

Bill, 77 years Admission

Bill is a 77 year old gentleman, who assaulted his wife two days ago by shaking her violently. She is increasingly fearful of Bill's verbal and physical aggression over the last 6 months and predicts Bill will either hurt himself or someone else. One of the triggers for Bill's behaviour is his belief that his wife is having an affair. Bill constantly checks up on her and whenever the phone rings, he becomes upset and distressed. Bill can't name the person he believes she is having an affair with, or explain why he believes this, except for vague ideas of being a "bad husband".

According to his wife and the nurse, Bill started having memory problems about 2 years ago, especially with his recent memory and he has marked problems finding the right words to express himself. Bill's long - term memory is intact. Since last year Bill has been losing his way around the flat at night.

He and his wife live in a rented 2 bedroom second story flat and the nurse has expressed concern that the flat may not be appropriate as ongoing accommodation due to Bill's behaviour and the impact of the two flights of stairs Bill has to negotiate if he leaves the flat.

Bill has lost 4 kgs over the past 6 months and his physical state is compromised due to emphysema, hypertension, prostatism and Parkinson's disease. As a result, Bill has some incontinence and moderate restrictions on his mobility and it takes him a significant amount of time to walk up or down the stairs and he can only do it with the help. Bill also has a high risk of falling, having had 2 to date. Bill requires a lot of assistance with all of his ADLs and he receives home support but only with showering and dressing, all other assistance is provided by his wife. They have 2 daughters who live close by but the relationship has deteriorated to the point where they will not visit Bill. Bill would often wander around the house in his underwear when the grandchildren arrived which has distressed the daughters and they believe the he should be "put into a nursing home".

The wandering around the house has become worse, especially at night. During the day Bill tends to sit in the chair with the TV on, dozing, smoking cigarettes and drinking anything up to 10 beers a day from which he is usually drunk which contributes to his lack of appetite, disturbed night time behaviours and aggression towards his wife. Bill sees nothing wrong with the intake of beer saying "nothing wrong with that, a man needs a beer". Early evening, Bill then starts to become more active and walks around the flat and he becomes lost and starts knocking on the walls and putting the radio on very loud which is now disturbing the neighbours and when they complain Bill verbally abuses them.

Bill's GP prescribed him sleeping tablets but he refuses to take them because he "just doesn't want to" and although taking the tablets may improve his sleep pattern, the potential side effects of dizziness on standing and increased fatigue would not be tolerated by Bill.

Bill says he has been feeling depressed for most of the last year but that "there is nothing wrong with that" and reports has no suicidal ideation.

Bill used to attend the senior citizens but because of his memory and physical problems he hasn't done so for 6 months. The nurse arranged for his attendance at the day program but he refused to attend, even though assisted transport was provided.