



Hallucinations

Alzheimer National Helpline

1800 341 341

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What are hallucinations and why do they occur in dementia?

Hallucinations are sensory experiences that don't exist outside of a person's mind. This means that a person having a hallucination can see, hear, smell, taste or feel something that isn't there.

People with dementia sometimes experience hallucinations. These can have a number of causes:

- Dementia can cause physical changes to the brain.
- Certain types of dementia tend to cause persistent visual hallucinations (such as Lewy body dementia).
- O Some illnesses (such as infections) may cause hallucinations or make them worse.
- Side-effects of some medications may include hallucinations.
- Dementia may worsen a pre-existing mental health condition that already causes hallucinations.

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What you can do if you think a person is experiencing hallucinations

First, make sure that it is a hallucination and not a real event. Secondly, make sure that you seek medical advice.

Then, ask yourself the following questions:

- Is the person scared or distressed by the experience? If not, then hallucinating may not be a big issue for them.
- Is the person aware that the experience is not real?
- On the hallucinations put the person, or anyone else, at risk?
- Do the hallucinations happen at a particular time or in a particular place? (Keep a note of the hallucinations to see if there is a pattern.)

Visual hallucinations

Visual hallucinations are the most common type of hallucination for people with dementia. They may see people, animals or other objects that are not present in reality. Sometimes, the hallucinations involve quite complicated scenes or bizarre situations.

What might help?

- Try to avoid having heavily patterned curtains and carpets. Plain curtains and carpets are best.
- Make sure the person has had their vision and hearing checked and they are wearing the correct glasses and hearing aids.

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- Remove or cover mirrors, if they're causing problems.
- A doctor might prescribe medication to treat the hallucinations.

Auditory hallucinations

Auditory hallucinations are also a very common experience for people with dementia. An auditory hallucination is when a person hears voices or other noises that are not there.

What might help?

- Try to stop any sounds or noises that the person with dementia could misinterpret (for example, turn off a radio that's in another room).
- Talk to the person or arrange for them to have company, as talking with other people can reduce or stop auditory hallucinations.

Rare types of hallucinations

- Olfactory (smell) hallucinations, such as the smell of gas on the road
- Gustatory (taste) hallucinations, such as a chemical taste or very salty taste in the mouth
- Tactile (touch) hallucinations, such as the feeling of insects crawling over your body
- Hypnopompic or hypnogogic hallucinations (these are hallucinations that people sometimes experience when they're waking up or falling asleep)

More practical tips to reduce or stop hallucinations

- Try changing their surroundings. For example, move the person to a different room.
- Use better lighting to get rid of shadows and dark areas in a room.
- Keep the person busy with meaningful activities.
- Attempt to reassure the person in a calm voice and tell them you understand that they've had a strange experience.
- Make a note of the person's experiences and look for patterns or insights that you can share with healthcare professionals.
- Talk to a doctor as medication can sometimes be helpful.

Misidentifications and misinterpretations

Misidentifications and misinterpretations are different from hallucinations.

A person with dementia might misinterpret something that is present. For example, they might think they see faces or objects in the pattern of a curtain or carpet, or in the shadows of a room. This is a misinterpretation and not a hallucination.

Misidentification is a false belief that a person has been replaced by an imposter or that someone that they don't know is well known to them. In some instances, the person with dementia may not recognise their own reflection in a mirror and believe that it is somebody else.

Delusional beliefs

What are delusions?

Delusions are fixed false beliefs that are at odds with reality. A person experiencing delusions will not change these beliefs, despite clear evidence to the contrary. Apart from a delusional belief, the person may act normally.

The most common forms of delusions experienced by people with dementia are:

- Persecutory delusions this is when the person feels persecuted such as believing that someone is spying on them or stealing from them
- Delusional jealousy this is when the person believes that a sexual partner is unfaithful (with no evidence)

Delusions can take many forms and can cause great distress – for both the person with dementia and their caregivers. It's important to remember that it is the condition causing this difficulty, not the person.

Why do delusions occur?

- They can be caused by changes in the brain, particularly involving memory.
- Some mental health problems can result in delusions.
- Certain medications might trigger delusions, as can alcohol or recreational drugs, even in small amounts.
- Sometimes hallucinations may form the basis for a delusional belief.

What might help?

- Check whether or not the person's beliefs are true. Sometimes their behaviour may be based on fact.
- Check if something in the person's home or nearby might have triggered the delusion. For example, voices from a radio or TV might cause a person to think that real people are present.
- If a person is worried about being spied on by neighbours, getting blinds or net curtains might help.

Ask their GP to check for signs of ill health, delirium, infections or constipation. In addition, make sure that the person has been eating and drinking enough.

Other things that can help

- Don't argue with a person who is experiencing delusional beliefs. Reasoning with them might not always be effective.
- Keep a diary of the delusions. This will help you to see if there is a pattern, such as when or where delusions take place or who is nearby when they take place.
- If a person with dementia believes that their money is being stolen or mismanaged, then consider establishing simple, easy-to-follow financial routines, including paying bills and collecting their pension.
- If a person often believes misplaced objects have been stolen, try to minimise the opportunities for objects to be misplaced. For example, find fixed places where you put keys, the mobile phone and so on. You could also get an item locator to help you find them. Keep a spare set of keys and spare glasses handy because this can help to calm the person until the originals are found.
- Encourage the person to take part in a meaningful activity which will distract them and so might take their mind off the delusion. Remember that doing tasks with the person rather than for the person can increase their feelings of independence and control. It can also build up their sense of selfesteem.
- Kind words of reassurance can make a big difference when a person is feeling confused, disorientated or scared.

For more information or for a copy of the resources, call the Freephone Helpline on 1800 341 341 or go to www.alzheimer.ie





For further information and support

The Alzheimer National Helpline is a free and confidential service providing information about dementia, supports and services in your area, and living well day to day. It is run by the Alzheimer Society of Ireland.

Helpline: 1800 341 341

(free calls from landlines and mobiles)

Monday to Friday, 10am-5pm. Saturday, 10am-4pm

Livechat on the website: www.alzheimer.ie Monday to Friday, 10am-11am and 3pm-5pm

Saturday, 10am-1pm

Email: helpline@alzheimer.ie **Website:** www.alzheimer.ie

Contact a healthcare professional

If the person continues to behave in ways that are difficult to understand, talk to your GP. A GP can make referrals to Specialist Mental Health Services for Older People.

You can also speak to your public health nurse about access to home support, day care and respite care options. You can contact the public health nurse at your local health centre or you can contact the HSE.

Phone: 1850 24 1850 (calls are not free)

Email: hselive@hse.ie Website: www.hse.ie

Other publications you may find useful include:

Practical tips for living well with dementia

HelpCard: for people with dementia when out and about

Practical steps to support your independence

Loss and grief when a family member has dementia

For a free copy, call 1800 341 341

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The Alzheimer Society of Ireland, ASI, has taken great care to ensure the accuracy of the information contained in this factsheet. ASI is not liable for any inaccuracies, errors, omissions or misleading information.

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