

False beliefs and delusions in dementia



Many people with dementia experience false beliefs and delusions, where they sense and believe things that are untrue or not actually happening. These false beliefs can feel very real.

False beliefs and delusions can happen at any stage of dementia but are more likely as the condition progresses. They often revolve around the belief that someone is trying to cause the person harm – for example, that someone is stealing from them.

What are false beliefs and delusions?

Anyone can have false thoughts and beliefs at times. For example, someone might believe that their friend no longer likes them when there is no evidence to support this. Most of us can keep these thoughts in check, but in some people with dementia, they may spiral out of control. Trying to explain to the person that they are not true can cause distress, and you cannot change their mind by reasoning with them.

False beliefs often appear as suspicion and paranoia, where the person with dementia thinks someone is trying to mislead or harm them, for example:

- believing that someone is spying on them
- thinking that someone is stealing from them (particularly money) or has broken into their home – this may happen if they have lost or misplaced the item
- believing that their partner is being unfaithful
- thinking that someone is poisoning their food
- believing that someone – such as a colleague or friend – is talking about them behind their back



Delusions occur when the person experiences reality differently from other people. They may have difficulty recognising people and mistake them for someone else, or a stranger; feel that they are in an unfamiliar place even if they are somewhere they know well; or become disorientated in time, for example thinking they are living in the past.

Common delusions include:

- believing that they need to ‘go home’ to a place that they have not lived in for many years – often their childhood home
- thinking they need to collect their children from school, even if they are now adults
- believing that they need to go to work, even if they are retired

Some people with Lewy body dementia experience Capgras syndrome, where they believe someone close to them has been replaced by an identical impostor. Please see Sources of support on p11 for more information.

4 Dementia UK

False beliefs or delusions can make the person with dementia feel frightened or threatened, which can make them reluctant to accept family and friends' attempts to care for them, especially if they feel other people do not believe them.

Why do false beliefs and delusions happen?

False beliefs and delusions in dementia have many possible causes, including:

- changes in the senses, which mean the person's brain misinterprets the information it receives. For example, they may misinterpret the smell of a bin as gas, and believe there is a gas leak
- confusion about what is real or true – for example, they may believe fictional characters in a TV programme are real
- loss of recognition of people or places – the person may not recognise a family member, so when they come to visit they may think they are an intruder. Please see Sources of support on p10 for our information on loss of recognition
- memory loss – for example, if the person forgets where they have put their wallet, they may believe it has been stolen
- confusion about date and time – for example, believing they are living in the past. This is especially common around dusk, when it is known as 'sundowning', and gives the person a strong sense that they are in the wrong place – please see Sources of support on p11 for information
- delirium – a state of sudden confusion that can be linked to things like infections, pain, or a change of routine or environment, such as being in hospital. Please see Sources of support on p10 for more information



- physical health problems
- medication issues such as side effects
- psychosis – a disturbance in someone’s cognitive state that causes them to lose touch with reality

False beliefs and delusions are more common in certain types of dementia, particularly Lewy body dementia, Alzheimer’s disease, and vascular dementia.

False beliefs and delusions can be very distressing for the person with dementia. They might think that strangers are in their house. They might feel they are in a strange, unknown place, even if it is somewhere familiar. Objects might seem to disappear from the place they were sure they were in. Conversations might not make sense. To seek to understand these confusing and worrying events, the person with dementia might blame someone or something else.

6 Dementia UK

If there is a sudden change in someone's behaviour or thinking, or they appear much more confused than usual, they should see their GP as soon as possible to rule out potentially treatable causes like physical health issues or delirium.

False beliefs and delusions are slightly different from hallucinations. These are also common in dementia, and involve the person experiencing something that is not really happening, like hearing voices or seeing things that are not there. Please see Sources of support on p10 for our leaflet on changes in perception and hallucinations.

Recognising false beliefs and delusions

The person with dementia might:

- make accusations that someone is stealing from them or harming them in some way
- hide possessions to keep them safe
- phone the police frequently
- refuse to open the door or take calls from people who they are suspicious of, even if they are close to them
- talk in whispers, saying things such as, "They can hear us"
- constantly lose things
- think they are younger than they are, and want to carry out roles they used to do, such as going to school or work
- think they are in a different or unfamiliar place, even if they are in a place they know well, like their home
- mistake the identities of people



- relive past traumas or events
- refuse to accept a rational explanation for what is happening
- be restless, agitated, angry or fearful

Tips for preventing false beliefs and delusions

- If possible, come to an agreement with the person about where to keep essential items such as their keys, wallet/purse, handbag and money so they are less likely to be misplaced
- Keep spares of important items that might get lost, like glasses or keys
- Make sure the person with dementia has regular hearing and sight tests
- Look out for any signs of infection, constipation or other physical ill health that could affect their mental state, and book an appointment with their GP if you have concerns

8 Dementia UK

- Consider if there has been a change in medication – the side effects may cause or intensify false beliefs or delusions
- Check the person with dementia is eating and drinking as well as possible – please see Sources of support on p10
- Try to keep to a routine and limit changes to the person's environment
- Keep photographs of them and close family/friends through different life stages around the house to help them recognise the people around them and the time period they are living in
- At night or when leaving the house, show the person that you are locking the doors and windows to give them peace of mind that no one can get in
- Consider what the person watches on TV – for example, crime dramas may make them more suspicious or paranoid

Tips for managing false beliefs and delusions

- Recognise that the belief or delusion is completely real to the person with dementia, and so are the emotions they feel as a result
- Provide explanations and reassurance without challenging or correcting them. You could say something like, “I can see that you are upset that someone might have stolen your purse. Let's see if we can find it in case it was accidentally misplaced.” This acknowledges what the person is feeling and offers a solution
- Provide non-verbal reassurance, for example holding the person's hand or stroking their arm, if they find this comforting
- Try not to take any accusations personally. Understand that their behaviour is a result of their dementia



- See if you can work out what caused the false belief or delusion and if possible, take steps to prevent it happening again, for example by putting their wallet or purse in an obvious, previously agreed place
- Engage the person in an activity they enjoy as a way of distracting them
- If these strategies are not working, try just ‘going along’ with the person until they are calmer and/or have moved onto a different topic, rather than disagreeing or trying to correct them
- In some cases, medication may be appropriate – you can discuss this with the person’s GP
- Recognise that if a family member, friend or carer is falsely accused of stealing from or harming the person, they are likely to feel distressed and may also need support

Sources of support

If you are living with dementia or caring for someone with the condition, register for our free online sessions, ‘Dementia: what next?’ at [▶ dementiauk.org/dementia-what-next](https://dementiauk.org/dementia-what-next)

To speak to a dementia specialist Admiral Nurse, call our free Helpline on **0800 888 6678** (Monday–Friday 9am–9pm, Saturday and Sunday 9am–5pm, every day except 25th December) or email [▶ helpline@dementiauk.org](mailto:helpline@dementiauk.org)

If you prefer, you can book a phone or video call with an Admiral Nurse at a time to suit you: please visit [▶ dementiauk.org/book](https://dementiauk.org/book)

Dementia UK resources

Changes in perception and hallucinations

[▶ dementiauk.org/changes-in-perception](https://dementiauk.org/changes-in-perception)

Coping with distress

[▶ dementiauk.org/coping-with-distress](https://dementiauk.org/coping-with-distress)

Dealing with restlessness

[▶ dementiauk.org/dealing-with-restlessness](https://dementiauk.org/dealing-with-restlessness)

Delirium

[▶ dementiauk.org/delirium](https://dementiauk.org/delirium)

Eating and drinking with dementia

[▶ dementiauk.org/eating-and-drinking](https://dementiauk.org/eating-and-drinking)

Loss of recognition

[▶ dementiauk.org/when-someone-doesnt-recognise-you](https://dementiauk.org/when-someone-doesnt-recognise-you)

Stages of dementia

[▶ dementiauk.org/stages-of-dementia](https://dementiauk.org/stages-of-dementia)



Sundowning

➤ dementiauk.org/sundowning

Other resources

The Lewy Body Society: Managing delusions, misidentification and Capgras syndrome in Lewy body dementia

➤ lewybody.org/download/managing-delusions-misidentification-and-capgras-syndrome-in-lewy-body-dementia

NHS: psychosis

➤ nhs.uk/mental-health/conditions/psychosis

To speak to a dementia specialist Admiral Nurse about any aspect of dementia:

Contact our Helpline:

0800 888 6678 or [▶ helpline@dementiauk.org](mailto:helpline@dementiauk.org)

Book a virtual appointment:

[▶ dementiauk.org/book](https://dementiauk.org/book)

Our charity relies entirely on donations to fund our life-changing work. If you would like to donate to help us support more families:

- Call **0300 365 5500**
- Visit [▶ dementiauk.org/donate](https://dementiauk.org/donate)
- Scan the QR code



Thank you.



DementiaUK
Helping families face dementia



dementiauk.org • info@dementiauk.org

Publication date: February 2025. Review date: February 2028. © Dementia UK 2025

Dementia UK, 7th Floor, One Aldgate, London EC3N 1RE

Dementia UK is a registered charity in England and Wales (1039404) and Scotland (SC 047429).