



Caregiver Syndrome

We seldom know in advance when we are going to find ourselves in the role of family caregiver. We could start out by simply helping a bit here and there and then suddenly find ourselves with a fulltime job. Or we could find ourselves plunged into it when a health crisis hits. Providing care to a family member or friend carries many responsibilities and can be an overwhelming experience. The impact of these growing demands can result in stress, anger, guilt, fatigue, depression and many physical symptoms. There is now a name for this collection of symptoms that family caregivers commonly experience. It is referred to as “caregiver syndrome”.

“Caregiver syndrome” was first mentioned on the CNN website in May 2008 in an article written by Dr. Andree LeRoy. In this article Dr. Jean Posner, a neuro-psychologist in Maryland, described this condition as “a debilitating condition brought on by unrelieved constant caring for a person with a chronic illness or dementia”. Peter Vitaliano, a professor of geriatric psychiatry at the University of Washington and an expert on caregiving, said that “the chronic stress of caring for someone can lead to high blood pressure, diabetes and a compromised immune system. The stress is not only related to the daunting work of caregiving, but also the grief associated with the decline in the health of their loved ones”.

Labelling the physical, emotional and mental impact of caregiving with a name could help increase awareness amongst family caregivers themselves, as well as amongst other family members, healthcare professionals and the general public. Although many family caregivers are burnt out they seldom seek help for themselves. Their energy and attention, as well as everyone else’s, is usually focused on the care recipient. Caregivers might not connect the physical and emotional symptoms they are experiencing with the stresses of caregiving. Many exhausted caregivers may not seek help because they don't realize that they have a recognized condition – “caregiver syndrome”.

Having these symptoms labeled can help caregivers feel more validated for what they are experiencing. Now that this syndrome has a name, caregivers will hopefully recognize the signs and symptoms early on and feel comfortable in seeking help. Also, having a formal name for the impact of caregiving may gain the attention of the healthcare profession and encourage them to take more time to ask questions to determine whether the family caregiver’s own needs are being met. They could then make recommendations on how and where the caregiver can get relief.

Expanding a family caregiver’s support system, getting help with caregiving tasks, finding sources of respite and providing education and information to caregivers can decrease the incidence of this syndrome. Contact the Family Caregivers’ Network Society at (250) 384-0408 or visit www.fcns-caregiving.org to find out more information about products and services available to help support you in your role as a family caregiver. Take some time for just yourself and remember to make an appointment with your healthcare provider to talk about the condition of your own health as well.

By Barbara Small, Program Development Coordinator, Family Caregivers’ Network