

Psycho-Educational Approach in Alzheimer's Disease

Dumont C*, Barvaux V and Cornil C

Department of Geriatric and Memory Unit, Grand Hospital De Charleroi, Rue Trieu Kaisin 134, 6061 Montigniessur Sambre, Hainaut, Belgium

Alzheimer's disease is a neurodegenerative and progressive dementia leading to cognitive decline and loss of autonomy. In addition to cognitive impairment, most of the patients also develop behavioral disorders, leading to more complex care. Caregivers face those difficulties on the daily basis and usually suffer from a lack of information and advice about Alzheimer's disease and its evolution. As the patient remains the center of our concerns, we too often forget the impact of this illness on the family and especially on the formal or informal carers.

Psycho-education for caregivers is a teaching programme which aim is to enable families to optimize reactions and interactions with the patient. It also has additional benefits such as increasing social contact, improving wellness and reducing the emotional pressure and perceived burden of caregivers. There are three stages to the psycho-educational approach: theoretical information, practical training in realistic situations and optimizing the carer's response to the patient (Table 1) [1,2]. The first stage consists in providing clear written and scientific information about the different aspects of Alzheimer's disease (nutrition, autonomy, social support,...). The second stage is a practical training including role plays about several situations the caregivers can encounter in the daily living, putting the carers in the patient's place to improve the feelings and reactions of the caregivers. The last stage consists in advising and correcting inadequate or undesirable reactions and interactions with the patient. The caregiver can indeed limit some behavioural disorders of the patient by adopting him- or herself appropriate responses towards his or her relative.

Over the last years, providing support to the caregivers or relatives of Alzheimer's patients has been valued in several studies [3]. Despite a variable methodology (group sessions, written advice, telephonic contacts...), those studies revealed benefits of the psycho-educational approach. Eloniemi et al. [4] in 2001 and Mittelman et al. in 2006 [5], both showed delay of nursing home placement. In 2015, a meta-analysis by Jensen et al. [6] revealed a moderate reduction on caregiver burden and on depression for the principal carer. However, the effect of psychoeducation on quality of life and transitions to long stay care remains unclear.

More recently, in 2015, Llanque et al. [7] described an evaluation of a community-based psychoeducational intervention (six weekly sessions), called The Family Series Workshop, for caregivers of community-dwelling patients with Alzheimer's disease or other

dementias. Caregiver stress, coping, and caregiving competence were assessed along with demographic characteristics of participants. The authors found a significant improvement in caregiving competence and a marginally significant increase in coping with humor. They also found that coping with humor, along with stress, were significant predictors of caregiving competence. Finally, the study indicated that it is possible to increase caregiving competence utilizing a "grassroots" approach and that it is feasible to hold educational group discussions on a plethora of challenging caregiving topics.

Psycho-education starts to emerge in European countries. Unfortunately, according to Rummel-Kluge et al. in a study made in Germany, Austria and Switzerland [8], it is only available in a few centers with a low participation rate. In France, the Alzheimer-plan 2008-2012 [9] includes several measures dedicated to caregivers, like a free teaching programme about helping relations, nonverbal communication and stress control. Recently, a national plan for neurodegenerative diseases 2014-2019 [10] has been created to follow this initiative. Switzerland also has a national strategy about dementia 2014-2017 [11], which includes caregivers support.

In conclusion, psycho-education is a highly valuable tools which can be beneficial to anyone caring for Alzheimer patients and which should be part of the non-pharmaceutical approach in dementia. It can be started at the early stage of the disease with dynamic caregivers, eager for information and advice. Its efficacy is observed at different levels: reduction in the rate of nursing home placement, reduction in psycho-behavioural disorders, reduction in the use of contention, reduction of the burden for caregivers and increase of well-being of carers. Further investigations should be made to establish the most effective program and estimate the cost-benefits ratio.

References

1. Dumont C, Asthana V, Meziani A, Rouviere H, Miceli A (2016) La psycho-education dans la maladie d'Alzheimer. *Neurol Psychiatr Gériatr* 16: 101-106.
2. Van den Berge D, Bosman N, Fery P (2010) New promising caregiver's psychoeducation training program: A Belgian experience in dementing disorders. *Rev Med Brux* 31: 35-43.
3. Livinstone G, Johnston K, Katona C, Paton J, Lyketsos CG (2015) Systemic review of psychological approaches to the management of neuropsychiatric symptoms of dementia. *Am J Psychiatry* 162: 1996-2021.
4. Eloniemi-Sulkava U, Notkola IL, Hentinen M, Kivela SL, Sivenius J, et al. (2001) Effects of supporting community-living demented patients and their caregivers: a randomized trial. *J Am Geriatr Soc* 49: 1282-1287.

Actions	Content
Theoretical training	Clear written and scientific information about Alzheimer's disease.
	Pluridisciplinary information about the other aspects of disease (nutrition, autonomy, social support,...)
Psychological training	Role plays about several situations putting the carer in the patients place to improve the feelings and reactions of their relative
Behavioural training	Training to correct inadequate or undesirable reactions that the relative can have when he faces the patient.
	Help to manage behavioural disorders and to establish strategies in case of crisis.

Table 1: Psycho-educational-like program.

*Corresponding author: Dumont C, Department of Geriatric and Memory Unit, Grand Hospital De Charleroi, Rue Trieu Kaisin 134, 6061 Montigniessur Sambre, Hainaut, Belgium, Tel: 003271109802; E-mail: dumontchristophe@mac.com

Received September 02, 2016; Accepted September 07, 2016; Published September 14, 2016

Citation: Dumont C, Barvaux V, Cornil C (2016) Psycho-Educational Approach in Alzheimer's Disease. *J Alzheimers Dis Parkinsonism* 6: 261. doi: 10.4172/2161-0460.1000261

Copyright: © 2016 Dumont C, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

5. Mittelman MS, Haley WE, Clay OJ, Roth DL (2006) Improving caregiver well-being delays nursing home placement of patients with Alzheimer disease. *Neurology* 67: 1592-1599.
6. Jensen M, Agbata IN, Canavan M, McCarthy G (2015) Effectiveness of educational interventions for informal caregivers of individuals with dementia residing in the community: Systematic review and meta-analysis of randomised controlled trials. *Int J GeriatrPsychiatr* 30: 130-143.
7. Llanque SM, Enriquez M, Cheng AL, Doty L, Brotto MA, et al. (2015) The family series workshop: A community-based psychoeducational intervention. *Am J Alzheimers Dis Other Demen* 30: 573-583.
8. Rummel-Kluge C, Pitschel-Walz G, Kissling W (2008) Psychoeducation in dementia: Results of a survey of all psychiatric institutions in Germany Austria and Switzerland. *Psychiatr Clin Neurosci* 62: 751.
9. <http://www.fondation-alzheimer.org/0-Articles/29-Les-Plan-nationaux%20http://www.plan-alzheimer.gouv.fr>
10. http://www.social-sante.gouv.fr/IMG/pdf/Plan_maladiesneuro_degeneratives_def.pdf
11. http://www.gdk-cds.ch/index.php?id=393&no_cache=1http://www.gdk-cds.ch/fileadmin/docs/public/gdk/themen/strategie%20bundkantone/demenz/bt%20nationale%20demenzstrategie2014-2017%20f.pdf