Behavioural and psychological symptoms of dementia (BPSD)

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BPSD

- Definition
- Causes
- Frequency
- Consequences
- Presentations
- Assessment
- Management
Definitions

Psychological symptoms

• Anxiety
• Depression
• Delusions
• Hallucinations

Behavioural symptoms

• Physical agitation, aggression
• Verbal agitation
• Disinhibition
• Apathy
Frequency

Psychological symptoms

• At any time, 10% have major depression
• 50% will have a psychotic symptom at some point

Behavioural symptoms

• Almost universal at some point
• But who decides?
Dementia severity

Repeats questions

Calling out

Aggression

Night-time pottering

O'Connor et al, 1990
Causes

Neuropathological syndromes

- Lewy body dementia $\rightarrow$ visual hallucinations
- Frontal lobe dementia $\rightarrow$ disinhibited behaviours

Stress response

- Insight
- Frustration
- Disorientation
- Unmet needs
Causes

- Pain
- Delirium
- Psychological symptom → behavioural symptom
  (e.g. depression, psychosis → agitation)
Consequences

Family carers
- BPSD → burden
- Admission to residential care

Residential care
- Staff stress
- Duty of care
- Mandatory reporting
Presentations

- Aged persons’ mental health teams
- Emergency departments
- General hospital wards
Questions

• What?
• Where?
• When?
• Who?
Scenarios

• Case 1: NH, moderate dementia, gradually worsening resistiveness at shower times

• Case 2: Home, moderate dementia, “shadows” spouse, anxious, poor appetite and sleep

• Case 3: NH, severe dementia, physically agitated and aggressive, sleep-wake disruption, visual hallucinations over last 3 days
Assessment

Mental state exam
- Appearance, behaviour
- Affect, mood
- Thought content
- Perception
- Cognition

Collateral history

Medical work-up
- Physical exam
- Check medications
- Lab tests, MSU
Medications

- Strongly indicated for pain, major depression, persistent psychosis
- Possibly indicated for persistent anxiety, irritability, aggression
- Treatments include analgesia, antidepressants, benzodiazepines, antipsychotics, mood stabilisers
Risperidone versus placebo
BEHAVE-AD aggression scores

Psychosocial strategies

- Stay calm
- Try to understand what’s causing the problem
- Avoid or work around it
- Individualise approaches
- Personal attention
Preferred music
Agitated behaviours

![Graph showing preferred music and agitated behaviours](image)
Working in the real world

- Diversional therapists
- Other staff
- Montessori principles
- Alternative therapists