caregiving or healthy volunteers - to participate in clinical studies. These studies are available all throughout country, and they're not just focused on drugs or medications. There are also clinical studies that are available that focus on quality of life for the person living with dementia, as well as psychosocial wellbeing. And as an effort to try to help the communities understand the importance of these studies and to provide you with information of the studies that are available, we have our [Trial Match](#) service which kind of acts like a dating matching service. You just come on to the Alzheimer's Association site, answer some brief questions, put in a profile, and the system is actually able identify the clinical studies that are available in your community. The great thing about the system as well is if you don't have a study that you're connected to right away, the system will continue to do that search for you as new studies come on board. So it's really, really important that for the people who can, they should know the clinical studies that are available and to participate. Because again, we're never going to be able to find an effective treatment for this disease unless we have people participating in those studies.

Melody Howard: 12:24

Thank you. Our next category deals with Alzheimer's and COVID-19. This question submitted by Harvey:

Q. Can COVID-19 bring on Alzheimer's?

Monica Moreno: 12:34 Yeah, thanks for the question, Harvey. There is no evidence today that shows that COVID-19 brings on Alzheimer's disease. We do know that the greatest risk factor for developing Alzheimer's disease is age. The more than 5 million Americans who are living with Alzheimer's disease today are over the age of 65. We also know that family history plays a great role in this. Some factors increase the risk of developing Alzheimer's. If you have a mother or a father who is living with Alzheimer's disease, you may have a higher risk of developing the disease. However, it doesn't guarantee that you're going to get the disease. And then the other risk factor that we look at is genetics. Although genetics only play a role in less than 1% of the population that develops Alzheimer's disease.

13:29 I do want to mention also that while COVID-19 doesn't bring on Alzheimer's disease, the fact that someone has Alzheimer's disease may actually put them at greater risk for developing COVID-19. And the reason for that is if you have a cognitive impairment, the individual may not remember all of the guidelines that they've put out as far as hand washing, making sure you're practicing social distance, and staying in place orders. They may not read or be able to remember those guidelines. And so that may put them at higher risk for developing COVID-19. In addition to the fact again that the majority of those Americans living with this disease are over the age of 65. And we know that is a large population who are more susceptible to COVID-19 are those who are in an older age group and also who have comorbidities such as diabetes, asthma or other diseases as well.

Melody Howard: 14:32 Thank you. That's a nice lead in to the next question.

Q. Is dementia one of the underlying conditions that puts you at higher risk for COVID-19?

Monica Moreno: 14:40 Yeah. You know, based on what we know from the CDC the underlying conditions that put someone at higher risk for developing COVID-19 are really more related to respiratory conditions than neurological. So, having dementia is not an underlying condition that puts you at higher risk. Again, what may put the individual at high risk is their inability to remember all of the practices, those practices that the CDC recommends in order to keep us safe and healthy. So as a caregiver, if you're caring for somebody with dementia, it may require that you do

monitoring or hands on assistance to ensure that the person is following those guidelines. It's dependent upon where in the disease progression the individual is, and how much they're able to retain as far as those guidelines.

Melody Howard: 15:36

Our next question submitted by Shirley is:

Q. How can you tell if someone with Alzheimer's has COVID-19?

Monica Moreno: 15:44

So it really is no different whether someone has Alzheimer's disease or not, as far as the symptoms that may indicate that a person has COVID-19. If you look at the CDC guidelines, we know that there are three symptoms that they tell us to look out for. The first is having a fever, the second is having a cough, and the third is experiencing shortness of breath. Now, depending upon where the person living with dementia is in terms of cognitive impairment, if they're in the early stage of the disease, they should be able to communicate to you whether or not they're feeling short of breath. Or whether they feel a fever that's coming on. If the disease has progressed and the person is having difficulty communicating what they may be experiencing or feeling, then as a caregiver you have to do a little bit more detective work - observing what's happening with that person if they're not able to communicate that to you.

16:44

So for example, if you're caring for someone who has challenges with communicating fully, you may want to take their temperature more frequently so that you have a good indication of what their baseline temperature is. If there's shortness of breath, you want to monitor it to see if some of the activities that they're doing on a day to day basis, if their ability to do those is affected. Now all of a sudden, you're starting to notice that they're a little bit more challenged and they're experiencing trouble breathing after doing an activity that they've done all their life, but it's becoming more difficult for them to do. So these are the things that as a caregiver you need to be monitoring for and making sure that you understand what those symptoms are, based on the CDC guidelines. And especially looking for those symptoms if that individual is not able to communicate what they're feeling or what they're experiencing.

Melody Howard: 17:45

Thank you. And this next question:

Q. I live in a senior building besides wearing gloves and a mask, how can I protect myself?

Monica Moreno: 17:55 So first I want to congratulate Margaret for wearing gloves and a mask, because those certainly some of the things in the CDC guidelines to do. We also want you to continue washing your hands as required for at least 20 seconds, disinfecting countertops and other frequently touched surfaces. A lot of senior buildings also have communal dining, and certainly in the midst of COVID-19 it's probably best not to participate in that type of dining, but to ask to have your meals delivered to your unit. There are also other things that you can do to try to ensure that you're not having to leave the building, and that could be reaching out to the nearest grocery store and placing the order with them and asking them to deliver groceries to your unit. I also know that there are a lot of pharmacies now that are offering free delivery service for medications, especially for seniors.

18:52 So reach out to your pharmacy to see whether or they're offering any special services. If you have to leave the building and you have to go grocery shopping, a lot of stores now are actually having special hours set aside for seniors so that they can go shopping. You'll need to know the types of services that are available and resources in the stores that you tend to need to have to venture into. And then also asking the management team at your senior building what are some of the services that they may be putting into place. They may be able to help you to stay in place, and not have you go out and expose yourself to others.

Melody Howard: 19:34 Thank you. And these next questions submitted by Maria and Lisa:

Q. Is it important to remind someone with dementia to wash their hands often? And what precautions should home caregivers take?

Monica Moreno: 19:50 Yeah, so it depends where the person is in the progression of the disease. So for someone who's in the very early stage of Alzheimer's disease, again they may just need reminders to wash their hands, but they're able to do that task independently. They may be able to understand exactly why they have to follow these guidelines and protocols because they're able to understand COVID-19 and the importance of keeping themselves and others safe and healthy. For someone

whose disease is a little bit more progressed or in the middle stage, you may have to provide more reminders to that individual. It may be helpful to actually set an alarm on your phone to remind you as a caregiver to remind the person to wash their hands. And then in the later stage of the disease where individuals tend to be more dependent on all of the care from their caregivers, the caregiver may have to actually wash that individual's hands because that person may not be able to do it on their own.

20:54

So the need to remind someone to wash their hands is really going to look different depending upon where the person is in the course of the disease. And then as far as precautions that home caregiver should take - this I read a little bit differently, right? So this could be a family caregiver who's in the home, but it could also be a paid caregiver who's coming into the home. But precautions should be exactly the same regardless of whether you're a family caregiver or you're someone coming into the home, you want to make sure that you're following all of the CDC guidelines. And I kind of feel like I'm repeating myself with that. But those really are the guidelines that everyone should be following. Make sure that you're going back to the CDC website often because some of those guidelines change day to day, hour by hour. Making sure that you're washing your hands, making sure you've disinfected all of the countertops, practicing social distancing, trying to minimize having to leave your home and to be able to get some of the items that you need on a day to day basis. Wearing a mask, wearing gloves, and just making sure that you're disinfecting, especially if people are coming into your home and then leaving. You want to make sure the people coming in are also following those guidelines before they come into your home and then after they leave, you're again washing your hands and following all of those other protocols from the CDC.

Melody Howard:

22:28

These questions are along those same lines as well.

Q. Is it safe for my mom with dementia to come to my home to provide respite care for my father, who is her primary caregiver?

Monica Moreno:

22:37

This is a really great question, Julie, and one thing that we know for individuals living with dementia, if there is a significant change in their environment or their routine it can actually exacerbate feelings of anxiety, stress or agitation. So, you really have to think what the pros and the cons are of having the mom

leave her home and come to her daughter's home in order to give respite to her father. Now we know that respite care is critically important for caregivers. It provides the caregiver the opportunity to step back, take time for themselves, to do the things that they love to do. Take a nap, watch a favorite movie, go out with friends. Although we know that's not always possible with COVID-19, but it really does give the caregiver an opportunity to kind of just refresh and rest. And so in Julie's situation, what she may want to consider is, is it possible for Julie to go to her father's home so that she can provide respite to her dad there.

23:47

Now, that may not be the optimum experience that her father was looking for, right? Because maybe he wanted to just be home by himself. But this option then prevents her mom from having to leave the home, go into a new environment and have to adjust to a new routine. And if Julie can actually go to her parents' home to provide that respite care to her father, then they can think about if there is a place in the home that her father can go to so that he can have that private time. Whether it's to get on the phone to talk to his friends, watch some sports shows, whatever that might be. But at least you give him a quiet time and Julie can provide care in her parent's home and continue to follow the same schedule of the daily routine that her mother is used to.

Melody Howard:

24:31

Thank you. And this next question is submitted by Judy.

Q. My husband has dementia and I have an autoimmune disease. I need to help with housekeeping. How do I protect myself and my husband if we have outside help?

Monica Moreno:

24:43

Judy this is a good question as well, and actually it was one that I experienced so I think I have some tips that will be helpful. Certainly, we want to make sure that before anyone comes into the home, that we ask those really critical questions. Are they feeling sick? Have they been around someone who is feeling sick, or tested positive for COVID-19? Do they understand what the protocols are, the guidelines from the CDC? Are they going to have accessibility to masks and gloves? Do they understand the importance of washing their hands before they come and after they leave? Do they have the materials that they need to disinfect the house? So asking all of those questions, I would even say before they even come in, ask them to take their temperature to make sure that they don't have a fever.

25:43

One of the things that I did - and this was weeks before all of the stay in place orders came into effect here in Chicago - I had a cleaning crew come in. What I did, I just kept myself and my son in my office and closed the door. The ladies came in and did the cleaning, and we talked through the door, and then they left. And you know, that may be something that you want to consider as well, right? How can you still maintain social distancing while you're able to get the services that you need into the home? That was just something that came to mind when I read this question because it was exactly one of the things that we did in our home. We kept that social distancing, but we were still able to get the services that we needed.

Melody Howard:

26:17

Very good. Next question, submitted by Jerry.

Q. I care for my wife who has advanced Alzheimer's with the help of two caregivers. What should we do if any of us show symptoms of COVID-19?

Monica Moreno:

26:29

First and foremost, you want to call the doctor. You want to make sure whether it's you, Jerry, as the caregiver, or if it's the caregivers who actually have come into the home and have become sick, that everyone reaches out to the doctor to share that information and to get guidance on what next steps should be. Certainly for you as a caregiver, if you're the one who actually shows symptoms, you want to isolate yourself. Make sure that you're wearing masks and gloves, that you're still following the CDC guidelines of washing your hands. But I would also encourage you to reach out to the agency that you've hired these two caregivers from, and talk to them about what are their protocols in the event that their staff gets sick. Will they be able to replace care? Because it sounds like with your wife, you actually need two people to help to provide care. If you're sick, what's the protocol for the agency to allow their staff to come in and help care for your wife while you're not able to do that?

27:32

So you want to be proactive and try to get answers to all those questions and have those conversations in advance before something happens, versus waiting for that crisis to occur, and then not knowing what we to do. But certainly as a caregiver, if you feeling sick, you need to isolate yourself, make sure that you're not sharing any personal house items. Then also have a plan in place for what's going to happen for the care of your wife if you're not able to provide that care because you become sick. And again, having those conversations with the agency that

you hired these caregivers from or talking to those caregivers, what's their comfort level if they know that you're sick but your wife isn't? Having that plan in place and having those conversations before something happens is critically, critically important.

Melody Howard: 28:23

Thank you. These next questions are also about Alzheimer's and COVID-19, submitted by Julien and Ellen.

Q. If my spouse with dementia is sick, how do I take him to the hospital when no one is allowed to accompany him? Are hospitals setting protocols for dealing with Alzheimer's and dementia patients with coronavirus?

Monica Moreno: 28:44

Yeah. Julie and Ellen, what a difficult situation to be in. The first thing, and if you hadn't thought of this, the first thing that I would do is call the doctor. It may be that the person living with dementia is sick, but it may not be necessary to go to the hospital or the emergency room. You always want to make sure that you're reaching out to your doctor, that you're sharing what symptoms you've noticed. When did those symptoms start? Have the list of medications that they're taking up to date, so that you can give a thorough overview of what's happened to that person since they started showing symptoms. The other thing that you want to do is be prepared. I would encourage the doctor to call the hospital and make sure that they know that you'll be bringing them into the hospital and that they know that that your spouse has dementia.

29:36

It's critically, critically important that information about the person with dementia gets transferred over and communicated to hospital staff. The other thing that I would do is write down all of the things that you would want the hospital staff to know about your husband. What are his likes and dislikes? Are there dementia related behaviors that he exhibits at certain times of the day? What are some of the strategies and tips that you're using and can share that may minimize those dementia related behaviors? What are the medications he's taking? You want to be able to paint a picture and put it all on paper, that will be helpful to the hospital staff. I would suggest doing this in advance, plan ahead. Don't wait until a crisis situation occurs because then you're not able to think clearly, and you're reacting versus planning ahead and being proactive.

30:34

The other thing I would do is think about some of the things that may help to calm your husband if he's not with you. And if

he's in a brand new environment and the routine has completely changed, those significant changes in environment and routine can cause increased confusion, agitation and anxiety. And so, is there something that you can send along with your husband that can actually soothe him? Is it a photo album? Is it music that he enjoyed? Think through some of those things that can help him in this environment.

31:35

And then the other thing is - every hospital has social workers. Find out who the social worker is in the hospital. Call them, introduce yourself and let them know that your husband is being admitted into the hospital. Having that one primary point of contact who can act as your advocate can make all the difference in the world, when you have a spouse admitted into the hospital and you're not able to be there with them.

That social worker can keep in contact with you. They can act as the intermediary to communicate information about your husband and the hospital staff, and vice versa. They can make sure to talk to the hospital staff, find out what's going on with your husband's care and then communicate that back to you. So leveraging the resources of a social worker in this type of situation, again is critical and can really make a difference in the experience. Not only for your husband, but for you as a caregiver, knowing that you're not going to be able to be there with them every day.

And then as far as the hospital setting protocols for dealing with Alzheimer's and dementia patients with coronavirus, right now, our health system is really focused on caring for those who are sick with COVID-19. So while there aren't any protocols that we're aware of that are being established, certainly the Alzheimer's Association through our health systems work is making itself available to those hospitals.

32:37

If there's information needed, there's education and resources that are needed, the Alzheimer's Association is here to help those systems in caring for people with the disease. We also have a 24/7 helpline, and while the majority of people who use that helpline are caregivers, we also have professionals who use that line to ask questions. For example there could be a health professional caring for someone with Alzheimer's, but they don't know much about the disease. And there is a behavior that the patient is exhibiting and they're not really sure how to handle that situation - they can call the helpline and we have

masters level clinicians to guide them through some of the strategies.

- Melody Howard: 33:24 Also I want to mention that MedicAlert can be really helpful as well if you need to take your loved one to the hospital. We maintain that health record and will certainly be able to send it off to the hospital while you're on your way there or as soon as you get there, so don't forget about that.
- Monica Moreno: 33:39 That's a great point. And certainly making sure that all of your medical information is up to date in your MedicAlert profile because that's going to be critically important. And I know emergency responders and healthcare teams really appreciate having the ability to have access to that information because it allows them to take better care of the person living with dementia. And it's also critical for caregivers, because if you get sick – like Jerry asked in the earlier question - you want to make sure that the hospital knows that you're caring for somebody living with dementia. That way there's some follow-up that happens to make sure that that individual is safe and being well cared for.
- Melody Howard: 34:17 I know we're trying to all figure out how to manage stress and anxiety. And so these questions are along those lines.
- Q. Is it normal that social distancing and the stay at home situation would exacerbate the symptoms of dementia? And all the stress seems to be making the dementia symptoms worse - are others experiencing that?**
- Monica Moreno: 34:37 As I mentioned, it's not uncommon that when you have a situation like COVID-19 and the regular routine for an individual with dementia has kind of been turned upside down, that you're going to notice changes in behavior. And so it's very common that this is happening today. Certainly, the changes in schedule and those routines being out of whack will have an impact. So really the goal as a caregiver is to try and keep that routine as close to normal as possible, but also recognizing that that may need to set a new routine for that person. Once you set that routine, try to stick to it. It really will make things a lot easier for you as a caregiver - and certainly for the person living with dementia.
- Melody Howard: 35:26 Thank you.

Q. How do I deal with anxiety about COVID-19 for someone with Alzheimer's? How do I calm his fears? Please share ideas for managing anxiety.

Monica Moreno: 35:38 Yeah. So one of the things that we like to say is that the behaviors shown by someone with dementia, or the emotions that people with Alzheimer's are feeling are a form of communication. And so what I would want to know is - what is causing this individual to be fearful? Is it that they're afraid that if you get sick, who's going to take care of them? I think one of the good things to do is to demonstrate how you're following the guidelines of minimizing the risk of developing the disease. So making sure that this individual sees you washing your hands, maybe have them participate in that activity so you're doing it together, making sure that they see you disinfecting the countertops or keeping your social distance, not leaving the home, setting up services to deliver groceries to your house. Just making sure that they understand and are seeing all of the things that you're doing to minimize the risk, to keep both you and them safe. I think that can help to relieve the anxiety that they're feeling.

36:33 Then just ask yourself the question - what's causing them to feel the way that they're feeling? And show them how what you're doing is allowing you to stay healthy, and to help that person to stay healthy and safe. Then as far as any ideas for managing anxiety, certainly if this is intended for the person living with dementia, we want to engage them in meaningful activities that can bring joy to their life. That activity will be dependent upon where this person is in the disease process. So really trying to distract that person. Maybe not having the TV on with the news around COVID-19 on all the time and minimizing their exposure to that information can help. What are some of the things they like to watch? What's their favorite movie? Music? Looking at some of the activities that you can do in the home that will distract them, get them to not be thinking about COVID-19 all the time, but focusing on things that they really enjoy doing - that will all help with the anxiety.

Melody Howard: 37:36 And our next question is submitted by Angela and Elizabeth.

Q. Due to the quarantine, my dad is angry and thinks we're keeping him in jail. How do I manage that? And also - my sister is pacing nonstop, day and night. She won't sleep, and we're both exhausted. What can we do?

Monica Moreno: 37:55 Again, this ties back to the forms of dementia related behavior, right? Certainly some of the changes in schedule and routines can exacerbate some of these behaviors. What we always try to look for, and we encourage caregivers to look for, is what was happening before this behavior happened, what might have triggered that behavior to occur? If you're able to figure that out, then what you can do is work to minimize those triggers and that will help to prevent that behavior.

In the issue of the sister who's pacing nonstop day and night, some of the things that I initially thought about were - is this individual taking long naps during the day? That could be what's interrupting her sleep pattern at night. Something else that I thought about was - is this person trying to meet a need? Are they hungry? Are they hot? Are they too cold? Do they have to go to the bathroom? So again, it's really trying to figure out what might be triggering this behavior and then trying to minimize those risks. The reality is the sister may be bored, and so she's just looking for something to do. If you start to notice that these behaviors are now becoming a safety issue to the individual or to you as a caregiver, I encourage you to reach out to the doctor. Let them know what's happening, and get guidance from the physician on what next steps need to take place.

Melody Howard: 39:22 Also on managing stress and anxiety. This question is from Karen.

Q. I'm a caregiver 24/7 for a parent with dementia. How do I cope?

Monica Moreno: 39:30 You know what they say Karen - caring for somebody living with dementia is a 36 hour day, right? It never stops. It's not just nine to five. And one of the important things that caregivers need to do in order to cope is to build a support system. And I know that that can be difficult today, given COVID-19 and social distancing and staying in place orders in many places across the country. But you still have the opportunity to connect with others who understand what you're going through and have walked in your shoes. The way that you're able to connect with people - even during COVID-19 - is through services that the Alzheimer's Association offers, such as our telephone support groups. As an organization, we have had to pivot very quickly to change the delivery of our support groups from in-person to virtually - similar to this platform or over the telephone. And we have

thousands of events and support groups across the country that you can participate in any time of the day or night.

40:33

We also have [ALZ Connected](#), which is our online social networking platform. This has a very robust community of caregivers who are there to share their stories. They share the tips and strategies that they've used, and really ask questions of other caregivers so that they're sharing in the support that's happening throughout the community. So I would highly encourage this caregiver – all caregivers, really - to look at some of those resources that are available and get connected to those who understand what you're going through and have walked in your shoes. There's nothing more comforting to know that you're not in this alone. No one has to go through Alzheimer's disease alone, especially given the vast number of resources that the Alzheimer's Association has to offer.

Melody Howard:

41:19

Thank you. Next question, submitted by Joanne and Pam. This is also along the lines of help for caregivers.

Q. How do I explain COVID-19 to someone with late stage dementia? And how do I explain to our family member with dementia that they can't see their spouse during the quarantine?

Melody Howard:

41:35

So to the first question, I think the caregiver really needs to assess how much the individual is actually able to understand - and whether sharing that information is going to make a difference. If they can't understand the information that's being shared, then it may not be necessary to share that information because it might cause confusion or stress. However, it's still important to ensure that the guidelines that the CDC has shared are still followed, especially the washing of the hands. And so as a caregiver you can make sure for someone in the late stage of dementia that you're making sure they're following those protocols and you're providing that assistance. If you are trying to explain to a family member that they cannot see the spouse during quarantine, that's a tough one. I know this is difficult, especially for those couples who've been married for years, or decades. But I think helping them to understand that the reason that they're not able to see their spouse is for their own safety and health and wellbeing, it may make it easier for the person with dementia to understand why it's necessary that they can't visit with them.

42:39 The other thing that you may want to consider, and we've been hearing a lot about this is - how can you help families stay connected through technology? Is there a way that you can use virtual platforms such as Zoom or FaceTime to be able to see and talk to one another? Can you make a phone call and talk to him over the phone and stay connected that way? Is there a way to communicate with the staff that may be caring for him wherever he's residing? So at least that form of communication is happening. The technology is really coming into play and helping families stay connected, especially when there's no visitation allowed in long-term care communities because of COVID-19.

Melody Howard: 43:25 Thank you. Next questions, submitted by Kim and Joanne:

Q. How can I help my loved one with Alzheimer's handle the quarantine? How do we avoid the downsides of disrupting the usual routine for so long?

Monica Moreno: 43:39 Yeah. You know, that's difficult because at the end of the day, we know that there's going to have to be changes to our daily life. Certainly, all of us across the country are experiencing that, and there's no getting around it. I think the thing that as caregivers we need to be thinking about is how we can try to maintain that sense of routine and schedule in that person's life to the best of our abilities. And again, it's not going to be perfect or easy.

I think it's important to note that some strategies or schedules that you put in place that are brand new may not work for the person. So you have to be flexible and nimble to try different things in different ways until you actually find the right way to create a schedule or a new normal for that person. And then the other thing is that if you create a schedule or a routine for someone that's not working today, try it again because it doesn't always mean it's not going to work the next day! You may go back to some of the things that didn't work in the past, because you might find that they're actually working today. So just get creative in continuing to try to find the right schedule and the right routines.

Melody Howard: 44:55 Thank you. The next questions were submitted by Heidi and Robert:

Q. Can you recommend technologies to help with safety and monitoring for a loved one with Alzheimer's? And what do you think of electronic medical alert devices for the caregiver?

Monica Moreno: 45:10 There's a lot of technology out there with GPS in order to be able to help someone be safe. I think it really is dependent upon what are the specific needs that the caregiver is looking for. Is it that they need monitoring with cameras in the home? Is it that the person is trying to wander out of the home? And so the different technologies that you're going to want to be looking at are really dependent upon what need are you trying to meet and the safety need that you're trying to address. The Alzheimer's Association actually a section of our website called [Technology 101](#). It's for caregivers who are looking for technology to use. It has a list of questions that we encourage you to ask a provider of that technology so that you can make the best decision possible to meet your safety needs.

46:02 And that ultimately is the most important thing because a solution is going to look different for every family based on the safety issue you're trying to address. And then as far as the electronic medical or devices for caregivers certainly if that's a device that works for you as a family I say, you know, ask those questions that we have on our website and make the best decision for you. That being said, technology doesn't always work. There's always the chance that it's going to fail. And so what we encourage our families to do is have a backup - and certainly a MedicAlert bracelet or ID is a wonderful way to have that safety net in the event that technology fails. We know that emergency responders know the brand of MedicAlert, and they know how the process works especially in a wandering incident. MedicAlert can be a real lifeline for someone who has wandered. You always want to have a backup plan in the event that technology fails.

Melody Howard: 47:03 Thank you. Next questions, submitted by Robert and Jennifer.

Q. My wife has Alzheimer's and liver disease and she needs to lose some weight to improve her health, but she's resistant to dietary changes. Any ideas? Also, any tips for keeping my loved one with dementia hydrated?

Monica Moreno: 47:21 So you know, the ability to eat or swallow can change as the disease progresses. And certainly, sometimes - no matter what you do as far as trying to put healthy foods in front of the person with dementia – it may not work. That being said, if

you're trying to keep that person healthy, there are things that you can do in the home such as making sure that they keep active and mobile. There are ways to be able to exercise and whether it's just walking around the home, going up and down the stairs a couple times, helping with the laundry, or setting the dishes on the table for meals, any form of movement is always a good thing. It's much better than being sedentary. So if this caregiver is having trouble in having his wife eat healthy, then let's get her moving a little bit!

48:18

And there's ways to do that within the home, especially given the confines of COVID-19. The same thing would go for keeping someone hydrated. It may be that the individual is not able to remember that they need to drink water to keep hydrated. And so as a caregiver, just making sure that you have a set schedule either to remind yourself - because I know as a caregiver there's a lot going on and sometimes, we may forget things as well. But set some reminders for yourself so that you can remind that person to drink water and stay hydrated. Ultimately, we want to make sure that the caregiver and the person living with dementia are healthy because we don't want anyone to get sick. It puts you at greater risk potentially for getting COVID-19 if your immune systems aren't working at their height.

Melody Howard:

49:12

Thank you. The next question is submitted by Guadalupe.

Q. How do we keep our loved one at home during the crisis and how do I qualify for financial help for home care?

Monica Moreno:

49:23

So if this is a situation, Guadalupe, where your family member with dementia is actually not able to understand why they have to stay at home and they're trying to leave the house all the time, there are certain tips and very easy tips that you can do to try to reduce the risk of the individual leaving the home and wandering away. One of the simple things to do is to get a lock, one of those slide bolt locks, and you put it up on your door but higher than eye level. This way if the individual is trying to leave, they're not going to think to look up to unlock the door and that will help prevent them from leaving the home. The other thing is to try to engage them in activities again that are meaningful and bring joy to their life. So thinking about all of the daily activities you have to do to keep the house in order during COVID-19, how can you engage that individual with dementia to participate in that way?

50:22 You have to focus on what the individual can do, versus what they can't. That can make all the difference in the world and it will keep them active and engaged, and hopefully will distract them so that they're not looking to leave the home. And then as far as qualifying for financial help for home care, again I think the first point of contact and the first phone call that you can make is to your local Area Agency on Aging. They will have all of the resources you need to know what's available in your region or in your local community. And I do want to share the website for the triple A's, and that's eldercare.ACL.gov. It's a wonderful resource and again, it's available throughout the entire country.

Melody Howard: 51:10 Thank you. And we are running a little low on time, so I'm going to skip over a couple of questions here. I'll ask this question submitted by Joan and Debra:

Q. How can I make a phone or FaceTime call meaningful for someone with Alzheimer's, especially if they have advanced disease?

Monica Moreno: 51:28 Yeah, this is a really great question and it's actually one that we get asked a lot, even without COVID-19, you know, how do I visit my family member in late stage and really be able to connect and make that visit. And really, it's about the moment. So if you're using FaceTime to connect with someone in the later stage of the disease, think about what is some music that they may enjoy, and play that for them over FaceTime. Was there a favorite poem or story that they really enjoyed? And reading that to them can be good. It's really about connecting to the person in the moment. And figuring out that even if they're not able to communicate to you, what's the way in which you can engage with them in a way that that they'll enjoy? And often that could be through music. It's really through the senses, auditory as well.

Melody Howard: 52:22 Monica, do you want to talk a little bit about the Alzheimer's Association Helpline?

Monica Moreno: 52:27 Sure. I'm just going to make sure that everyone is aware of all of the services that the Alzheimer's Association has to offer. We have a 24/7 helpline. Even in the midst of COVID-19, all of our staff are available 365 days a year, 24/7. We have masters level clinicians who are available to provide counseling to caregivers, or really anyone impacted by the disease. And we have a live chat feature that's available on our website, alz.org and we have translation services for over 200 languages. So whether

you're looking for basic information about the disease, or you're feeling challenged in trying to address a dementia related behavior, please use our 24/7 helpline. We're there for you anytime day or night.

And then as I mentioned, the Alzheimer's Association historically has delivered all of our support groups and education programs in person. In light of COVID-19, we quickly pivoted to be able to continue to provide these services to our families virtually. If you go to [Community Resource Finder](#), you can enter your zip code and find all of our education programs and support groups that are available across the country. If you're interested in getting home care services, if you're looking for a residential care community, doctors, neurologist, you can actually come to Community Resource Finder and all of that information is available in this database.

- Melody Howard: 54:07 Thank you. And here's some more resources for you as well.
- Monica Moreno: 54:13 This is [ALZ Connected](#) that I talked about for those caregivers who really need to build that support system, especially with COVID-19. If you can't get out to stay connected with family and friends or other caregivers, ALZ Connected is the way to do that online and be able to talk to other caregivers who are in a similar situation.
- Melody Howard: 54:31 Right. Thank you so much. So just a couple of points from our side at MedicAlert. Given that many of our members are uniquely at risk during this pandemic, please be sure to update your MedicAlert health information profile and your emergency contacts. It's really important at this point that everything be up to date, and be prepared as Monica talked about earlier.

Also take advantage of our resources that we have for you. We have a [COVID-19 Resource Center](#) that has lots of information for people living with different chronic conditions. The address is listed on the screen, but if you go to our website and type in resource center you would be able to find that as well.

I also want to share with you to look out for our next LIVE Healthy Hour event that's going to happen in about two weeks. We'll send out notification in advance of that. One of the things that we would like to know is if this session today was helpful for you – so we're going to push out a poll. If you don't mind filling in that information for us, that would be fantastic. We do like to hear if the information is helpful. Great. And we



appreciate you so much attending today and spending this time with us. I know that we had a lot of questions that we couldn't cover. We'd like to ask Monica to come back for another round. We will have to schedule that, but if you don't mind Monica, we'll get that set up and answer some more good questions for members.

Monica Moreno: 55:51

That'd be great. And thanks for having me. Everybody stay safe and healthy.

Melody Howard: 55:56

Thanks you as well. Thank you everyone. Have a fantastic day.