

# Managing Wandering Behaviour in Dementia



The Geriatric Medicine service provides inpatient and outpatient specialist care to older persons aged 75 years and above. Specialist assessment and individualised holistic management are offered to elderly with bladder and bowel-control problems, memory, mood and behavioural problems and multiple falls or difficulty walking. Patients are cared for by a multi-disciplinary team comprising doctors, nurses, physiotherapists, occupational therapists, speech therapists, dietitians, pharmacists, podiatrists and medical social workers, where necessary.

# What is Wandering Behaviour in Dementia?

- At some point during the course of their disease, people with dementia may wander or try to leave their home without a companion, a behaviour known as “exit-seeking”.
- More than 50% of people with dementia wander during the course of their disease.
- It is one of the more challenging dementia-related behaviour for caregivers.
- It appears aimless but often has a purpose.

## Pros and Cons of Wandering Behaviour

### Pros:

- Social contact
- Exercise
- Stimulation



## Cons:

- Accident, fall, injury, and death
- Getting lost
- Fatigue/exhaustion
- Malnutrition, i.e. not sitting down for meals, increase in calorie requirement
- Sleep disturbance
- Social isolation
- Earlier institutionalisation



## Reasons for Wandering Behaviour

### 1. They may wander in response to an unmet basic need such as:

- Loneliness, lack of human contact
- Inactivity/boredom
- Loss of personal possessions and mementos
- Where they are is uncomfortable or unfamiliar to them e.g. noisy or confusing environment
- They are not getting a good night's rest and confusing night with day



- Hunger, thirst or need to use the toilet
- They are experiencing some form of distress like pain, uncomfortable clothes, excessive heat, etc

## **2. Some may wander to relive past routines or behaviours they were familiar with in the past.**

# **Manage Wandering Behaviour**

## **1. Identify the antecedent**

- Assess for the presence of illness, pain or discomfort
- Check if the person feels lost, abandoned or disoriented
- Look for a pattern and reason behind the wandering; keep a record of it e.g. when does it happen and is it related to certain situations or triggers

## **2. Ensure safety**

- Supervise or assist the person with dementia to walk, especially those without steady gait
- Place night lights around the house
- Remove obstacles in the environment
- Use visual exit barriers
- Disguise the door
- Put a 'stop' or 'no exit' sign
- Never lock the person with dementia at home or in the car alone
- Secure all toxic substances, sharp objects and medications



### 3. Distraction

- Distract the person by offering snacks or suggesting another activity that is simple and familiar to him/her.
- Plan daily activities and exercises routinely to avoid under-stimulation, anxiety, restlessness or agitation.
- Such activities can be based on interest and what it means to the person and can include music, art, physical exercise, cognitive stimulation, therapeutic touch, pets, gardening, etc.



### 4. Other interventions

- If they are unwilling to go home or back to their room, walk with them until they are willing to be led back i.e. when they feel tired.
- Ensure the environment is comfortable and not too hot/cold or noisy/quiet.
- Avoid busy places that can be confusing and cause disorientation e.g. shopping malls.
- Place familiar objects and mementos around the rooms.
- Limit any objects that may trigger wandering behaviour, e.g. house keys or wallet.

## 5. Facilitate safe return

- Always keep a recent photograph of the person with dementia.
- Apply for a Safe Return Card from the Alzheimer's Disease Association.
- In case he/she goes missing, keep calm and make a thorough search of the house or the places he/she frequents. Have someone stay at home to answer the phone or wait for the person.
- If the person cannot be found even after a search, contact the police immediately.



## For more information

### Ng Teng Fong General Hospital and Jurong Community Hospital

1 Jurong East St 21, Singapore 609606

[www.ntfgh.com.sg](http://www.ntfgh.com.sg) | [www.jch.com.sg](http://www.jch.com.sg)

### Clinic opening hours

Monday – Friday: 8.30am – 5.30pm

Saturday: 8.30am – 12.30pm (Selected clinics only\*)

Dental Clinic: Monday – Thursday: 8.00am – 5.30pm, Friday: 8.00am – 5.00pm

\*Please refer to our websites for more details.

### General enquiries & appointments

General enquiries line: 6908 2222 (24-hr)

Fax: 6716 5500 | Email: [contactus@nuhs.edu.sg](mailto:contactus@nuhs.edu.sg)

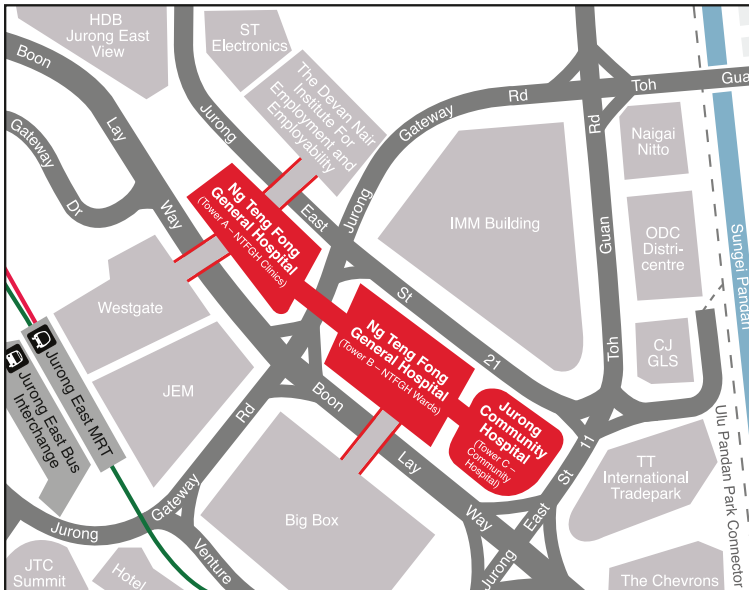
Appointment line: 6908 2222 (Monday – Friday: 8.00am – 5.30pm, Saturday: 8.00am – 12.30pm)

Fax: 6716 2200 | Email: [appointment@nuhs.edu.sg](mailto:appointment@nuhs.edu.sg)

Dental appointment line: 6716 2233 (Monday – Friday: 8.00am – 5.30pm)

Fax: 6716 2200 | Email: [JHCampus\\_Dental@nuhs.edu.sg](mailto:JHCampus_Dental@nuhs.edu.sg)

## Getting there



### By train

Alight at Jurong East MRT Station

### By bus

#### Jurong East Bus Interchange

41, 49, 51, 52, 66, 66B, 78, 78A, 79, 79A, 97, 97E, 98, 98M, 105, 143, 143M, 160, 160A, 160M, 183, 183B, 197, 333, 334, 335, 506

#### Along Boon Lay Way

49, 99, 333, Private bus service 625, 990

### Disclaimer:

The information in this brochure is meant for educational purposes and should not be used as a substitute for medical diagnosis or treatment. Please seek your doctor's advice before starting any treatment or if you have any questions related to your health, physical fitness or medical condition. Information is accurate at the time of printing.