

**UNIVERSITI TEKNOLOGI MARA**

**EXPLORATION OF NON-PHARMACOLOGICAL  
INTERVENTIONS IN BEHAVIOURAL AND  
PSYCHOLOGICAL SYMPTOMS OF DEMENTIA (BPSD)**

**NUR SABIHA MD HUSSIN**

Thesis submitted in fulfilment  
of the requirement for the degree of  
**Master in Clinical Pharmacy**

**Faculty of Pharmacy**

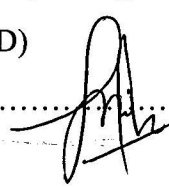
February 2019

## AUTHOR'S DECLARATION

I declare that the work in this thesis was carried out in accordance with the regulations of Universiti Teknologi MARA. It is original and is the result of my own work, unless otherwise indicated or acknowledged as reference work. The thesis has not been submitted to any other academic institution or non-academic institution for any degree or qualification.

I, hereby, acknowledge that I have been supplied with the Academic Rules and Regulations for Post Graduate, Universiti Teknologi MARA, regulating the conduct of my study and research.

Name of Student : Nur Sabiha Binti Md Hussin  
Student I.D No. : 2017912647  
Programme : Master in Clinical Pharmacy – PH770  
Faculty : Pharmacy  
Thesis Title : Exploration of Non-Pharmacological Interventions in Behavioral and Psychological Symptoms in Dementia (BPSD)  
Signature of Student : .....  
Date : February 2019



## ABSTRACT

Dementia is a global epidemic and the incidence is in a growing trend. Behavioral and Psychological Symptoms in Dementia (BPSD) is an integral element of dementia which appears in any stage of dementing. These symptoms do not only impair the well-being, activities of daily life and quality of life of people with dementia but they also cause immense burden to the care providers. As pharmacotherapy is deemed to have less clinical efficacy with many side effects, non-pharmacological interventions are the primary recommendation for the management of BPSD. Despite the availability of non-pharmacological guidelines around the globe, less is known regarding the practice within Malaysian context. This study is aimed to provide the preliminary evidence to achieve a better model of care for people with dementia in Malaysia. Data was collected through observations at the care centres and semi-structured interviews of the caregivers and people with dementia. Observations were written in the field notes and most interviews were audio recorded and transcribed verbatim. All data were subjected to thematic analysis. The result of the findings suggested that local facilities have been practising some personalised management for non-pharmacological interventions such as music therapy, physical exercise and motor rehabilitation, reminiscence therapy, pet therapy, acupuncture and art therapy. However, within the larger domain, personalised non pharmacological interventions could not be grasped by care providers due to lack of training, staff inadequacy and time constraint. The strategy of providing social interaction through non-pharmacological approach was halted by communication barriers. Furthermore, collaborative care with physician and family members should also be applauded but the barriers such as lack of family support led to additional workload beyond the job scope of the care providers.

**Keywords :** BPSD , Non-Pharmacological Interventions, Strategies and Barriers

## ACKNOWLEDGEMENT

All Praise to Allah Rabbal 'Alamin for giving me the opportunity to embark on this Master journey and complete this very important milestone of my life. Just at the time when I have the least confidence in myself and I thought I could never do this, You blessed me, guided me, sustained me and saved me for so many times. Alhamdulillah wa Astagfirullah. May the efforts count.

I would also like to express my gratitude to my supervisor, Dr Shubashini Gnanasan for having trust in me to complete one of her important projects. Thanks to Dr Mahmathi Karuppanan for being the nicest co-supervisor. Thanks for motivating, showing direction and guiding me throughout this journey. And to all who collaborated and warmly accepted me to their havens, thanks! Not to forget the people who shared their stories, life experiences, and gave meaningful life advice, thank you all.

To the backbone of my life, I dedicate this whole Master journey for both of you. Thanks Mak and Abah for always be there when I needed you. I can never achieve this without your prayers and supports. Not to forget, deepest gratitude to my siblings and friends for giving me strength and motivation to finish this journey.

To my fellow coursemates, thank you for everything! Thanks for not making this three semesters feels boring. A special thanks to Kak Izzati for always being supportive and helped me during my hard times. I owe you so much!

Finally, to my favourite bestie, Syaza Aqilah, thanks for constantly checking on me and always made sure I didn't quit. Without your love and unwavering support, I would have not been able to pursue and complete my graduate studies. You are right, "The sweetness at the end of every struggle worth the journey"

*Alhamdulillah ! I did it !*

## TABLE OF CONTENTS

	<b>Page</b>
<b>CONFIRMATION OF PANEL OF EXAMINERS</b>	ii
<b>AUTHOR'S DECLARATION</b>	iii
<b>ABSTRACT</b>	iv
<b>ACKNOWLEDGEMENT</b>	v
<b>TABLE OF CONTENTS</b>	vi
<b>LIST OF TABLES</b>	ix
<b>LIST OF FIGURES</b>	x
<b>LIST OF ABBREVIATIONS</b>	xi
<b>CHAPTER ONE : INTRODUCTION</b>	1
1.1 Background Information	1
1.2 Problem Statement	2
1.3 Rationale of Study	2
1.4 Research Question	3
1.5 Research Objectives	3
<b>CHAPTER TWO : LITERATURE REVIEW</b>	
2.1 Introduction to Dementia	4
2.2 Dementia statistic	5
2.3 BPSD and its key management	6
2.3.1 Pharmacological Interventions	6
2.3.2 Non-Pharmacological Interventions (NPI)	7
2.3.2.1 Physical Exercise and Motor Rehabilitation	8
2.3.2.2 Cognitive Interventions: Validation and Reminiscence Therapy	9
2.3.2.3 Music Therapy	10