Alzheimer's Caregiving Tips

Changes in Intimacy and Sexuality

Alzheimer's disease can cause changes in intimacy and sexuality in both a person with the disease and the caregiver. The person with Alzheimer's may be stressed by the changes in his or her memory and behaviors. Fear, worry, depression, anger, and low self-esteem (how much the person likes himself or herself) are common. The person may become dependent



and cling to you. He or she may not remember your life together and feelings toward one another. The person may even fall in love with someone else.

You, the caregiver, may pull away from the person in both an emotional and physical sense. You may be upset by the demands of caregiving. You also may feel frustrated by the person's constant forgetfulness, repeated questions, and other bothersome behaviors.

Most caregivers learn how to cope with these challenges, but it takes time. Some learn to live with the illness and find new meaning in their relationships with people who have Alzheimer's.

How to Cope with Changes in Intimacy

Most people with Alzheimer's disease need to feel that someone loves and cares about them. They also need to spend time with other people as well as you. Your efforts to take care of these needs can help the person with Alzheimer's to feel happy and safe. It's important to reassure the person that:

- You love him or her
- You will keep him or her safe
- Others also care about him or her

The following tips may help you cope with your own needs:

- Talk with a doctor, social worker, or clergy member about these changes. It may feel awkward to talk about such personal issues, but it can help.
- Talk about your concerns in a support group.
- Think more about the positive parts of the relationship.
- Get more information. See "Intimacy, Sexuality, and Alzheimer's Disease: A Resource List," www.nia.nih.gov/alzheimers/intimacy-sexuality-and-alzheimers-diseaseresource-list.



How to Cope with Changes in Sexuality

The well spouse/partner or the person with Alzheimer's disease may lose interest in having sex. This change can make you feel lonely or frustrated. You may feel that:

- It's not okay to have sex with someone who has Alzheimer's.
- The person with Alzheimer's seems like a stranger.
- The person with Alzheimer's seems to forget that the spouse/partner is there or how to make love.



For more caregiving tips and other resources:

- Read "Caring for a Person with Alzheimer's Disease": www.nia. nih.gov/alzheimers/publication/ caring-person-alzheimers-disease
- Visit www.nia.nih.gov/alzheimers/ topics/caregiving
- Call the ADEAR Center toll-free: 1-800-438-4380

A person with Alzheimer's disease

may have side effects from medications that affect his or her sexual interest. He or she may also have memory loss, changes in the brain, or depression that affect his or her interest in sex.

Here are some tips for coping with changes in sexuality:

- Explore new ways of spending time together.
- Focus on other ways to show affection, such as snuggling or holding hands.
- Try other nonsexual forms of touching, such as massage, hugging, and dancing.
- Consider other ways to meet your sexual needs. Some caregivers report that they masturbate.

Hypersexuality

Sometimes, people with Alzheimer's disease are overly interested in sex. This is called "hypersexuality." The person may masturbate a lot and try to seduce others. These behaviors are symptoms of the disease and don't always mean that the person wants to have sex.

To cope with hypersexuality, try giving the person more attention and reassurance. You might gently touch, hug, or use other kinds of affection to meet his or her emotional needs. Some people with this problem need medicine to control their behaviors. Talk to the doctor about what steps to take.

The Alzheimer's Disease Education and Referral (ADEAR) Center is a service of the National Institute on Aging, part of the National Institutes of Health. The Center offers information and publications for families, caregivers, and professionals about Alzheimer's disease and age-related cognitive changes.

