

Eating Well with Dementia

A carers' guide



This guide provides practical, everyday eating and drinking advice for people caring for a relative or friend with dementia.

The guidance is evidence-based and written by a registered dietitian. It does not substitute or replace personalised advice provided by your healthcare team. Speak to your dietitian, doctor, nurse or allied health professional (occupational therapist, physiotherapist, podiatrist or speech and language therapist) for further advice on diet, nutrition or related cultural/social health matters.

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Introduction

Eating, drinking and related activities such as shopping and cooking are a normal part of daily life. They can play an important role in structuring our day, forming and recalling memories.

Food and drink also play an important role in maintaining health and well-being. They provide vital nutrition and are important in social activities and celebrations such as birthdays, religious festivals or holidays. Developing dementia should not exclude people from these – some activities may become more difficult, but being creative can help people stay involved.



Common Eating and Drinking Challenges

Dementia influences people's lives differently – not everyone will experience the same changes. This is also true for eating and drinking. People with dementia may find eating difficult and/or change their eating habits and preferences. This can be distressing for the person with dementia and for those caring for them.

For further dietary advice, ask your GP to refer you to a dietitian. Contact your GP immediately if you notice a person with dementia is losing weight.



Challenges can occur because:

- People with dementia may have reduced or limited feelings of hunger and/or thirst. They may:
 - forget to eat or drink
 - feel that they have already eaten or had something to drink
 - overeat because they have forgotten that they have already eaten.
- Preferences and habits may change.
 - People with dementia may start to enjoy and/or prefer sweet or spicy foods, when they didn't before.
 - People with dementia may prefer routines and like to have fixed mealtimes and food choices.
- Recognising, preparing/cooking food and using cutlery may become difficult.
- Chewing or swallowing may become difficult.

If chewing or swallowing becomes difficult, ask your GP to refer the person you care for to a speech and language therapist. They will assess and advise you on the best food and fluid consistency for the person with dementia.

Read on for information to help address and overcome these challenges.

Preparing for a Meal

Small changes can help to make mealtimes more enjoyable and less stressful. These changes can also help to improve nutritional intake.

- Try to remain as relaxed as possible around mealtimes. Communicate calmly using your tone of voice and gestures to provide support.
- Make meals an activity. Try to set the scene for a meal and encourage the person with dementia to get involved in its preparation. Tips include:
 - encourage them to set the table
 - talk about cooking smells, favourite foods, memorable meals or recipes
 - show the person with dementia the food and let them smell it to aid recognition.
- Ask if the person needs to go to the toilet before meals.
- If the person with dementia wears glasses, a hearing aid or dentures, make sure that they wear these for the meal.
- If the person with dementia is struggling to grip standard cutlery or cups, try adapted versions with wide or chunky handles.
- If additional time is needed to complete meals:
 - provide one course at a time
 - try using a plate warmer to help keep food warm. These can be purchased in pharmacies or online.

- To make food easier to see:
 - use plain plates in a colour that contrasts with the food and the table. Try to use primary colours (red, yellow and blue) as these are recognised for longer as dementia progresses
 - try to keep the room brightly lit.



- Keep the table setting simple:
 - only have a few condiments to keep focus on the food on the plate
 - avoid distracting decorations such as vases or patterned table coverings.
- Try to make mealtimes a shared activity. Eating together, indicates that it is time to eat, and can help the person with dementia see how and what to eat.

Eating Habits

What if food favourites change?

People with dementia often experience changes in their food preferences. The dementia can change how flavours are recognised. Taste and sense of smell also changes naturally with age. People may enjoy or even prefer strong or spicy foods that they used to dislike. Foods that may now be enjoyed include lasagne, curry, chilli or pizza.

- Keep an open mind:
 - don't exclude any food and try a wide variety until you find what the person enjoys now
 - childhood favourites that link to older memories may be appreciated
 - try to keep a list of current preferences and re-try foods from time to time.
- Try adding spices, herbs, onion, garlic, chilli, pepper, lemon juice or Worcestershire sauce to enhance flavours.
- Avoid adding extra salt, especially if the person has vascular dementia as this can influence blood pressure.
- Offer table sauces, chutney, pickles and relishes, vinegar, mustard, salad dressings or tomato ketchup, as appropriate.
- Try to keep the table setting simple and don't clutter it with bottles and jars.

What if sweet foods are preferred?

It can be difficult to encourage healthy food choices when a person only wants to eat sweet foods. However, with a little planning, sweet and sweetened foods can provide the nutrition needed.

- Try naturally sweet vegetables such as carrots, sweetcorn, turnip, sweet potato, peppers or peas. Vegetables provide a wide range of vitamins and fibre essential for good health. Add a drizzle of honey for extra sweetness before serving.



- Try adding a little sugar to mince, stew or potatoes. If weight gain is a problem, try a granulated sweetener instead.
- Use sweet and sour sauce or serve food with sweet sauces, pickles or chutneys such as apple, redcurrant, cranberry, sweet chilli, ketchup.
- Encourage milk-based pudding because these are a good source of protein, energy and calcium. Try:
 - custard and stewed fruit, rice pudding, mousse, trifle, whipped desserts, ice-cream, crème brûlée, crème caramel, evaporated milk or cream with canned or fresh fruit
 - adding a small amount of maple or golden syrup, jam or honey to increase the sweetness of fruit or puddings, if needed.

What if unusual combinations of food and fluid are being mixed together?

People with dementia may be unsure which items go together. They may like to have their dessert first, mix it with their main meal or add drinks to savoury meals. This will cause no harm, so accept unusual combinations.

If meals and/or drinks are being mixed, serve one course at a time. Avoid putting several plates on the table as this can be confusing. Offer drinks after, instead of with, the meal. Alternatively, offer small amounts during the meal and a full drink afterwards.

What if food is being spilled at meals?

- Try using wipe clean table mats and coverings and allow the person to eat as they wish, even if this looks messy. Make sure that the table and chairs are at a suitable and comfortable height and use a napkin to protect clothing from spillages, whilst maintaining dignity.
- Encourage the person to eat independently. Although it may be difficult, try not to comment on the way they are eating as this could be upsetting. Giving verbal support by prompting to start or continue eating is helpful.
- If using cutlery is difficult, try to prepare favourite foods that are easy to eat with a spoon such as casseroles, or offer finger foods instead (see 'Finger foods and nourishing drinks' for suggestions).
- Try using a lipped or high rimmed plate. This will allow food to move around easily without being spilt.

What if completing meals is difficult?

- Allow extra time for meals as needed.
- Try placing cutlery or a cup in the person's dominant hand. As the dementia progresses it may be necessary to provide assistance with eating.
- Prompting offers support and helps to maintain dignity and independence for as long as possible. Useful phrases include:
 - *"How's your tea?"* to encourage the person to drink
 - *"Have you nearly finished?"* to encourage the person to continue to eat.
- Serve one small course at a time. This will help to keep food warm and avoid confusion. Extra portions can always be served.
 - Consider offering 5-6 small snacks during the day rather than 3 main meals.
 - Try using a plate warmer or insulated cup to keep food and drink warm for longer.
- Don't worry if food is refused. Simply offer something again in 30 minutes to an hour. If food refusal continues, seek further advice from your GP as this may indicate other issues.
- When eating with others, avoid removing plates until everyone is finished. Removing plates early can be seen as a signal to stop eating.



What if sitting during meals is a problem?

If sitting down for long is difficult, completing a plated meal can be challenging. Agitation also burns extra energy and can contribute to weight loss.

- Leave snacks along the route that the person walks or place foods in their hand to prompt them. Try a variety of finger foods, but always remember to remove any uneaten food to avoid spoilage (see 'Finger foods and nourishing drinks' for suggestions).
- Encourage high-energy foods (see 'Adding extra energy and protein').
- Try changing the environment to see what helps, for example:
 - limit distractions by turning off the television or radio
 - provide background noise such as soothing music.
- If you notice that there are times in the day when the person is more settled, consider changing mealtimes or offer additional snacks at these times.



Adding Extra Energy and Protein

It is important that people have enough energy and protein for good health. If someone only eats small amounts, this can be a challenge. Changing the type of food and how it is offered can help.

Offer 5-6 smaller meals and snacks rather than 3 larger meals per day. Try to encourage food at times in the day where you notice the person with dementia eats better – some people eat best in the morning while others eat better as the day goes on.

Use the suggestions below* to add energy and protein to foods without increasing their volume.

- Use full-fat or fortified milk in cereals, sauces, puddings and drinks.
Fortify milk by adding two tablespoons of any milk powder and use as normal on cereal, in sauces and drinks.
- Add extra butter, polyunsaturated or monounsaturated spreads, grated cheese (including lower-fat varieties such as Edam), soft cheese, mayonnaise or cream to potatoes, soups, sauces or vegetables.
- Add extra sugar, syrup or fortified milk to puddings, or hot drinks.
- Add a teaspoon of jam, syrup or honey to porridge, custard, rice pudding or semolina.
- Spread jam, honey, marmalade and butter or margarine thickly on bread, toast, scones, crumpets and pancakes.

*People with vascular dementia and/or other health conditions such as diabetes, stroke or heart disease may need personalised dietary advice. Ask your dietitian how to appropriately increase energy and protein with less saturated fat and/or sugar.

Finger foods and nourishing drinks

Finger foods and nourishing drinks can be a good alternative to plated meals if cutlery becomes difficult to use, or the person is always on the move.

Try the suggestions below.

- Milk-based drinks such as hot chocolate, malted drinks, milkshakes or milk-based coffee.
- Be careful with hot drinks. Do not overfill cups and use an insulated cup with a lid to reduce the risk of injury for a person who paces a lot.
- Fresh fruit juices such as orange, apple or pineapple. These are also a good source of vitamins and minerals, especially vitamins C. Some diluted blackcurrant drinks are also fortified with vitamin C and can be useful.
- Sandwiches cut into small squares, triangles or rolled into a sausage shape. Try a range of breads including pitta, tortilla wraps, naan, chapatti or roti. Suitable fillings include:
 - egg mayonnaise
 - tuna mayonnaise – try adding sweetcorn, peppers or diced cucumber
 - meat or fish paste
 - corned beef – try adding chopped tomato or onion
 - cold meats – try adding relishes, pickles or chutneys
 - cheese or cheese spreads
 - peanut butter – try with mashed banana.



- Small savoury biscuits, crackers or mini oatcakes with hummus, spreading cheese, meat/fish paste or pâté.
- Scones with butter, jam, or jam and cream.
- Teacakes with butter.
- Crumpets with honey, jam, syrup or butter.
- Fruit or chocolate muffins or cereal bars.
- Fruit or malted loaf with butter.
- Gingerbread, individual small cakes or slices.
- Pieces of fruit or vegetables such as sticks of carrot, slices of cucumber, cherry tomatoes, pineapple chunks, chunks of banana, berries, or mandarin segments.
- Toast fingers with cheese spread or toasted cheese, mashed or sliced boiled egg, jam, marmalade, pâté, meat paste, peanut butter or yeast extract spreads.
- Slices of pizza, quiche or garlic bread.
- Small sausage rolls, cooked chicken pieces, cocktail sausages or meatballs.
- Samosas, pakoras or spring rolls.
- Fish fingers, scampi pieces or fish cakes.
- Cut pieces of potato waffle, potato croquettes, chips, roast or boiled potatoes.



Overeating

Weight can be difficult to control when a person forgets that they have already had a meal. Being told you have already eaten can be distressing, and it can be challenging to tell someone that they have already eaten.

The following tips can help.

- Try dividing the original meal into two smaller portions – when food is requested the second time, give the second portion.
- Only serve a small portion of protein (fish, meat, poultry or vegetarian alternative) and starchy carbohydrate foods (potatoes, rice, pasta or bread). Fill most of the plate with salad or vegetables.
- Offer snacks such as fruit or light yoghurt as an alternative to an extra meal.
- Make ice-lollies with sugar-free or diet drinks. Offer these as a snack or a second dessert.
- If a meal has already been eaten, offer a drink instead. Try lower-calorie drinks such as tea or coffee (with sweetener instead of sugar), diet, sugar-free or reduced-sugar fizzy drinks, flavoured water or diluted drinks, or water.



What if Constipation is a Problem?

Good bowel health is important because constipation can reduce appetite, and increase confusion and agitation. High-fibre foods help to bulk-up stools, which makes them softer and easier to pass. However, avoid powdered bran as this can reduce the absorption of important minerals such as iron.

Useful suggestions are listed below.

- Include extra fruit and vegetables in meals or as snacks. Try a side salad, diced or puréed vegetables in savoury sauces or dishes. Fresh, stewed, dried or chopped fruit is great on its own, with cereal, in desserts or as a juice.
- Have snacks that contain fibre such as a handful of dried fruit, cereal bars, digestive/oat biscuits or multigrain/seeded crackers.



- Use wholemeal bread and cereals such as Weetabix, Shreddies, Just Right, muesli or porridge.
- Have soup that contains beans and pulses such as broth or lentil.

If fibre is being increased, do so gradually to avoid discomfort and excess wind. Fluid intake should also be increased. Aim for at least 6-8 cups (1½-2 litres or 4 pints) of fluid a day. This will help to make stools easier to pass.

If constipation persists, ask your GP for further guidance.

What if Fluids are a Problem?

In general, 6-8 cups (1½-2 litres or 4 pints) of fluid should be included every day to keep well hydrated. On hot days, when sitting in centrally heated areas or if there is an infection present, try to encourage an extra 1-2 cups. Poor hydration can contribute to constipation, increase feelings of tiredness, increase risk of urinary infections, reduce concentration and add to confusion.

The list below provides suggestions to help.

- Offer small amounts frequently – about ½ or ¾ of a cup at a time.
- Vary fluids to keep interest. All fluids count, try:
 - soup, hot drinks, fruit juices, cordials, diluted or fizzy drinks and water
 - flavoured ice lollies or ice cubes made with juices.
- Make sure that the person is comfortable and sitting upright, if possible.
- If someone has a familiar or preferred cup, use it.
- If needed, prompt them to drink by:
 - placing the cup in their hand
 - offering a sip from a spoon to encourage drinking from a cup.
- If you are unable to prompt the person to take fluids, make a jug or bottle of juice and place it within view. Try to use a clear plastic jug or bottle so that the fluid can be seen. If other family, friends or care services are visiting, this can be prepared in advance and placed in the fridge.
- Try offering drinks in a social setting to increase intake, for example a cup of tea with friends.

Mouth Care

Good mouth care is important. It will help to improve taste from food, avoid infections and encourage gum and dental health. Ensure the person with dementia's teeth and mouth (gums and tongue) are clean.

- Brush teeth with fluoride toothpaste twice a day for at least two minutes to help keep teeth and mouth healthy.
- Clean dentures (false teeth) thoroughly twice a day, and after eating when necessary.
- If strong mint flavours aren't enjoyed, try milder or fruit-flavoured varieties.
- If bristles cause irritation, try soft bristled or "finger" brushes.

Ask your dentist or pharmacist for more information if needed.



Remember

1. Always follow any personalised guidance provided by your health care team.
2. Eating and drinking is important for *everyone's* health and well-being.
3. Make mealtimes a shared activity.
4. Stay open-minded about food choices and try to provide healthy versions of favourite foods.
5. Keep table settings simple and use adapted cutlery, plain coloured plates and plate warmers as needed.
6. If someone only eats small amounts, provide 5-6 small meals or snacks a day, adding extra nourishment if required.
7. If someone is overeating, try to reduce portion sizes and offer lower-calorie snacks.
8. Make sure the person with dementia is hydrated. Aim for at least 6-8 cups (1½-2 litres or 4 pints) of fluid a day.
9. Keep the person with dementia's mouth healthy by making sure that their teeth and/or dentures are brushed twice a day.

More Information and Services

As well as seeking advice from your doctor, nurse or allied health professional (dietitian, occupational therapist, physiotherapist, podiatrist or speech and language therapist), you can get support and information from:

Alzheimer Scotland

www.alzscot.org

Dementia Helpline: 0808 808 3000 (freephone 24 hour)

Alzheimer's Society

www.alzheimers.org.uk and www.alzheimers.org.uk/localinfo

Dementia Helpline: 0300 222 1122

(9-5 Monday to Friday; 10-4 Saturday and Sunday)

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At the time of publication the information contained within the leaflet was, to the best of our knowledge, correct and up-to-date. Always consult a suitably qualified dietitian and/or your GP on health problems. NDR-UK cannot be held responsible for how clients/patients interpret and use the information within this resource. Visit www.ndr-uk.org for more information and to contact the team on the development and evidence supporting this resource.

