

2nd International Conference on

Parkinson's Disease & Movement Disorders

December 05-07, 2016 Phoenix, USA

Role of Therapeutic Touch in the management of responsive behavior in patients with dementia.

Helen Senderovich^{1,2,3,4,5} and **Ananthavalli Kumarappah**^{4,5}¹Baycrest, Toronto, Canada²Department Family and Community Medicine³Division of Palliative Care⁴Faculty of Medicine⁵University of Toronto, Canada

Introduction: There was an estimated 36.5 million individuals worldwide living with dementia in 2010 as per World Health Organization. In addition to deficits in cognitive domains, responsive behaviours in dementia (RBD) greatly impact the quality-of-life of individuals with dementia and greatly increase caregiver burden. Current treatment modalities are not always effective, and thus non-pharmacological approaches along with careful use of pharmacological therapies should be considered in the management of RBD. Therapeutic Touch (TT) is a simple procedure that only requires a pair of hands and a compassionate mind. TT allows for clear and respectful communication with the patient and helps to avoid confrontation by providing stimulation and structure.

Objective: To review the publications that evaluate the use of TT in the management of RBD.

Methods: We searched PubMed for 'Therapeutic Touch' and 'Dementia'. We limited our inclusion to reviews and studies published in the last 10 years. We excluded articles in languages other than English and studies for which no outcomes were reported.

Results: Four of the five examined studies suggest that Therapeutic Touch reduces restless behaviours found in dementia. However, there are limitations to these studies including methodological variability and small sample sizes.

Conclusions: TT is garnering attention for its potential role in ameliorating RBD in patients suffering from different stages of dementia and many are looking into using TT in palliative care settings. It can be used in inpatient and outpatient settings. However, at this time, there is insufficient data and further studies need to be done before definite conclusions can be drawn.

Biography

Helen Senderovich is a physician at Baycrest Health Science System with practice focused on Palliative Care, Pain Medicine and Geriatrics. She is an Assistant professor at the Department of Family and Community Medicine, and Division of Palliative Care at the University of Toronto who actively involved teaching medical students and residents. She has a broad international experience and a solid research background. Her research was accepted nationally and internationally. She is an author of multiple manuscripts focused on geriatrics, patient's centered care, ethical and legal aspect of doctor patient relationship, palliative and end-of-life care.

hsenderovich@gmail.com

Notes: