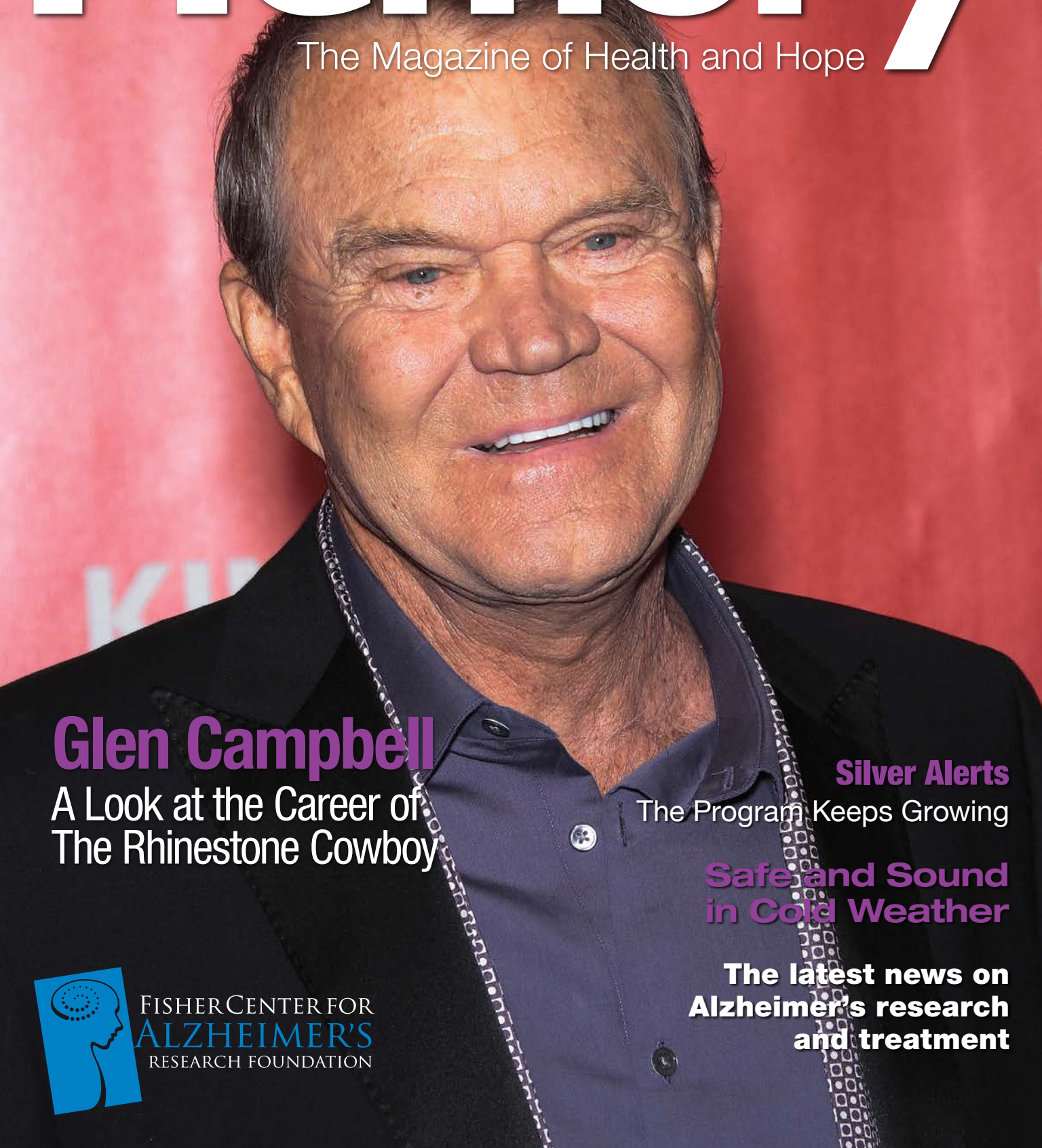


preserving your

Memory

Fall 2013

The Magazine of Health and Hope



Glen Campbell

A Look at the Career of
The Rhinestone Cowboy

Silver Alerts

The Program Keeps Growing

Safe and Sound
in Cold Weather

The latest news on
Alzheimer's research
and treatment



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Caregivers Corner

Tips for caregivers, including: what you need to know for traveling with your loved one, what to ask an elder law attorney, the Clinical Stages of Alzheimer's disease, and more.



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Sign up to get Alzheimer's disease news reviewed by William J. Netzer, Ph.D., Fisher Center for Alzheimer's Disease Research at The Rockefeller University.

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Fall Back

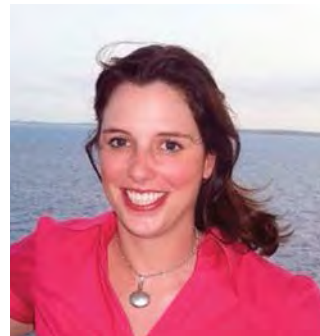
As the hot days of summer depart from us, we welcome fall with a new issue of *Preserving Your Memory*. Get ready for the coming cold weather by learning how to minimize the risks for your loved one that come with winter (page 8).

This month's cover story is a journey through the storied career of music legend Glen Campbell, who is fighting his own battle with Alzheimer's disease (page 18).

The Silver Alerts program continues to expand, and it's having a very positive impact in the lives it touches (page 27). Another "silver" program, SilverSneakers®, is helping older adults stay active for their health (page 22).

On the research front, we talk to Fisher Center scientist Dr. Victor Bustos about his work in Alzheimer's research (page 10). And we find out how members of the "sandwich generation" are managing to care for parents and children at the same time (page 30).

We hope this issue of *Preserving Your Memory* brings a little warmth to your cooler months.



Betsey Odell

A handwritten signature of Betsey Odell in blue ink.

Betsey Odell
Editor in Chief

Please send your tips, stories or questions to:
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About the Fisher Center for Alzheimer's Research Foundation

Since 1995, the Fisher Center Foundation, a 501(c)(3) nonprofit organization, has been providing hope and help to the public by funding research into the cause, care, and cure of Alzheimer's disease and creating much needed educational programs. We are one of the world's largest research teams leading the battle against Alzheimer's disease. Our team of internationally renowned scientists, under the direction of Nobel laureate Dr. Paul Greengard, has been at the forefront of research that has provided a conceptual framework for modern-day investigations into Alzheimer's disease. Oprah's *O Magazine* listed us as the top charity to give to for Alzheimer's. The Fisher Center Foundation has earned Charity Navigator's highest 4-Star rating for fiscal management and commitment to accountability and transparency. For more information or to make a donation, go to www.ALZinfo.org.

The Latest News on Alzheimer's Disease and Brain Health

Online Alzheimer's Tests Found Wanting

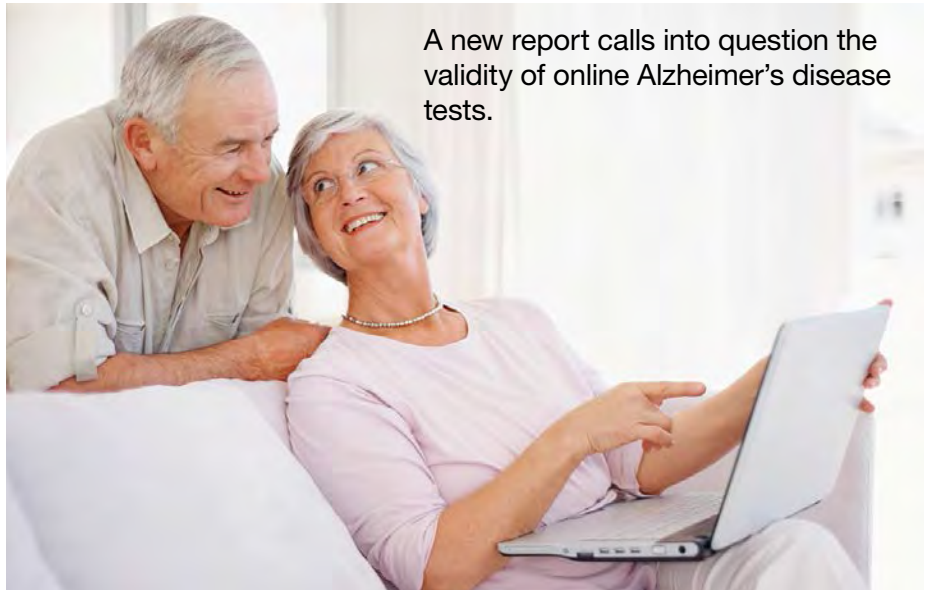
A new report calls into question the validity of online Alzheimer's disease tests. The study evaluated 16 online tests that purport to tell the reader whether they have Alzheimer's and found the tests to be of low quality, sometimes misleading and even predatory.

Julie Robillard, Ph.D., of British Columbia University and leader of the study, said that the online tests were of varying quality scientifically but very poor in terms of ethical standards. The tests were found using a leading search engine and were reviewed by two separate panels, each of which included a geriatrician, a neuropsychologist, a "human-computer interaction specialist," and an ethicist specializing in neuroscience.

The findings are of particular concern because so many adults find health information online. Worse, some of the tests were found on sites that were affiliated with sites that market products or services to the dementia population, but this was rarely disclosed. "This is a very predatory marketing strategy for a vulnerable population," she said, noting that "some of the tests were clearly designed to tell you had [Alzheimer's disease] or had something wrong."

Putting Off Retirement Lowers Alzheimer's Risk, Study Finds

A study of nearly half a million people in France found that those who delayed their retirement day had a lower risk of



A new report calls into question the validity of online Alzheimer's disease tests.

developing Alzheimer's disease and other forms of dementia.

This was the largest study to look at this issue to date.

"For each additional year of work, the risk of getting dementia is reduced by 3.2 percent," said Carole Dufouil, a scientist at INSERM, the French government's health research agency. Dufouil led the study.

France has a very large database of detailed health records and conducts some of the most far-reaching Alzheimer's research in the world. Researchers were able to tap into that database in reaching their conclusions. The scientists ruled out those who had developed dementia within 5 years of retirement, and at 10 years, in order to rule out those who retired early because of dementia.

Because work keeps people physically active, mentally alert, and socially connected, it carries the benefits that tend to keep the mind sharp and may delay the onset of Alzheimer's disease and other forms of dementia.

Cancer, Chemo May Lower Alzheimer's Risk

It may be a hard conclusion to swallow, but patients who survive cancer—and especially those who received chemotherapy as part of their cancer treatment—experienced a lower risk of developing Alzheimer's disease, according to recent research.

The study looked at cancer survivors of several types, and found that liver cancer survivors enjoyed the greatest protection from Alzheimer's, with a 51 percent

reduced risk. Other types of “protective” cancers included pancreatic, at 44 percent; esophageal, at 33 percent; leukemia, at 31 percent; lung, at 25 percent; and kidney, at 22 percent.

These findings point to possible new therapeutic targets for researchers to explore. A protein known as pin1 may play a role in this inverse relationship between some types of cancer and Alzheimer’s.

Researchers at the VA Boston Healthcare System found that even ruling out those who died from cancer did not change the results of their study.

This new study confirms results presented in 2004 by Catherine Roe, a scientist at Washington University in St. Louis. At that time, her results were not well received.

Clinical Trials Updates

Here are news updates on several clinical trials we’ve covered in the past:

Lilly Drug to Undergo New Trial

Solanezumab, an Eli Lilly & Co. drug that has failed two previous clinical trials, will be the subject of a new trial focusing only on mild Alzheimer’s patients who appeared to respond to the drug in the prior studies.

The drug works by blocking beta-amyloid proteins, which are linked to the formation of plaques in the brains of Alzheimer’s patients. In a previous trial, the drug was able to slow the decline in cognitive abilities, as measured by a cognitive test, in 34 percent of patients who began the study with mild Alzheimer’s disease. It did not slow decline in patients with more advanced disease nor did it improve the performance of every-day activities in the mild Alzheimer’s group.

The new trial will include 2,100 patients. “Since Lilly saw a signal of benefit in the mild patients in the completed trials, it makes a lot of sense for them to simply zoom in on that group in this new trial,” said Steven Ferris, director of

the Alzheimer’s Disease Center at NYU Langone Medical Center in New York. “It’s a roll of the dice again, but they’ll get a definitive answer.”

Exelon Gets FDA Approval

Exelon, a Novartis patch for treating Alzheimer’s symptoms, has gained approval from the FDA for treating severe Alzheimer’s patients. A pill version of Exelon has been prescribed for Alzheimer’s for about a decade. Exelon works by temporarily allowing one of the brain’s neurotransmitters to work longer. This neurotransmitter is depleted in Alzheimer’s disease. As with other FDA-approved Alzheimer’s drugs, Exelon doesn’t prevent or cure the condition.

The Exelon patch is a preferred treatment because it isn’t a pill. In late-stage Alzheimer’s, pill-taking can be a serious challenge, sometimes because swallowing can be so difficult for patients at this stage of the disease. The patch also delivers a steady stream of medicine, so there are no peaks and valleys in terms of the medicine’s supply to the bloodstream.

A six-month study of the Exelon patch in severe patients found that the highest dose—13.3 mg—was successful at treating symptoms, according to study lead Martin Farlow, vice chairman of research in the neurology department at Indiana University School of Medicine. “In terms of functioning in activities of daily living, it was a range of things that included the ability to feed themselves, to respond to commands, to do things,” he said. “All of these improved, modestly, but improved. Or, they were stable as compared to patients on lower doses.”

Another Alzheimer’s Drug Fails

An independent study of a drug called semagacestat, produced by Eli Lilly & Co., found that the drug was not effective in preventing symptoms in Alzheimer’s patients and in some cases made them worse.

Semagacestat targets gamma secretase, an enzyme involved in the production of

beta-amyloid, which forms plaques in the brains of Alzheimer’s disease patients.

Lilly turned over all its study data on the drug to the Alzheimer’s Disease Cooperative Study, a project of the U.S. National Institutes of Health, for independent analysis after stopping a 2010 trial early for safety reasons.

In spite of the failure, useful information came from the study. “It clearly leads to the conclusion that targeting gamma secretase as a way to reduce amyloid simply doesn’t work,” said Steven Ferris, director of the Alzheimer’s Disease Center at NYU’s Langone Medical Center in New York City. “It doesn’t appear that this is a promising target for treatment.”

Alternatively, semagacestat may have failed because of its inherent toxicity, because of the way in which it inhibits gamma-secretase and because it may be necessary to treat patients at a much earlier stage of the disease, even before symptoms emerge, for benefit to be realized.

Lilly Drug Pulled After Liver Problems Detected

A Phase II clinical trial for an experimental beta secretase drug was terminated after patients manifested problems with liver biochemical tests, according to drug developer Eli Lilly & Co.

The compound, known as LY2886721, is a type of beta-site APP cleaving enzyme, or BACE. The drug was being tested as a once-a-day treatment for decreasing Alzheimer’s symptoms. The problems with the liver tests were not believed to be a result of the drug’s primary mechanism.

In an official statement, the company said, “Lilly will further evaluate this data prior to determining next steps for the entire LY2886721 clinical development program.” ■

Check the Fisher Center website (www.ALZinfo.org) often for up-to-date and expert-reviewed scientific news.

Weathering the Cold

Tips for a safe, comfortable winter.

Winter is rarely a wonderland. Often, it's a harsh season fraught with numerous health and safety risks. For senior citizens and people with dementia, the cold-weather months can be particularly perilous. Such groups need to take particular care throughout the season. Here are some tips for doing that:

Get a flu shot. People who are older or who are in poor health have a higher risk of hospitalization and death due to the flu—and winter is when the illness usually peaks. Make sure both you and your loved one get an annual flu shot. Ask your doctor if a pneumonia shot is also recommended.

Stock up on essentials. In case you become homebound during a winter storm (or you just want to avoid venturing out into the cold), make sure you have enough groceries, water, toiletries and other staples at home. If bad weather is in the forecast, be sure to attend to any upcoming prescription refills your loved one may require. Make sure you have plenty of blankets, flashlights and nonperishable foods on hand in case your power goes out. If your home gets too cold and you or your loved one is showing signs of hypothermia, call 9-1-1 right away. (See sidebar for signs of hypothermia.)

A nutritious diet with lots of fruits and vegetables can help improve your physical and mental resilience during the winter months.

Try to keep the winter blues at bay. Winter can be a depressing season for anyone, but for people with Alzheimer's disease who are also prone to sundowning, it can be particularly unsettling. Try to diminish the impact of reduced daylight by doing the following for your loved one:



Bundle up to prevent winter's chill from causing problems outdoors.

- Limit caffeine and sugar to the early morning hours.
- Increase physical activity, like helping with chores around the house.
- Discourage naps during the daylight hours.
- Reassure your loved one calmly when he or she is upset.

- Invest in a light therapy lamp, if you can afford it.
- Encourage a hobby.

Select season-appropriate clothing.

People with Alzheimer's disease often dress unsuitably when they're responsible for clothing themselves. Depending on which stage of the disease your loved one is in, you should assist in dressing or at least supervise his or her wardrobe choices. Layered, lightweight clothing is best for cold weather—especially indoors. Outside, be sure your loved one always has a warm coat, hat and gloves or mittens.

Ensure your home is heated safely.

The older we get, the harder it is for our bodies to appropriately regulate temperature. As a result, older adults may turn the thermostat up too high, potentially leading to dehydration and—for people with dementia—further confusion. If you or your loved one gets cold in your climate-controlled home (ideally set at 65-70 degrees, depending on the age of your home and how well it heats), opt for an extra layer of clothing before cranking the heat up higher. If you're using other heating devices in your home, be sure you take steps to reduce the risk of a house fire. You can do so by keeping space heaters clear of flammable objects, installing carbon monoxide and smoke detectors, purchasing a fire extinguisher, getting a checkup for your chimney's flue pipe and placing a glass screen in front of a wood-burning fireplace. You should also always supervise your loved one when he or she is in a room with a fire, space heater, kerosene lamp or other potentially hazardous heating device.

Keep your car prepared for the weather.

The last thing you want is to be stranded in the cold—especially if you're with a loved one who has dementia. To ensure you're safe when you leave home, make sure your car has been properly serviced and winterized. If possible, avoid leaving home when there is snow and ice on the roads. On the off chance that you do experience car trouble in the elements, make sure your car is already stocked with blankets and a charged cell phone.

Prevent falls. With obscured, slippery and uncertain surfaces, winter is a prime season for falls. Such accidents are particularly dangerous for the elderly, who are more prone to broken hips. To reduce the likelihood of falls, make sure your loved one wears shoes with non-skid soles. In addition, you should only allow him or her to walk on

Signs of Hypothermia

Older people are particularly vulnerable to hypothermia because their bodies don't regulate temperature efficiently. In addition, there are many prescription medications, like sedatives and antidepressants, that may make someone with Alzheimer's disease even more prone to this serious safety event. So be on the lookout for the following symptoms:

- Stiff muscles, particularly in the neck and limbs
- Fine trembling on one or both sides of the body
- Cold skin
- Skin that is very pale or that includes blue or pink spots
- A puffy or swollen face
- Poor coordination
- No reaction (such as shivering) to obvious cold
- Slowed breathing and heart rate
- Increased confusion, disorientation and apathy

If you suspect your loved one has hypothermia, avoid handling him or her. Hypothermia causes a weakened heart and action or movement could lead to sudden death. What you should do is call 9-1-1 right away and then attempt to insulate your loved one with blankets. Do NOT try to re-warm your loved one by other means. Doing so can be very dangerous. You should also avoid administering food or water, or raising your loved one's legs.

NOTE: *Some of the symptoms of hypothermia, such as confusion and disorientation, are similar to those of Alzheimer's disease. So if you notice a sudden worsening of these symptoms, immediately check for the physical signs of hypothermia.*

surfaces that are completely clear of snow and ice. Avoid going outside after dark, and if a building you're entering or exiting has handrails, use them. ■

News from the Fisher Center for Alzheimer's Research

Preserving Your Memory talked to Dr. Victor Bustos, postdoctoral research associate at the Fisher Center for Alzheimer's Research Laboratory, about the work they are doing there now.

Preserving Your Memory: Please tell me about the research you're currently doing in Dr. Greengard's lab. What is the nature of the research? What are you targeting?

Dr. Victor Bustos: I'm investigating why Alzheimer's disease appears when people get older. There is a protein in nerve cells called presenilin that undergoes changes with aging. I think some of these changes could explain why aging is the main risk factor in Alzheimer's disease. So, the target I'm looking for is presenilin.

PYM: If you had to sum up your work in a few sentences, what would you say?

Dr. Bustos: I use cells growing in culture and genetically engineered mice to investigate the changes that occur with aging. One of the things I do is to modify these changes using biochemical and genetic methods. Then I determine whether the mice get Alzheimer's disease.

PYM: What results have you discovered thus far from your research, or what do you expect to find?

Dr. Bustos: I have discovered a change in the molecule presenilin that I believe is a contributing factor for Alzheimer's disease in elderly people.

PYM: What impact might your work have on Alzheimer's diagnosis or treatment in the future?

Dr. Bustos: I think it will allow us to find drugs that will target presenilin, or other molecules that are regulated by it. This will block the effects of aging so that Alzheimer's can be avoided.



Dr. Victor Bustos

PYM: What directions can you see your work taking in the future?

Dr. Bustos: I think it will open up new avenues for research into aging and its impact on different diseases that are age-dependent. ■

What Climbing Mount Kilimanjaro Taught Me About Alzheimer's

In January 2013 I climbed Mount Kilimanjaro in Africa. I knew it would be a challenge that would test both my physical and mental strength. I was a bit daunted by the fact that I could prepare for the physical challenge but wasn't really sure how to prepare for the mental challenge. The whole experience was outside my comfort zone and at some level I knew I needed to grow spiritually, and this might just create the catalyst that I needed.

The change happened in the months following the trip, when I started doing some soul searching. I began to realize that the preparation for the climb and the actual climb provided a framework for how a person could face challenges in their life. I believe that all the small challenges in our lives are often there to prepare us for the bigger ones. There is no doubt that Alzheimer's disease is a large challenge.

The process of climbing Mount Kilimanjaro taught me some valuable lessons that could be applied to the journey of Alzheimer's disease:

- 1. Do your homework and prepare for the climb by arming yourself with information.** Understand as much as you can about the disease and the nature of Alzheimer's disease and dementia. The more you understand, the more tools you will have to respond in compassionate ways to both yourself and the person with the disease.
- 2. Don't look at the whole mountain or you'll undoubtedly get overwhelmed.** Take it one step at a time and one moment at a time. If you think about a continual



Mount Kilimanjaro

string of "what ifs..." the result is despair, anxiety and worry. Most of the time the things we worry about aren't even the things that actually happen. So developing an attitude of dealing with things as they come is healthy and more peaceful.

- 3. Assemble a good support team.** Connect with as many people as you can about the experience. Put an intention out to the universe that you want to go through this experience with others who can support you and you them.
- 4. Once the preparing is done and the team is in place, let go of the need to control everything and go with the flow.** Letting go of control is very freeing and powerful. It applies to Alzheimer's disease, but also to many areas in our life where control is just an illusion. Alzheimer's and dementia creates the perfect opportunity to learn to let go of those things we have no control over! ■

A Voice to Remember

Tom and Karen Brenner are authors of the book *You Say Goodbye and We Say Hello: The Montessori Method for Positive Dementia Care*. They help people living with dementia, their families and caregivers navigate this challenging condition using techniques first developed by Maria Montessori.

When we first met Jeannie, she was absolutely furious that her son had “dumped” her in the memory enhancement center. She had been having trouble with falling at home and had been found more than once wandering in her neighborhood, unsure of who she was and where she was. Her husband was dead, and her children believed that living in a locked ward where she could get medication and therapy was the best and safest solution for their mother. Jeannie did not understand why her children had abandoned her to strangers in a strange place. Jeannie was having trouble sleeping in her new home and wasn’t eating much. She stayed away from the other residents and refused to participate in any of the exercises and activities that the staff tried to introduce to her. She sometimes began screaming for no apparent reason and would physically strike out at staff who tried to comfort and calm her. Jeannie was a hard case.

We tried to interest Jeannie in some of our poetry reading circles. She threw the poetry book at us. We learned that she had loved to sew and brought in pairs of fabric swatches for a matching exercise (corduroy, satin, silk, wool). Jeannie blew her nose in the swatch of silk. We asked Jeannie to help us with a bread-baking exercise, giving her a sifter full of flour to pour into a large bowl. She poured it over the head of the person standing next to

her. We invited Jeannie to join the flower-arranging group. She broke the flower stems in half and threw the flowers all over the floor. Jeannie was a hard case.

Then one day we brought in some music books that we had created. Each folder had about ten hymns in it. (This was a home for people belonging to a certain Protestant denomination. Not everyone in the home was a member of this church, but the majority were.) We had printed the hymns in very large font and used card stock to ease page turning. We invited several people to join our choir and began singing the first hymn, “When the Roll is Called Up Yonder.” This hymn has a great part for bass voices, repeating the phrases first sung by the sopranos and altos. We didn’t have a hope that our choir would be able to master this rather complex version of the hymn, but, unknown to us, we had a great bass singer in the group. He was very familiar with this old hymn and began to sing his bass part with gusto. The other singers didn’t realize what he was doing, and continued to sing over the bass. As we were muddling through the hymn, Jeannie suddenly appeared in front of our choir and clapped her hands together loudly, yelling,

“Stop! Stop! You have to let the bass sing his part, you have to wait for him and then go on. Like this.” At that point, Jeannie began to sing the hymn, beating out the time with the flat of her hand against her thigh. Her voice poured out, a rich contralto. The choir (and both of us) stared at her in wonder. Jeannie stood very tall and lifted her right hand up in an elegant gesture.

“Now,” she commanded us, “from the beginning.” Jeannie directed the choir with authority and passion. She lowered her hand for us to sing softly, she raised her arms to bring forth our voices. We sang through the ten hymns and then sang them again. By this time, a small audience had gathered. Jeannie turned and faced the audience and spontaneously sang a beautiful and heart-rending version of “Amazing Grace.”



Music made a vital connection for Jeannie.

From that moment on, Jeannie was the choir director and the soloist. Her voice was still amazingly strong and beautiful. We created games for Jeannie like, “Name That Hymn.” We would sing or say the first few words of a hymn and before we got more than two or three words out, Jeannie would say the name of the hymn. Then, she would often sing the hymns, knowing all of the verses!

Jeannie would still sometimes have bouts of screaming, and she never really made friends or seemed comfortable in the memory enhancement center. When she was practicing and performing with her choir, she was in her element, and she was joyful and calm. In one of her more lucid moments, Jeannie told us that she believed that she had been given a gift and that it was her duty to lift her voice and every voice in the celebration of music. Jeannie was a hard case, but she taught us that even the hard cases have gifts to share and lessons to teach us. When that roll is called up yonder, no doubt, Jeannie will be leading the choir!

To purchase the Brenners’ book, You Say Goodbye and We Say Hello, please visit www.brennerpathways.org. ■



Tom and Karen Brenner, authors of *You Say Goodbye and We Say Hello*.

MetLife Foundation Announces Research Award Winners

Two leading Alzheimer's disease researchers are honored for their work.

In May, MetLife Foundation honored the recipients of the 2013 Awards for Medical Research in Alzheimer's Disease. Yueming Li, PhD, is a member and professor of the Sloan-Kettering Institute and director and professor of the Graduate Program in Pharmacology at Weill Medical College of Cornell University. Lennart Mucke, M.D., is director of the Gladstone Institute of Neurological Disease and Joseph B. Martin Distinguished Professor of Neuroscience and professor of Neurology at the University of California, San Francisco (UCSF).

Both men were honored at a scientific briefing and awards ceremony on May 15 in New York. Drs. Mucke and Li each received a \$200,000 grant for his institution to further his work, and a personal prize of \$50,000.

MetLife established the awards in 1986 in order to recognize and reward scientists who are demonstrating significant contributions to the understanding of Alzheimer's disease. The MetLife Awards for Medical Research in Alzheimer's Disease are managed by the American Federation for Aging Research (AFAR), which has been a champion of the cause and supporter of funding for science in healthier aging and age-related medicine.



Yueming Li, PhD, professor of the Sloan-Kettering Institute and director and professor of the Graduate Program in Pharmacology at Weill Medical College of Cornell University, and **Lennart Mucke, M.D.**, director of the Gladstone Institute of Neurological Disease and Joseph B. Martin Distinguished Professor of Neuroscience and professor of Neurology at the University of California, San Francisco (UCSF).

Photos: MetLife Foundation

Yueming Li, PhD



The awards express the belief that research is the road to understanding and ultimately treating this devastating disease. Recent estimates state that well over 100 million and possibly as many as 200 million people worldwide will be living with Alzheimer's disease by 2050. Currently, more than 5.5 million people in the U.S. are living with Alzheimer's disease.

"MetLife Foundation is proud to present our awards to these outstanding researchers, whose work helps bring us closer to finding a cure for Alzheimer's disease," said Dennis White, president and chief executive officer, MetLife Foundation. "Doctors Li and Mucke have made significant contributions that have also enabled other scientists to explore promising new avenues of Alzheimer's disease treatment."

New Directions in Alzheimer's Research

Dr. Li's work demonstrates how an enzyme known as gamma-secretase works to produce amyloid-beta, a protein that accumulates as plaques in the brains of people with Alzheimer's disease. These plaques damage the neurons and connections in the brain. Dr. Li has developed a novel way to study the gamma-secretase complex, a

method that is now enabling his lab and others to screen for potential treatments.

Dr. Li, who is a lab head in Molecular Pharmacology and Chemistry Program at Memorial Sloan-Kettering Cancer Center, has made the study of gamma-secretase a primary focus, particularly its role in the pathology of Alzheimer's disease. In a study published in a 2000 edition of *Nature*, Dr. Li's team provided the first compelling biochemical evidence that gamma-secretase activity is triggered by presenilin, a subunit within this complex. When mutated, presenilins can lead to Alzheimer's disease.

In 2010, Dr. Li's lab reconstituted gamma-secretase and identified presenilin as containing the active site for gamma-secretase. This led to further study, which a number of research teams are now conducting, of the structure and function of gamma-secretase at both the molecular and atomic levels. This provided further proof that gamma-secretase is a potential target for the development of Alzheimer's disease treatments.

Currently, Dr. Li's team is focusing its research on modulating gamma-secretase activity in order to alter the processing of amyloid precursor protein, which has been implicated in the development of Alzheimer's disease, and developing targeted therapies based on this knowledge.



(l to r) Dennis White, Dr. Lennart Mucke, Dr. Max Gomez, Dr. Yueming Li

Lennart Mucke, M.D.



The awards express the belief that research is the road to understanding and ultimately treating this devastating disease.

focus lies in exploring the role of DNA damage and aging-related factors in cognition, and in translating his lab's latest findings into potential treatments.

"We have selected these individuals because their work has provided major insights to the field and is likely to lead to new Alzheimer's disease treatments, which are desperately needed," said David M. Holtzman, M.D., chair of the MetLife Awards for Research in Alzheimer's Disease Advisory Committee, which

selected the winners. Dr. Holtzman is the Andrew B. and Gretchen P. Jones Professor and Chairman, Department of Neurology, Washington University School of Medicine, and is a previous recipient of the MetLife Foundation Award. ■

Dr. Mucke's work has focused on identifying molecular and cellular processes by which small assemblies of amyloid-beta impair cognitive functions. He showed how these assemblies work with tau, another protein that accumulates in the brains of Alzheimer's patients, to disrupt the activity of brain networks. In addition, Dr. Mucke showed that suppressing the abnormal excitability of these brain networks can reverse cognitive and behavioral decline in animal models of Alzheimer's disease.

In their lab at the Gladstone Institute of Neurological Disease, Dr. Mucke and his team have made a number of important findings regarding the mechanisms that underlie Alzheimer's disease. They have also identified new therapeutic approaches for blocking these mechanisms. They proved that the activities of the proteins amyloid-beta, apoE4 and tau, all linked to Alzheimer's disease, can disturb the communication pathways between brain cells. They further found that the interactions among these proteins play an early role in disrupting the brain's neural networks.

Dr. Mucke and his team also found that the combined actions of amyloid-beta and tau result in some of the over-stimulation of neurons, which is known to be an early characteristic of Alzheimer's disease.

The results found by Dr. Mucke led him to initiate experiments designed to determine if blocking abnormal network activity could be a therapeutic approach, an area of great promise in drug discovery. His current

Dr. Li and Dr. Mucke were honored at a scientific briefing and awards ceremony in May.



Living with Alzheimer's Disease

Products That Make Life Easier, Simpler, and Safer

Every 69 seconds, someone in the United States is diagnosed with Alzheimer's disease. There are now more than 5 million Americans living with the disease. What is not widely known—even by some physicians—is that there are products available that are made especially to help make Alzheimer's patients' lives better with the disease, and, in some cases, to help them remain living at home longer and safer.

The Alzheimer's Store is dedicated to providing unique products and information for those caring for someone with Alzheimer's disease. Every product in the store has been carefully selected to make living with Alzheimer's disease as easy as possible. The store also provides a rating system for products that tells potential buyers whether a particular product is for the early, middle, or late stages of the disease. For example:



- ❖ A clock that will automatically remind an Alzheimer's sufferer of the day and date. This easy-to-read, battery-operated wall clock displays the day of the week and date, and automatically changes at midnight.



- ❖ A medication dispenser that prevents accidental double-dosing. This automatic medication dispenser beeps at the right time, provides the right meds, and is lockable so no more pills can be taken until the next dose time. This dispenser should not be used by a person with Alzheimer's without supervision, but it can be very useful for people with milder forms of memory or cognitive impairment.



- ❖ A telephone that allows the user to push the picture of the person they want to call. For those who may be a little forgetful or who have difficulty seeing the numbers, this phone is a blessing.

With over 200 products that address various activities of daily living and caregiver challenges, the Alzheimer's Store is dedicated to finding and providing products for people with Alzheimer's disease and those caring for them.

**For more information and many more helpful products,
go to www.alzstore.com or call (800) 752-3238.**



Photo: Jorg Hackemann/Shutterstock.com

The ‘Rhinestone Cowboy’ Battles Alzheimer’s

By Tamekia Reece

It’s not often a celebrity has a career that spans more than 50 years. It’s also uncommon for a person affected by Alzheimer’s disease to release a record that makes it in the top 10 on the Billboard chart. Meet Glen

Campbell. Throughout the years, the 8-time Grammy Award-winning country music superstar has put out such hits as “Rhinestone Cowboy,” “Gentle on My Mind” and “Wichita Lineman.”

In 2011, Campbell revealed doctors had diagnosed him with Alzheimer's, and he would be releasing his final album and embarking on one last tour, dubbed "The Glen Campbell Goodbye Tour." Now, two years later, despite the progression of the disease, the 77-year-old hitmaker recently released another album, *See You There*, and he and his family have been busy in the fight for Alzheimer's research.

Early Life

Although he's really from Billstown, Arkansas, Campbell has always said he's from Delight, Arkansas, because Billstown is so small he's never seen it on a map. Born on April 22, 1936, to sharecroppers, Campbell was one of 10 children. He developed a love for music at an early age—first, by listening to the congregation sing at church, and then by a battery-operated radio. When he heard about a black church a few miles away—one where the members sang fast music with heavy rhythms—he had to see it. He would hike to the church, stand just below the window, rise on his bare tiptoes and peek inside at the people, who were caught up in the spirit and the music. "It was my first experience of seeing how moving music could be to people," he recalled in his autobiography, *Rhinestone Cowboy*. "I had never seen so much unleashed passion and I hungered to be around the rhythm and music that I felt as much as heard ...," he wrote.

His dad bought him a \$5 guitar when he was four. From the moment he got it out of the mailbox, he couldn't keep the guitar out of his hands. By time he was eight, Campbell and an uncle—who he says was the best guitar player in the family—formed a band and played in schoolhouses, at church functions, and on local radio shows. When Campbell was 15, the pair hit the road and played at bars and nightclubs. Campbell didn't know it at the time, but he was on his way.

Makings of a Star

Eventually Campbell landed in Albuquerque, New Mexico, and started his own band, The Western Wranglers. At age 17, he married his pregnant girlfriend, Diane. They lost their first child, but later had another. The couple divorced after six years. Later that year, he remarried (he and his second wife went on to have three children), and he and his new bride headed to Los Angeles in hopes he would make it in the major leagues.

After a rocky start (he was stiffed for payment several times), he landed a job writing songs and recording demos for a song publishing company. There he met Jimmy Bowen, another staff writer, who would go on to produce Frank Sinatra, George Strait, Reba McEntire, and many others, including Campbell. Through the friendship and association with Bowen, who had become a producer for Capitol



Glen Campbell and wife, Kim, at the American Music Awards in Los Angeles.

Records, Campbell got into session work—providing backup instrumentals or vocals for artists. He couldn't read sheet music, but he was allowed to play by ear because of his talent.

He became part of a group of L.A. studio musicians that later came to be known as "the Wrecking Crew," given that name by drummer and head member Hal Blaine, because older session musicians thought this younger, more informal group, in their jeans and T-shirts, was wrecking the business. The crew was in high demand because they had a reputation for being able to knock out a stellar record in little time. Campbell, who had grown up so poor the family sometimes didn't have food, was making a six-figure income. And the Wrecking Crew backed what seems like a who's who of the top music stars of that time: Elvis, Frank Sinatra, Dean Martin, The Beach Boys, Nat King Cole, Simon & Garfunkel, and many others. "I was floating on cloud nine," said Campbell in a 2011 *USA TODAY*

interview. “To play with that caliber of musicians, it really opened my eyes and made my playing better.”

Flying Solo

Campbell continued working with the Wrecking Crew while attempting to launch a solo singing career. Throughout the years, he put out quite a few singles—some successful, others not so much. In 1964, he filled in on tour with The Beach Boys when lead vocalist and bassist Brian Wilson got ill.

It wasn't until 1967, though, that Campbell had his first big hit. With “Gentle on My Mind,” penned by John Hartford, Campbell's solo career took off overnight. In a little over a year, he had a string of additional hits: “By the Time I Get to Phoenix,” “Dreams of the Everyday Housewife,” “Galveston,” “I Wanna Live,” and “Wichita Lineman,” all of which took top spots on the charts. By the end of 1968, Campbell had five Grammy Awards and Country Music Association (CMA) awards for Male Vocalist of the Year and Entertainer of the Year.

Already a household name, Campbell cinched his spot when he entered the world of television. After a summer hosting gig on *The Smothers Brothers Comedy Hour*, he was offered his own show. *The Glen Campbell Goodtime Hour*, a variety show, aired on CBS from 1969 through 1972 and was nominated for Golden Globes and Emmys. Campbell co-starred with John Wayne in the movie *True Grit* in 1969. For his role, he was nominated for a Golden Globe, and the title song, which he sang, received a nomination for an Academy Award. Campbell also appeared in *Norwood*, *Any Which Way You Can*, and *Rock-a-Doodle*.

Campbell released his biggest hit in 1975. “Rhinestone Cowboy,” the title track of his 30th studio album, was a smash hit with country and pop audiences. It snagged number one spots on Billboard's Hot 100, Adult Contemporary, and Country Singles charts. However, things weren't going as great in his personal life. After 16 years of marriage, he and his second wife divorced. Soon after, he remarried, and he and his third wife had one child.

Through the years, Campbell still performed and released music, despite alcohol and drug addiction. In 1981, once-again

Glen Campbell by the Numbers

- 81 chart-topping songs
- 1 double-platinum album, 4 platinum albums and 14 gold albums
- Three songs—“Wichita Lineman,” “By the Time I Get to Phoenix,” and “Gentle on My Mind”—are in the Grammy Hall of Fame
- 3 Gospel Music Association Dove Awards

divorced, he went on a blind date with a Radio City Music Hall dancer. He and Kimberly Woolen married and have three children together. In all, Campbell has eight children: Debby, Kelli, Travis, Kane, Dillon, Cal, Shannon, and Ashley.

With rehab and the support of his wife, Kim, Campbell conquered his addictions. In the '90s he released several gospel albums. He was inducted into the Country Music Hall of Fame in 2005.

Here and Now

After the revelation of his Alzheimer's diagnosis, Campbell experienced a resurgence of popularity. *Ghost on the Canvas*, released in June 2011 and intended to be his last album, peaked at number six on the Billboard Country chart.

Campbell was top cowboy again when some of today's biggest country stars—Keith Urban, Vince Gill, and Brad Paisley—sang his songs during a tribute at the 45th CMA Awards.

Assisted by a teleprompter and his band, which includes his three children with Kim—sons Shannon on guitar, Cal on drums, and daughter Ashley played banjo and keyboard—Campbell hit the road in August 2011 for his farewell tour. Once again, he made magic. Although he did have memory lapses and visible disorientation on stage at times, his kids were able to help him through it, and fans eagerly filled in when he forgot lyrics.

At the 2012 Grammy Awards, Campbell performed “Rhinestone Cowboy” to a standing ovation, and he received a Lifetime Achievement Award. A few months

What's New?

- **Music:** Surfdog Records released *See You There*, Campbell's final album, in August. The vocals were originally recorded when Campbell was working on his 2011 release, *Ghost on the Canvas*. *See You There* revisits and revamps Campbell's most popular hits, including “Gentle on My Mind,” “Wichita Lineman,” “Hey Little One,” “Galveston,” and

“Rhinestone Cowboy.” Also included are original tracks, such as “I Wish You Were Here” and “Waiting on the Comin' of My Lord.”

- **Documentary:** James Keach, Oscar-winning producer of *Walk the Line*, the Johnny Cash biopic, is working on a documentary that will chronicle Campbell's career and battle with Alzheimer's. The documentary is scheduled to be released later this year.

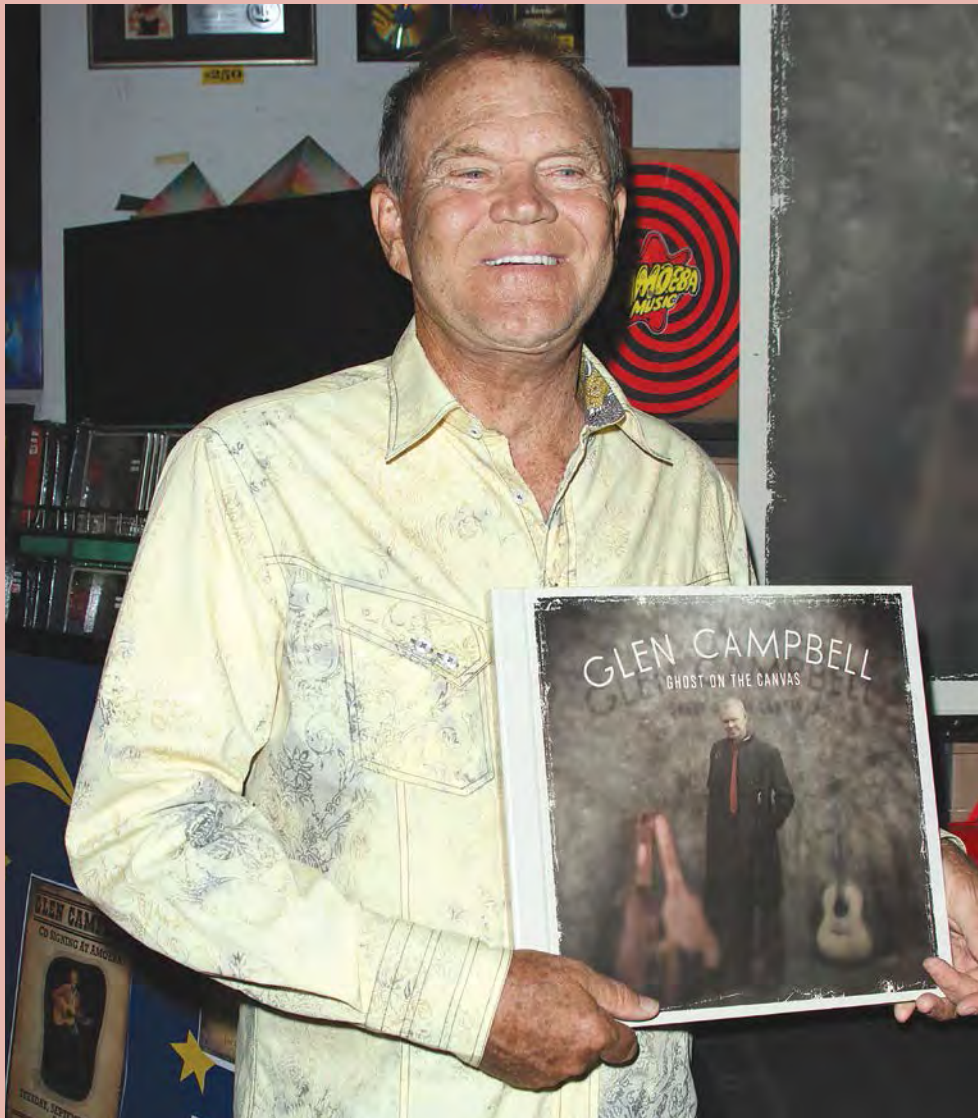


Photo: s_bukley/Shutterstock.com

Glen Campbell at the *Ghost on the Canvas* CD signing.

later, Campbell's health forced the family to cancel the Australian and New Zealand leg of the tour.

Campbell's battle with Alzheimer's has progressed to a point where he can no longer do interviews or perform. In a recent *Country Weekly* interview, his wife Kim, who he's been married to for 31 years, says Campbell now has trouble speaking and can't be left alone for even the shortest amount of time.

During the tour, many of Campbell's appearances were benefit concerts with proceeds going to Alzheimer's research. His family continues where he left off by speaking up about the disease that has stolen his lyrics and memories. Earlier this year, Ashley (with her mom and dad by her side) testified at a Senate hearing in Washington, D.C., for more funding for Alzheimer's research. Speaking about why her dad chose to tour after his

diagnosis, Ashley said, "For my dad and my family, talking about his diagnosis publicly was important. It is important for people to know that individuals with Alzheimer's can keep doing what they love—that life doesn't end right away when you are diagnosed with Alzheimer's," she said. "It was also so important for my dad to take action and help spread the word about the need to find a cure."

Of his struggles, the family is managing as best as it can. "I just go day to day and try to keep him happy and healthy," Kim said. As for Campbell himself, the Rhinestone Cowboy is thankful and seems to have made his peace with the condition. In an interview last year, he said, "I've accomplished everything I wanted to do. I've been blessed. When I think back to where I came from, I have been able to do some amazing things in my life." ■

The Long Walk to Fitness

For older adults looking to improve their health, SilverSneakers® provides a safe, supportive and social environment to kick off a healthy, active lifestyle.

In 2004, Priscilla Farrell was spending her days struggling to navigate her home while attached to an oxygen tank by a 50-foot tube, and doctors informed her that she had just four years to live. When her granddaughter described a dream in which they had walked on the beach together, Priscilla hardly considered it possible. But the next day, she received a call explaining that she qualified for SilverSneakers®, a program available to Medicare beneficiaries to help them stay physically active and socially engaged. Priscilla knew something had to change. Her husband and she agreed, “What have we got to lose?”

SilverSneakers offers members a fitness center membership and specialized classes that foster social interaction and healthy lifestyles. Mary Swanson began the program in 1992, when her father Richard Swanson had a heart attack and his doctors advised him to exercise three times per week. When they searched for a facility, they found nothing on the market specifically for seniors. Mary started compiling a network, and SilverSneakers was formed. Healthways saw the program’s potential and acquired it in 2006.

The First, Longest Step

“One of the most important aspects of SilverSneakers is its Program Advisors,” says Joy Powell, President of Fitness Market and SilverSneakers at Healthways. Fifty percent of all members have never set foot in a gym

before and are often recovering from an illness. Program Advisors help members get through their initial fear of gyms, get them fully versed on the equipment, and introduce them to the classes.

SilverSneakers offers members a fitness center membership and specialized classes that foster social interaction and healthy lifestyles.

When Priscilla entered the program, she feared that people would laugh at her and say, “What the heck is she doing there? She’s on an oxygen tank and can barely walk.” Instead, she walked into the welcoming atmosphere of the SilverSneakers community.

Instruction focuses on a gentle introduction to fitness. The SilverSneakers classes focus on range of motion, strength training, balance, endurance and mobility used in daily activities. The various classes use chairs for support as well as exercise bands, balls, and handheld weights.

Members don’t commit to a single facility, and they can choose from circuit training, cardio, yoga, water exercise classes and more. Responding

to member preferences for exercising at home or outside over working out in a gym, programs have expanded to include a flex program that holds classes in churches, parks and beaches, and the range of classes now includes Zumba, tai chi and pole walking. If members are unable to get to a facility, Healthways offers online kits available to order online for general cardio, yoga or strength training that include videos, a pedometer, a yoga mat and more.

For Priscilla, her time in the gym turned her life around. She lost 120 pounds and has a goal of losing 70 more. She stopped using her oxygen after a year in the program, and her arthritis and fibromyalgia basically went away. Today, she can take that walk on the beach with her granddaughter.

The Social Factor

For Cecil Daniels, a 71-year-old man who was diagnosed with high blood pressure at 14 years old and suffered from diabetes, it was the social aspect of SilverSneakers that hooked him. At the barbershop where Cecil spent many hours of his days, his friends hounded him to join them at their local Gold’s Gym. A year into the program, he lost 23 pounds, his diabetes and blood pressure came under control, and he started feeling good “all the time.”

“In all of our studies, one of the main motivating factors for participation is the social aspect,” Powell says. SilverSneakers Program Advisors help facilitate potluck dinners, cooking



SilverSneakers helps older adults stay active and socially engaged.

classes, knitting circles and more to keep members engaged with fitness on a deeper level.

Hard Work Pays Off

Medicare beneficiaries enrolled in SilverSneakers showed better physical and emotional health, less impairment in daily living activities, and a higher average number of days of good health. In one study in the second year of the program, participants had fewer inpatient hospital admissions, and members who went to the gym two or more times per week saved an average of \$1,252 compared to those who went less than one time per week.

The greatest opportunities to improve health and reduce costs are in people

with chronic conditions like diabetes and depression. Strength training may improve balance and decrease risk of falls, and exercise is increasingly recognized as beneficial in the prevention of Alzheimer's disease and other age-associated neurodegenerative disorders.

A Healthy Future

SilverSneakers has expanded dramatically over the last five years. Today, there are 10 million eligible Medicare recipients and the program partners with 11,000 facilities nationwide. There are fitness locations in all fifty states, and SilverSneakers recently hit 50 million member visits. The program continues to expand

through member input, alerting the program to networks that should be added and ideas for new types of instruction.

Mary Swanson's father continued his exercise regimen for another 30 years. Each year, SilverSneakers recognizes determined and inspiring members, like Cecil and Priscilla, with the Richard L Swanson Inspiration Award, named in her father's honor. ■

To begin your own journey to better health, visit silversneakers.com or call toll-free 888-423-4632, Monday - Friday, 8 a.m. - 8 p.m. EST, to find out if your health plan offers this benefit or to find a SilverSneakers fitness location near you.

The Alzheimer's Diet

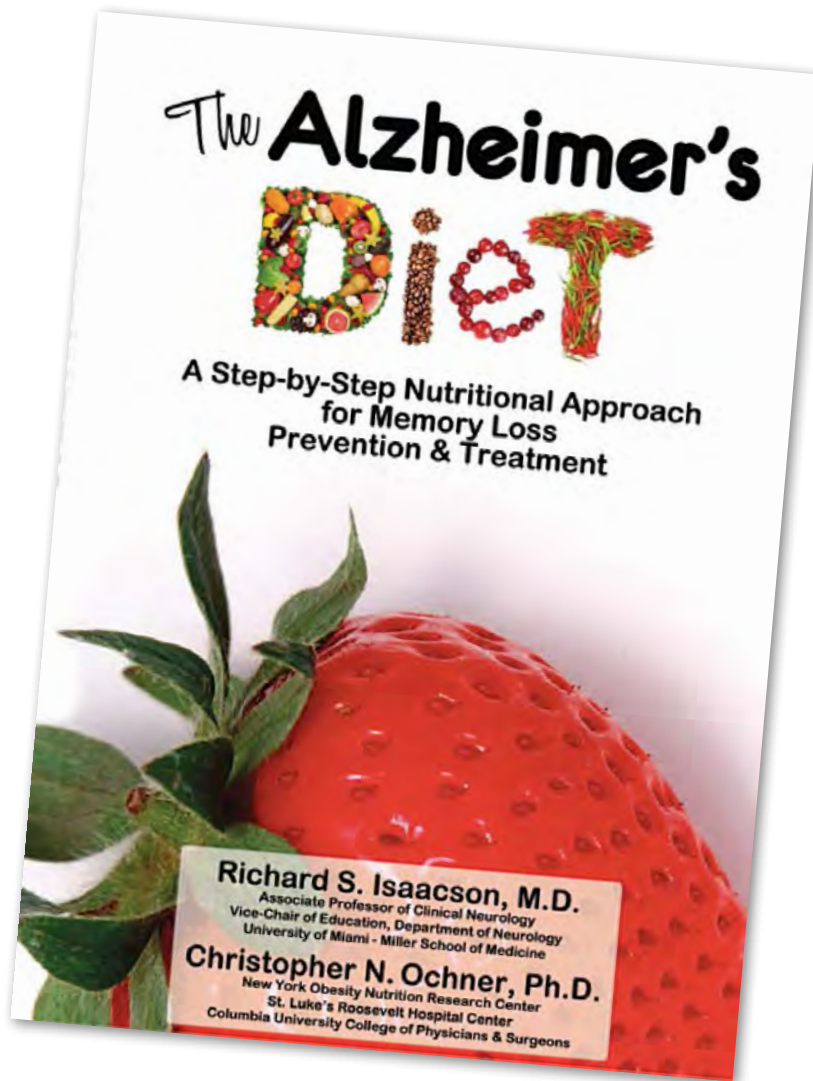
Eating well has a profound effect on your health, so it's no surprise that it also impacts the well-being of your brain. In fact, some experts say the foods you eat have a significant impact on your odds of developing Alzheimer's.

"A bad diet can be a large causal agent in the development of Alzheimer's," says Christopher N. Ochner, Ph.D., co-author of *The Alzheimer's Diet: A Step-by-Step Nutritional Approach for Memory Loss Prevention & Treatment* (AD Education Consultants, 2013). "But the positive effects of a healthy diet are really profound. The earlier one starts on a brain-healthy diet, the better. Most studies show the largest positive effects of diet for risk reduction or possible prevention, but a brain-healthy diet can help individuals already diagnosed as well. In fact, several randomized clinical trials have demonstrated the positive effects of diet for patients with memory loss."

Although the Fisher Center does not endorse any specific diet for the prevention of Alzheimer's, it does believe that a healthy diet is important. Always talk to your doctor first if you are planning to change your diet.

Here is what the authors of *The Alzheimer's Diet* recommend for the prevention of cognitive decline:

- **Eat fish.** Fatty fish such as wild salmon, mackerel, and lake trout are rich in omega-3s, fatty acids that play important roles in the health and function of neurons, says Richard Isaacson, M.D., co-author of *The Alzheimer's Diet*. They may also help reduce beta amyloid plaques that cause Alzheimer's and brain inflammation.
- **Boost your intake of antioxidants.** Good sources include berries, kale, mushrooms, onions, beans, and 100% unsweetened cocoa powder. Antioxidants help neutralize free radicals—the damaging byproducts of the brain burning glucose for energy—that cause oxidative neural damage. And good news for coffee lovers: caffeinated coffee may help protect the brain, too. "The caffeine itself may have neuroprotective effects, and coffee beans are high in antioxidants," Isaacson says. "The two together seem to work synergistically or at least in additive fashion."
- **Think Mediterranean.** Eating a Mediterranean-style diet abundant in fruits and vegetables, lean proteins (fish, chicken, and turkey), low-fat yogurt and cheeses, and nuts and seeds, can help preserve brain health and function. At the same time, it doesn't include red meats and processed foods, which are high in unhealthy fats.
- **Minimize high glycemic carbs.** Foods such as white rice, pasta, baked goods, chips and bagels cause insulin levels to rise and fall rapidly, which, over time, may be harmful to the brain. "These foods cause rapid spikes and then subsequent crashes in insulin, and eventually impair the body and brain's insulin response," Ochner says. "This may lead to insulin insensitivity in the brain, which is why AD is sometimes casually referred to as 'diabetes type 3'."
- **Eat the right proportions every day.** A healthy diet requires a balance of fats, carbohydrates and proteins. Aim to get 25 percent of your total calories from fat, keeping saturated fat to no more than percent. Get 30-45 percent of your calories from healthy carbohydrates and 25-35 percent from protein.
- **Get enough of the top brain vitamins—folic acid, vitamins B6 and B12, and vitamin D.** Folic acid is found in leafy greens and fortified grains, while B6 is found in lean proteins, chickpeas, potatoes and bananas. You can get B12 from salmon, trout, fortified cereals and low-fat milk. Vitamin D is found in low-fat dairy products, fortified juices, tuna and salmon.
- **Limit unhealthy fats, while eating more healthy ones.** Fats that are good for the brain include avocados, natural peanut butter, some nuts and seeds, and fatty fish. Steer clear of foods high in saturated fats such as most fast foods, anything hydrogenated, dried coconut, butter, whole dairy foods, milk chocolate and white chocolate, and cheese.
- **Do a 12-hour fast every day.** If you routinely wake up at 6 a.m., try to eat your last meal at 6 p.m. the night before. Evidence suggests that substances called ketone bodies, which are produced when there are no



The Alzheimer's Diet offers specific guidance, meal plans and recipes.

carbohydrates to burn for fuel, may have a protective effect on brain cells. Talk with your doctor before starting a fasting regimen.

- **Watch your portions.** Being obese is linked to lower cognitive function. So make sure to keep an eye on total calorie intake. ■

Sample Menu

Breakfast: Fruit smoothie—blend $\frac{1}{2}$ c strawberries and blueberries with $\frac{1}{2}$ c Greek yogurt and $\frac{1}{3}$ c ice; add 2 tsp sugar-free sweetener. Black or green tea or coffee.

Lunch: Spinach salad—fresh spinach with chunks of chicken, walnuts and pomegranate seeds; fat-free balsamic vinaigrette dressing.

Snack: Protein bar with 5-7 g total fat (less than or equal to 3 g); less than 10 g carbohydrates; 1 g protein per 10 calories; 2-5 g fiber and folic acid, B6, B12 and D.

Dinner: Grilled rosemary salmon skewers (see recipe). 1 glass Concord grape juice.

Dessert: Strawberries 'n' cream. Chopped strawberries with $\frac{1}{2}$ c fat-free half-and-half. Add small amount sucralose to desired sweetness.

Grilled Rosemary Salmon Skewers

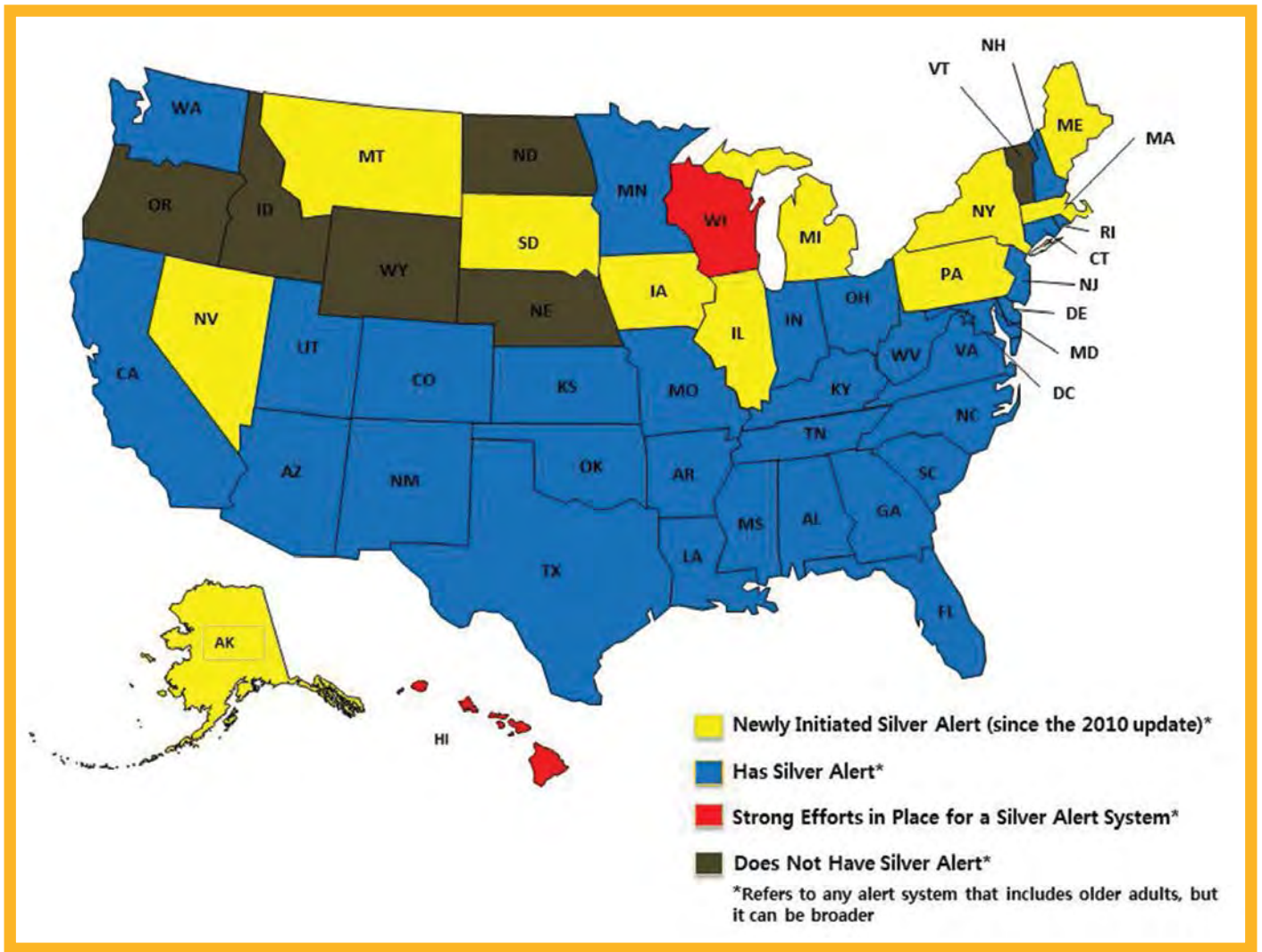
Ingredients

- 2 tsp minced fresh rosemary
- 1 tsp extra-virgin olive oil
- 2 cloves garlic, minced
- 1 tsp freshly grated lemon zest
- 1 tsp lemon juice
- ½ tsp kosher salt
- ¼ tsp freshly ground pepper
- 1 pound center-cut salmon fillet, skinned and cut into 1-inch cubes
- 1 pint cherry tomatoes

Directions

1. Preheat grill to medium-high.
2. Combine rosemary, oil, garlic, lemon zest, lemon juice, salt, and pepper in a medium bowl. Add salmon; toss to coat. Alternating the salmon and tomatoes, divide among eight 12-inch skewers.
3. Oil the grill rack. Grill the kebab, carefully turning once, until the salmon is cooked through, 4 to 6 minutes total. Serve immediately.





Silver Alerts Are as Good as Gold

By Mary Adam Thomas

An Update on State and Local Efforts to Find Missing Adults

Days after an 88-year-old resident of an Eastern Oklahoma residential facility went missing, he was found in Flagstaff, Arizona. A 71-year old Texan who wandered from his home was located the next day, disoriented but alive. A North Carolina 20-year-old was found safe the day after getting lost during a bike ride. All suffer from cognitive impairment, and all were located after Silver Alerts were issued on their behalf.

Silver Alerts notify the public via roadside signs, radio announcements and other media that a memory-impaired person is missing. Although they are most commonly associated with missing seniors, they are sometimes also activated to help locate adults who suffer from other forms of cognitive impairment (such as developmental disabilities). Silver Alerts are modeled after Amber Alerts, which are put in place to find missing children.

Since *Preserving Your Memory* first reported on this topic (see “Silver Alert Finding Its Way Home” in our Spring 2009 issue), awareness has spread across the country.

Federal Silver Alert legislation was initially introduced to the U.S. Congress in 2008. A bill passed in the House of Representatives in September of that year, but the 110th Congress adjourned before the Senate could consider the issue. A revamped program, known as the National Silver Alert Act, was re-introduced to the House in February 2009, but was not taken up by the Senate. The policy’s most recent iteration, the National Silver Alert Act of 2011 (referred to as S. 1263) was introduced in June 2011, but was referred to committee, where it remains. As such, there is currently no official Silver Alert program backed by federal funds. However, awareness has grown and an increasing number of state and local governments are implementing Silver Alert-style programs of their own.

In the first half of 2013, Silver Alerts are credited with helping locate 80 missing seniors.

According to Martha Roherty, executive director of the National Association of States United for Aging and Disabilities (NASUAD), localized programs can actually enhance the effectiveness of these safety-based initiatives while also providing an important educational component for first responders. “The beauty of Silver Alert programs is that they bring together state and local agencies that haven’t traditionally worked together. It gives law enforcement an opportunity to partner with social services to ensure the safety of citizens, helping them stay in their homes and their communities longer,” says Roherty. “Lots of training has taken place in recent years to teach law enforcement officers how to work with individuals with memory impairment and other cognitive disabilities so that these agencies and their officers can become more sensitive to the needs of various groups of citizens. Part of that has come about directly because of programs like Silver Alert,” she adds.

According to NASUAD, 42 states plus the District of Columbia and New York City have now instituted official Silver Alert programs, and two additional states have begun legislative efforts but have yet to implement programs. While each state and municipality tailors its program to suit the specific needs of its citizens, all share the goal of protecting vulnerable adults.

“Some of the states have been slower to adopt Silver Alert programs for various reasons,” reports Roherty. “Some are reluctant to do it because of privacy concerns, and many say the cost of implementation is just too high.” In addition, she explains, some law enforcement agencies resist Silver Alert programs because of concerns that they will be used as a crutch. “Quite frankly, some police departments are nervous that if there are community alert systems in place, assisted living facilities and family members might rely too heavily on them instead of adequately caring for individuals with cognitive issues,” she says.

Still, one need only look at the proven results of Silver Alert initiatives that are in place. In Florida, where more than four million citizens are aged 60 or older and more than half a million of those seniors are said to have some form of memory loss, the success stories pour in. In June 2013 alone, 14 missing seniors were found and returned to safety, thanks to Silver Alerts. In the first half of 2013, Silver Alerts are credited with helping locate 80 missing seniors.

Mary M. Barnes, chair of Florida’s Silver Alert Support Committee, summarizes the importance of her state’s efforts this way: “Individuals with dementia are at the greatest risk for wandering, and they make judgmental errors such as driving into wooded areas or water, driving the wrong way on the road and not recognizing road signs. The Silver Alert is vital to protecting a very fragile and vulnerable population in Florida, and it may help prevent a tragedy.”

42 states plus the District of Columbia and New York City have now instituted official Silver Alert programs.

Even without the backing of federal legislation and even when they’re called by other names, Silver Alert-style communication strategies are helping to return cognitively impaired adults to safety in communities throughout the country. In the words of NASUAD’s Roherty, “As the aging population continues to grow, the need for these wrap-around resources will become more of a priority for states. Silver Alerts are a small but important portion of those types of programs; they can provide comfort to caregivers and family members who will know that in an emergency, there are tools that can be used—and have been used effectively—to help bring people home safely.” ■

The Power of Purple

Wristband Program Aims to Keep Hospital Patients Safe

While Silver Alerts help locate people who wander from their homes, what measures are in place to do the same for memory-impaired adults who are being treated in hospitals for issues unrelated to their dementia?

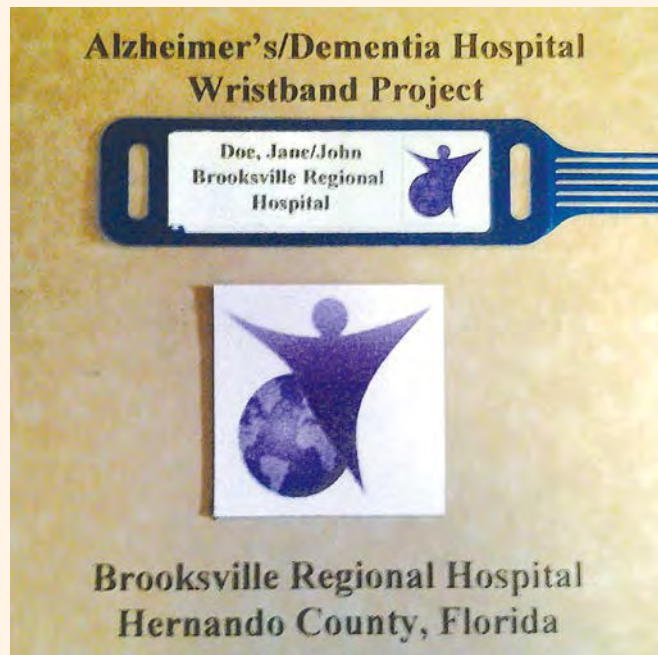
That's precisely the problem Gary LeBlanc wants to solve. Author of *Staying Afloat in a Sea of Forgetfulness*, *Managing Alzheimer's and Dementia Behaviors* and co-author of *While I Still Can*, LeBlanc also writes a column about caregiving. He understands the challenges of caring for a person with dementia, having seen his father through his own cognitive decline and several hospital stays.

"We all know that routine is one of the most important parts of taking care of someone with dementia," says LeBlanc. "But when they're in the hospital, that routine goes out the window. During one of my dad's hospital stays, I asked his doctor why nobody else seemed to know that he had dementia; even nurses couldn't keep it straight that he needed special care."

So LeBlanc decided to do something about it. The result is the Alzheimer's/Dementia Hospitalization Wristband Project, currently being piloted at Florida's Brooksville Regional Hospital.

The program includes a multi-tiered set of solutions to keep memory-impaired in-patients safe and well cared for during hospital stays.

- A sticker featuring the "purple angel" logo (recognized as the international symbol of dementia awareness) is attached to the standard-issue wristband of any patient with a prior diagnosis of memory loss who is admitted to an acute care hospital.
- A large magnet with the same logo is affixed to the patient's door to alert staff to the patient's memory issues.
- All staff members receive training to better understand how to work with cognitively impaired individuals, meet their physical and emotional needs, and keep them safe during hospital stays.



The Wristband Project is intended to raise awareness of individual patients' needs within the hospital setting. Clinicians who see the purple logo will know not to make critical treatment decisions based on that patient's self-reported case history. Staff will be trained to understand that patients with purple angel wristbands who exhibit unpredictable behavior are memory-impaired, not mentally ill individuals in need of 72-hour psychiatric holds. Finally, similar to Silver Alerts, when patients are found walking unsupervised throughout the halls or on the grounds of the hospital while wearing a purple angel wristband, they are more likely to be returned safely to their rooms.

For Gary LeBlanc, the program is one small tool in the enormous task of keeping dementia patients safe. "You can't look at a person with memory impairment straight in the face and know they have dementia," he says. "It's just not a visible condition, so you have to identify them to help protect them."

More information on LeBlanc's work, including details about the Wristband Project, is available at www.common sensecaregiving.com.

ARE YOU PART OF THE SANDWICH GENERATION?

Caring for children and elderly parents presents unique challenges.

Whether they know it or not, many Baby Boomers belong to the “sandwich generation.” This doesn’t refer to what they eat for lunch.

It’s about their situation, sandwiched between caring for their children and their parents at the same time. To be sure, these caregivers deal with a variety of stresses, but they enjoy unique satisfaction as well.

These busy people aren’t a small group—there are more than 50 million sandwich caregivers in the U.S. About 70 percent of them are between 41 and 59 years of age and 20 percent are under 40. According to the Pew Research Center, sandwich caregivers are as likely to be men as women.

Relentless Demands

They all have one thing in common: They’re busy caring for family members from dusk till dawn.

“When someone must care for themselves, their children and aging parents at the same time, it becomes difficult to juggle everything at once,” says Kristine Bertini, Psy.D., a psychologist at the University of Southern Maine and author of *Strength for the Sandwich Generation: Help to Thrive While Simultaneously Caring for Our Kids and Our Aging Parents*. “One example is the situation that a sandwich caregiver faces in the morning. They have to get

children ready for school, give attention to their husband or wife, and care for parents living with them. It’s a very demanding life.”

Those demands don’t just cause physical fatigue. There is also emotional stress. “These caregivers, most of whom are in their 40s and 50s, previously thought that at that age, they’d have their lives to themselves,” says H. Michael Zal, psychiatrist and author of *The Sandwich Generation: Caught Between Growing Children and Aging Parents*. “But suddenly they find that their kids still need them, but in different ways than before, and their aging parents ask them for help with their daily lives, even with things like managing their finances. These caregivers can also be faced with an additional financial burden. They can feel ‘stuck’ in this situation and resentful because of it.”

If the all-consuming pressures of caregiving aren’t recognized and managed, sandwich caregivers can run into marital conflicts, depression, poor performance on their jobs, strained relationships with family members, isolation from friends and little time for social activities.

Reasons for Hope

But it’s far from a hopeless situation. With the right combination of insight, planning and communication, a

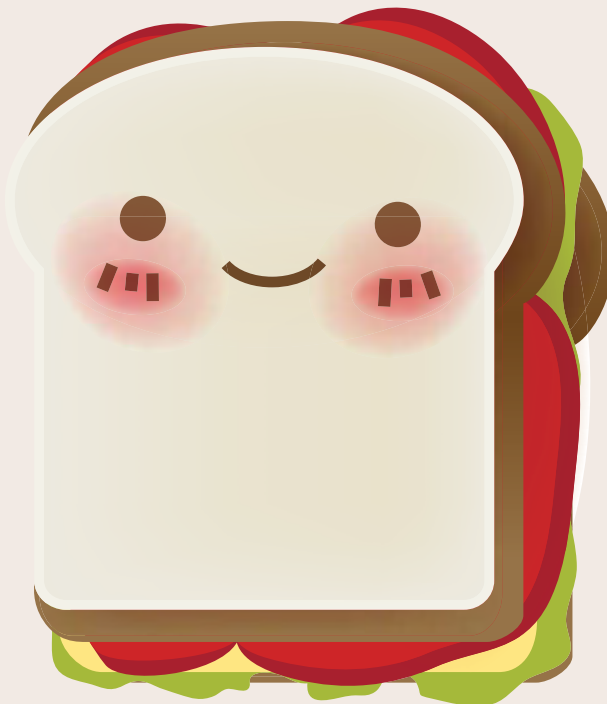
sandwich caregiver's hectic life can be made more manageable. Here are some tips from the experts:

- **Don't Try to Please Everyone**—“Don't hold onto the notion that you can please everyone, because the reality is that you can't,” says Sandra Haymon, Ph.D., psychologist and author of *Baby Boomers—Sandwiched Between Retirement & Caregiving*. “You don't need other people's approval of the things you're doing, and there isn't one right way to do them. Everyone's situation is unique, and the caregiver usually knows what is best for their family.”

- **Get Professional Help**—Don't try to perform this juggling act on your own. Contact a local social worker, the Area Agency on Aging or U.S. Health and Human Services (www.longtermcare.gov) for strategies for caring for children and senior parents at the same time. Also, team with a financial planner to learn how to manage higher expenses.

- **Pace Yourself**—“The biggest mistake caregivers make is seeing the role as a 100-yard dash instead of a marathon,” says Haymon. “Caring for children and aging loved ones can last for years, even decades. Caregivers need to pace themselves—they have to realize there is only so much they can do in a day—or they won't make it to the finish line with their health and relationships intact.”

- **Hold Family Meetings**—Scheduling time for the entire family to communicate with each other is very important. The family members must understand their responsibilities and have a chance to discuss their needs and the best ways to address them. These meetings aren't a time for criticism; everyone must feel free to say exactly what is on their mind.



The sandwich generation of caregivers is caring for children and parents at the same time.

- **Establish Routines**—“By following routines for meal times, activity periods, bed times and chores, everyone knows what is expected of them and doing things together every day strengthens bonds within the family,” says Bertini. “Without this kind of structure in place, a busy day becomes even more hectic and stressful.”
- **Take Care of Yourself**—Many sandwich caregivers are so focused on doing good things for others that they don't do good things for themselves. “Our emotional and spiritual well-being is directly connected to our physical

health,” says Haymon. “Take care of yourself physically by exercising, maintaining a healthy diet and scheduling down time. Stay connected with family and friends. Practice relaxation techniques. Do things that make you happy. Don't let the role of caregiver consume you. You have many other roles to play in life—pay attention to and enjoy those roles.”

Lasting Fulfillment

The role of sandwich caregiver is relentlessly demanding, but it can also be extremely rewarding. In addition to giving their children valuable family experiences, many sandwich caregivers benefit from the opportunity to care for parents who, much earlier in life, cared for them.

“In this situation, elderly family members are dependent on their children, so sandwich caregivers can rebuild relationships with their parents and experience deeper emotional intimacy with them,” says Bertini. “A sandwich caregiver's parents can be more willing to express their emotions and allow close relationships to flourish. Also, involving grandchildren in caring for their grandparents not only distributes the workload, it develops a multigenerational bond in the family that can be profound, uplifting and enduring.” ■

Health Care Power of Attorney

Trusting your end-of-life medical decisions to someone else

It's never easy to talk about end-of-life decisions. But even the healthiest adults could have a serious accident or suffer a medical emergency—such as a stroke or heart attack—that could leave them unable to make their own medical decisions. If you're in the early stages of Alzheimer's disease (AD), it's especially important to think about how you want your care to be managed as your disease progresses.

Legal experts recommend that all adults—even the young and healthy—set up an advance directive known as a health care power of attorney. This legally binding document allows you to appoint another person as your “agent” or “proxy” who can make medical decisions for you when you are no longer able to do so.

“Every adult who has the capacity to sign a health care proxy should do this,” says Shirley Berger Whitenack, a partner with Schenck, Price, Smith & King in Florham Park, N.J. “You never know what might happen to you that may render you incapacitated, either temporarily or permanently.”

Doctors and other healthcare professionals are likely to involve your next of kin in making medical decisions, but if a conflict arises—perhaps among family members or between health care providers and the family—the judicial system will step in and appoint a guardian to help resolve it. That is a costly, lengthy process that makes



A health care power-of-attorney makes sense for everyone.

private matters public and often causes disagreements among family members.

“A simple health care power of attorney can take care of that issue and leave no doubt as to who is to be responsible for those decisions,” says Whitenack, who serves as vice president of the National Academy of Elder Law Attorneys. “You can set up this arrangement and have no worries.”

Finding the Right Person

Many people appoint a spouse or adult child as their health care proxy, but the best choice is someone who you are certain will carry out your wishes and who can communicate those desires clearly with family members and your health care providers. Choose someone who can be rational and level-headed in

the face of difficult situations.

“You should find someone who will both respect and honor your wishes,” says Howard Krooks, a partner with Elder Law Associates, P.A., in Boca Raton, Fla., who also practices in New York. “Your health care proxy may not agree with your wishes, but they should understand that their role is to be a communicator of those wishes. You'll need someone who's willing to understand what your wishes might mean in a variety of difficult circumstances and who has the strength of conviction to implement those wishes.”

You may also want to name a successor health care proxy who could take over the responsibility should your first proxy become incapacitated or die.

Difficult Discussions

It's important to have open, candid discussions with your health care proxy—along with your spouse, children and other important loved ones—about your preferences for pain management and medical interventions such as CPR, feeding tubes or mechanical ventilation. Let them know at what point you'd want life support removed, how you feel about donating your organs and what to do with your body after death (burial, cremation, donation to science, etc.). These conversations may be uncomfortable, but they are essential.

You should detail your preferences about end-of-life care in another advance directive called a living will. As a companion piece



A health care proxy should be someone you trust to communicate your wishes clearly.

to your health care power of attorney, this document will make it easier for your health care proxy to carry out your wishes in a life-or-death situation.

“It’s a good idea to have these family discussions while you’re still healthy so that your loved ones can point back to that discussion or series of discussions when they’re facing a difficult situation that may be fraught with emotion,” says Krooks, who serves as president of the National Academy of Elder Law Attorneys. “That’s easier than referencing a private discussion that happened when no other family members were present.”

Peace of Mind

While health care power of attorney forms and living wills can be downloaded from the Internet, the

laws governing these advance directives vary from state to state. You’ll run the risk of signing a document that has no legal standing. Whitenack and Krooks recommend consulting an elder law attorney to ensure that your document is legally binding. Your attorney also can answer your questions and address related matters, such as financial management and estate planning.

Though the costs will vary according to the services you need, most health care power of attorney arrangements can be set up for \$100 to \$300. That’s a small price to pay for the peace of mind it offers.

“My advice would be to decide that you’re actually going to do this, whether you’re ill or not,” Krooks says. “Make it a part of putting your life and estate in

order, then you can put the documents on the shelf, forget about it and hope your agent never has to use them. But you can rest assured and have the peace of mind that if they do need to use them, you’ve planned ahead and your wishes will be honored.” ■

You can find an elder law attorney near you by consulting the National Academy of Elder Law Attorneys at www.naela.org or the National Elder Law Foundation at www.nelf.org.

Bernard A. Krooks is managing partner of the law firm Littman Krooks LLP (www.littmankrooks.com). A certified elder law attorney, he is a past president of the National Academy of Elder Law Attorneys and past president of the Special Needs Alliance.

Brain-Boosting Puzzles

“Use it or lose it.” The message is simple. If you don’t use your muscles, they will no longer be as effective as they should be. Of course, the brain is not a muscle; however, it has recently come to light that “mental workouts,” such as solving crosswords and other puzzles, can help ward off Alzheimer’s. In these pages, we offer a variety of different types of puzzles that will work out your various skills involving memory, deduction, and letter manipulation, and, we hope, also provide you with a ton of fun!

(Answers on page 37)

MATCH THESE

Identify these mountain peaks by matching them to the countries where they are at least partially located.

- | | |
|--------------------------|------------------|
| 1. ___ Pico de Orizaba | a. Israel |
| 2. ___ Mount Kilimanjaro | b. Mexico |
| 3. ___ Aconcagua | c. Italy |
| 4. ___ Matterhorn | d. Greece |
| 5. ___ Mount Etna | e. Japan |
| 6. ___ Mount Ararat | f. Argentina |
| 7. ___ Mount Olympus | g. Tanzania |
| 8. ___ Mount Everest | h. Canada |
| 9. ___ Mount Fuji | i. Nepal |
| 10. ___ Mount Carmel | j. Switzerland |
| 11. ___ Mount McKinley | k. United States |
| 12. ___ Mount Logan | l. Turkey |

DROPLINE

Take the letters in the top half of each column below and distribute them in the blanks of the bottom half so that the letters spell out a humorous observation. The black squares are the spaces between words. One letter has been dropped in place to start you off.

W	H	E	Y	N	E	D	Y	E	U	D	B	M	O	R	E
R	I	M	O	R	U	Y	E	C	R	O	E	O	W	H	F
C	E	F	N	D	E		N	O	E	D	M		R	R	O
B			O	O				F	I				A		I
B															

LEAPFROG

Here’s a list of famous pairs — two names for each number. Their letters are in the correct order, but they overlap. All you have to do to find the names is separate the letters.

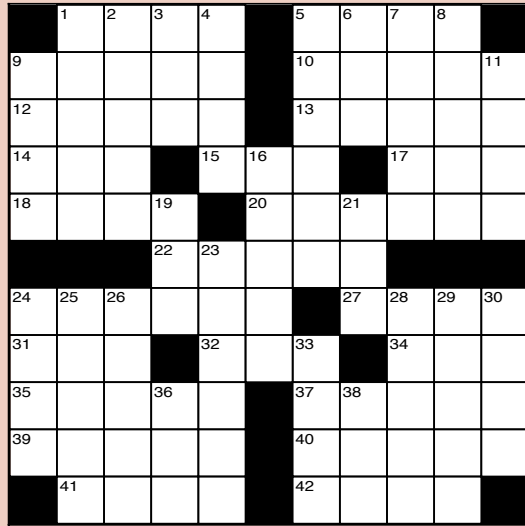
Example: **EOURRPYHDEICUES** — ORPHEUS & EURYDICE

- | | |
|-----------------------|-------|
| 1. ABLURLENSN | _____ |
| 2. JEBRERNY | _____ |
| 3. JUROLMIEOET | _____ |
| 4. CALENOTPOATNRYA | _____ |
| 5. CSOHNENYR | _____ |
| 6. ROASTGAERIRES | _____ |
| 7. TLHOUELIMSAE | _____ |
| 8. DBAGLOWONODIDE | _____ |
| 9. MDRRJHEKYYDLEL | _____ |
| 10. JONASPEOPLHEIONNE | _____ |

BRAIN-BOOSTING CROSSWORDS

(Answers on page 37)

We have provided two crosswords here to sharpen your puzzle skills. Start with the one on the left, which is the easier puzzle. In this one we have provided solving aids, such as the number of words in multi-word entries. The puzzle on the right is a medium-level puzzle and those solving aids are not provided. The second puzzle is also a thematic puzzle: the title "You'll Have to Show Some 'I.D.'" is a hint. Have fun testing your knowledge while doing something that's good for you!



Across

- 1. "M*A*S*H" actor Jamie
- 5. Utilizes
- 9. "Sound of Music" role
- 10. Maritime
- 12. Particles
- 13. Teacake
- 14. Laughing ____
- 15. School org.
- 17. Beer container
- 18. French islands
- 20. Proposals
- 22. Kitchen device
- 24. Egypt's continent
- 27. Local pool spot, perhaps (abbr.)
- 31. Sis's counterpart
- 32. Conjunction, informally
- 34. Stately tree
- 35. Semicolon bottom

Down

- 1. Deadly
- 2. Got up
- 3. Border
- 4. Scrape roughly
- 5. Dangerous
- 6. Cul-de-____
- 7. Summon, as a memory
- 8. More sound
- 9. Wise trio of the Bible
- 11. Millipede's multitude
- 16. Synagogue scroll
- 19. School subj.
- 21. Use a skillet
- 23. Fuel ingredient
- 37. Math proportion
- 39. Ale holder
- 41. Dice game
- 42. Feels sick

- 24. Fundamentals
- 25. Beer head
- 26. Juliet's beloved
- 28. Iron or aluminum
- 29. Cuts quickly
- 30. "Famous" cookie maker
- 33. Killer whale
- 36. Behave or print preceder
- 38. Jackie O's second husband

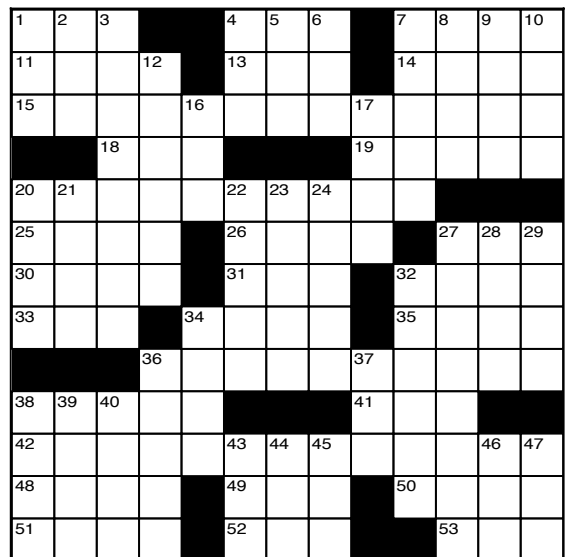
You'll Have to Show Some "I.D."

Across

- 1. ____ hat
- 4. Actor Vigoda ("Barney Miller")
- 7. Cabbie cost
- 11. Road shoulder
- 13. Hombres
- 14. Winglike
- 15. Robert Sherwood play named for a solitaire game
- 18. ____ forma
- 19. Clean off
- 20. Tariff on foreign goods
- 25. Actress Zetterling et al.
- 26. Holm and McKellen of "Lord of the Rings"
- 27. Writer Umberto
- 30. Mentally competent
- 31. Lawyer's deg.
- 32. Treat snootily
- 33. Texting abbreviation for "Wow!"
- 34. Jai ____
- 35. Should that be the case
- 36. Juicy tidbit from someone with special knowledge
- 38. Singer Rimes
- 41. "Con ____" (1997 action flick)
- 42. Modern-dance diva of the early 20th century
- 48. Garment of Delhi
- 49. Motel's kin
- 50. Actor Barry
- 51. Conduit
- 52. Whoopi's role in "Ghost"
- 53. Nobelist Hammarskjöld

Down

- 1. Item in a geisha's wardrobe
- 2. Escorted
- 3. Very wet
- 4. They follow midnights: abbr.
- 5. Futon, e.g.
- 6. Wind dir.
- 7. Sprite
- 8. Pool plant
- 9. Bowl shouts
- 10. Costume designer of the '20s
- 12. Melancholy
- 16. Craggy hill
- 17. "____ Dance" (Goodman's theme song)
- 20. "____ Tired" (Beatles)
- 21. Grown-up miss
- 22. Works the soil
- 23. ____ Lama
- 24. Raveled
- 27. Got tough
- 28. Point
- 29. Flute's orchestral neighbor
- 32. "Tin Men" product
- 34. ____ regni
- 36. Film made outside the studio system
- 37. Perrier, to Pierre
- 38. Say "yeth"
- 39. Actor Morales
- 40. "Modern Maturity" publisher
- 43. Diamond ____ (country band)
- 44. "Conjunction Junction" freight
- 45. Genetic info carrier
- 46. Literary ors
- 47. Not positive: abbr.



BRAIN-BOOSTING PUZZLES

HIDDEN-MESSAGE WORD-FIND™

After you have located and circled in the diagram all the words in the list below, read the leftover (unused) letters from left to right, line by line, to reveal a quote about butterflies from Richard Bach, author of "Jonathan Livingston Seagull."

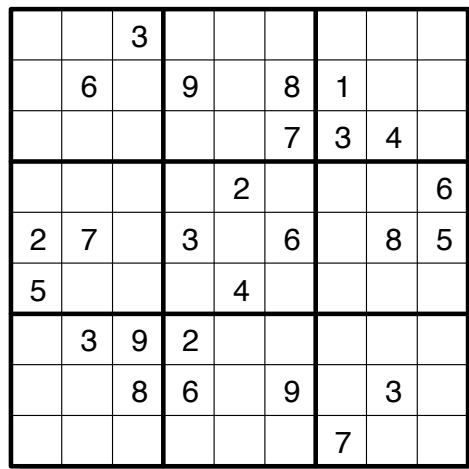
You are looking for a 37-letter phrase.

- | | |
|-------------|----------|
| ARRANGEMENT | IDENTIFY |
| BOARD | INSECTS |
| BOTTLE | LABELS |
| BOX | LOCATION |
| BUTTERFLIES | NET |
| CAPTURE | PINS |
| CLUB | RESEARCH |
| COLLECTING | SPECIES |
| DATE | SPREAD |
| DISPLAY | STUDYING |
| FIELD GUIDE | TAGS |
| FINDING | TRADING |
| FORCEPS | WINGS |
| HOBBY | |
| HUNTING | |

W T N E M E G N A R R A D H A
 T E T B G N I Y D U T S A H E
 S N B H O B B Y G C A T E T E
 R P L O C A T I O N P I R C L
 L A E R X W R C A L I A P A L
 S P E C I E S D S T D T S P H
 E E N N R F I N D I N G N T B
 H D G O D O F T N H S E W U O
 C S R L D A F G T H E G L R H
 R M A S T E T R C A B C A E L
 A L G N I T C E L L O C B T S
 E D I S P L A Y F I T N E D I
 S P I N S E C T S A T B L U T
 E D I U G D L E I F L T S E R
 R B U T T E R F L I E S F L Y

SUDOKU

To complete the puzzle below, fill in the squares so that each digit 1 through 9 appears exactly once in each row, in each column, and in each enclosed nine-unit block.



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PUZZLE ANSWERS

Match These

1b, 2g, 3f, 4j, 5c, 6l, 7d, 8i, 9e, 10a, 11k, 12h.

Dropline

Before you borrow money from a friend, decide which you need more.

Leapfrog

1. Burns & Allen; 2. Ben & Jerry; 3. Romeo & Juliet; 4. Antony & Cleopatra; 5. Sonny & Cher; 6. Astaire & Rogers; 7. Thelma & Louise; 8. Blondie & Dagwood; 9. Dr. Jekyll & Mr. Hyde; 10. Napoleon & Josephine.

Hidden Message

What the caterpillar calls the end of the world, the master calls a butterfly.

Crossword 1

F	A	R	R	U	S	E	S		
M	A	R	I	A	N	A	V	A	L
A	T	O	M	S	S	C	O	N	E
G	A	S	P	T	A	K	E	G	
I	L	E	S	O	F	F	E	R	S
C	O	R	E	R					
A	F	R	I	C	A	Y	M	C	A
B	R	O	T	H	O	E	L	M	
C	O	M	M	A	R	A	T	I	O
S	T	E	I	N	C	R	A	P	S
H	O	S	E	A	I	L	S		

Crossword 2

O	L	D	A	B	E	F	A	R	E			
B	E	R	M	M	E	N	A	L	A	R		
I	D	I	O	T	S	D	E	L	I	G	H	T
P	R	O	E	R	A	S	E					
I	M	P	O	R	T	D	U	T	Y			
M	A	I	S	I	A	N	S	E	C	O		
S	A	N	E	L	L	D	S	N	U	B		
O	M	G	A	L	A	I	I	F	S	O		
I	N	S	I	D	E	D	O	P	E			
L	E	A	N	N	A	I	R					
I	S	A	D	O	R	A	D	U	N	C	A	N
S	A	R	I	I	N	N	G	E	N	E		
P	I	P	E	O	D	A	D	A	G			

Word-Find

W	I	N	E	M	E	G	N	A	R	R	A	D	H	A
T	E	T	C	N	I	Y	D	U	T	S	A	H	E	
S	N	E	H	O	B	B	Y	C	C	A	T	E	T	E
R	P	L	O	C	A	T	I	O	N	P	I	R	C	L
L	A	E	R	W	R	C	A	L	I	A	P	A	L	
S	P	E	C	I	E	S	O	S	T	D	T	S	P	H
E	E	N	R	E	I	N	D	I	N	G	N	T	B	
A	D	G	O	O	F	T	H	S	E	W	O			
C	C	R	L	D	A	G	T	H	E	G	O	R	H	
R	M	A	S	T	E	R	C	A	B	C	A	E	L	
A	L	G	N	I	T	O	L	L	O	O	B	T	S	
E	I	S	P	L	A	M	F	I	T	N	E	D		
S	P	I	N	S	E	C	T	S	A	T	B	L	U	T
E	D	I	U	G	D	L	E	I	D	L	T	S	E	R
B	U	T	T	E	R	F	L	I	E	S	F	L	Y	

Sudoku

8	5	3	4	1	2	6	9	7
4	6	7	9	3	8	1	5	2
9	1	2	5	6	7	3	4	8
3	8	4	7	2	5	9	1	6
2	7	1	3	9	6	4	8	5
5	9	6	8	4	1	2	7	3
7	3	9	2	5	4	8	6	1
1	2	8	6	7	9	5	3	4
6	4	5	1	8	3	7	2	9

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Using Free Online Resources to Facilitate Family Caregiving Decisions

Feeling overwhelmed for stretches of time—some longer than others—is a natural part of living in a household facing the challenges of dementia.

Although some caregivers and families may feel alone in these challenges, the inspiring truth is that there are a number of new resources available for those facing these same struggles—perhaps more now than ever before.

The nation's largest senior living resource, A Place for Mom (toll-free **866-333-0740** with hours Monday-Friday **5:00 AM-9:00 PM** and Saturday-Sunday **8:30 AM-5:30 PM** Pacific Time), helps caregivers cope with those difficult stretches by meeting the increasing adversity of dementia head-on. Empathetic support, professional advice and centralized tools are some of the ways in which A Place for Mom supports families in the early stages of dementia. However, the later stages of dementia can introduce a new set of challenges. For families in this situation, the increasing unpredictability of the disease often brings about a need for a level of care beyond what can be provided by the typical family—but how does one go about finding the right care?

Research shows that families frequently begin their search for senior living options without a full understanding of what is available. This is understandable, since the senior care industry has been scurrying to meet the rising needs of the growing senior population over the past two decades. As a result, the industry has witnessed the development of many levels of care options. When families begin their search without the safety net of a Senior Living Advisor, they can run into problems. In a recent study conducted by A Place for Mom, 59% of those seeking “nursing home care” ultimately chose an entirely different level of care after they had been educated about the various options by a trusted Senior Living Advisor. It is this advice that can be vital to a family's search.

A Place for Mom's over 240 Senior Living Advisors across the United States help thousands of people each month, providing assistance 7 days a week. These trained professionals perform a thorough consultation, collecting



specific details about the senior's needs and budget in order to identify the appropriate care type. Once the Advisor has a complete profile of the senior, several care options in the area are selected for the family. This invaluable assistance is offered at no charge to families—A Place for Mom carries

out its mission of being a comprehensive senior living resource through payment from the participating senior communities in the A Place for Mom network.

When it comes to selecting a senior living community for a loved one, A Place for Mom also offers families additional resources to find only the best care for their loved one. With over 100,000 senior living communities and care providers across the country, selecting a senior housing option can be daunting. However, SeniorAdvisor.com (toll-free **866-333-0742** with hours Monday-Friday **5:00 AM-9:00 PM** and Saturday-Sunday **8:30 AM-5:30 PM** Pacific Time)—a ratings and reviews site designed for people engaging in this search process—provides a helping hand to aid in the selection process. With over 25,000 ratings and reviews from real families across the country, SeniorAdvisor.com provides a way for families to get an inside look at the communities in their area, with relevant feedback from other families. Caregivers use the information available on SeniorAdvisor.com to determine which senior living communities they would like to tour or investigate in more detail.

Regardless of the stage of a family's journey, A Place for Mom can offer support and guidance. Caregivers.com, AgingCare.com and Alzheimers.net are examples of three separate online resources providing a sense of community to those involved in the daily ups and downs of caregiving. These resource hubs act as a respite, providing inspirational quotes, valuable tips and smart, poignant advice from healthcare professionals. These online resources can help minimize the stress and fatigue of caregivers. One of the most significant benefits of utilizing these free resources is that families can feel empowered knowing that they are making the best possible decisions for their loved one.



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ALZTalk.org BETA

ALZTalk.org, is a free and easy way to make new friends and stay connected with those in the Alzheimer's community. Join today to post messages and share pictures and favorite links. ALZTalk.org gives users a voice and allows them to share tips and stories about coping with loved ones with Alzheimer's. It also offers the ability to ask our experts questions no matter how large or small.

People (215)

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Page: 1 2 3 4 5 6 7 8

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Set Up Your Profile in 1 Easy Step

Get Answers to Your Questions

ALZTalk.org

All Users

Bodytomb says:
How's your dad doing today?

HomemChicago says:
Much better today....I think the meds are finally starting to help

Bodytomb says:
How's your mom?

Bodytomb says:
Still has her great sense of humor!

HomemChicago says:
Will you be on same time tomorrow? I have to run...

Bodytomb says:
NP - see you then!

Chat Online

Share Your Photos & Events

ALZTalk.org Forum

There are currently 107 discussions - join in!

Start a Topic

Topic	Attachment	Started by	Started	Replies	Last Comment
Looking for Help With Story	None	Journalist2	Oct 10, 2007	1	last comment by yee
Finding a "Good" Nursing Facility	None	Heidi	Oct 6, 2007	3	3 hours ago by zaza
Short Term Care	None	Heidi	Oct 6, 2007	1	on Oct 6 by Marc
new to alzheimer's	None	lynw31	Oct 7, 2007	2	on Oct 8 by Heidi
Help for Dementia Caregivers	None	Adus	Oct 5, 2007	2	on Oct 9 by Adus
my mom is driving me crazy	None	yelle	Oct 4, 2007	2	on Oct 6 by Adus
Other On Line Chat Sites	None	Yae	Oct 4, 2007	1	on Oct 6 by Marc
curious	None	gymba	Oct 5, 2007	2	on Oct 6 by Yae
Her Husband is a Stranger Now, What to do?	None	Balimattar	Oct 1, 2007	1	on Oct 2 by Tragic-He
How to convince mom to move into Assisted Living	None	Clair	Oct 1, 2007	2	on Oct 4 by Dianakrich
my mom	DSC00913.JPG	msicol	Sep 27, 2007	3	on Oct 6 by Marc
how to support a caregiver overseas	None	sjean	Sep 26, 2007	3	on Oct 7 by sjean
early onset alzheimers	None	Cynth	Sep 23, 2007	4	on Oct 7 by lynw31
Any Chats?	None	Tammy9	Sep 21, 2007	2	on Sep 27 by kash
Staying in bed	None	Thomdix	Sep 19, 2007	1	on Sep 22 by shei
Alternative treatment	None	hssar	Sep 15, 2007	1	on Oct 2 by Yae
new to group	None	rissar	Sep 14, 2007	1	on Sep 26 by Marc
Dementia	None	Tammy9	Sep 14, 2007	4	on Sep 24 by Orion
What if you have to leave them alone	None	Heidi	Sep 12, 2007	1	on Sep 30 by curletto
What if you have to leave them alone	None	Heidi	Sep 12, 2007	1	on Sep 14 by Kathy

ALZTalk.Org Photos

There are currently 142 photos| View as a Slideshow

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Visit ALZTalk.org for the most comprehensive Alzheimer's community resource online. Brought to you by the Fisher Center for Alzheimer's Research Foundation and ALZinfo.org

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