



When They Won't Drink Water: Dehydration in Dementia



© LAUNEX LTD 2026. All rights reserved.

Families often say the same thing:

“He just refuses to drink.” “She won’t touch the water.” “I keep putting drinks in front of her but nothing changes.”

From the outside it can look like resistance. In dementia, it is usually something very different, it is often a change in how the brain recognises thirst.

In a healthy brain, hydration is regulated automatically. Sensors in the body detect changes in fluid balance and send signals to the hypothalamus, the brain region responsible for maintaining internal stability. The hypothalamus interprets these signals and produces the familiar sensation we recognise as thirst.

In dementia, the reliability of this system can change.

The body may still require fluid, but the brain no longer interprets the signal clearly. The person does not experience thirst in the same way they once did. They may simply not feel the need to drink.

At the same time, memory changes add another layer.

A drink can be placed in front of the person, but if attention shifts elsewhere, the brain may not return to it. Even when a drink is visible, the connection between seeing the glass and initiating the action of drinking may weaken.

There can also be sensory reasons.

Water is a subtle taste. When sensory processing changes in dementia, flavours that are mild or neutral can become less noticeable. Some people begin to describe water as tasting “strange,” “flat,” or simply uninteresting.

Practical concerns also influence behaviour. Many people living with dementia begin to worry about needing the toilet more frequently. If toileting already feels confusing or difficult, avoiding drinks can feel like a way to prevent another problem.

These changes mean that what appears to be refusal is often the result of several neurological shifts happening at the same time.

The consequences of dehydration can be significant.

Even mild dehydration can increase confusion, fatigue, and agitation. It can contribute to constipation, which in turn increases discomfort and behavioural distress. Reduced fluid intake is one of the most common contributors to urinary tract infections in older adults, which can cause sudden changes in cognition, hallucinations, or delirium.

Low fluid levels can also affect blood pressure and increase the risk of dizziness and falls.

For this reason, hydration becomes one of the most important daily supports in dementia care. The goal, however, is not simply “getting them to drink water.” The goal is maintaining hydration in ways that work with the brain as it is now.

One useful approach is to increase fluids through foods that contain high water content. Fruits such as watermelon, oranges, and strawberries contain large amounts of fluid while also providing stronger flavour signals that the brain can detect more easily.

Smoothies, yogurt, soups, and ice cream can also contribute meaningfully to hydration. These foods are not indulgences. They are practical hydration tools when plain water becomes difficult.

Sweet taste can also be used strategically. Sweetness is one of the most resilient taste signals the brain recognises. Lightly flavoured drinks, fruit-infused water, or hydration products such as jelly-based fluids can make intake easier.

Presentation matters more than many people realise.

Clear liquids in clear glasses can be difficult for the brain to detect visually. Using cups with strong colour contrast — particularly red — makes the drink easier to see and process visually.

The mechanics of drinking can also change. A bendable straw often helps because it allows the person to drink without needing to lift the glass or coordinate several movements at once. This small adjustment can make a surprising difference.

Most importantly, hydration should never become a battle.

Encouragement works better than pressure. Offering smaller amounts more frequently throughout the day often works better than expecting the person to finish a full glass at once.

Many families notice that drinking increases when the experience is relaxed and social — sharing tea, sitting together, or offering a drink during a familiar routine.

When confusion increases suddenly, when behaviour shifts without an obvious cause, or when constipation appears, fluid intake should always be considered.

Because sometimes the change we are seeing is not a new stage of dementia. It is dehydration.

Understanding the brain changes behind hydration allows families to respond with practical adaptation rather than frustration.

In dementia care, many everyday challenges become easier when we work with the brain rather than against it.

You can explore more **Launex Dementia Torch resources** here:

<https://launexltd.com/resources>

#DementiaCare #DementiaHydration #LivingWithDementia #DementiaSupport
#CaregiverSupport #PersonLedCare