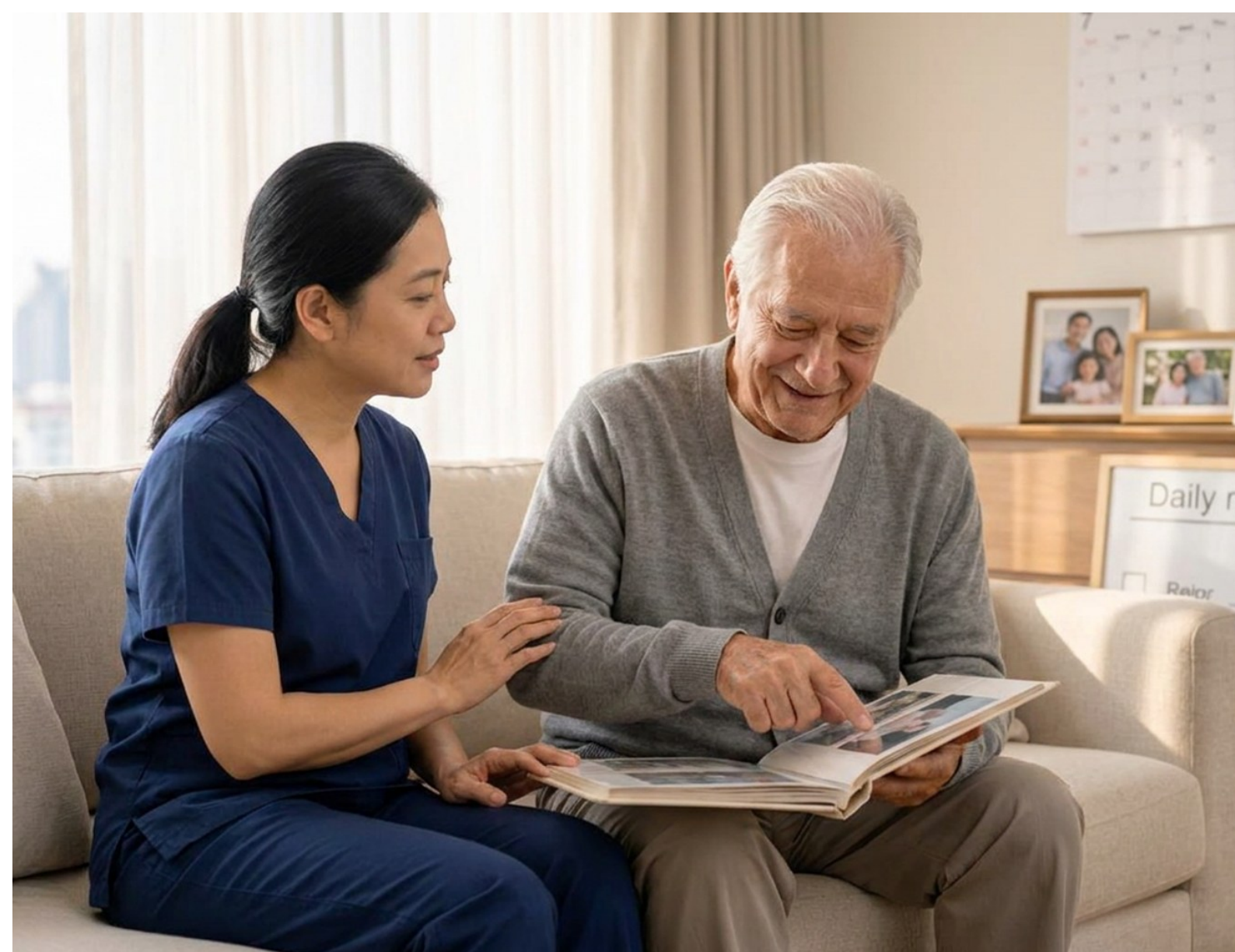




Dementia care at home in Thailand

Diagnosis, costs, safety and a care plan that lasts.

Bangkok, Pattaya, Phuket, Chiang Mai

Researched by Elder Thai Staff · October 2026

Emergency in Thailand: call **1669**



Dementia care at home in Thailand

Emergency in Thailand: call **1669**, the free 24-hour national [medical emergency line](#). If someone with dementia goes missing, call the police on **191** at once, then the Mirror Foundation's missing-person line for people with memory loss, **095-631-1914** ([Mirror Foundation](#)).

Reading time: about 20 minutes · Last updated: October 2026 · Researched by Elder Thai Staff

Want help at home already? [Get a caregiver →](#)

Printable one-page checklist: [download the PDF](#).

This guide is for you if you live in Thailand, or plan to, and your memory is changing: you have been told you have dementia, Alzheimer's disease or "mild cognitive impairment", or you are worried that you might. It covers getting a proper diagnosis in Thailand, what care at home really costs, how to set up your home and your day, what a good caregiver does, how to stay safe if you start to wander, how to protect your money and your wishes, and when to add more help. The best time to read it is now, while you can still make every decision yourself. Your doctor in Thailand always has the final word.

1. The short answer

- **Get a real diagnosis first.** Memory problems have many causes, and some are treatable (thyroid problems, low vitamin B12, depression, medicine side effects). Thailand's national dementia guideline asks doctors to check for these ([Thai Clinical Practice Guideline for Dementia 2020, Department of Medical Services](#)). A memory clinic assessment at a private Bangkok hospital usually costs somewhere between about 5,000 and 40,000 THB, depending on the scans (see [section 3](#)).
- **You are not alone in this.** Thailand has more than 700,000 older people living with dementia, and the Department of Medical Services expects about 1.17 million by 2030 ([Thansettakij, reporting DMS figures](#)). Thai hospitals, Thai caregivers and Thai families know this illness well.
- **Most people with dementia can live at home for years** with the right help at the right time. Start small, usually **4 hours a day**, and add hours as the illness moves on. With Elder Thai, 4 hours a day is **36,000 THB a month** (30 days), 8 hours is **66,000 THB**, 12 hours is **75,000 THB** and 24 hours is **105,000 THB**.
- **Do the legal paperwork while you still can.** Thailand does not recognise a "lasting" power of attorney: an ordinary power of attorney generally ends when you lose mental capacity ([ThaiLawOnline](#)). After that, your family may need a court order to touch your Thai bank account. See [section 10](#).
- **Plan the backup before you need it.** Dementia care fails when one exhausted person carries it all. At Elder Thai a replacement caregiver is always ready, and caregivers work in shifts so nobody burns out.

[Talk to us about your situation →](#)

2. What dementia means for your daily life

Dementia is not one disease. It is a group of illnesses that damage the brain over time. Alzheimer's disease is the most common type; vascular dementia (after strokes or small-vessel disease) is next. Most types get slowly worse over several years. The speed differs a lot from person to person.

Thai doctors usually describe three stages. Here is what each one tends to mean for you at home, and the help that usually fits. Your own doctor will tell you where you are.

Stage	What you may notice	Help that usually fits
Early (mild)	Forgetting recent conversations, repeating questions, missing bills or pills, getting lost in a new place, harder to follow Thai or English conversations	Medicine reminders, a weekly pill box, someone to come along to appointments and the bank. 4 hours a day, or a few days a week
Middle (moderate)	Getting lost in familiar places, mixing up day and night, trouble dressing and washing, not recognising danger (stove, traffic, heat), restlessness late in the day ("sundowning"), suspicion of others	Daily help with washing, meals and outings, and someone there in the late afternoon and evening. 8 to 12 hours a day , plus a plan for nights
Late (severe)	Needing help with everything: eating, toilet, moving; speaking little; at risk of choking, falls and pressure sores	24-hour care , either a live-in caregiver or two caregivers on 12-hour shifts, plus nurse and doctor visits

A YouTube viewer whose mother had dementia in a Thai care home wrote the line that matters most here: "One to one care every moment is the absolute key." You do not need one-to-one care every moment at the start. But plan for it now, so that when you do need it, it is already arranged.

3. Getting diagnosed in Thailand

Where to go

- **A memory clinic or a neurologist.** Large private hospitals have memory or dementia clinics with English-speaking doctors, for example [Bumrungrad's Memory Clinic](#) and [Bangkok Hospital's Brain x Bone centre](#). In Chiang Mai, Phuket and Pattaya, ask the neurology department of the main private hospital (for example the Bangkok Hospital group branch in your city).
- **University and government hospitals** cost much less, but waiting times are longer and English varies by clinic, so bring someone who speaks Thai if you can. [Ramathibodi Hospital's Memory Clinic](#) runs on Wednesday mornings (tel. 02-201-1235). [Prasat Neurological Institute](#), the Ministry of Public Health's national neurology hospital, takes appointments on 02-306-9899 ext. 2175. [Chulalongkorn's neurocognitive unit](#) is another option in Bangkok. Bring a Thai speaker.

What the assessment includes

Following the [Thai dementia guideline](#), a full work-up usually means:

1. **A talk with the doctor**, ideally with someone who knows you well, about what has changed and when.
2. **Memory and thinking tests** on paper, such as the MoCA or the Thai Mental State Examination. Ask to do them in your strongest language: a test in your second language can make you look worse than you are.
3. **Blood tests** for treatable causes: thyroid, vitamin B12, blood sugar, kidney and liver function, and others the doctor chooses.
4. **A brain scan**, CT or MRI, to look for strokes, tumours, bleeding or fluid.
5. **A medicine review.** Some sleeping pills, allergy pills and bladder medicines can worsen memory in older people. Bring every packet you take.

What it costs (published prices, 2026)

Test or package	Price	Source
Alzheimer's screening package (doctor, tests, scan)	38,100 to 41,970 THB	Bangkok Hospital Brain x Bone
Dementia screening with brain MRI	16,500 THB, doctor's fee extra	Samitivej Sukhumvit
Alzheimer's risk screening programmes	From about 4,500 THB (blood test only) to 22,000 to 30,000 THB with MRI	Samitivej
Memory clinic visit at a university or government hospital	Much lower, but ask for the price for foreigners in advance	Ask the hospital

Packages change often. Ask for a written estimate, and ask if the neurologist's fee is included.

Medicines

The Thai guideline, like international guidelines such as [NICE NG97](#), uses medicines called cholinesterase inhibitors (for example donepezil) and memantine for Alzheimer's disease. They do not cure dementia, but they can help some people for a while. They are widely available in Thailand. Generic donepezil is cheap: public hospital purchase prices are roughly 450 to 830 THB for 30 tablets ([Thai government procurement listings](#)), and a private pharmacy lists brand-name Aricept Evess 10 mg at about 2,550 THB for 28 tablets ([MediMedix](#)). Ask your doctor whether a generic is fine for you; it usually costs much less.

What to say at the clinic (Thai): ช่วยตรวจความจำให้หน่อยค่ะ/ครับ ช่วงนี้ลืมบ่อยขึ้น (*chuay truat kwaam-jam hai noi ka/krap, chuang nee leum boi kheun*) "Please check my memory. I have been forgetting more often lately."

[Want someone with you at the memory clinic? →](#)

4. Your visa, insurance and the move

- **Visa.** Many retirees stay on a Non-Immigrant O-A (retirement) visa, an O visa based on retirement or marriage, or a Long-Term Resident (LTR) visa. They have different money, insurance and reporting rules, and the rules depend on your nationality. Dementia makes the paperwork harder each year (90-day reports, renewals, bank letters), so hand it to someone you trust early. For help, use [Thai Kru](#).
- **Insurance.** The O-A visa requires health insurance with at least **3,000,000 THB** of cover a year ([Royal Thai Consulate-General, Los Angeles](#)). Most health insurers exclude conditions you already have when you join, and many stop taking new members in their late 60s ([Allianz FlexCare plan guide](#)). **Do not cancel a policy you already have.** A new one may never cover your dementia. Elder Thai's [guide to health insurance over 60](#) compares plans.
- **Home care is rarely insured.** Expect to pay for caregivers yourself. Hospital stays are what insurance is for.
- **Moving to Thailand with dementia?** Talk to your doctor first and do not make the move alone: have a trusted person or a caregiver with you for the journey and the first weeks. Move early, while you can still learn a new home. Choose a condo with a lift, security at the door, a walk-in shower and a hospital within 15 to 20 minutes. Book a caregiver to start the day you arrive.

5. What dementia care at home costs

Your caregiver: hours a day × number of days

Elder Thai has no fixed package. You choose the hours and the days and can change them as your needs change.

Hours a day	Price per day	1 week	1 month (30 days)
4 hours	1,200 THB	8,400 THB	36,000 THB
8 hours	2,200 THB	15,400 THB	66,000 THB
12 hours	2,500 THB	17,500 THB	75,000 THB
24 hours (live-in)	3,500 THB	24,500 THB	105,000 THB
Two 12-hour shifts (someone awake all night)	5,000 THB	35,000 THB	150,000 THB

How dementia costs usually grow:

- **Early stage:** 4 hours on weekdays (about 22 days) = about **26,400 THB a month**.
- **Middle stage:** 8 hours every day = **66,000 THB a month**. Many people add the late afternoon and evening, when confusion is often worst: 12 hours = **75,000 THB**.
- **Late stage:** 24-hour live-in care = **105,000 THB**. If you are up and walking most nights, two caregivers on 12-hour shifts = **150,000 THB**.

Other costs to budget for

Item	Typical price	Source
Neurologist follow-up, private hospital	Ask the hospital; budget a few thousand THB a visit	Hospital price list
Nurse visit for a procedure (injection, catheter, dressing)	From 1,200 THB a visit, plus supplies	KIN HomeCare
Doctor home visit (central Bangkok)	6,000 THB for 30 minutes, plus fees	PrimeCare Clinic
GPS watch or pendant with SOS button	About 2,500 to 3,200 THB	Lazada listings (check current prices)
Electric hospital bed (rental, late stage)	From 4,500 THB a month, plus deposit	KIN HomeCare rental

Compared with a home: specialist dementia care at [VivoCare](#) in Chiang Mai is USD 3,500 a month, and one-to-one 24-hour care at [Ban Sabai](#) is far more on top of the room. Our [home care vs nursing homes guide](#) compares the full costs.

6. Set up your home for memory loss

Do this in the early stage, while you can help choose and get used to the changes. People with dementia cope best with a home that stays the same.

Safety

- **Kitchen:** a gas stove is the biggest danger. Fit a gas valve you can turn off, or switch to an induction hob with an automatic shut-off. Keep knives and cleaning products in a cupboard with a child lock (cheap on [Lazada](#) and [Shopee](#)).
- **Doors:** condos with a keycard lift and a security desk are safer than a house with a gate onto the soi. A simple door chime or sensor tells your caregiver when the door opens. Tell the security guards in Thai who you are and who to call.
- **Bathroom:** grab bars, a shower chair, a non-slip mat, and the water heater set to a safe temperature.
- **Balconies:** high condo balconies need a lock when confusion grows.
- **Medicines:** locked away, with a weekly pill box set out by your caregiver or nurse.
- **Heat:** people with dementia may not feel thirst or heat. Keep the air conditioning on in hot months and a water bottle in sight.

Making the home easy to understand

- **Labels with pictures** on cupboards and the bathroom door.
- **A large clock that shows the day and date**, and a calendar where your caregiver crosses off each day.
- **Good light**, with night lights on the way to the toilet. Many falls happen at night.
- **Familiar things in sight:** photos, your own chair, music you love. Remove mirrors if they start to upset you.

7. Your daily routine

A fixed routine lowers stress and confusion. Your caregiver should keep the same order every day and write a short log: food and drink, medicines, toilet, sleep, mood and anything new. If family abroad want updates, a daily LINE or WhatsApp message with a photo works well.

A sample day (8 hours, 8:00 to 16:00)

Time	What happens
8:00	Caregiver arrives, greets you by name and says who they are, every day
8:15	Washing and dressing, at your pace, with clothes laid out in order
9:00	Breakfast together; morning medicines checked against the list
9:45	A walk outside or in the condo garden, in the cooler morning
10:30	Something you enjoy: music, photo albums, cards, simple cooking, a temple visit
12:00	Lunch; plenty of water
13:00	Rest; a short nap only, so you sleep at night
14:00	Outing or errand: market, bank, café
15:15	Calm time; prepare the evening meal; plan for tomorrow
15:45	Log written; safe-handover check (stove off, door rules, phone charged)

Late afternoon is often the hardest time ("sundowning"). If you become restless or upset in the evening, move the caregiver's hours later (for example 12:00 to 20:00) or add hours. Elder Thai's [wandering and sundowning care](#) is built for this.

8. What a good dementia caregiver does

Ask any caregiver, from any agency, about these skills before they start.

1. **Talks so you understand:** short sentences, one question at a time, eye level, a calm voice. Never says "Don't you remember?"
2. **Does not argue.** If you believe it is 1985, they work with you, not against you.
3. **Knows the warning signs:** a sudden change in confusion, a fever, burning urine, constipation or dehydration (in older people with dementia, infection often shows as new confusion, not pain). Coughing or choking when eating or drinking is a sign to tell the doctor: a caregiver should never force food, drink or pills on you, because of the risk of choking and chest infection.
4. **Handles bathing and toilet calmly** and keeps your dignity. Refusing a shower is common; a good caregiver tries again later, not by force.
5. **Prevents falls:** safe transfers, good shoes, clear floors.
6. **Manages medicines** from a pill box and never doubles a dose.
7. **Keeps you active:** walking, chores you can still do, music, faith, simple Thai cooking.
8. **Speaks Thai and your language**, so they can talk to doctors, pharmacists and security staff for you.
9. **Writes the daily log** and tells you, or the person you choose, about changes.

International guidance such as [NICE NG97](#) says carers need training in communication, personalised care and planning ahead. Thailand has no single required qualification for home caregivers, so ask what training a caregiver has had and test it at a trial day. Elder Thai's [in-home dementia caregivers](#) are briefed on your history, routine and triggers before they start.

What a caregiver does not do: injections, drips, wound care or catheter changes. Those are nurse tasks. See [private nurse at home](#).

9. Wandering and getting lost

Wandering is one of the biggest risks in dementia, and Thai streets, traffic and heat make it more dangerous. Prepare now.

1. **Wear ID.** A bracelet or card with your name, condition and a Thai phone number. The Mirror Foundation's "**สาย(ใจ)ห่วง**" **wristband** project gives people with memory loss a QR wristband that helps whoever finds you contact your family ([Mirror Foundation missing-person centre](#)). Call the foundation to ask how to register and whether there is a fee.
2. **Carry a GPS tracker:** a watch or pendant with a SIM card and an SOS button, about 2,500 to 3,200 THB on [Lazada](#). Choose one that works on Thai networks (AIS, True or dtac), budget for a prepaid SIM with data, and check the battery life in reviews. Your caregiver keeps the app on their phone and charges the device every night.
3. **Keep a recent photo** on your caregiver's phone and in the care plan.
4. **Tell the condo security desk** your name, your unit and your caregiver's number, and ask them to call if you leave alone. Give them a photo and a short note in Thai, introduce your regular caregiver, and remind them when the guards change.
5. **If you go missing:** call **191** (police) immediately; do not wait 24 hours. Then call the Mirror Foundation's dementia line **095-631-1914** ([contact page](#)), your embassy, and the Tourist Police **1155** for English.
6. **Stop driving** when your doctor says so. Thailand's roads are hard enough without memory loss.

10. Money, legal papers and your wishes

This section matters more in Thailand than at home, because Thai law handles loss of capacity differently. Get advice from a Thai lawyer, and from a lawyer in your home country for assets there.

1. **There is no lasting power of attorney in Thailand.** An ordinary Thai power of attorney generally ends if you lose mental capacity ([ThaiLawOnline on incapacity](#), [Aphiwat Law](#)). A UK, US or Australian lasting power of attorney may not be accepted by a Thai bank.
2. **If capacity is lost, a court must appoint a guardian.** Under section 28 of the Civil and Commercial Code, a spouse, relatives or the public prosecutor can ask the court to declare a person incompetent and appoint a guardian (ผู้ดูแล) ([Section 28](#)). This takes months and needs a recent medical certificate ([guardianship procedure](#)). Your Thai bank account may be frozen meanwhile.
3. **So act now, while you can sign:**
 - Ask your Thai bank what it needs for a trusted person to help you (a joint account, or a bank-approved authorisation), and set it up.
 - Make sure your caregiver budget is paid by someone you trust, by standing order if possible.
 - Write a Thai will for Thai assets.
 - Name the person you want as your guardian in writing, so the court knows your wish.
4. **Write your wishes about end-of-life care.** Under Section 12 of the National Health Act 2007, anyone treated in Thailand can make a written "living will" refusing treatment that only prolongs dying ([National Health Commission Office](#)). Do it while you can clearly decide, in Thai and English, and give copies to your hospital and your caregiver.
5. **Keep a copy of everything** (passport, visa, insurance, bank details, will, living will, doctor's letters) in one folder your caregiver knows about.

11. Backup: the plan that keeps dementia care working

Dementia care often lasts years. The biggest risk is not the illness itself but the carer breaking down, whether that is a spouse, a friend or one hired helper.

- **Thai rules on rest:** a domestic worker you hire directly must get at least one day off a week, public holidays and sick leave ([Ministerial Regulation No. 14, 2012](#)). If you hire privately, you need a second person for those days. Read [the hidden risks of self-hiring](#).
- **One person cannot be awake 24 hours.** If you need someone awake at night, you need two caregivers on shifts.
- **Changes upset people with dementia,** so the relief caregiver should meet you, read your care plan and come on a regular day.
- **Your partner needs breaks too.** If your husband or wife cares for you, plan regular time off for them. Elder Thai's [dementia respite care](#) covers this.

How Elder Thai handles backup: a replacement caregiver is always ready, so you are never left without help when your caregiver is sick or off. Our caregivers work in shifts, so nobody works all the time and burns out. You get a rested caregiver who has read your care plan.

Your one-page care plan (English and Thai, on the fridge)

Your name and the name you like to be called; what you know about your own diagnosis; medicines and times; allergies; how you move; what you eat and drink; what calms you and what upsets you; your daily

routine; your doctor, hospital and HN number; your address in Thai; emergency contacts. Any relief caregiver, nurse or paramedic can pick it up and carry on.

[Get a caregiver with backup built in →](#)

12. When to add more hours

Review every three months, or at once if something changes. Add hours if any of these happen:

- you **got lost**, or left home alone at night;
- you **left the stove on**, took the wrong pills, or forgot to eat;
- you **fell**, or are unsteady in the shower;
- you are **awake and restless at night** more than once or twice a week (time for overnight cover, see [overnight care](#));
- you **became suspicious or frightened** in the evening;
- you **need help with the toilet** or have accidents;
- the person who lives with you is **exhausted**;
- you have just come **home from hospital** (often a big step down in memory; plan 24-hour cover for the first week or two, see [care after a hospital stay](#)).

Your situation	Hours that usually fit
Living alone, early stage, managing most things	4 hours a day, or most weekdays
Living with a partner who still works or needs breaks	4 to 8 hours a day
Middle stage, confused in the evening	12 hours (late morning to evening)
Not safe alone at any time, sleeps at night	24 hours, live-in (live-in dementia care)
Up and walking most nights	Two caregivers on 12-hour shifts

13. When to call

Call 1669 now if:

- you suddenly cannot speak, see, or move an arm or leg, or your face droops (possible stroke);
- you have chest pain or severe breathlessness;
- you fall and hit your head, or cannot get up;
- you are suddenly very drowsy or very hard to wake;
- you choke and cannot breathe.

Call your doctor or hospital today if:

- confusion suddenly gets much worse over hours or days (often an infection, dehydration or a medicine problem, not the dementia getting worse);
- you have a fever, a cough, or burning when passing urine;
- you are eating or drinking much less, or have not had a bowel movement for three days;
- you have new hallucinations, or are very upset or aggressive;
- you have missed or doubled any medicine.

What to say to 1669 (Thai): ต้องการรถพยาบาล ผู้สูงอายุที่เป็นโรคสมองเสื่อมไม่สบาย ที่อยู่คือ ... (*tong-gaan rot pa-ya-baan, poo-soong-ah-yoo tee pen rok sa-mong seuam mai sa-bai, tee-yoo kue ...*) "I need an ambulance. An elderly person with dementia is unwell. The address is ...". Write your address in Thai underneath.

Support for you: the [Alzheimer's and Related Disorders Association of Thailand](#) runs carer support and information in Thai.

14. Questions people ask

"Will I be able to stay in my own home?"

For most people, yes, for a long time, if help grows with the illness. The common reasons people move to a home are night-time wandering, a carer who has run out of strength, or care costs at 24 hours. Plan for all three now.

"My family are abroad. How will they know I'm safe?"

Your caregiver can send a short daily update by LINE or WhatsApp, and a weekly summary. Give one family member permission to talk to your caregiver and your doctor.

"Is it cheaper than going home?"

Usually, by a lot. A full month of 24-hour care with Elder Thai is 105,000 THB. In the US, a home caregiver at about USD 35 an hour costs more than that for 4 hours a day ([CareScout](#)).

"What about the visa?"

A comment we see often: "It's the visa I am worried about!" Keep your visa current, keep your insurance in force, and get help with the paperwork early ([Thai Kru](#)).

"Can a Thai caregiver really handle dementia?"

Thai families have cared for parents at home for generations. What matters is training, a routine and backup. Ask the questions in [section 8](#) and do a trial day.

15. Get a caregiver

If you have read this far, you already know what keeps dementia care at home working: the same calm person, a routine, and backup when they need a break. That is what Elder Thai does.

Elder Thai sends trained, English-speaking caregivers to your condo, house or serviced apartment in **Bangkok, Pattaya, Phuket and Chiang Mai**. Your caregiver works to a written care plan, speaks Thai with doctors, pharmacies and security staff for you, and keeps a daily log your family can see.

What your caregiver does:

- daily routine, washing, dressing and the toilet, with patience and dignity ([memory care at home](#), [Alzheimer's home care](#));
- medicine reminders, meals, drinks and light housework;
- walks, music, outings and company ([companion care](#));

- evening and night cover for sundowning and wandering ([wandering and sundowning care](#), [overnight care](#));
- round-the-clock care when you need it ([live-in dementia care](#));
- memory clinic and hospital visits as your companion and interpreter ([hospital appointment companion](#));
- breaks for your husband, wife or family carer ([dementia respite care](#)).

Backup is built in. A replacement caregiver is always ready if yours is sick or off, and our caregivers work in shifts so nobody works all the time and burns out.

What we do not do: replace your doctor, or carry out medical procedures. Registered nurses handle those when your plan needs them ([private nurse at home](#)).

How pricing works: you choose the hours per day and the number of days. There is no fixed package and no long contract.

Hours a day	Price per day
4 hours	1,200 THB
8 hours	2,200 THB
12 hours	2,500 THB
24 hours	3,500 THB (live-in)

Many people start with **4 hours a day** in the early stage and add hours only when they need them.

[Request a dementia caregiver](#) · WhatsApp **+66 62 837 0302** · LINE · hello@elderthai.com

Printable one-page checklist: [download the PDF](#).