

Techniques for Prevention of Dehydration

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Professionally, I am writing this paper as a specialist in critical care nutrition. Personally, I am contributing information based upon extensive knowledge on this topic: My mother has Alzheimer's, and I have found her to be in severe dehydration twice in the past 10 months.

Background:

More advanced Alzheimer's patients may have difficulty with the basic life functions of chewing and swallowing. Liquids may be of particular difficulty. In the case of my mother, she appears to have a protrusion reflex of an infant, expelling food and liquid out of the mouth, instead of propelling them back via her tongue. Such actions have resulted in the bouts of severe dehydration.

Solutions:

1. Position:

While in the hospital, I tried feeding her in a 90-degree position in a "cardiac chair". What a difference the position made with both intake of solids and liquids. Obviously, it is consistent with the flow of gravity. We now feed her exclusively in a cardiac chair at home and her hydration is excellent.

2. Semi-solids:

She does best on liquids and solid foods liquefied in a blender or food processor of a mechanical consistency. This principle is used to deliver both fluids and potassium. *For example:* She received hot cereal cooked in water (i.e. Cream of Wheat) at least for one meal per day. Through this, she automatically obtains around 240 CC (approx. 8 oz.) of water. In between meals, she receives "natural" orange jello: Knox Unflavored Gelatin is prepared with orange juice and banana slice (basic recipe on box). This alone adds around 500 cc (approx. 16 oz.) of fluid each day, as well as nearly 1 gram of potassium.

3. Foods prepared with water:

Cooked fruits, vegetables, boiled potatoes, and pasta are added regularly to her daily diet as a way to increase the overall fluid intake.