

Eating well with dementia

practical tips for family carers





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The Alzheimer Society of Ireland has taken great care to ensure the accuracy of the information contained in this booklet. We are not liable for any inaccuracies, errors, omissions or misleading information. If you would like to comment on this booklet, please contact **1800 341 341** or email **helpline@alzheimer.ie**

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About this booklet

This booklet is for family members of people with dementia. Both people with dementia and their families contributed to this booklet. It aims to provide information to support families to:

- Understand how dementia can affect a person's appetite and experience with food
- Meet the nutritional needs of a person with dementia
- Encourage a person with dementia to enjoy and be involved in meal preparation and mealtimes
- Deal with weight loss, weight gain and other issues that can emerge

About dementia

Dementia is the name for a range of conditions that cause damage to the brain. This damage can affect memory, thinking, language and the ability to carry out everyday tasks.

There are many conditions which cause dementia. Alzheimer's is the most common cause. Vascular dementia, Lewy body dementia and Fronto-temporal dementia are other causes.

Sometimes a person may experience a mix of two dementias and this is called mixed dementia. Some people may be diagnosed with dementia and it may not be possible to confirm if it is Alzheimer's or another cause of dementia.

Why is it important for people with dementia to eat well?

Good nutrition is essential for health and well-being. For people living with dementia, getting the correct nutrition through food can sometimes be difficult.

It is important to remember that dementia can affect each person differently. As dementia progresses, changes may develop that can impact eating and drinking. This can lead to under-eating resulting in weight loss, or over-eating, causing weight gain.

It can be upsetting to see someone we care about struggle with eating and drinking and to see weight loss or weight gain. Good practical nutritional advice can help people with dementia manage these challenges and remain strong, healthy and independent for as long as possible.



How can dementia affect diet and nutrition?

Dementia can lead to changes in weight, appetite, sense of taste, smell and thirst, and can result in difficulties in chewing and swallowing. These changes can all have an impact on diet, nutritional intake and quality of life.

Weight loss/weight gain

Some people with dementia simply lose their sense of time and forget to eat, or think they have already eaten as they just don't feel hungry. This can lead to missing out on meals and snacks throughout the day, which can cause gradual weight loss over time.

If someone is living alone, they may find it more difficult to purchase food and prepare meals. They may also forget to eat the food they have, especially if it is not visible and easily accessible.

Dementia affects signals in the brain and this can affect how some people recognise hunger, thirst, smells or fullness. Dementia can also affect a person's ability to recognise food, to use cutlery and, in later stages, to swallow. Over time this may mean a person with dementia may not eat or drink enough to support their needs and well-being.

The opposite may also happen and some people can over eat. They may not remember they have just eaten or they may not recognise they feel full. Some forms of dementia can result in a person craving sweet foods and their insight into what is a healthy amount may be affected. They may choose to have additional meals and snacks, grazing throughout the day and that may contribute to undesirable weight gain.

Food preferences

Dementia can alter food preferences. Changes in the brain can result in some people not recognising certain foods, flavours, smells and textures like they used to. Some people crave sweet, sugary foods or strong spicy foods.

Satisfy these cravings using nutritious foods such as vegetables that are naturally sweet including carrots, turnips, sweet potatoes, parsnips and peppers. Roast with honey for extra sweetness or add sweet sauces such as tomato sauce, redcurrant jelly, cranberry sauce, pickles and chutneys. Enhance flavours with spices, herbs, pepper, garlic, lemon juice, but avoid using too much salt.

The person with dementia may take a dislike to foods they previously enjoyed, and cut them out altogether. Imagine that you have a cold and your taste buds are affected, this can be what it is like for a person with dementia.

It can be helpful to make a list of food preferences, likes and dislikes, to share with other family members or carers, particularly if the person with dementia has difficulty communicating their preferences.





Mood

Some people with dementia can become withdrawn, agitated, distracted or upset about what is happening around them at a particular point in time during the day. This can affect eating, drinking and socialising. Being active before mealtimes, by taking a short walk or just getting outside for a breath of fresh air, can awaken the senses and make mealtimes more enjoyable.

Eating and drinking is integral to many social events, and is often associated with pleasure and happy memories. Certain foods, like childhood favourites can remind us of events in the past, and may act as a prompt to eating. Social interaction can also help stimulate appetite. Try to maintain social connections by sharing food and drink with friends and family for as long as possible.

Communication

Remembering the correct words for certain foods may become more difficult for some people with dementia. Sometimes the words used to describe meals, such as “shepherd’s pie” may not mean anything to the person with dementia, until they see and recognise exactly how it appears.

Traditionally the person with dementia may have preferred to use a specific sauce with a particular meal, but may have forgotten how to communicate this. Picture menu cards can help to communicate food choices, and be used to develop a food preference list. These can be produced at home by sticking pictures of foods onto card.

Old cookery books, magazines, websites and digital photographs can all be used to source the culinary images, and then stored in a photo album or scrapbook.

The Alzheimer Society of Ireland has a factsheet on Communication – **see page 32** for how you can order.

Co-ordination problems

As dementia progresses, eating using cutlery or drinking from a glass can become increasingly difficult due to co-ordination problems. This can make mealtimes more challenging and take the pleasure out of eating and drinking. When co-ordination becomes difficult, using a spoon and finger tips, instead of a full set of cutlery can help. Finger food and food bowls can also be useful.

Hints and tips for finger foods are included in the Q&A section on page 22.



Eating well for people with dementia

Eating a healthy, balanced diet is essential to maintain good health for everyone. Choosing a variety of foods from different food groups can help achieve this balance, and ensure that the body gets all the nutrients that it needs to stay well.

It is important to remember that every person with dementia is different, and the food and nutrition challenges that individuals face will dictate how much of each food group the person may need to eat. For example, if a person with dementia is losing weight, they may need to increase their intake of foods from most of the food groups. If a person with dementia is gaining too much weight, they may need to reduce their intake. More detailed information on weight loss and weight gain in dementia can be found on **pages 28 to 30**.

What are the food groups?

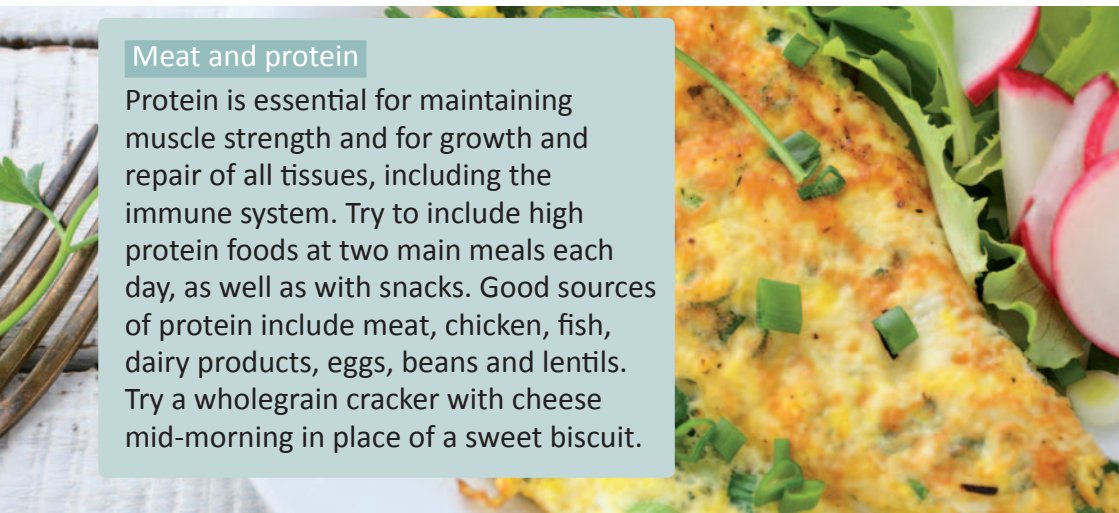
Bread, cereals, pasta, potatoes and rice

Starchy foods are an excellent source of energy. It is important to ensure regular intake throughout the day to keep energy levels up. Some people with dementia can feel increasingly tired as the day progresses, so basing meals on starchy carbohydrates such as bread, potatoes, pasta and rice will help. Where possible, choose wholegrain versions as they are also a good source of fibre.



Meat and protein

Protein is essential for maintaining muscle strength and for growth and repair of all tissues, including the immune system. Try to include high protein foods at two main meals each day, as well as with snacks. Good sources of protein include meat, chicken, fish, dairy products, eggs, beans and lentils. Try a wholegrain cracker with cheese mid-morning in place of a sweet biscuit.



Fruits and vegetables

Fruits and vegetables provide a good source of vitamins, minerals and fibre, which help support the immune system and promote healthy bowel function. Aim for 5 servings a day that can include tinned and frozen, as well as fresh fruit and vegetables. Enjoy a variety of colours and limit fruit juice to unsweetened, just once a day.



Omega 3

Omega 3 is a type of healthy fat. We hear a lot about the role of diet to maintain a healthy heart, and the message is quite similar for a healthy brain. Studies show that certain nutrients, such as omega 3 fats, can help support healthy brain function. Having oily fish, for example, salmon, herring, sardines, mackerel, or tuna twice a week will provide a good intake of omega 3 fats. Fresh, frozen or tinned oily fish will all help. Other foods that can provide omega 3 include vegetable oils, linseed, nuts (walnuts, pecan and pine nuts) and leafy green vegetables, like spinach and broccoli.



Milk and dairy foods

Dairy foods are a rich source of protein and calcium, which are important to support bone strength. Dietary sources include milk, cheese, yoghurt and custard. Try to choose lower fat options unless advised to follow a high energy diet.





Tips to encourage eating

Some people with dementia can struggle to eat enough throughout the day to meet their nutritional requirements. Forgetting to eat, thinking they have already eaten, or struggling to finish a meal can all become more challenging as dementia progresses.

The following pages provide hints and tips to encourage good eating habits and help the person with dementia be as independent as possible.

Keep the table setting simple: A relaxed and calm environment will help the person with dementia to focus on what they are eating, so avoid too much clutter on the table. Keep condiments and sauces to a minimum.

Establish a routine around eating and meal times that works well for everyone. Use prompts to signal that it is time to eat, this could be involving the person with dementia in meal preparation or in setting the table or it could be a prompt such as eating lunch when the news is on.

Company at mealtimes can make them more sociable and enjoyable. Eating with others can encourage a person with dementia to eat, and they can copy actions if a prompt is needed.

Distinguish food from the plate:

Contrasting colours will help identify foods, so use plain plates and cups which are in contrast to the table and stand out. Avoid patterned table cloths and plates. Make food attractive by trying a variety of different colours and shapes as it is important to be tempted by the food that we see.

Familiarity is important: Having the table set in a familiar way helps, and a favourite plate or cup may act as a prompt. Is there a preferred seat at the table? Where possible, stick to established meal patterns according to the individuals preference.

Be flexible around food choices:

People with dementia can sometimes become confused about which items “go together”. They may mix dessert with main courses or add drinks to a main meal. There is no harm done, especially if the food is still eaten.

Allow sufficient time: It may take longer for the person with dementia to finish a meal, so allow sufficient time. Avoid having too much food on a plate at any time, and allow time between courses. Use of plate warmers and insulated cups will help to keep food and drinks warm. Try not to clear plates away until everyone seated at the table is finished, as removing plates can be a signal to stop eating.



Little and often: As people get older, they often prefer to eat smaller meals, more frequently. Instead of 3 main meals a day, try 5 – 6 small snacks distributed throughout the day.

Be flexible to food preferences: Develop a food preference list and remember to adjust as tastes change. Try not to exclude foods too quickly and re-try ones that haven't been tried for a while.

Don't worry about neatness: If the person with dementia is struggling with cutlery, this may result in some spills and mess around the table. Try using non-stick mats or plates with suction cups and a wipe clean table cloth to make cleaning up easier, and encourage the person to feed themselves as much as possible.

Using finger foods: Try including finger foods that can be easily eaten without cutlery. These are ideal for those who have difficulty using cutlery or are restless and like to walk around at mealtimes.

Tips for shopping and cooking

Meal planning and shopping

Planning what to eat a few days in advance will help ensure adequate variety of foods in the diet. Writing a shopping list prior to a supermarket shop will help. We often buy relatively similar foods on a regular basis, so once this shopping list is created, it can form the basis for future shopping trips.

Include some tinned and packet foods in this shopping list to use on those days when you are unable to get out to the shops. Tinned soups, cereals and desserts, such as custard and rice pudding, are all good sources of energy which take little preparation.

For the person with dementia, it is much easier to shop in a familiar supermarket where they are comfortable with the layout. It is also a good idea to sequence the shopping list with the layout of the shop and tick off items so nothing is forgotten. The Alzheimer Society of Ireland have a “dementia card” that can be used to discreetly let others know that the person has dementia and may take a little longer to shop.

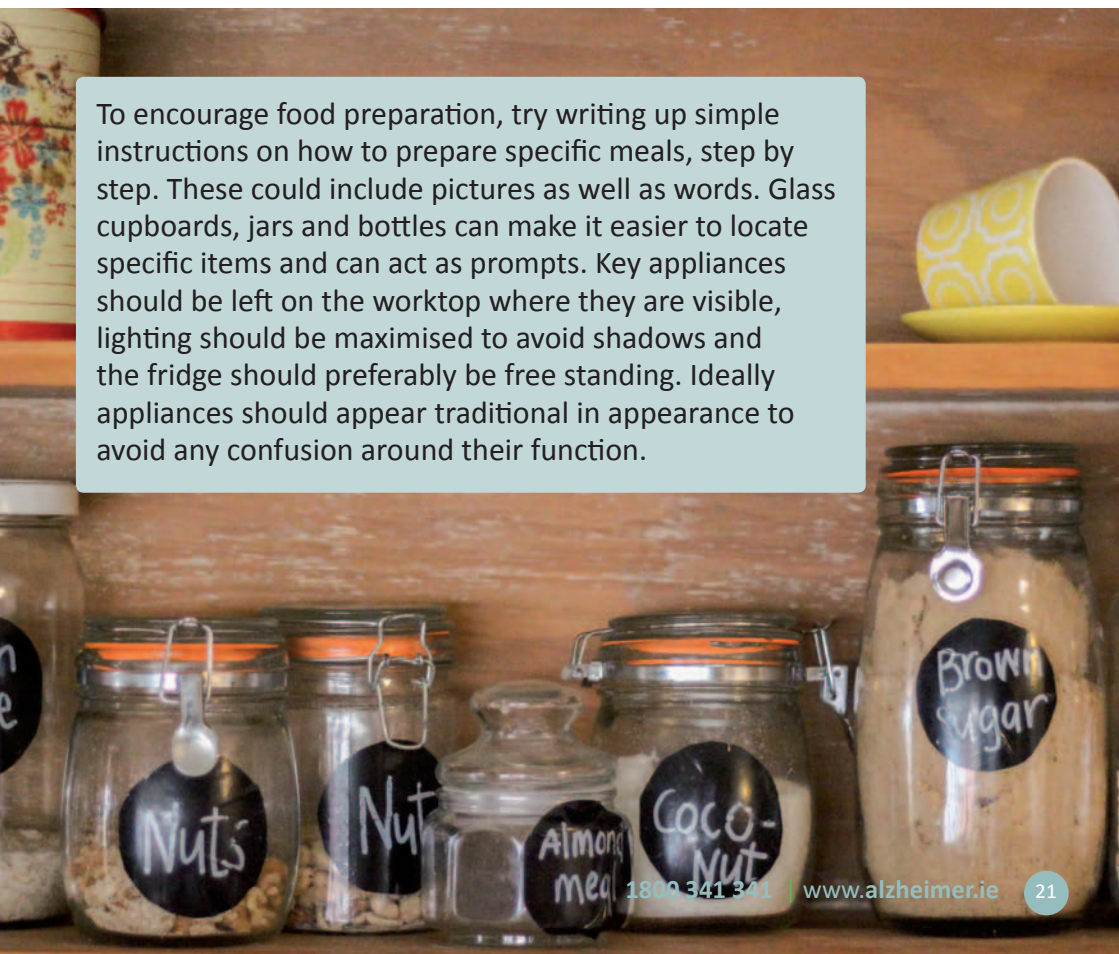


Food preparation and cooking

We often think about mealtimes well in advance of sitting down to eat, and this can start with food preparation which plays an important role in helping stimulate our senses, informing us that food is coming. When we smell food cooking, we start to look forward to eating as our taste buds become stimulated. Getting involved in food preparation will help the person with dementia focus on the meal ahead, increase their appetite and activity levels, and help maintain essential cooking skills for longer.

Some people use a “coded” system to help them find certain foods and cooking equipment. This includes putting sticky notes on cupboards and on the fridge, with lists as to what they contain.

To encourage food preparation, try writing up simple instructions on how to prepare specific meals, step by step. These could include pictures as well as words. Glass cupboards, jars and bottles can make it easier to locate specific items and can act as prompts. Key appliances should be left on the worktop where they are visible, lighting should be maximised to avoid shadows and the fridge should preferably be free standing. Ideally appliances should appear traditional in appearance to avoid any confusion around their function.





Q&A: Tips to manage some specific challenges

Q 1: What happens when the person with dementia is too distracted to eat, pacing a lot, or struggling with cutlery?

Some people with dementia are on the go all the time, sometimes due to agitation and anxiety. This can burn a lot of calories and contribute to weight loss if food intake does not increase too.

Using finger foods can be a good alternative if using cutlery or sitting at the table becomes difficult. Finger food helps the person with dementia to remain in control of what they eat, and may help increase their intake if appetite is poor. If there is a particular place in the house that the person with dementia likes to spend time in, leaving snacks in a bowl or a clear jar may encourage food intake.

It is important to provide variety from all food groups when organising snacks for a person with dementia. Here are some tips for getting started:

- **Milks based drinks**, such as hot chocolate, milky coffees and milkshakes. Try not to make them too hot. For a person in the later stages of dementia, use a non-spill cup with a lid.
- **Sandwiches cut into small squares or triangles.** It's important to get the size right, too small will be hard to pick up, but too big could be off putting if appetite is poor. Try fillings which are a good source of protein such as egg, tuna, ham, chicken, cheese or cheese spreads and peanut butter. Add salad, sweetcorn, peppers, sliced tomato and flavour with mayonnaise, pickles or chutneys.
- **Savoury biscuits**, crackers, slices of warmed pitta bread with hummus, cheese spreads or pate.
- **Toast fingers with cheese spread**, melted cheese, jam or peanut butter.
- **Small slices of cheese, pizza**, quiche, small sausage rolls, cocktail sausages, scampi, fish fingers, fish cakes, chicken goujons, potato croquettes, potato waffles, roast potatoes.
- **Fruit loaf, scones**, pancakes with butter/cream and jam.
- **Small individual cakes** - mini cupcakes or slices of Madeira.
- **Cereal bars** or small biscuits like digestives or fig rolls.
- **Chopped up fruits and vegetables** – carrot sticks, cucumber slices, cherry tomatoes, grapes, chopped apple, chopped banana, orange segments, melon and pineapple chunks. A sprinkle of lemon juice will stop chopped fruit from turning brown, making it more appetising.

Q 2: How does dental care affect the eating habits of a person who has dementia?

Good mouth care is important as it improves the taste of food and the ability to chew and swallow. If the person with dementia wears dentures, their mouth will still need to be cleaned to help prevent infections. A sore mouth or gums and poor fitting dentures can make it more difficult to eat well, and can result in the person with dementia refusing to eat, however they may not be able to communicate this effectively.

The general advice is to brush teeth twice daily with a toothbrush and toothpaste. Pictorial prompts in the bathroom can be a reminder to include tooth brushing as part of daily personal care. If using a toothbrush becomes difficult, try using finger brushes or a child's soft toothbrush, which may be gentler, especially if teeth are sensitive. If you suspect a sore mouth or pain when eating, talk to your dentist and arrange a check up.



Q 3: What can happen when a person with dementia does not drink enough?

Dementia can affect sense of thirst. Some people with dementia do not have the same desire to drink, they may forget to drink or think they have had a drink recently, when they have not. We all need approximately 8 cups (2 litres) of fluid daily to keep the body functioning well. Symptoms of low fluid intake include headaches, loss of concentration and drowsiness, and can contribute to increased risk of infections, increased risk of falls, constipation and the development of an acute confusion state called delirium.

To reach the recommended intake of fluids, drinks should be taken throughout the day. During spells of hot weather or in warm rooms, extra fluids will be required. People with dementia may be prompted to drink by placing a cup in their hand, watching others drinking and by leaving an appealing drink within reach. Visual stimulation is important, as some people may recognise a coloured drink or cup quicker than a clear glass or white cup with water.

Taste preferences are just as important with fluids as they are with food. People with dementia should be offered a variety of drinks that they enjoy. Hot drinks including soups, fruit juices, squashes, ice lollies and fizzy drinks all count and add variety. However, it is important not to serve hot drinks too hot as some people may drink too fast and burn themselves.

Some people with dementia may have additional medical conditions with specific fluid recommendations. If concerned, please check this with the GP or hospital doctor.



Q 4: How do people with dementia develop chewing and swallowing problems?

Chewing and swallowing problems may become more apparent as dementia progresses. This can be due to a lack of recognition for the need to chew and swallow foodstuffs and fluids. If chewing or swallowing does become difficult, ask your GP or hospital doctor for a referral to a Speech and Language Therapist who can assess for swallowing difficulties.

The Speech and Language Therapist can advise on what foods and fluids are safe and if a texture modified diet or thickener is required.



Q 5: Is constipation associated with dementia?

Constipation can be a problem for people who have dementia. Good bowel health is important for reducing the risk of constipation. Constipation, or difficulty emptying the bowel, can lead to agitation, reduced appetite and increased confusion. There are many contributory factors including reduced physical activity, reduced fluid intake and/or insufficient fibre (roughage) in the diet.

The first step in managing constipation is to ensure a person drinks enough fluid and has adequate fibre in their diet. For most people, this means 8 cups (2 litres) of fluid per day. This should be combined with adequate fibre found naturally in fruit, vegetables, wholegrain cereals and wholemeal bread. Fluids and fibre bulk up the stool, making it easier to pass. The tips below provide suggestions for your daily meals and snacks.

Keep a food and drink diary for several days to help you monitor how much a person is drinking and what fibre is in their diet. If constipation persists, and you have tried increasing fluids and fibre, talk to your doctor.

Some tips for reducing the risk of constipation include:


- Aim to have fruits and/or vegetables in all meals and snacks: include salad vegetables in all sandwiches, add vegetables to stews, casseroles, soups and sauces. Fresh, stewed, dried or chopped fruits can be added to desserts, yoghurt and cereal.
- Use digestives, cereal bars and multigrain crackers as snacks between meals.
- Choose wholemeal breads and wholegrain cereals such as porridge, muesli and Weetabix.
- Add lentils, beans or pulses to soups and casseroles. Try beans on toast for lunch.
- Provide drinks throughout the day, offer a variety and make them easy to access. **See page 25** for more information about drinking.

Q 6: What happens if someone with dementia puts on too much weight?

A small amount of weight gain is acceptable, but if it becomes excessive, it is important to talk to your GP or hospital doctor.

The following tips may help:

- Control portion sizes with a smaller plate. There is no need to cut out any particular food group, but make sure every meal includes fruit and/or vegetables to fill up on.
- Avoid high fat and sugary foods, such as processed meats, fried foods, cakes and pastries. Replace with lean meats with visible fat removed, chicken and fish.

A close-up photograph of a white bowl filled with cooked oatmeal. The oatmeal is topped with several slices of ripe banana. A silver spoon is visible on the right side of the bowl. The bowl is placed on a rustic wooden surface.

Choose high fibre starchy options that will provide enough energy throughout the day. For example porridge, wholegrain cereals and wholemeal bread.

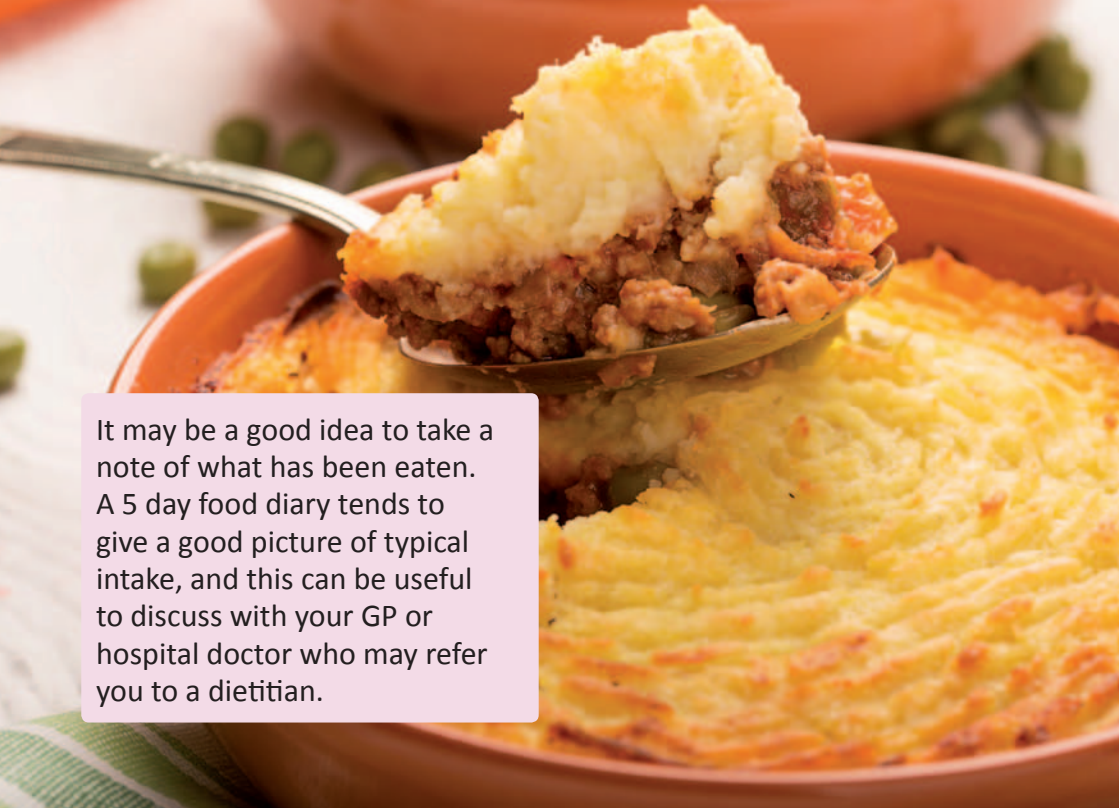
- Keep high calorie foods out of sight and make sure there are plenty of healthier options available, such as low fat yoghurts, rice cakes, vegetable sticks and chopped up fruit. If the person with dementia fancies something sweet, try sugar free jellies, lollies or fizzy drinks/cordials.
- Additional weight gain might be linked to low activity levels. Where possible, encourage more exercise, which can also help with stress levels.

Q 7: What if the person with dementia loses weight?

Despite best efforts, some people with dementia will eat less than their body needs and they will lose weight without trying to. If this persists, the person with dementia can become nutritionally at risk, with loss of muscle strength, reduced resistance to infections and poor wound healing.

The following steps may help to increase nutritional intake:

- Encourage small, frequent meals and snacks every 2 -3 hours.
- Offer foods that are high in calories and protein, for example meat, chicken, oily fish such as salmon and mackerel, eggs, full fat milk and other dairy products, such as cheese and yoghurts.
- Add full fat milk or cream to cereals, porridge, sauces, puddings and drinks.
- Add extra butter, cheese, soft cheese, cream or mayonnaise to potatoes, soups, sauces, or vegetables.
- Add syrup, sugar, jam or honey to puddings, custard, porridge, rice pudding and drinks.
- Offer snacks between meals, including biscuits, chocolate, cakes and ice cream
- Avoid drinks with main meals as this can reduce what is eaten
- Encourage nourishing drinks, such as full fat milk, hot chocolate, Ovaltine, cocoa or milk shakes between meals
- Special nourishing drinks such as Complan are available to purchase in supermarkets and chemists. These powders can be made up using full fat milk to supplement food intake between meals.



It may be a good idea to take a note of what has been eaten. A 5 day food diary tends to give a good picture of typical intake, and this can be useful to discuss with your GP or hospital doctor who may refer you to a dietitian.

Q8: What happens if the person with dementia continues to lose weight?

Sometimes it is not possible to get adequate nutrition from food alone. In these cases, medical nutrition can be prescribed by a GP, hospital doctor or dietitian to supplement nutritional intake. The most commonly used form of medical nutrition are oral nutritional supplements, designed to provide extra energy, protein and micronutrients in a small volume.

The supplements are available on prescription, and come in a variety of flavours and styles, including milkshakes and desserts. If the person with dementia continues to struggle despite following the practical tips in this booklet, please speak to your GP, hospital doctor or dietitian to see if a medical nutrition product is indicated.

About Alzheimer Society of Ireland



THE ALZHEIMER
SOCIETY of IRELAND

The Alzheimer Society of Ireland is the leading dementia specific service provider in Ireland. The Alzheimer Society of Ireland works across the country in the heart of local communities providing dementia specific services and supports and advocating for the rights and needs of all people living with dementia and their carers.

Their vision is an Ireland where no one goes through dementia alone and where policies and services respond appropriately to the person with dementia and their carers, at the times they need support.

The Alzheimer Society of Ireland also operates the Alzheimer National Helpline offering information and support to anyone affected by dementia at **1800 341 341**.

About Nutricia Advanced Medical Nutrition



Nutricia Advanced Medical Nutrition is the market leading provider of medical nutrition products and services in Ireland. Whether managing long term conditions or recovering from illness, the products and services from Nutricia Medical are specially designed to improve health outcomes, making a difference to the lives of people both in hospital and at home.

Further information can be found on our website **www.nutricia.ie** or by calling our Customer Services team on **1800 923 404** or emailing **support.ireland@nutricia.com**.

Useful resources

Nutrition and Dementia - A practical guide when caring for a person with dementia

A comprehensive booklet including sample meal plans.
Available from The Irish Nutrition and Dietetic Institute at **www.indi.ie** or by calling **01 280 4839**.

Eating well for people with dementia - a guide for carers

This booklet is available from the Northern Health and Social Care Trust.

http://www.northerntrust.hscni.net/pdf/Eating_well_with_dementia_leaflet.pdf

Communication and dementia

An ASI factsheet which provides tips to help families communicate with a person with dementia and strategies to support a person with dementia express themselves.

Call **1800 341 341** or visit **www.alzheimer.ie**

Living well with dementia, a guide for family members

An ASI booklet which covers a range of topics to support families following a diagnosis of dementia.

Call **1800 341 341** or visit **www.alzheimer.ie**

Useful contacts

The Alzheimer Society of Ireland

Providing information, advice and a range of dementia specific specialist services such as dementia advisers, social clubs, Alzheimer Cafes, home care and day care throughout Ireland.

Freephone **1800 341 341**

email **helpline@alzheimer.ie**

Visit **www.alzheimer.ie**

Understand Together

A public support, awareness and information campaign led by the HSE working with The Alzheimer Society of Ireland and Genio. The website includes information about supports and services in Ireland.

For more information visit **www.understandtogether.ie**

Health Service Executive

For information about supports such as a speech and language therapist, contact your Local Health Office. Details available at **www.hse.ie** or by calling **1850 241 850**. You can also speak to your doctor or public health nurse about a referral to a speech and language therapist.

The Irish Nutrition and Dietetic Institute

This is the national organisation for nutrition and dietetic professionals. They offer factsheets and information about how to locate a dietitian.

visit **www.indi.ie**



National Helpline: 1800 341 341

Email: helpline@alzheimer.ie

Website: www.alzheimer.ie