Relaxation Spa

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For our best practice we turned one of our tub rooms into a relaxation spa. It was setup to provide a calm atmosphere for residents' with dementia experiencing increased stress or behaviors. In our spa we have music therapy, aromatherapy therapy, massage therapy, and whirlpool therapy. The spa is a great way to provide a calm soothing atmosphere that triggers relief and relaxation for the resident. We decorated the room with scenery images, lamps, and placed thick robes and towels in the room on shelving to provide an inviting feel.

The problem our spa addresses is dementia related behaviors. Adults with dementia have feelings that are often difficult to express due to cognitive impairments in language, memory, and executive function. Communicating frustration, boredom, fear, loneliness, anxiety, or pain may be expressed as resistance, agitation, wandering, frequent requests for assistance, and repetitive calling out. It is increasingly recognized that pharmacological treatments for dementia should be used as a second-line approach and that non-pharmacological options should, in best practice, are pursued first. Potential side effects of these medications increase the risk of falls, stroke, and extrapyramidal symptoms. Good clinical practice requires the clinician first to exclude the possibility that behavioral or psychological symptoms are the consequence of concurrent physical illness (e.g. infections, constipation), and second to try non-pharmacological approaches before considering pharmacological interventions.

Aromatherapy is one of the fastest growing of all the complementary therapies. It appears to have several advantages over the pharmacological treatments widely used for dementia. It has a positive image and its use aids interaction while providing a sensory experience. The main essential oil used in aromatherapy for dementia is extracted from lavender. They also have the advantage that there are several routes of administration such as inhalation, bathing, massage and topical application in a cream. This means that the therapy can be targeted at individuals with different behaviors: inhalation may be more effective than massage for a person with restlessness, for instance. There have been some positive results from recent controlled trials which have shown significant reductions in agitation, with excellent compliance and tolerability.

Many elderly patients become sensory deprived as their faculties fade but the basic need for touch remains constant. Touch often remains the last form of communication when all other avenues have surrendered to the disease. When massage therapy is administered to patients with behaviors resulting from dementia it fosters feelings of intimacy and emotional connectedness for the patient.

Our spa has been effective in reducing behaviors associated with dementia. It has also been a positive experience for other resident’s not exhibiting behaviors. It has provided relaxation and stress reduction and promoted psychosocial well-being. Our resident’s love to feel pampered and the extra attention is just what they need. The cost of setting up this spa experience was less than $100, but the benefit for the residents has been very rewarding.