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Classification of behaviors in dementias based on principles of compliance and aggression

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Objectives: There is vast heterogeneity in use of terminology and classification of behaviors in dementia with no universally accepted classification system.

Methods: Criteria proposed by Davis, Buckwalter and Burgio (1997) were identified as the basis for classification of behaviors in dementia. A review of literature was done with a view to identify the "Specification of the Theoretical Construct" (STC) to justify aggregation of similar Behavioral symptoms into clinically meaningful categories.

Results: STC identified for these behavioral categories are theories on compliance and aggression. Behavioral categories emanating from this construct are; *Oppositional Behaviors* (OB) and *Physically Aggressive Behaviors* (PAB).

Discussion: OB is the result of non-compliance to the directions being given by the care provider. The types of OB are determined by the level of developmental sophistication or conversely by the degree of cognitive impairment in patients with dementia. PAB are the result of perceived impediment by the patient in goal attainment. This results in the emergence of negative emotions. These emotions are 'out of proportion' to the stimulus. The purpose of this behaviour is to warn the care provider of the noxious nature of their involvement in the present situation.

Biography

Atul Sunny Luthra is presently an associate clinical professor at McMaster University, Hamilton, Ontario, in the faculty of health sciences, Department of Behavioral Neuroscience. He is also affiliated as a research scientist with the Research Institute for Aging, Schlegel, and University of Waterloo, Ontario. He is currently working as medical coordinator in the Program for Older Adults at Homewood Health Centre, Guelph, Ontario. He is affiliated in the same capacity with the St. Peter's site of Hamilton Health Science, Hamilton, Ontario. His clinical and research focus is on developing safe pharmacological and affordable non-pharmacological treatment interventions for behaviors in moderate to advanced dementia.

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