

## Health Education and Interprofessional Care with Caregivers and Families of Elderly Patients with Alzheimer's Disease (AD): A Necessary Binomial

**Neudson Johnson Martinho\***

*Doctor in Education/Health Education, Professor, Faculty of Medicine, Federal University of Mato Grosso (UFMT), Brazil*

**\*Corresponding Author:** Neudson Johnson Martinho, Doctor in Education/Health Education, Professor, Faculty of Medicine, Federal University of Mato Grosso (UFMT), Brazil.

**Received:** October 11, 2022; **Published:** October 14, 2022

**DOI:** 10.31080/ecor.2022.04.00359

**Keywords:** Health Education; Alzheimer's Disease; Interprofessionality

Alzheimer's Disease (AD) is a neurodegenerative disease that affects about 36 million individuals and is the most common cause of dementia, covering about 70% of the world's cases. Among its main disorders are: Dysphagia, irritability, aggression, psychological and psychomotor disorders, in addition to memory loss. Such changes lead to multiple difficulties, both for the AD patient and for their caregivers, making it necessary to have an interprofessional team capable of understanding the disease and its consequences, in order to allow a real holistic and humanized care. In the process of caring for elderly people with AD, caregivers and family members over time, as a result of physical and emotional fatigue, concern about spending people and the economic crisis that plagues most families in the West, end up developing a high degree of stress and fatigue, adding to all this the lack of knowledge about the disease and its stages, consequently impairing the quality of care provided. From this perspective, dialogic actions based on Paulo Freire's pedagogy, with the methodology of conversation circles, allow for the exchange of knowledge that reverberates in the improvement of humanized and interprofessional care for patients with AD. Based on this educational premise, we carried out an action in an institution for the care of the elderly, located in the city of Várzea Grande, in the state of Mato Grosso, Brazil. After the conversation circles, it was evidenced that 60% of caregivers of the elderly are aged between 25 and 55 years old, of these, 46.7% were unaware of the term "humanization of care" and 26.7% had already seen it, but they did not know its meaning. Among the participants, 13.3% did not know the concept of "multiprofessionality" and 53.3% did not know the concept of "interprofessionality". After participating in the conversation circles, 75% of the participants stated that they understood the term "humanization of care" and 100% assured that they understood the concepts of "multiprofessionality" and "interprofessionality" and agreed with the need to establish an interprofessional team for comprehensive care. to the AD carrier. These results corroborate the importance and need for Health Education and interprofessional actions as a relevant binomial for effective care for the elderly with Alzheimer's. We consider that the methodology of the circle of conversations subsidized in the pedagogy of Paulo Freire, enable the construction of knowledge and practices about the disease and its evolutionary stages, knowledge that contribute to a more humanized and qualified health care for the elderly. Interprofessionality and dialogic actions favor the exchange of knowledge between different professionals and the family, emerging in a holistic health care [1-8].

### Bibliography

1. Abreu ID., *et al.* "Demência de Alzheimer: correlação entre memória e autonomia". *Revista de Psiquiatria Clínica* 32.3 (2005): 131-136.
2. Li R and Orleans M. "Personhood in a World of Forgetfulness: An Ethnography of the Self-Process Among Alzheimer's Patients". *Journal of Aging and Identity* 7.4 (2002).

---

**Citation:** Neudson Johnson Martinho. "Health Education and Interprofessional Care with Caregivers and Families of Elderly Patients with Alzheimer's Disease (AD): A Necessary Binomial". *EC Nursing and Healthcare* 4.10 (2022): 01-02.

3. Tristão FR and Santos SM dos A. "Atenção ao familiar cuidador de idoso com doença de alzheimer: Uma atividade de extensão universitária". *Texto e Context Enferm* 24.4 (2015).
4. Mendes CFM and Dos Santos ALS. "O cuidado na doença de Alzheimer: As representações sociais dos cuidadores familiares". *Saúde e Soc* 25.1 (2016).
5. Gutierrez BAO., *et al.* "Impacto econômico da doença de Alzheimer no Brasil: é possível melhorar a assistência e reduzir custos?" *Cienc e Saúde Coletiva* 19.11 (2014).
6. Brasil. Ministério da Saúde. Protocolo Clínico e Diretrizes Terapêuticas Doença de Alzheimer. Portaria SAS/MS nº 1298, de 21 de novembro de 2013. Brasília-DF. Brasil (2013).
7. Mendes CFM and Santos ALS. "O cuidado na doença de Alzheimer: as representações sociais dos cuidadores familiares. *Saúde soc.*, São Paulo 25.1 (2016): 121-132.
8. Sereniki A and Vital MABF. "A doença de Alzheimer: aspectos fisiopatológicos e farmacológicos". *Revista de Psiquiatria do Rio Grande do Sul* 30.1 (2008).

**Volume 4 Issue 10 October 2022**

**©All rights reserved by Neudson Johnson Martinho.**