

The use of Aromatherapy for people living with dementia.

Aromatherapy is the use of aromatic plant oils, including essential oils, to promote well-being and enjoyment. Aromatherapy may help to support a sense of calm or provide a shared sensory experience between the person with dementia, their carer or family member. For some people, aromatherapy may have positive benefits including reducing tension and promoting feelings of relaxation¹.

An accredited aromatherapist should be consulted when considering aromatherapy.

The Provision of Aromatherapy

Aromatherapy can be provided through inhalation and/or topical application.

Inhalation: the oils evaporate into the air using a diffuser container, spray, oil droplets, or breathed in, for example, in a steam bath. Essential oils can be added to a spritzer bottle, with oils dropped onto tissue, clothing, or bed linen as prescribed.

Topically: massage oils, bath, and skin care products, are absorbed through the skin. Massaging the area where the oil is to be applied can boost circulation and increase absorption. Massaging areas that are richer in sweat glands and hair follicles, such as the head or the palms of the hand, may absorb the oils more effectively. Essential oils can be added to hand creams, balms, or body lotions.

Application of essential oils must be done gently. Concentrated oils must always be diluted with a carrier oil before being applied to the skin. Most common carrier oils are sweet almond oil or olive oil.

Who is most likely to benefit?

- People living with dementia who have used aromatherapy previously may wish to continue to enjoy it. Talk to families to see if the person has used aromatherapy in the past and how the oils were beneficial.
- People who enjoy sensory activities, especially touch, may enjoy massage enhanced with essential oils.
- People who are in the palliative phase of their illness may enjoy the experience of aromatherapy or to share the experience with one another person.

It is important that consent is provided by the person, next of kin or legal representative, and that the person's GP is aware of the use of aromatherapy.

Care Staff Helpsheet

Consulting an accredited aromatherapist

It is important to consult an accredited aromatherapist as they will

- blend therapeutic essential oils suitable for each person.
- suggest how the oils should be used such as massage, inhalation, or water immersion.
- consider existing medical conditions as there may be incompatibilities with the use of certain oils.
- develop a care plan with individualised essential oils to address the individual needs of the person.

Introducing aromatherapy to a person

- Engage with aromatherapy in a private space as diffusers used in communal spaces may not have a positive impact on other people.
- When trialling aromatherapy, start slowly and watch the person's reaction. Stop the intervention if the person appears distressed.
- If using essential oils for massage, always undertake a patch test. This involves dabbing the oil on a small area of the skin, usually the inner elbow. This area of the skin will need to be closely monitored for any adverse reactions before commencing aromatherapy.
- If using essential oils in a diffuser, trial by applying a drop or two on a tissue and check if the person is having a positive response to the scent (i.e., observing to see if the person appears more relaxed, calm, or smiling).
- The best results may come from consistent use, so if the person living with dementia appears to enjoy or benefit from the experience, consider adding it to their daily routine. For example, a hand massage at night, essential oils in the person's shower gel, or a diffuser at their bedside.

- Record what works and what doesn't for each person and provide feedback to your team.

Special considerations and precautions:

- When storing essential oils, it is important to be aware that light, heat, and oxygen can affect the integrity of the oil.
- Lotions developed for one person should be limited to their use only.
- Have the aromatherapy care plan stored with aromatherapy/essential oils for quick reference.

It's important not to impose this activity on people who haven't shown any interest as not everyone will respond to aromatherapy. This may depend on the person's background, culture and previous experiences with aromatherapy.

Useful resources

Talking sense is a HammondCare Dementia Centre publication that explores living with sensory changes and dementia.
<https://www.dementiacentre.com/resources?sort=&direction=&filter%5Bsearch%5D=Talking+sense>

International Aromatherapy and Aromatic Medicine Association (IAAMA)
<https://www.iaama.org/>

Australian Traditional Medicine Society (ATMS)
<https://www.atms.com.au/>

International Federation of Aromatherapists (IFA)
https://ifaroma.org/en_GB/home

References

Dunwoody, L., Smyth, A., and Davidson, R. (2002). Cancer patients' experiences and evaluations of aromatherapy massage in palliative care. *International Journal of Palliative Nursing*, 8(10), 497-504.