

MOOD, DEPRESSION AND BEHAVIOUR

WELCOME!


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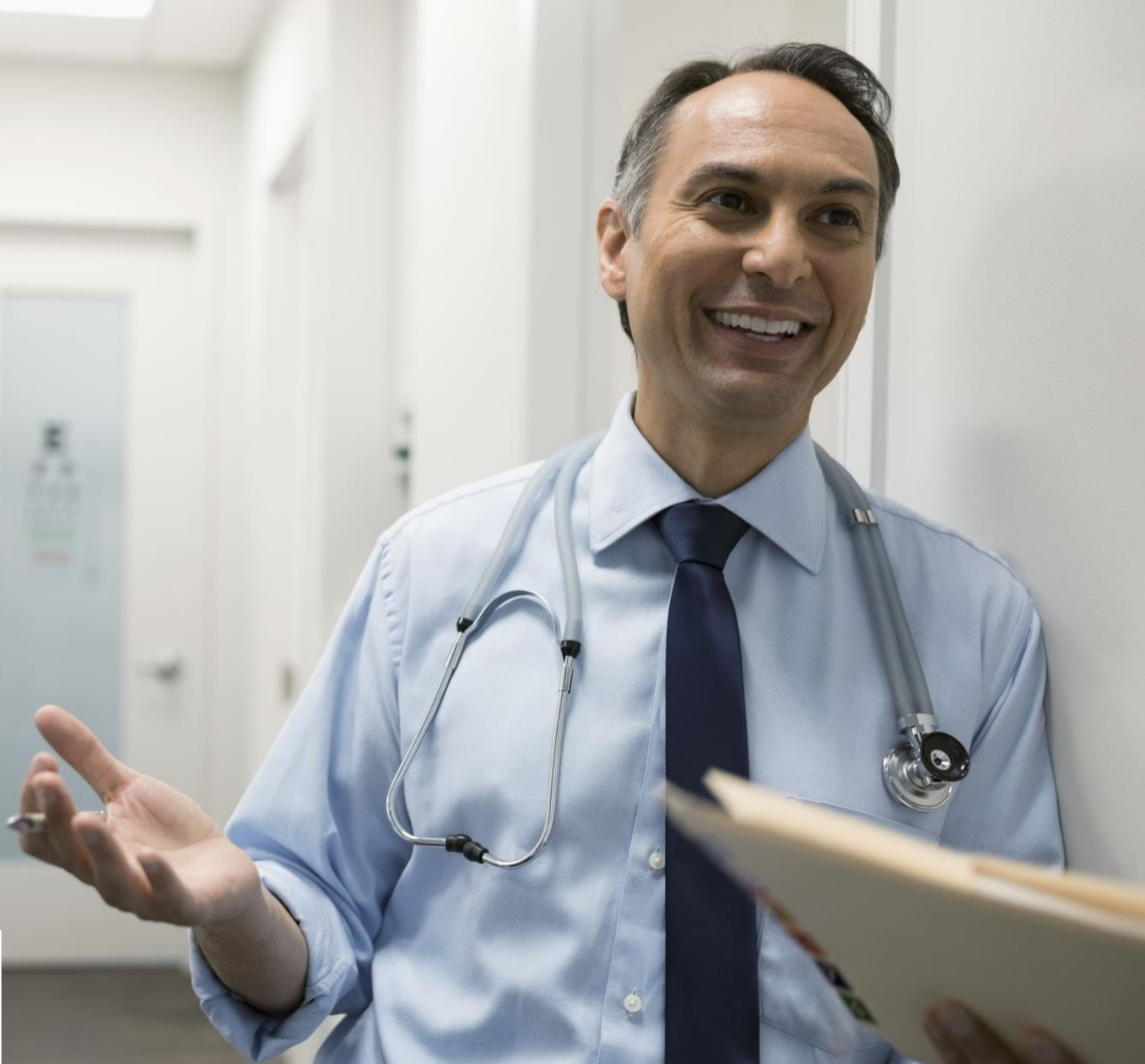
strokenetwork
SOUTHEASTERN ONTARIO

Mood

Tracy Lyn's Story



Effects of Stroke



CHANGES AFTER STROKE MAY INCLUDE DIFFICULTIES WITH...

Spoken Language Balance Coordination

Motor Movements Fine Motor Skills Swallowing

Written language Organizing Planning Coping Abilities

Math skills Vision Perception

Problem solving Bowel Control Bladder Control

Insight Social Abilities Sexual Intimacy Personality

Creativity Alertness Spatial Orientation

Emotions Awareness Behaviour Mood

Sensation Sensory Processing Energy Levels

Fatigue Levels Pain Roles

Feelings May Include

Anxiety

Grief

Guilt

Frustration

Embarrassment

Disappointment

Bitterness

Anger

Isolation

Desperation

Weariness

Sadness

Fear

Feeling Impaired



There is a grieving process.

We need to allow the people we are working with to be able to experience this.

What Can We Do?

Acknowledge the person has been through a large change in their life and feelings are normal

Support them with agreeing they have a right to their feelings

Know that your support will help them through the process as they learn to accept and adapt to their new normal

Mood changes should never be forgotten or glossed over

One important role as caregiver is to be able to determine if normal feelings are changing into depression

DEPRESSION

When it's not just low mood

WHAT IS DEPRESSION?

Depression is different than mood as it a chronic overwhelming sense of loss of interest and despair that interferes with a person's ability to function. Why do we need to worry about the difference?



**DEPRESSION CAN BE
TREATED**

**AND THE SOONER IT IS TREATED
THE BETTER THE OUTCOMES.**

How to tell the difference.....

Clinical depression

- About 10 to 15 percent of people experience clinical depression. About 30 to 50 percent of people who have stroke experience depression.
- The beginning is gradual. People don't really know when or why it started.
- Depression is a medical illness resulting from chemical changes in the brain.
- Depression does not go away without treatment.
- Depression can last months or years.

The “blues” or just feeling sad

- Everyone feels sad sometimes.
- There is a definite beginning. People know when it started and why they feel sad.
- The sad feelings are an emotional response to an event.
- The sad feelings go away without treatment.
- The mood lasts a few days or weeks.

What Should We Be Looking Out For?


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Physical Symptoms

- Changes in sleeping patterns
- Sleeping more or less than usual or having a broken sleep
- Changes in eating habits: Eating more or less than usual, weight loss or gain
- Decreased energy
- Easily fatigued
- Unexplained aches and pains
- Tearfulness



Attitudes

- Not caring about anything
- Loss of interest in things that were previously enjoyed
- Negativity: Feeling that everything is gloomy and dark
- Self-focus on me, myself and I
- Self-loathing
- Difficulty connecting with others, withdrawing from people or activities that they previously enjoyed



Emotions

- Feelings of hopelessness, worthlessness, and guilt
- Sadness and despair
- Anxiety or nervousness
- Irritability or anger
- Thoughts of death and suicide
- Difficulty coping, easily overwhelmed

Mental Functions

- Difficulty concentrating
- Difficulty making decisions
- Feelings of confusion or a sense of living in a fog
- Difficulty remembering things, especially short-term events



WHAT DO WE DO IF WE SUSPECT DEPRESSION???

Things to encourage as caregiver.....

1

Help structure the day

2

Remind that depression is a medical illness

3

Give resources to help

4

Share concerns with team if you have permission (suicidal ideation is different)

5

Be positive

6

Encourage tasks that are relaxing

7

Encourage them to share their feelings

8

Encourage activity and being with people they enjoy

Looking at the Person as a Whole



Self Care

When looking at these tasks we need to consider what is important to the person

Consider what they want to spend their energy on

What do they have the most trouble getting help with and how can we modify to increase independence

Productivity

To a lot of us this means our jobs which may be a long term goal for the people we are working with.

Short term goals can lead towards long term goals.

Consider the productivity components of life in general- the business of living, managing finances, completing advance directives, managing appointments and schedules.



Leisure

Best practice indicates that leisure interests should be addressed.

This is one area that can be so adaptable as leisure interests can vary so much and include so many skill levels.

Activity should be meaningful to the person

Find out why, with who, when, where and what to figure out what makes an activity important to someone



Satisfaction

All of these areas combined lead to life satisfaction.

When we can engage in these areas of function it can lead to feelings of connection, feeling accomplished, general well being, stress reduction, and feelings of control over your own life.

Physical and intellectual stimulation can have a large impact on mood overall.

FINAL THOUGHTS FROM TRACY LYNN

"To me, knowledge is power. By focusing on understanding my body, I am hopeful that this will provide me with more strength to walk down this new path of life."

Behaviour

A few key areas that can impact behaviour...

- Where the stroke was
- How severe the stroke was
- How long ago the stroke occurred
- The person's behaviour, cognitive abilities and personality before the stroke
- Whether or not there was an underlying health issue such as depression and anxiety

Changes.... the good and the bad



- https://www.youtube.com/watch?v=Zs_oFYoP4Kc

OUR ROLE AS CAREGIVERS ... SUPPORT, TRY TO UNDERSTAND AND PROBLEM SOLVE HOW WE CAN HELP.

Emotional Lability

What to do?

- ▶ Ask the person if what you are seeing is matching how they are feeling
- ▶ Explanation of emotional lability being common and not exclusive to them
- ▶ Distraction

Social Awareness

- Avoid situations that are beyond the person's abilities
- Give feedback and cues to assist in recognizing inappropriate behaviour and suggest alternatives however do not criticize
- Discuss social expectations before the situation
- Recognize appropriate actions





Apathy

Involve the person in their care

Learn what brings joy to the person

Encourage participation and break down barriers

Be on the look out for depression

Make it easy to participate in activity

Encourage however don't force

Learn person's interests

Talk about memories



Anger and Aggression


- Be a detective and look for the underlying causes- when you know the reason you can help to find solutions
- If you identify a trigger avoid it if possible-i.e. crowds are overwhelming, pain needs to be controlled
- Offer support if the person is trying to complete a task that is frustrating for them
- Explain what you are doing and what is happening when providing care
- Redirect to something else- taking the person away from the current situation or drawing attention to something else

Sometimes it is all about YOU.....

- ▶ Remember the behaviour is not intentional
- ▶ Good communication can de-escalate a situation
- ▶ Decrease the noise in the environment
- ▶ Offer their glasses and other communication devices
- ▶ Be aware of your own demeanour
- ▶ Avoid confrontational approaches



***ARE THERE BEHAVIOURS THAT YOU SEE IN
YOUR AREAS OF CARE THAT WE CAN TALK
ABOUT AND TRY TO PROBLEM SOLVE THE
REASON FOR IT????***



The take
away.....

Needs are
trying to be
expressed
through
behaviours.

Kudos to the Caregivers!

- Everyday tasks change for the patient and the caregiver.
- There becomes a new normal.
- What feelings can the caregiver experience?



Feelings May Include

Anxiety

Grief

Guilt

Frustration

Embarrassment

Disappointment

Bitterness

Anger

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Desperation

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All the THINGS!

Roles may change which might lead to a lot of extra things that need to be done by the caregiver.

Dressing

Housecleaning

Cooking

Laundry

Groceries

Toileting

Yard Work

Animal Care

Driving

Finances

Grooming

Social Commitments

Garbage

Making Money

Feeding

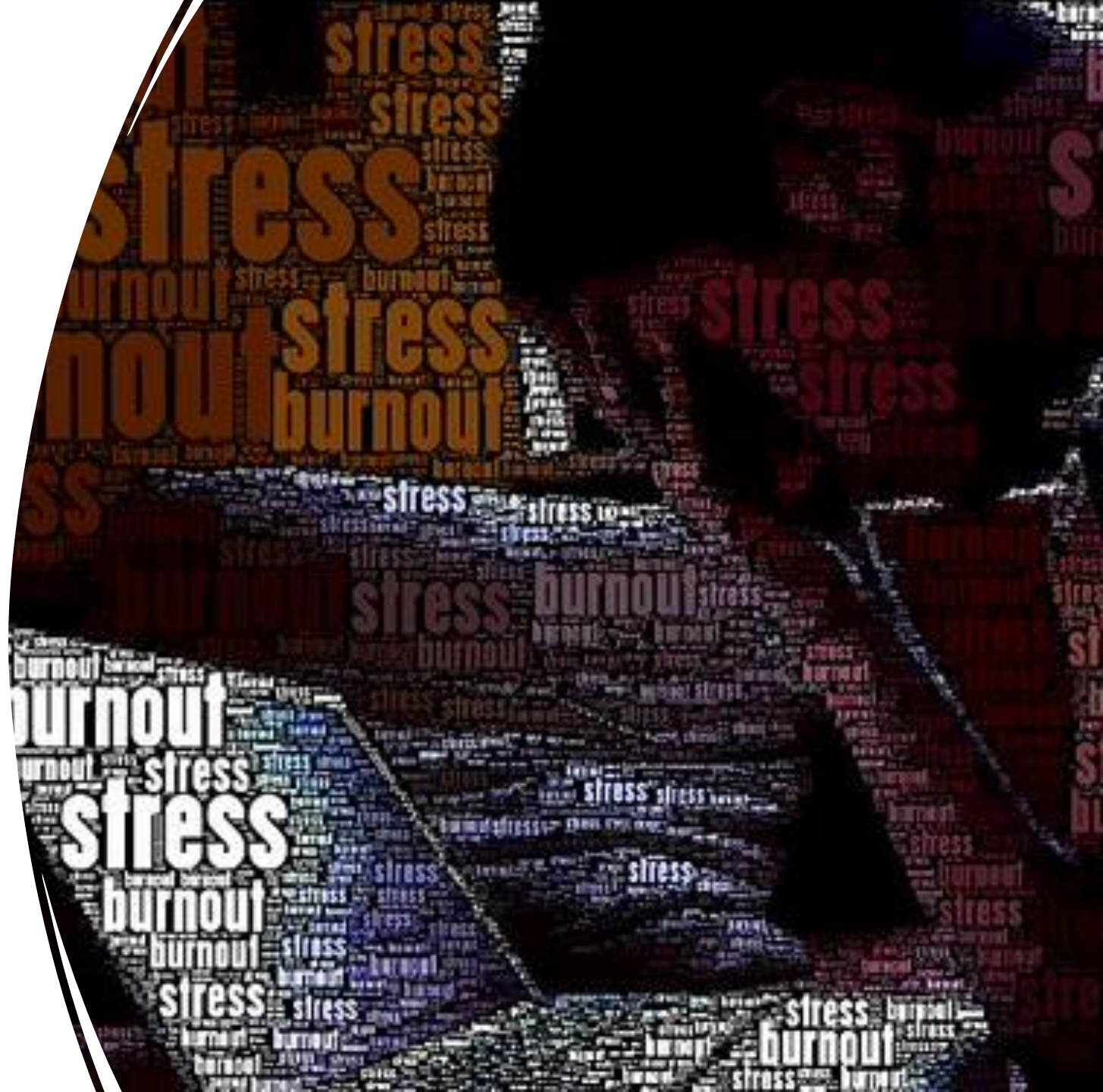
Child Care

Medications

Managing medical appointments

Consider the Following:

- Physical Stress
- Mental Stress
- Social Changes
- Emotional Stress





How Can We Help?

- Acknowledge the change
- Ask how they are doing
- Encourage them in the work they are doing
- Educate them and involve them in the work you are doing
- Encourage their own self care and respite
- Make referrals when needed
- Communicate well
- Screen how they are coping



QUESTIONS?
THANKYOU!