

CASE STUDY

Vascular Dementia

Characteristics of Vascular Dementia

Average age of occurrence:

Incidence increases with age

Average duration: Dependent on numerous factors

Brain areas affected: Varied, based on location of “strokes”

Key symptoms: Possible memory problems, difficulty concentrating and following instructions, monetary concerns. Physical symptoms include paralysis and difficulty speaking. Reduced abilities to complete activities of daily living. Behaviors can include wandering and crying at inappropriate times.

Interested in information about Arden Courts?

Please contact the community directly or our general information line, 888-478-2410, which is available between the hours of 9 a.m. – 11 p.m. E.S.T. After hours you can also contact us at help@hcr-manorcare.com and a representative will be in touch the next day.

Our Resident’s Story

Bob is a retired pastor who spent his life sharing his faith and ministering to others. Married for 65 years, he and his wife have a large family with six children, thirteen grandchildren, and ten great-grandchildren. Three years ago, Bob’s mental and physical health deteriorated after a series of Transient Ischemic Attacks (TIAs). His neurologist told him that these mini strokes are often a precursor to a large stroke. Bob moved into Arden Courts for his medical and physical needs.

Individual Pursuits

Arden Courts staff reviewed Bob’s lifestyle biography and talked extensively with Bob’s wife. They made sure that Bob always had a Bible on his nightstand within easy reach. Every morning and evening, Bob read a passage from his Bible. Staff members noticed Bob continued to minister to others. He often checked in with other residents, placed a hand on their shoulder to make sure they were OK or offered a kind word. He ended each encounter with a “bless you” and bended his head in prayer before every meal.

Engagement Therapy

Bob found a perfect fit in a Bible study program and small group discussion. When he first arrived at Arden Courts, he would read a Bible passage and expound the message, just like he did for years from the pulpit. As his vascular dementia became more advanced, the staff altered his role in Bible study. They kept him involved by having him read along with a staff member and respond to simple yes/no questions. At meal time, they provided a basket of blessings so he could pull one out to read.

Lifestyle Programming

Increasingly, Bob sits passively without speaking. This decline is hard for his family to witness, yet some part of Bob clings to what’s important. He is a mainstay at the daily devotional time in the community center. He finds comfort in this familiar environment, holding his well-worn Bible and flipping through the pages. His eyes light up during the hymn singing, and he often sings and claps along.

Namaste Care

Due to a loss of balance and coordination, Bob is dependent on a wheelchair. He is considered advanced in his dementia. Once an avid people watcher and observer of his environment, he now becomes fixated and distracted by simple things—a flower, a painting on the wall, or a crumpled newspaper. Namaste Care is beneficial because it helps him to reduce distractions with slow, purposeful strategies. Bob’s wife plans her visits during Namaste because she is able to get his singular attention and converse with him.



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