



Understanding disinhibition

Many people living with dementia experience changes in behaviour. Understanding the causes of these changes can help you respond.

What is disinhibition?

Disinhibition is where dementia affects the person's ability to regulate their response to information or stimulus.

It can be confusing and confronting when the person you care for says or does things that are out of character or rude.

What are the signs of disinhibition?

Impulsive or disinhibited behaviours may include:

- Making tactless or offensive comments
- Talking to strangers as if they know them
- Losing sexual inhibition, or making advances to someone in an inappropriate way
- Inappropriate undressing in an unexpected setting or situation
- Buying items that they would normally never buy or shoplifting

'Disinhibited behaviours can cause significant distress to the carer or to the family. They can become embarrassed, ashamed or worried about taking the person living with dementia out in a public place.'

Why people living with dementia experience disinhibition?

The frontal lobe of the brain is our social filter and if that is affected by the dementia, as it often is, then they will lose that filter and lose that ability to know what is a normal social behaviour and what isn't.

Reasons why a person with dementia may express disinhibited behaviour include:

- Damage to the frontal lobe of the brain due to dementia
- Triggers in the environment
- Confusion
- Delirium/illness
- In response to being misunderstood
- You will also see evidence of disinhibition in someone who is acutely confused from a delirium, or may simply be confused about where they are and think they're in their home when they're actually in a more public place
- Infection, pain and medication can also contribute

What can I do to help?

- Remember, the person is not deliberately trying to offend or embarrass you.
- Remain calm and try not to react in a negative way. A quiet response will be helpful, even though you may find the situation embarrassing or distressing.
- Redirect the person's focus onto something else and, if necessary, move to a different environment.
- Consider the potential causes. A quick checklist may help to identify the cause and support you to respond.

This information has been compiled with the assistance of Professor Sue Kurrle, Geriatrician.

Disclaimer: This information is a guide only and is not a replacement for medical care by a qualified professional.



Is the change sudden and severe?

Is it a life threatening or emergency situation?

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