Susan McCurry, PhD, a Seattle psychologist in the Department of Psychosocial and Community Health at the University of Washington, has written a practical guide to “becoming a resilient caregiver” of a family member with dementia. In clear and straightforward language, she describes a philosophy of caregiving designed to promote harmony and to minimize conflict within the family. Each chapter provides several brief, illustrative case descriptions that elucidate this philosophy.

The book follows the theme of resilience in caregiving through chapters organized by five key ideas: do not argue, accept the disease, nurture yourself, create novel solutions, and enjoy the moment.

The idea of resilience suggests maintaining flexibility, creativity, and a degree of optimism while accepting the devastating reality of a loved one with dementia. Resilience is especially necessary in dealing with challenging psychiatric and behavioral manifestations of dementia.

The author describes the application of these basic ideas in the unique situations that occur in each case. This book, then, is not just a list of specific interventions; in fact, this is one of the strengths of the book. Although the message is intended for family caregivers, this work would also be useful for professionals. Such practical nonpharmacological approaches are typically underemphasized in professional training programs.

According to the Alzheimer’s Association, approximately 4.5 million Americans have Alzheimer’s disease.1 By the year 2050, that number could grow to more than 11 million. More than 70% of patients live at home, where the bulk of their care is provided by family members who often devote their lives to the effort.

In addition to experiencing memory loss, patients typically experience changes in personality and behavior, including mood and anxiety symptoms, agitation, and paranoia or other psychotic manifestations. These psychiatric and behavioral symptoms, even more than loss of memory, challenge caregivers and may ultimately contribute to the patient’s placement in a nursing facility. Families struggle greatly to provide care at home, usually with limited knowledge, support, and resources. Depression and burnout in caregivers are major problems.1

When a Family Member Has Dementia is intended to provide valuable information to help fill this gap, but it is not a comprehensive guide to all aspects of care for the patient with dementia. For example, little attention is devoted to the use of medications for managing disturbances of behavior, a challenging and increasingly controversial area. However, the book is a fine guide to a practical philosophy of providing care while maintaining one’s own emotional balance.

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REFERENCE