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An Overview of caregiver burden in dementia care

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Background: We aimed to investigate the effects of behavioral disorders on the quality of life, care burden, anxiety and depression of Alzheimer's Disease caregivers.

Method: A hundred and seven caregivers of Alzheimer's Disease (AD) patients were enrolled to the study. Among AD patients, 37 were home care (group I), 33 were using day care home (group II) part time and 37 were staying in the nursing home (group III) full time. Patients were classified, according to dementia severity based on the clinical dementia rating scale (CDR). CDR score of group I and II patients were 1-2 and 3 for group III patients. For anxiety and depression "Beck anxiety" and "Beck depression scales"; for life quality "World Health Organization Quality of Life Assessment short version (WHOQOL-Bref)"; for behavior disorders "Cohen-Mansfield Agitation Inventory (CMAI)" and for caregiver burden "Zarit Caregiver Burden Interview (ZCBI)" were applied to all caregivers. Turkish validations of all tests were used.

Results: The average age of the groups were 52±11 years, 64±12 years and 53±15 years respectively. There was no statistically significant difference between the groups in terms of the duration of care of the patients. Beck depression scale was significantly higher in group 3 (group I, II and III 13±9, 11±7 and 27±16 respectively; $p<0,0001$). WHOQOL-Bref test scores were significantly lower in group III ($p<0,0001$) and CMAI score was significantly higher in group III patients (group I, II and III; 50±3, 43±16, 71±42 respectively, $p=0,01$). There was no statistically significant difference between the groups in terms of ZCBI.

Conclusion: The depression scales, quality of life and caregiver burden of the caregivers are effected due to the fact that the patients staying in the nursing home are more aggressive. The caregiver burden may be reduced if behavioral disturbances and environmental factors in the nursing home are corrected

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