



**Isle of Man
Government**

Reilhtys Ellan Vannin

Department of Health and Social Care

Rhëynn Slaynt as Kiarail y Theay

Nutrition and Cognitive Impairment

Information for Family, Friends and Carers

Cognitive impairment is present in a number of neurological disorders. They can be progressive and severe. They include, but are not limited to; Dementia, Parkinson's disease, some learning disabilities and acquired brain injury. The most common types of dementia are; Alzheimer's disease, Vascular dementia and Lewy body dementia. Dementias all share a gradual decline in a persons memory, understanding, reasoning and communication.

Changes in eating habits and behaviours can result in malnutrition, which is common with dementia and other neurological impairments. The relationship with food, appetite and the mechanical process of eating can become altered.

Other health problems can affect dietary intake. So ensure these are also addressed:

- **Poor dentition:** painful gums, ill-fitting dentures and rotting teeth can affect dietary intake. Consult a dentist
- **Poor sight:** can affect ability to cook and feed one's self. Consult an optician
- **Constipation or diarrhoea:** consult a GP
- **Medication side effects** consult a GP or pharmacist
- **Difficulty holding plates or cutlery:** adapted utensils can be useful, consult an occupational therapist

Encourage foods high in energy and protein

If you notice that oral intake has declined resulting in weight loss traditional healthy eating principles need not apply.

You should review the **Food First leaflet** on the IoM Government Nutrition and Dietetics webpage.

Advice includes

- Using toppers to meals to add extra calories and protein such as cream, butter, sugar, peanut butter, hummus, grated cheese and jam
- Offering additional snacks or finger foods such as cake, biscuits, sausage rolls, pork pies, crumpets and cockatiel sausages
- Aiming for smaller more frequent meals
- Using fortified milk in cups of tea and coffee and in desserts, sauces and on cereal.



Each person should be treated as an individual. As a friend, family member or carer it is likely you will know them best. Have a look at the following and see if any apply.

Tips to encourage eating and drinking

- Ensure glasses, hearing aids and dentures are being worn before starting mealtimes.
- Lifelong food habits may change. People may choose to have larger or small portions than before, or they may start liking new foods. Don't be afraid to try new things. Smaller or large plates may be required.
- Insulated plates can be helpful at mealtimes. Some people's eating habits can slow down due to distractions, swallowing problems or a change in eating behaviour. Being able to keep the food warm will make a difference to how much of the meal they will finish.
- Brightly coloured plates can help people identify that there is food on the plate. Neurological impairment can often affect the ability to differentiate between objects, like seeing white mashed potatoes on a white plate. Just avoid any confusing patterns, as this can be distracting.
- Eating should take place in a relaxed, calm and familiar environment without excessive distractions such as a loud TV or radio.
- Avoid distracting objects or patterns such as brightly patterned tablecloths or ornaments on the meal table.
- Try the "watch me" technique. This involves holding the spoon, fork or cup and showing the person what to do. They may copy you.
- Attempts to eat non-food items can occur due to confusion. If this

becomes a regular habit ensure finger food is available as a replacement snack.

- Make mealtimes an activity. Include the person in setting the table, talk about the food on offer or memories of mealtimes.
- Ensure the person has been to the toilet before the meal starts. This ensures no avoidable interruptions during the meal and gives them an opportunity to wash their hands before eating.
- Only provide one course at a time. If someone requires more time to eat keep the dessert warm or cool until they are ready. Rushing someone will not encourage them to eat more.
- Some people with dementia can be agitated if required to sit for long periods. The use of finger foods, they can eat on the go, can be useful.
- Many Dementia sufferers lose the ability to gauge temperature of foods. Always check foods and drinks before serving to avoid scalds and burns.

Nutrition in the end stage of life

As dementia and other neurological conditions advance, quality of life is the priority rather than nutritional adequacy. People will often start to eat less and less as they experience the dying process. Gradually more help will be required to eat. It is important to follow the person's cues in regards to amounts taken and choice of food. Try not to get anxious or frustrated about eating and drinking. There may come a time when food and drink are refused. This is part of the natural dying process. Often this does not cause any distress or discomfort to the individual.