

DISINHIBITION AND DEMENTIA

What is Social Disinhibition?

- Social disinhibition is described as socially inappropriate behaviour, loss of manners/ decorum, or impulsive, rash or careless behaviour that is totally out of character for the person with dementia prior to them developing dementia.
- It is likely that the person with dementia does not have insight into any inappropriateness associated with their behaviour.
- Their behaviour is an aspect of their disease and not something they are deliberately choosing to do.
- It can be a very confronting and distressing aspect of dementia, especially for family or care workers.

What You Might See with Disinhibited Behaviours

- Making tactless remarks or inappropriate statements about themselves or others that the person with dementia would not have said prior to developing dementia.
- Using offensive language.
- Talking to strangers or invading the personal space of others.
- Behaving in an impulsive, rash or careless manner, e.g. spending more money than usual- buying things they normally wouldn't buy.
- Sexually inappropriate behaviour.
- Bold and flirtatious behaviour.
- Undressing in public.

Reasons People become Disinhibited

- **Misinterpretation, misunderstanding or misidentification.** It could be that the person with dementia may have misinterpreted another person's behaviour, misunderstood a situation or conversation, or misidentified a person for someone else and their response is appropriate for what they have understood.
- **Disorientation to time and/or place.** The person with dementia may be disorientated to time or place. E.g. they may believe it is time for bed or believe that they are in the bathroom or bedroom and start undressing.
- **Discomfort.** If they feel too hot or cold or have clothing that is too tight, they may also take clothes off to make themselves more comfortable.
- **Loss of social filter.** With certain types of dementia disinhibition is more common E.g. if the frontal lobe of the brain has been affected by dementia, it is likely that a person's social filter has also been affected- they are more inclined to talk about things as they see them, rather than thinking about whether what they are saying or doing is socially appropriate. Strong emotions may cause outbursts of offensive language or behaviour.
- **Unrealistic expectations.** If unrealistic expectations are in play, the frustration of either expecting too much of someone else or having them expect too much of the person with dementia can cause disinhibited behaviour.

Things You Can Do That May Help

- First things first, looking after someone who exhibits disinhibited behaviour can be confronting and distressing. **You will need to deal with your own emotional reaction to the behaviour first** before you can respond to it appropriately.
 - Take the time to **understand your own reactions.**
 - **Remain calm** and display a patient and gentle manner.

- Have **realistic expectations**.
- **Plan a break** so that you can work towards recharging your own battery.
- **Network with others** who understand the mental and emotional burden of caring.
- **Be mindful** of the person with Dementia's right to be treated with dignity and respect and in a manner that minimises distress or embarrassment
- **Look for a trigger.** Understanding why a person may be behaving in a disinhibited manner will help you respond appropriately. If you can recognise any triggers of behaviour you can work to minimise the behaviours as much as possible.
 - Is the person with dementia in pain or uncomfortable? Have they had a medication change? Do they need to go to the toilet? Is their clothing uncomfortable?
 - Are they expressing frustration around expectations or communication issues?
 - Are they over stimulated or bored?
 - Does part of their life story trigger the behaviour?
 - Does the environment trigger the behaviour?
- **Understand how delirium may affect behaviour and be willing to consider it as a trigger.**
- **Make sure your GP is involved with the care.** They will be able to rule out any medical reasons for the behaviour. It is helpful to keep a folder to keep medical conversations and information sheets together. It is also helpful to write down your list of questions or things you want to discuss with the doctor before you visit.
- **Contact your local Dementia New Zealand affiliate for support.** The team at Dementia New Zealand are always willing to help with a listening ear and support.
- If the behaviour is sexually inappropriate, **gently remind** the person that it is inappropriate and take them to a more private place or use a different activity or object to divert them.
- It may be necessary to quietly and respectfully **explain** the situation to others involved.
- Remind yourself that the person with dementia is not behaving this way on purpose – **it is part of their illness.**

Other helpful articles/websites

[Loss of inhibitions and dementia | Alzheimer's Society \(alzheimers.org.uk\)](https://www.alzheimers.org.uk)

[What Do We Mean by Behavioral Disinhibition in Frontotemporal Dementia? - PMC \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/)

[Disinhibition Alzheimer-Society-PEI.pdf](#)

dementiacaring.com.au/dementia-and-disinhibited-behaviours/

[Dementia and challenging sexual behaviour | Alzheimer's Society \(alzheimers.org.uk\)](https://www.alzheimers.org.uk)

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