Sundowning with Dementia

What is “sundowning”? Sundowning is when people with Alzheimer's disease or a related dementia become more restless, anxious, insecure, agitated or confused in the late afternoon and into the evening often causing them to pace or wander. It can occur at any stage of the disease. However, it seems to peak in the middle stages of dementia and lessens as the disease progresses. No one is sure what causes sundowning.

Triggers that may cause sundowning are:

- End of day fatigue can lead to inability to function well or to cope with stress.
- Lack of activity in the afternoon compared to the morning can lead to restlessness later in the day.
- Care partner(s) is busy at this time of day and the person with dementia may feel lost without something meaningful to do.
- Low lighting and increased shadows can create more confusion, fear, disorientation and/or hallucinations (common items look differently when it is darker).
- Disruption of the body’s internal clock that leads to difficulty in knowing day from night.
- Physically uncomfortable due to unmet needs such as hunger, thirst, need to use the toilet and pain.
- At this time of day, the care partner(s) is tired and less patient and communicates by facial expression, tone of voice or body language his/her fatigue, impatience and stress to the person with dementia, making the person more confused and irritated.
- Flurry of activity during staff shift changes in a care facility can cause anxiety and restlessness.

Tips that may lessen sundowning:

- Help someone who is “sundowning” the same way you would help anyone with dementia that is agitated or upset. Look for reasons that might be contributing to the agitation and work to resolve them. Empathize, comfort and reassure.
- Check for pain and discomfort. The person might not be able to explain how they feel or why. Listen to both words and body language.
- Plan an activity that’s enjoyable and easy for the person in the late afternoon or early evening. (See our list of activity ideas).
• Plan ahead and simplify schedules to make the afternoon and evening hours less hectic. Schedule appointments, trips, and activities such as baths or showers earlier in the day.

• Help the person use up extra energy through exercise. Arrange brisk walks during the day. Or have someone walk with the person at the first signs of restlessness.

• Reassure and comfort the person. Tell what time it is and what’s going on in the house. Reassure the person that you are there. Then involve the person in a meaningful activity he or she can assist with such as setting the table, folding towels, doing dishes, peeling potatoes, or sweeping the floor. Or, if at night, assist with toileting and provide a small glass of warm milk, a gentle massage or whatever is the routine bedtime ritual.

• Reduce the noise level, control the number of people who visit in the evening hours, and confine noisier family activities to another area of the home.

• Provide regular activities, exercise, and fresh air and sunshine during the daytime and reduce daytime napping if nighttime sleeplessness is a problem.

• While people with dementia might sometimes find it difficult to sleep in their beds at night, they might fall asleep more easily in a reclining chair.

• Control the person’s diet. Reduce foods and beverages with caffeine and high sugar content or restrict those foods to the morning hours to reduce restlessness late in the day and sleeplessness at night. An early dinner or healthy late afternoon snack may also help; if that is the time the person becomes restless.

• Consult with the person’s physician. The physician can check for signs of depression, sleep disorders, or physical problems, such as urinary tract, bowel, bladder, or prostate difficulties that might lead to frequent bathroom trips or make sleep difficult. There might be medications that can fix problems, reduce pain, or encourage sleep – but beware of the risk of increased confusion and falls if a medication increases drowsiness. In some cases, melatonin or essential oils such as lavender might assist night time sleep.

• Make it easy for the person to urinate. Consider a bedside urinal or commode. Discourage fluids late in the day. Encourage toileting before going to bed.

• Keep rooms adequately lit. Good lighting can reduce the person’s confusion in the evening. A nightlight can prevent the person from becoming agitated in unfamiliar surroundings at night.

• Avoid arguing and long explanations. The person may not know or be able to tell you what’s wrong. The person with dementia does not have control over annoying behavior. Confusion and restlessness occur because the brain is not functioning well and cannot sort out cues in the environment, accurately remember recent events or conversations, or recognize how to best deal with personal anxiety and discomfort.

Remember to care for yourself.

• Make sure you get adequate rest. If these steps don’t resolve the person’s night time sleeplessness, arrange for someone else to supervise the person at night. Or install effective door chimes and arrange the room or house so that it’s safe to let the person stay awake while you nap or sleep in another room.