

Good hydration for a person with dementia



A person living with dementia may not always recognise when they are thirsty or be able to express their thirst. This may mean that they do not drink enough and become dehydrated, which can lead to other health problems. This can be very worrying for family and friends, especially if they are unable to encourage the person to drink.

In this leaflet, we share advice on recognising the signs of thirst and dehydration in a person with dementia, and tips for supporting them to stay hydrated.

Why does good hydration matter?

Keeping hydrated is important for all of us to maintain our health and wellbeing. The percentage of water stored in the body reduces after the age of 50 so the chances of dehydration increase as we get older – but regardless of age, if a person does not drink enough, their body will not work as efficiently as it should.

Being dehydrated can worsen the symptoms of dementia. For example, if someone is even mildly dehydrated, the way their brain functions can be affected, making them more confused. Or if their urine becomes concentrated from not drinking enough, it can irritate the bladder and make urinary incontinence worse.

Dehydration can cause low blood pressure and dizziness, increasing the risk of falls.

Staying hydrated is also important if the person takes medication, as it will help their body process their medicine more effectively.

Reasons for not drinking enough

Reasons why a person with dementia may struggle to drink enough include:

- forgetting to drink due to memory problems



- difficulty recognising and/or expressing that they are thirsty
- loss of interest in drinking due to low mood
- concentration issues that may make finding the time to drink more challenging
- difficulty recognising drinks, even if they are in the person's usual cup/mug/glass
- loss of ability to drink independently, for example because of impaired coordination or vision that makes it difficult to pick up a cup or drink without spilling
- changes in taste – perhaps preferring sweeter or stronger flavours

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- mouth problems that cause the person discomfort when they drink, such as tooth decay, ill-fitting dentures, oral thrush and/or painful mouth ulcers
- infections, constipation and pain
- difficulty swallowing

Signs of dehydration

It is important to recognise the signs and symptoms of dehydration so you can take steps to help the person with dementia to take more fluids, reducing the risk of health complications.

Signs and symptoms of mild to moderate dehydration

- increased confusion
- agitation
- appearing drowsy or withdrawn
- changes in mood
- headache
- increased thirst – but be aware that the person may not recognise or be able to communicate this
- dry mouth and lips
- bad breath
- fatigue
- dizziness/light-headedness
- infrequent urination/dark urine – see Sources of support on p13 for a urine colour chart



- constipation – see Sources of support on p15 for a link to a stool chart
- dry or shrivelled skin or skin that has lost its elasticity
- sunken eyes
- muscle cramps

If any of these occur, you can try the tips that follow in this leaflet. It is also a good idea to contact the person's GP or phone NHS 111 for advice if their symptoms do not improve despite taking steps to improve their hydration.

Signs of severe dehydration

- delirium (extreme and often sudden confusion) – see Sources of support on p14

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- extreme thirst
- rapid breathing
- rapid heartbeat
- low blood pressure
- severe dizziness or light-headedness
- not urinating or passing very dark urine in small amounts
- altered state of consciousness

If the person has any of these signs of severe dehydration, they may need immediate treatment. You should contact the person's GP to ask for an urgent appointment, or call NHS 111 for advice out of hours or if you cannot get a GP appointment.

How to encourage a person with dementia to drink

The general advice is that everyone should drink six to eight cups (one-and-a-half to two litres) of fluids per day – but be guided by the person's usual preferences and drinking habits. Here are some ways to support them to stay hydrated.

General advice

- Allow the person time to drink without rushing
- Sit and have a drink with them – this will encourage interaction and they may follow your lead
- Make sure the person is happy and relaxed in the social situation and environment they are in – for example, you could play their favourite music in the background
- Think about how you can best communicate that they need to drink – for example, you could mime taking a drink, or use



pictures to remind them. See Sources of support on p14 for more communication tips

- If the person has children, encourage them to sit with their parent and have a drink – they could pour from the same jug to make drinking a family activity
- Set reminders on the person’s phone or a smart device like Alexa, or write on a whiteboard, to prompt them to drink at regular intervals
- If the person is going out to work, volunteer, play sport or have a day out, make sure they take a water bottle with them
- If carers are coming in, ask them to make sure every visit starts and ends with a drink, and to leave a jug of water, squash or juice nearby at the end of the visit

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- Offer a drink whenever anyone visits, or try going out regularly to a coffee shop, café or pub (for a non-alcoholic drink) – drinking can be a sociable activity
- Consider the person's beliefs, culture, life history, routines, preferences and needs to help find a solution tailored to them
- Attending a memory café, daycare centre or lunch club may encourage the person to drink. They may imitate what other people are doing, and if they tend to get frustrated with you, they may be more willing to take direction from a staff member or volunteer
- Consider if there are any underlying problems like dental issues, depression or an infection. If in doubt, contact their GP
- Think about joining a carers' support group locally or online – sharing experiences and tips can be very helpful

What to offer

- All fluids count (except alcohol) so try a range of different drinks: water, tea, coffee, hot chocolate, milk, fruit juice and squash
- Temperature can have a huge impact on how appealing a drink is. Some people prefer an ice-cold drink, while others would rather have a warm drink – but bear in mind that very hot or cold drinks may be unappealing to some people
- Try offering stronger flavours, like a less diluted squash
- Consider what drinks the person enjoyed in the past and offer those
- People with dementia may have changes in tastes – they may develop a preference for sweet drinks, or unusual combinations of flavours

- Fluid intake can come from food, too – foods like jelly, soup, ice lollies, yoghurt, custard, watermelon, pineapple, cucumber, pears, and even jacket potatoes contain fluid
- You can also buy ‘Jelly Drops’: sweets designed to improve hydration for people with dementia who struggle to drink. Each sweet contains 50ml of water. Please see Sources of support on p15 for details

Serving suggestions

- Offer the person their favourite mug, glass or beaker, if they have one
- Offer different sizes and shapes of cup to see if they have a preference
- A clear glass may help by allowing the person to see what is inside, although some people struggle to see water in a clear glass
- Try colourful cups or beakers that are easy to see to attract the person’s attention
- Check that their cup or glass is not too heavy or a difficult shape to grasp
- Ensure the person is sitting upright and well positioned
- If the person is struggling to pick up or drink from a cup, help them – but do encourage them to be as independent as possible
- Some people find it easier to drink through a straw
- Ensure the person always has a drink within easy reach
- Offer the person their cup in their line of sight, and describe the drink to them

- Keep the cup topped up so it is easy to drink from and the person can see that it is full
- Some people find it easier to take small but frequent sips than drink a full glass
- Look into buying a reminder cup like a ‘Droplet-Reminder’ – these flash and play a voice message at regular intervals to prompt the person to drink. Please see Sources of support on p15
- If you are measuring fluid intake, pour drinks from a jug so that you can monitor how much has gone at the end of the day, or give the person a water bottle with measurement marks to drink from so they can keep track of how much they have consumed

If, despite trying these tips, the person with dementia is not drinking enough – or at all – speak to their GP for advice and support. You could also consider asking for a referral to a dietitian for specialist advice on hydration for people with dementia.

Dementia and alcohol

Drinking alcohol in moderation can be an enjoyable part of life, but it may have a negative impact on the person’s health and safety, for instance by increasing confusion and the risk of falls. Alcohol is also dehydrating so rather than quenching the person’s thirst, it could worsen any hydration issues.

If the person with dementia appears to be drinking too much alcohol, they may have forgotten how much they have had or when they last had alcohol, or they may have problems controlling their impulses.

Low-alcohol and alcohol-free versions of many drinks are widely available. A healthcare professional can offer advice on whether the person with dementia should reduce their alcohol intake and help devise a plan.



Dementia, drinking and medical conditions

People with heart failure, kidney disease and some other health conditions may need to drink different amounts from than the usual recommended guidelines, so always follow their medical professional's advice on how much to aim for.

If the person with dementia has problems with swallowing, including regularly choking on fluids, contact their GP. They may refer the person to a speech and language therapist, especially if there are safety concerns around choking.

Hydration at the end of life

As a person with dementia approaches the end of their life, their body no longer has the same need for food and drink. This is a natural part of dying. It can be hard for family and friends to accept, but it is usually better to focus on offering drinks for comfort and enjoyment

rather than to give fluids through a drip or feeding tube, for example, which can be highly distressing for a person at the end of life.

If the person's mouth is dry, you can help by wetting their lips with a damp sponge or a baby toothbrush. You do not need to move the toothbrush too much – they will suck it if they want to get the fluids. Avoid using a sponge on a stick as the person could bite pieces off, causing a choking hazard.

Towards the end of life, it is okay to dip the baby toothbrush into any favourite drink that you know the person likes the taste of. However, fruit juice can be quite acidic so it is best mixed with water.

You can offer small sips of fluid if the person is able to swallow and willing to take it but do ask their healthcare professional if there are any difficulties such as swallowing problems or a risk of choking. As an alternative, you could put ice chips inside a clean cotton handkerchief for the person to suck on.

If the person appears to like having their teeth or dentures cleaned, you can help them using a separate baby toothbrush and baby/mild mint toothpaste, or a non-foaming toothpaste. You can also apply lip balm or Vaseline to their lips sparingly.

If you are unsure of the benefits and risks of encouraging the person to continue to drink, you can discuss these with their doctor, district nurse or a dementia specialist Admiral Nurse – see Sources of support on p14 for information.

Urine colour chart

1 – very good

2 – good

3 – fair

4 – mildly dehydrated

5 – dehydrated

6 – very dehydrated

7 – severely dehydrated



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

Eating and drinking with dementia

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

Delirium

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

Mouth care and oral health for people with dementia

[▶ dementiauk.org/mouth-care](https://dementiauk.org/mouth-care)

Recognising the final stages of dementia and moving towards end of life care

[▶ dementiauk.org/end-of-life-care](https://dementiauk.org/end-of-life-care)

Tips for better communication

[▶ dementiauk.org/tips-for-communication](https://dementiauk.org/tips-for-communication)

Understanding dying

[▶ dementiauk.org/understanding-dying](https://dementiauk.org/understanding-dying)

Other resources

Bristol stool chart

➤ bladderandbowel.org/bowel/bowel-resources/bristol-stool-form-scale/

Droplet-Reminder cups

➤ droplet-hydration.com

Jelly Drops

➤ jellydrops.com

NHS guide to dehydration

➤ nhs.uk/conditions/dehydration

Swallowing problems (dysphagia)

➤ nhs.uk/symptoms/swallowing-problems-dysphagia



**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.



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Helping families face dementia



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

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