GUIDE · 5 MIN READ

When a loved one with dementia refuses their medication

It is one of the most stressful parts of caring — and almost always solvable with small changes to routine, format and language. Here's how to work through it without an argument.

Why it happens

- They don't believe they're ill — common in dementia, especially with anosognosia (lack of insight). Arguing the point rarely works.
- The tablet tastes bitter, is too big to swallow, or hurts going down. Many older adults have undiagnosed swallow problems.
- Side effects — nausea, drowsiness, dizziness. They may not link the tablet to feeling rough, but they remember the bad feeling.
- Mistrust of the person handing it over — particularly after a row, or with a new paid carer.
- Routine has been broken — different cup, different room, different time, different person.
- Paranoia or hallucinations — they think the tablet is poison or 'not theirs'.

What actually helps

- Same time, same place, same cup, same person if possible. Boring routine wins.
- Hand them the tablet — don't put it in their mouth. Autonomy matters and is more often the unlock than people expect.

- Try a different format: liquid, dispersible, patch or melt. Ask the GP or pharmacist what alternatives exist — many tablets do.
- Hide-in-food (covert administration) is a legal and ethical decision. Only ever with a documented best-interests decision involving the GP and pharmacist — never quietly.
- Pair the medication with something they look forward to — a favourite biscuit, tea, the morning radio programme.
- Drop the word 'medicine'. 'Here's your morning tablet, Mum' is often refused; 'Here's the one Dr Patel asked you to take' is often accepted.
- If refused, walk away calmly and try again in 20 minutes. Persisting in the moment makes the next attempt harder.
- Don't crush tablets without checking — some (especially modified-release and enteric-coated) become dangerous when crushed. Always ask the pharmacist.

When to call the GP today

Missed doses of heart, epilepsy, diabetes, Parkinson's or blood-thinning medication for more than 24 hours — ring the GP or 111. For everything else, log the refusals and discuss at the next appointment: there is almost always a kinder alternative.

General guidance, not medical advice. Covert administration is a legal decision and must always involve the GP and pharmacist. In an emergency call 999.