Dementia: What to Expect — Infections

What is happening

Infections are very common in advanced dementia and near the end of life.

As dementia progresses:

- The body becomes weaker
- Movement decreases
- Swallowing becomes less safe
- The immune system becomes less effective

Because of this, infections often occur more frequently and may become harder to recover from.

Common types of infections

Urinary tract infections (UTIs)

UTIs are common, especially if:

- A catheter is present
- The patient is incontinent
- Mobility is limited

Skin infections and pressure ulcers

Skin breakdown may occur from:

- Spending long periods in bed or a chair
- Inability to reposition independently

Open skin areas may become infected.

Lung infections (pneumonia)

Pneumonia is very common in advanced dementia.

It often develops because:

- Swallowing becomes weaker
- Food, liquids, or saliva may enter the lungs (“aspiration”)

Recurrent pneumonia is one of the most common causes of death in advanced dementia.

Important understanding

Infections in advanced dementia are often part of the natural progression of the illness.

At this stage:

- The body may no longer be strong enough to recover fully
- Antibiotics sometimes provide little benefit
- Treatments may increase discomfort or side effects without improving quality of life

This does not mean care is being withheld.

The hospice team continues to focus on:

- Comfort
- Symptom relief
- Dignity
- Reducing suffering

What the hospice team may do

Treatment depends on:

- The type of infection
- The patient's comfort
- Goals of care

Possible treatments may include:

Urinary infections

- Antibiotics if appropriate
- Comfort-focused care and hydration guidance

Skin problems

- Dressings
- Skin protection
- Pressure relief and repositioning
- Wound care supplies

Lung infections

Treatment may focus on:

- Comfort
- Breathing support
- Reducing distress

In some situations, antibiotics may not help or may cause additional burden.

What you may see

- Fever
- Increased sleepiness
- Increased confusion or agitation
- Coughing
- Changes in breathing
- Reduced appetite or intake
- Skin redness or open sores

When to call hospice

- Fever develops
- Breathing becomes more difficult
- Confusion or agitation suddenly worsens
- Skin breakdown or drainage appears
- The patient seems uncomfortable or distressed
- You are unsure whether symptoms may represent infection