



ORIGINAL ARTICLE

Effects of Productive Activities with Reminiscence in Occupational Therapy for People with Dementia: A Pilot Randomized Controlled Study[☆]



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Received 14 June 2013; received in revised form 22 December 2013; accepted 10 January 2014

Available online 18 April 2014

KEYWORDS

dementia;
depressive symptoms;
occupational therapy;
reminiscence;
task performance

Summary *Objective/Background:* Although a number of studies have considered the effects of reminiscence therapy, none have examined whether a therapy that combines reminiscence with productive activity has a beneficial effect on elderly dementia patients. This study tests our hypothesis that productive activities with reminiscence in occupational therapy (PAROT) can alleviate depressive symptoms and improve task performance of elderly dementia patients. *Methods:* Thirty-six patients with dementia were randomly divided into two groups, namely, an intervention group ($n = 17$) and a control group ($n = 19$). The intervention group had six activity sessions (making rice balls and cakes; one session/week) while reminiscing about the activity. Measurements were performed using the Cornell Scale for Depression in Dementia (CSDD), Multi-dimensional Observation Scale for Elderly Subjects (MOSES), Vitality Index, and Mini-Mental State Examination (MMSE). The performance of the patients was assessed based on photographs of the products after the first and sixth sessions.

Results: Six patients dropped out while the study was in progress, thus leaving 15 patients in the intervention group and 15 patients in the control group. The scores of depression symptoms in CSDD and MOSES were significantly improved for the intervention group, while within-group comparison showed no significant differences in CSDD, MOSES, or MMSE total scores. In terms of task performance, 88% of the patients in the intervention group, including two patients with severe dementia, showed significant improvement in making the product.

[☆] Conflicts of interest: All contributing authors declare no conflicts of interest.

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Conclusion: Our study suggests that PAROT may alleviate depressive symptoms and improve the task performance of elderly people with dementia.

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Introduction

Symptoms of depression are commonly observed in older adults with dementia (Bierman, Comijs, Jonker, & Beekman, 2007; Tsuno & Homma, 2009). For example, Gottfries (2001) has estimated that 50% of patients with dementia exhibit symptoms of depression. Gitlin et al. (2009) have observed that pharmacological approaches are not very effective for treating the depressive symptoms associated with dementia, and that nonpharmacological interventions are far more important. Besides depressive symptoms, older adults with dementia also exhibit diminished performance (Cidboy, 2004; Tarawneh & Holtzman, 2012).

After surveying the literature on the efficacy of acetylcholine inhibitor in treating patients with Alzheimer's disease (AD), Birks (2012) concluded that none of these treatment effects were larger. Thus, it is anticipated that, in addition to drug treatments, development of non-pharmacological therapies holds promise for mitigating the effects of dementia.

Reminiscence therapy is one such nonpharmacological approach for helping older people with dementia. Reminiscence therapy is a care system that essentially involves receptiveness and empathy in listening to the past experiences and memories of the elderly patients (Tadaka & Kanagawa, 2004; Woods, Spector, Jones, Orrell, & Davies, 2005). Meta-analysis of controlled reminiscence trials suggests that reminiscence may have beneficial effects on happiness and depression among the elderly patients (Chin, 2007). Wang (2007) conducted a randomized controlled trial, and found reminiscence therapy to be effective at relieving depressive symptoms and improving cognitive function in older people with dementia. Tadaka and Kanagawa (2007) conducted randomized controlled trials on elderly patients suffering from AD or vascular dementia (VD), and reported that reminiscence therapy had a beneficial effect on elderly dementia patients who were withdrawn. Most of these studies dealt with elderly patients suffering from having mild to moderate dementia.

Music and various other types of stimulation have recently been used to support reminiscence therapy, but verbal stimulus remains the primary method of arousing reminiscence in dementia patients (Ito, Meguro, Akanuma, Ishii, & Mori, 2007). Routine actions or tasks mastered in the past are better and longer retained as procedural memory by people with dementia (Van Halteren-van Tilborg, Scherder, & Hulstijn, 2007). Some sort of task-oriented intervention that exploits procedural memory learned in the past may hold the key to opening up and reinforcing reminiscence. Intervention that links physical activity with reminiscence is called activity reminiscence therapy (Yamagami, Oosawa, Ito, & Yamaguchi, 2007). In such interventions, some sort of tool from the past is presented that is related to a reminiscence theme.

Participants who are familiar with the tool demonstrate how the tool is used for the other participants and the staff, and reminisce about the activity (Kijima, 2002). However, to our knowledge, this is the first study in which patients actually engaged in a familiar activity from the past, created a product through the activity, used the created product, and reminisced about the activity. We developed a new intervention that combines productive activities and reminiscence (Table 1).

This study explores the effects of productive activities with reminiscence in occupational therapy (PAROT) on depressive symptoms, task performance (Darragh, Sample, & Fisher, 1998; Shumway-Cook et al., 2007), and the cognitive functioning of the elderly patients with mild to severe dementia.

Methods

Design

This is a pilot randomized controlled study conducted at long-term care facilities in Japan. An intervention group and a control group were selected from among patients at the facilities. The study was carried out over a 2-year period from September 2007 to November 2009.

Table 1 Productive Activities with Reminiscence in Occupational Therapy Versus Activity Reminiscence Therapy.

	PAROT (This study)	ART (Kijima, 2002)
Products	Yes	No
Activity		
Participants	All	All
Doing	Actually doing	Demonstrating how to use it
Having a goal	Making products	—
Reminiscence		
Participants	All	All
Topics	Relevant to activity	Relevant to activity
Consuming the products	Yes	No
Communication	Nonverbal > verbal	Verbal > nonverbal
Size of group	Less than 10 patients	Less than 10 patients
Number of therapists	Two to three OTs	Unspecified

ART = activity reminiscence therapy; OTs = occupational therapists; PAROT = productive activities with reminiscence in occupational therapy.

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