The effectiveness of French origin dementia care method; *Humanitude®* for acute care hospitals in Japan, a pilot study

Miwako Honda¹, Rosette Marescotti², Yves Gineste²
National Hospital Organization Tokyo Medical Center¹ Tokyo, Japan, Instituts Gineste-Marescotti² Paris, France

**Background**

23.3% of population in Japan is age over 65 and the prevalence of dementia is estimated to be 33.9% in age over 85.

Medical professionals working in acute care facilities have tendency of focusing on the treatment of acute medical problems. However, the cognitive impairment of geriatric patients makes it difficult to provide the care due to their declining cognitive status.

Effective skill to take care of patients with cognitive impairment is critically needed, while the burn out and resignation rate of nursing staff are increasing.

*Humanitude®* is a French origin care method for cognitive impaired patients widely used for more than 35 years. The effectiveness is well known in European countries but it is not evaluated in Asian countries, where cultural background is different.

**Objectives**

Assess the effectiveness of *Humanitude®* through 5 days training course for nurses working in acute care hospitals.

**Methods**

Nurses working at acute care hospitals were trained with 5 days intensive training course of *Humanitude®*.

**The contents of the training**

- Lectures
- Philosophy and theory of the methodology
- Techniques of patient care
- Pathophysiology of dementia
- Bedside training
- Daily care for geriatric patients

**Key concepts of the methodology**

- 4 fundamental techniques
  1. regard
  2. talk
  3. touch
  4. assistance to stand up

The participants were asked questionnaires before and after the training. Narrative and qualitative analysis were performed.

**Results**

- 23 nurses were enrolled the study
- Average of job experience; 18.0 years
- Median of job experience; 14.5 years.

**Design**

Qualitative before-and-after study

**Table 1: pre-training problems at work**

<table>
<thead>
<tr>
<th>Relationship with patients:</th>
<th>Violence by patients</th>
<th>Refusal of care</th>
<th>Difficulties to communicate</th>
<th>Anxiety of patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical problems:</td>
<td>Depression</td>
<td>Delirium</td>
<td>End of life care</td>
<td></td>
</tr>
<tr>
<td>Workload:</td>
<td>Limitation of time for care</td>
<td>Considering to resign job</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Postgraduate education:</td>
<td>Lack of education of care for dementia</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Table 2: pre-training experience**

<table>
<thead>
<tr>
<th>Learning experience</th>
<th>Performing experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regard</td>
<td>YES 6</td>
</tr>
<tr>
<td>Talk</td>
<td>YES 11</td>
</tr>
<tr>
<td>Touch</td>
<td>YES 9</td>
</tr>
<tr>
<td>Stand up</td>
<td>YES 7</td>
</tr>
</tbody>
</table>

**Table 3: post-training evaluation**

<table>
<thead>
<tr>
<th>Relationship with patients:</th>
<th>Gained confidence for the care</th>
<th>Enjoyed the time with the patients</th>
<th>Success to establish better relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-verbal communication</td>
<td>Success for muscle relaxation</td>
<td>Less violent behavior</td>
<td>Became calm without psychiatric medication</td>
</tr>
<tr>
<td>Workload:</td>
<td>Overall care time is shortened</td>
<td>Enjoyed the work</td>
<td>Less fatigue after work</td>
</tr>
<tr>
<td>Education:</td>
<td>5 days course of lecture and bedside training were quite practical</td>
<td>Strongly recommend to learn this method to colleagues</td>
<td></td>
</tr>
</tbody>
</table>

**Discussion**

- Majority of participants realized the moment of establishing better communication with patients.
- This is the first implementation of this method to Japan and this is a pilot study to evaluate the effectiveness of the methodology.

**Conclusions**

Nurses in acute care hospitals recognized *Humanitude®* is effective for geriatric cognitive impaired patients.

**Bibliography**

Gineste Y et al.
Humanitude : Comprendre la vieillesse, prendre soin des Hommes vieux

**Contact information**

Miwako Honda: honda-1@umin.ac.jp

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