

preserving your

Summer 2010

# Memory

The Magazine of Health and Hope

## Tracie Thoms

Talented singer-actress speaks out for Alzheimer's research

### Wandering

Real-world advice for keeping your loved one from straying

**The Latest News on Alzheimer's Disease and Brain Health**



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Photo: Michael Yarish/Warner Bros.

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# preserving your Memory

The Magazine of Health and Hope



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West 46th Street & 12th Avenue  
New York, NY 10036  
1-800-ALZ-INFO  
www.ALZinfo.org

**Kent L. Karosen, Publisher**  
**Betsey Odell, Editor in Chief**  
**Alan White, Managing Editor**  
**William J. Netzer, Ph.D., Science Editor**  
**Jerry Louis, Graphic Designer**  
**Toby Bilanow, Bernard A. Krooks,**  
**Contributing Writers**



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Sam Gaines, Managing Editor  
Traci S. Cossman, Senior Art Director  
Judy Nance, Account Manager  
Jan McLean, Creative Director  
Traci Marsh, Production Director  
Tiffani Hill-Patterson, Cari Jackson, Tamekia Reece,  
Kelli Rush, Jennifer Sellers, Mary Adam Thomas,  
Michelle Porter Tiernan, Winnie Yu, Contributing Writers

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For advertising information, please contact:  
Betsey Odell Judy Nance  
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(646) 381-5148 (336) 547-8970, ext. 3361

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## Summer is here!



**Betsey Odell**

Summer has arrived, and the warm weather means a lot of good things have returned—including another issue of *Preserving Your Memory*. We think you'll find that this issue has plenty of hopeful news and helpful information for Alzheimer's patients and caregivers alike.

The warm weather is the perfect time to take a day trip for a short vacation from the home. You can do it! Just read our article on preparing for a day trip with an Alzheimer's patient (page 8) to get started. Perhaps you might consider the health and social benefits of a walk outdoors (page 28), but be sure to keep aware of what you need to do to minimize the risks of wandering for your loved one with Alzheimer's or dementia (page 10).

Ready for a treat that brings some good news with it? Barbecue sauce is in the news because of its potential for enhancing good brain health. Consider the delicious possibilities by trying a jerk sauce recipe, direct from the Sandals Resorts (page 22).

Caregiving is the focus of a new major research study sponsored by MetLife Foundation, The National Alliance for Caregiving, and AARP. Find out how America's caregivers are addressing the challenges of providing care (page 15).

Our cover story is an interview with singer-actress Tracie Thoms, who has made Alzheimer's disease a personal cause in her advocacy (page 18).

May summer bring the warmth of friends, family and good times enjoying the splendor of the season.

**Betsey Odell**  
**Editor in Chief**

Please send your tips, stories or questions to the Fisher Center for Alzheimer's Research Foundation, West 46th St. & 12th Ave., New York, NY 10036, or by e-mail to [betsey@alzinfo.org](mailto:betsey@alzinfo.org).

### 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. For more information or to make a donation, go to [www.ALZinfo.org](http://www.ALZinfo.org).

# The Latest News on Alzheimer's Disease and Brain Health

## Clinical Trials Yield Promising Results for AD Research

Affiris, a Vienna-based biotechnology company, will soon begin testing its new Alzheimer's disease (AD) vaccine in six European countries, according to an April announcement.

Clinical trials for the AD02 vaccine, which was developed with the British pharmaceutical company GlaxoSmith-Kline, will involve 420 patients and test the vaccine's efficacy in preventing the buildup of beta-amyloid plaques in the brain by stimulating the production of antibodies to attack the plaques. This buildup has long been suspected of being a critical step in the development of Alzheimer's.

The AD02 vaccine is a therapeutic remedy, designed to be administered to patients already diagnosed with AD.

Approximately 6 million Europeans have been diagnosed with AD. Results from the trials are expected as early as 2012.

## Antibody Therapy

In Toronto, a small preliminary study presented at the American Academy of Neurology meeting in April revealed that a decades-old drug made from human blood may slow the deterioration of mental skills in AD patients. The drug, Gammagard, is typically used to treat immune-system disorders.

Researchers found that the drug appeared to replenish a depleted supply of antibodies that attack the beta-amyloid protein, which forms the plaques associated with AD. The study of 24 patients compared scores on a standard test that measured disturbances in mem-

ory, attention, language and other cognitive skills typically associated with AD. The rate of decline appeared to drop in the group treated with Gammagard. Although the prospect of deriving antibodies from human blood to treat Alzheimer's is fascinating, this study is far too small to allow any conclusions to be drawn regarding Gammagard's effectiveness.

## New Phase IIb Trial

Prana Biotechnology announced that its new AD drug, PBT2, will enter a definitive Phase IIb trial before the end of 2010. This trial will involve 525 patients with mild to moderate AD and will treat patients over the course of a year while measuring key cognitive performance tasks. The double-blind, placebo-controlled trial will test the efficacy of two doses of the drug.

PBT2 shows promise because it has shown positive changes in biomarkers and in cognitive performance among patients treated in a small trial a few years ago.

## Genetic Variant Represents Twice the Risk of Alzheimer's Development, Researchers Find

A rare variation in a single gene may double the risk of developing dementia, researchers found in a U.S. study. The

gene is called MTHFD1L. The variation was present in about 9% of those with late-onset AD, the study found, whereas about 5 percent of those who did not have AD had it. Late-onset AD is the most common type of Alzheimer's, affecting people age 60 and older.

The gene does not have as strong an influence as another genetic variant, which occurs in the gene APOE on chromosome 19. This better-known AD-



Clinical trials for a new AD vaccine will soon begin in Europe.

linked variant occurs in about 40 percent of people with late-onset AD, as opposed to the 25% to 30% of people who have the variant but not the disease.

MTHFD1L is involved in the metabolism of folate, which in turn influence levels of homocysteine in the body. Elevated homocysteine has been shown to be a risk factor for coronary artery disease and late-onset AD.

### **Another Potential AD Drug Target Emerges**

University of Illinois researchers have identified a receptor embedded in the membrane of neurons and other cells that may respond to Alzheimer's treatment, according to a report in the *Federation of American Societies for Experimental Biology (FASEB) Journal*.

The receptor is activated by beta-amyloid, a protein fragment widely believed to be responsible for most of the devastating effects of Alzheimer's disease. Beta-amyloid stirs the neurons to increase activity, which eventually leads to their demise. Beta-amyloid forms the plaques typically associated with AD. Because beta-amyloid binds to a different part of the receptor than that which healthy neurotransmitters bind to, drugs targeting that part of the receptor could frustrate the beta-amyloid binding process without harming the healthy and essential processes of neurons.

### **Protein Clumps, Not Amyloid Plaques, May Start AD Memory Problems**

Results from a mouse model of AD indicate that very small clumps of beta-amyloid, not the plaques made by the same protein fragment, may start the process of memory loss in AD patients. The findings seem to point away from amyloid plaques as having a toxic effect in the development of AD.

In the study, researchers found that mice that didn't develop the amyloid plaques still developed AD as surely as mice that

had both plaques and the amyloid clumps, called oligomers. "These findings may enable the development of neuroimaging agents and drugs that visualize or detoxify oligomers," said Sam Gandy, MD, Ph.D., professor of neurology and psychiatry, and associate director of the Alzheimer's Disease Research Center at the Mount Sinai School of Medicine.

Researchers reported their findings in the journal *Annals of Neurology*.

### **Obesity Gene Presents Greater AD Risk, Study Finds**

The FTO obesity gene possesses a common variant that one in three Americans have, one which puts them at greater risk for weight gain and obesity. But it also leads to a loss of brain tissue, which puts carriers of the variant at greater risk of neurodegenerative diseases like Alzheimer's later in life, according to new U.S. research.

The gene and its variant are typically associated with Americans of European origin, but researchers at UCLA also found that 15% of African Americans and Asian Americans have the gene and variant, as well as 25% of mixed-origin Hispanics. In their study of 206 healthy older Americans from 58 U.S. locations, researchers found that patients with the FTO variant had consistently less brain tissue than did non-carriers of the gene variant. The study ruled out the possibility that other obesity-related risk factors, such as cholesterol, diabetes or high blood pressure, could account for the differences observed.

"If you have the bad FTO gene, your weight affects your brain adversely in terms of tissue loss," said Dr. Paul Thompson, professor of neurology at UCLA and a member of the Brain Research Institute and the Laboratory of Neuro Imaging. "If you don't carry FTO, higher body weight doesn't translate into brain deficits; in fact, it has nothing to do with it. This is a very mysterious, widespread gene."

### **More Evidence That a Healthy Diet Helps Fight AD**

A new study analyzing the dietary patterns of more than 2,000 people age 65 and older added more weight to the belief that certain foods help in the battle against Alzheimer's.

Researchers looked at the dietary patterns of 2,148 New Yorkers every year and a half over a four-year period and found that a diet low in fat, with plenty of salads, nuts, fish, poultry, tomatoes, fruits, and dark, green, or cruciferous vegetables, seemed to be associated with a lower incidence of AD. On the other hand, diets heavier in high-fat dairy products, red meat, organ meat and butter seemed to point to higher risk for developing AD.

The study was published in the *Archives of Neurology*.

### **New Guidelines for Drivers with Dementia**

The American Academy of Neurology (AAN) issued new guidelines for doctors evaluating the ability of patients with AD or other dementia to drive safely, with scores on a standard dementia test and input from family members identified as the two most useful tools in making that judgment.

Research shows that family members are more accurate in their judgments of a patient's driving ability than is the patient. AAN doctors looked at the results of 422 studies on AD and dementia with relation to driving, rating each on the basis of the study's quality and the strength of its findings.

The new guidelines point out that some people with dementia can still drive safely within reason, but the disease's progress will often change that assessment. For more information on this subject, visit the Family Caregiver Alliance's Web site at [www.caregiver.org](http://www.caregiver.org), then click on Fact Sheets & Publications > Fact Sheets > Legal Issues > Dementia & Driving. ■

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



With a little planning, a day trip can be a good experience for everyone.



By Jennifer Sellers

# A Day Out

Learn how to make day trips with your Alzheimer's loved one as safe and easy as possible.

**T**o many people, summer means one thing: vacation! The idea of taking time away from your regular routine for a little rest and relaxation—and maybe some fun and adventure—seems to be just the prescription for most busy lives. However, if you are the caregiver for a loved one with Alzheimer's disease, leaving home for any reason—much less a full-blown overnight trip—can be challenging and overwhelming. Therefore, a day trip may be a great alternative for you and your loved one, easing your travel stress and making the trip more enjoyable for all.

## Where to Go

When it comes to a day trip with a person with Alzheimer's disease, simplicity is key. The place (or places) you choose to go should be low-stress locations. Too much stimulation—like large crowds or loud music—can cause the person with Alzheimer's to become agitated. So with those precautions in mind, what are some good day-trip ideas?

In *The Alzheimer's Sourcebook for Caregivers: A Practical Guide for Getting through the Day*, author Frena Gray-Davidson suggests a walk in a park or garden, driving to



a nearby scenic spot, window shopping, going to the zoo, picnics and museum visits.

Other potential day trips include:

- Visiting a local farmers' market: This will allow you to spend time outdoors while shopping for in-season, memory-preserving foods.
- Exploring your city's downtown district: Don't spend all day driving from one strip mall to another, getting in and out of your car. Many towns have revitalized downtown districts filled with one-of-a-kind shops and attractions.
- Collecting seashells: If you're a short drive from an ocean, consider taking a beach stroll of shell collecting followed by a picnic. Shell searching is a quiet, simple activity that includes a twist of adventure. Plus, you can take the shells with you to serve as distractions or memory triggers at home.

It's good to experiment and try new things, says Gray-Davidson. Because the recreational activities your loved one enjoyed in the past may no longer be ideal, you should be creative in choosing fun, yet soothing, new activities.

## Keeping Boredom (and Isolation) at Bay

Regardless of the particular day trip you choose, it's important to find something that works for you and your loved one. New activities, if successful, will serve two purposes. First of all, they will help eliminate some of the daily boredom people with Alzheimer's face, says Gray-Davidson.

"Boredom is one of the worst problems that affects people with Alzheimer's in daily life," says Gray-Davidson in her guide. "Since those with Alzheimer's often have plenty of energy but lack the capacity to continue their former activities, they face a constant struggle to find enough ways to pass the time. As they depend so much upon caregivers, this becomes the caregiver's battle too. Old habits may not survive, so new ones have to be created."

Secondly, as Gray-Davidson mentions above, the outings also give the caregiver an opportunity to take a break from the routine and isolation that can plague a caregiver of someone with dementia.

## On the Road

While your day trip might offer a break in routine for you and your loved one, you'll still need to ensure that a fair amount of planning and organization are involved—

like there is with any event involving a person suffering from Alzheimer's disease. Here are some quick tips:

- Have the day's itinerary planned out ahead of time.
- Ensure the trip's events won't tax your loved one's limitations.
- Don't rush your loved one when preparing for the trip that morning. Follow your usual routine of bathing, dressing and eating.
- Make sure both you and your loved one are dressed comfortably and weather-appropriately.
- Pack any medications your loved one may need while you're out.
- Make sure your loved one is wearing an identification tag in case you get separated from him or her.
- Bring appropriate games, photos or other distractions along on the car ride in case your loved one gets restless or agitated.
- Understand that you may have to pull over or take a break if your loved one becomes agitated at any point during the trip. If you're driving, turn on the child safety lock function in your car if you have one. This will keep your companion from trying to exit a moving car if he or she becomes disoriented.

Alzheimer's disease doesn't have to mean the end of fun and exploration for your family. By planning carefully, you can enjoy day trips that are rewarding for both you and your loved one. ■

## Your Local Art Museum

In 2006, the Museum of Modern Art (MoMA) in New York City launched a program for people with dementia and their caregivers called *Meet Me at MoMA*. The free program allows Alzheimer's patients and their caregivers to visit the museum on a day when it is normally closed. The tours and themes are specially designed to appeal to and accommodate those with Alzheimer's disease.

MoMA's Alzheimer's Project has expanded nationwide with outreach programs at museums, assisted living facilities and community organizations throughout the country. You can learn more about this project, which is funded by a grant from MetLife Foundation, by visiting [www.moma.org/meetme](http://www.moma.org/meetme). You might also want to contact your local art museum to see if they offer the program or something similar.

Taking a few precautions can help reduce the risk of wandering.

By Winnie Yu

# Wandering Away

It is a major problem with Alzheimer's patients: the tendency to wander off, away from caregiving loved ones or even their residential care facilities. The results can be devastating. Here's what you need to know, and what's being done to help keep wandering at bay.

**T**welve hours after he was placed in a nursing home in California, Mardig Avadian disappeared. Dressed nicely in khaki pants and a shirt, the 86-year old man had joined a group of visitors and snuck out of the nursing home. "He began walking the streets of north Los Angeles until he hitched a ride—or so we think—and was found walking along the freeway nine miles away in the Mojave Desert," says his daughter Brenda Avadian, MA, who went on to launch TheCaregiversVoice.com, a Web site for caregivers. "He was trying to hitch a ride to Milwaukee, Wisconsin, where he had lived for 45 years."

Like many people with Alzheimer's disease, Mardig Avadian had a habit of wandering, a common behavioral problem that occurs with dementia, especially Alzheimer's. According to the Alzheimer's Association, up to 60 percent of all patients with the disease will wander.

The most dangerous form of wandering is elopement, in which the person leaves an area and is unwilling or unable to return, says Mark L. Warner, author of *A Complete Guide to Alzheimer's Proofing Your Home* (Purdue University Press) and owner of The Alzheimer's Store ([www.alzstore.com](http://www.alzstore.com)). "They can walk out the door and not realize that this is their home," Warner says.

*(continued on page 12)*



# ALZHEIMER'S DISEASE AND WANDERING

## A Growing Problem That Needs to Be Addressed

In February of this year, an 81-year-old woman with Alzheimer's disease from Cartierville, Canada was found frozen to death after she wandered out of her home wearing a nightgown. The same month, an 88-year-old man with Alzheimer's disease was found dead after he wandered less than a block away from his East side home in Columbus, Ohio. In April of this year, in a wooded area in Boston, a 76-year-old man with Alzheimer's disease was found deceased. The incidents are rising, and Alzheimer's disease and wandering is a growing problem that needs to be addressed.



### Alzheimer's Disease

Experts estimate nearly 5 million Americans currently have Alzheimer's disease. Alzheimer's is defined as an irreversible, progressive brain disorder that destroys memory and intellectual function. Over a period of years, the disease leads to the complete loss of cognitive function and a long period of dependency.

**By age 72, approximately 1 in 8 Americans will have Alzheimer's disease.**

Given that almost 80% of dementia care is provided in the home by family caregivers; in the years to come, Alzheimer's disease and related dementias will pose immense financial, physical and emotional challenges for growing numbers of American families.

### Wandering

Disease experts estimate that nearly 60% of individuals wander at some point during the progression of Alzheimer's disease, while many of them will wander repeatedly.

Research conducted by Robert J. Koester of the Virginia Department of Emergency Services found that 46% of individuals who wander that are not located within the first 24 hours are found deceased.

Worse, due to their loss of judgment, individuals with cognitive conditions do not often perceive the risks. Lacking the cognitive ability to be self-protective, they frequently seclude themselves. This limits the usefulness of standard search methods (such as calling the person by name) and complicates rescue and recovery.

### Impact on Law Enforcement

Just as greater numbers of citizens are turning to local law enforcement for help in locating their loved ones who have wandered, public safety agencies report drastic budget cuts. Search and rescue operations typically cost taxpayers \$1,500 per hour and can take 9 hours on average to complete, while many last for days. Unfortunately, some individuals who wander are never found, or are found too late.

### Project Lifesaver

Project Lifesaver International was founded by public safety officers to bring about a solution that facilitates the rapid location of those that wander -- a strategy that greatly increases the chance that the individual will be found alive. Currently, over 1,000 agencies and groups in 45 states participate—police, sheriff, fire, and other emergency responders and departments.

The method relies on proven radio technology and a specially trained search and rescue team. Citizens enrolled in Project Lifesaver wear a small transmitter that emits an individualized tracking signal. When caregivers notify a local Project Lifesaver agency that the person is missing, a trained team responds to the missing person's area and starts searching with a mobile locator tracking system. **Most who wander are found a few miles from home and within approximately 30 minutes.**



To date, Project Lifesaver agencies have conducted more than 2,100 successful searches for enrolled individuals, who were returned safely to their families with no serious injuries or fatalities reported.

Because of Project Lifesaver, the astronomical bill to taxpayers for search and rescue operations is cut dramatically, and manpower hours and resources are conserved. The program helps individuals who wander to be found safely, quickly, and alive, and it provides caregivers with "peace of mind."

For more information about enrolling your loved one in the program, or to learn ways you can help, please visit

**[www.projectlifesaver.org](http://www.projectlifesaver.org)**

For a limited time, individuals who are interested in joining the program can enroll – **at no cost** – thanks to a grant from the DOJ's Bureau of Justice Assistance.

(continued from page 10)

## Why They Wander

Wandering occurs for numerous reasons, says Maria Wellisch, R.N., vice president of corporate education for Morningside Ministries in San Antonio, Texas ([www.mmlearn.org](http://www.mmlearn.org)). Some nursing-home residents head out the door when they see the staff getting their coats and purses to leave for the day. Other people wander because they think they need to go to a place they left years ago such as a former home, an office or someplace to fetch their kids. Some patients wander because they're bored, anxious or physically uncomfortable. Some may simply be confused.

For the wanderer himself, the experience is much like going out into a mall parking lot and not knowing where you parked—without knowing why he's out there. "We all do that, but at least I know I parked outside," Wellisch says. "These patients don't have the connections in their brains to find their way back or even know why they are out there. And as the disease progresses, they lose the executive function to know to ask for help."

## Who's at Risk

Certain people are at greater risk for wandering than others. Signs of a potential wanderer include someone who:

- Returns from a regular walk or drive later than usual
- Tries to fulfill former obligations, such as going to work
- Tries or wants to "go home" even when at home
- Paces, makes repetitive movements or is otherwise restless
- Has difficulty locating familiar places like the bathroom, bedroom or dining room
- Asks about the whereabouts of current or past friends and family
- Acts as if doing a hobby or chore, but nothing gets done
- Appears lost in a new or changed environment.

Wandering can be very dangerous for the Alzheimer's patient, who could fall, get struck by a car or assaulted by a stranger. For loved ones like Brenda Avadian, whose father wandered constantly, wandering can become a constant source of worry and concern. "It was like having a baby and wanting to wake up every time the baby cries," she says. "Your ears are constantly tuned in to sounds in the night. It was absolutely exhausting. We started to show signs of impaired thinking, too."

After seven months of having her father in her home, Avadian put him in a nursing home. He died five years later at the age of 90 in 2001.

## Prevent Wandering

Simple steps can deter some wanderers or at least make it less likely they'll go far. Here are some suggestions:

- Install an alarm system with a remote alarm that goes off in the caregiver's bedroom. The alarm may be a motion detector or even one in the floor mat.
- Place a chain lock high above the patient's head or near the ground but not at eye level. The lock won't prevent emergency rescue teams from entering, but may be enough to stop a patient from getting out.
- Disguise the door. Hang a photo or mirror on the back, cover up the doorknob or place wallpaper on the door.
- Adjust the color or texture of the door. Hang a sheet of black fabric over the door, or place a dark mat in front of it. Warner says this technique is known as "visual cliffing." Patients may misinterpret the change in color or texture as a change in elevation, which may deter them from moving forward.
- Limit their distance by installing a fence or a gate with a gravity latch. Consider putting locks on outdoor gates.
- Place a bench or chair near the door where a patient might exit. "It might not stop him, but he might sit down," Warner says.
- Dress the patient in bright colors. Bright clothes will make it easier for you to describe a wanderer later on to search teams if they do wander.
- Alert the neighbors. Let everyone living nearby know that your relative might wander and suggest they call you if they see him. Make sure they also know what he looks like. Keep a list of your neighbors' phone numbers handy in case you need to track down your relative.

Finally, try to keep your relative occupied with purposeful tasks, which can help stave off the boredom and anxiety that may lead to wandering. "It should be something that can be done frequently, is purposeful and something they want to do," Wellisch says. "Someone who likes to cook might want to ice cupcakes. With former nurses, I used to give them clipboards so they could make rounds with me. It should be something from their past that touches their memories." ■

## Silver Alert

If you have a relative who wanders, consider registering him or her in the National Silver Alert program. The free online program allows you to record vital information about that person, which can be quickly given to emergency responders in the event the person wanders off and becomes lost. The program records vital medical and personal information as well as a photo of the senior in an online database that is available 24/7. For more information, check out [www.nationalsilveralert.org](http://www.nationalsilveralert.org).



# *Melodies of Lost Memories* Fund Research for a Cure

Here is the story of a songwriter who has put his heartfelt experiences with a loved one who had Alzheimer's disease into words and music, and another who wrote a song to comfort a friend facing it in his family—and to raise money to help find a cure.

Inspired by personal experiences with Alzheimer's disease, two singer/songwriters are using their talents to raise awareness about the disease. One is a seasoned musician; the other is a teenager just starting her music career.

Both have written tender songs that describe the heartbreak of losing loved ones to Alzheimer's. Their music is meant to raise awareness and funds toward Alzheimer's research. More importantly, these songs move listeners to find hope in the ongoing search for a cure.

## **“Don't Let Me Fade Away”**

Aaron Angello has been playing music since he was 14 years old. He has shared the stage with well-known artists such as John Hiatt, the Nitty Gritty Dirt Band, Michael Martin Murphey, Jon Secada, Inara George and many others. He has recorded two CDs, *Alone and Acoustic* and *Sweet Abandoning*.

A resident of Boulder, Colo., Angello started writing songs while living in Los Angeles. “I've always been particularly interested in the song itself—its form and structure, the lyrics,” he says. His eclectic music embraces rock, country, jazz and blues.

Angello knows firsthand the daily struggles of living with Alzheimer's disease. His grandmother passed away from early onset Alzheimer's when Angello was a child, and his grandfather succumbed to the disease when Angello was in his early twenties.

Since both grandparents lived with Angello and his family, Angello witnessed the daily ups and downs of the disease, he says. “I saw and experienced the physical and emotional stress of taking care of someone you love as his memory slips away from him.”

Angello remembers a particular evening he spent with his grandfather sitting at the kitchen table over a couple slices of pizza. “His disease had progressed to the point that he didn't



Songwriter Aaron Angello.

recognize any of us,” Angello says. Suddenly, his grandfather experienced a moment of clarity, Angello says. “In an instant, a light seemed to come on behind his eyes; he became incredibly lucid.” His grandfather began to recall vividly detailed stories about Angello's grandmother, who had passed away several years before. “He told me how beautiful she looked in her apron; he seemed so lost in her memory,” Angello says. “Then his eyes filled with tears; he slammed his fist on the table

and said, 'I miss that little girl.' How horrible it must be to know you are losing your memory, to feel the things most precious—friends, family—slipping away from you," Angello says.

This poignant moment shared with his grandfather inspired Angello to write the song "Fade." Set to the gentle strums of his guitar, he describes the song as "a kind of imagined prayer, a plea to be allowed to hang on."

### "Lost Lullaby"

Augusta Crawford is a 15-year-old singer/songwriter who has played the guitar for the past seven years. Her goal is to raise at least \$10,000 for Alzheimer's research with proceeds from her song, "Lost Lullaby."

A resident of Greeneville, Tenn., Crawford was moved to write "Lost Lullaby" after a good friend confided in her that his grandmother had Alzheimer's disease. Crawford reflected on how difficult it had been for her friend Bobby Lemaster to talk about his Nana.

"When I asked who took care of her, Bobby said his Pawpaw did," Crawford says. "I remember thinking 'How sweet, it's just like *The Notebook*.'" Written by Nicholas Sparks, *The Notebook* is a love story that alternates between the early 1940s and present day. It portrays a husband and wife dealing with Alzheimer's disease.

As Crawford learned more about coping with Alzheimer's, she began to realize the harsh reality of living with the condition. "I was not prepared for the terrible truths about this disease," she says. "There was nothing romantic or pretty about it."

Crawford was inspired to write a song to honor Bobby's grandmother, Judy Lemaster. The song would be a gift to the Lemaster family. As she wrote the song's lyrics, she tried to step outside herself and see the situation through the eyes of Bobby's grandfather. "I tried to imagine how he must feel watching a little piece of someone he had loved all his life slip through his fingers each day," she says.

Crawford also thought about Judy's lost memories as a result of her condition. "I wondered if she remembered



Augusta Crawford and her guitar instructor, Mark Eades.

tucking her own children in bed at night and singing them to sleep," she says.

After composing a melody, Crawford took her song to her guitar instructor, Mark Eades. "I wasn't sure if Mark would want to help me with the music or if he'd take me seriously because, at the time, I was just 14," Crawford says. "But I think he fell in love with the words and everything behind the song."

After learning more about Alzheimer's, Crawford decided to use the song as a way to raise awareness and funds toward research for treatment and a cure.

### Listen and Donate for Hope

Angello continues to write songs and perform regularly. He is currently interested in writing poetry. Visit [myspace.com/aaronangello](http://myspace.com/aaronangello) to listen to a few of his songs. Order his CDs online at [www.aancorecords.com/aaron.html](http://www.aancorecords.com/aaron.html). All proceeds from the song "Fade," which will soon be available through iTunes, go to Alzheimer's disease research.

Crawford is spreading the word about Alzheimer's disease through her website, [www.augustalostlullaby.com](http://www.augustalostlullaby.com). She encourages friends and family to post a link to the site on their Facebook pages. Visit the site to view a video for "Lost Lullaby," which features photos of the Lemaster family. A copy of the song is free with your donation of \$10 or more to Alzheimer's research. ■



# Caregivers: A Growing Population with Growing Needs

The nation owes a debt of gratitude to the nearly 66 million unpaid caregivers who not only provide a vital service for their loved ones, but save our health care system millions of dollars. A new survey points the way for helping caregivers help the people they care for.



The typical American caregiver is female.

**T**he number of Baby Boomers retiring will increase considerably in the next few years, further hastening the growth of our nation's elderly population and increasing the need for caregiving services. For many Americans, those services will be provided, at least in part, by a friend or family member, and they will be provided free of charge.

The significance of this reality cannot be understated. Family caregivers literally save us billions of dollars because they take on the brunt and usually the expense of providing that needed care for loved ones. Without them, more elderly Americans would wind up relying on public programs such as Medicaid or paying out of pocket for the care they need. Medicaid is a federal program designed to provide a minimum of care as inexpensively as possible, and as we know, health care as an out-of-pocket individual expense is very expensive. Thus, people who need but don't have family caregivers can sometimes face increased expense and, lacking the comfort of an in-home environment, a decreased quality of life and health.

Funded by MetLife Foundation, the 2009 report from the National Alliance for Caregiving (NAC) in collaboration with the American Association of Retired Persons (AARP), titled *Caregiving in the U.S.*, paints a very clear picture of the changing population of caregivers. The survey polled some 1,480 family caregivers age 18 and over on a range of questions covering many aspects of providing care for family members in need. What emerged from this study is the increasing diversity of caregivers in terms of age, race, gender and a host of other factors; but the one cause driving growth in their numbers, more than any other, is Alzheimer's disease.

## The American Caregiver

The report estimates that some 65.7 million Americans served as caregivers to a family member in the past year. That figure represents 28% of the U.S. population. Not surprisingly, nearly one-third (31.2%) of American households reported at least one person serving in an unpaid caregiving role.

The typical American caregiver is a female, 48 years old, taking care of one person on an unpaid basis. But more than one-third (34%) of respondents to the survey reported taking care of two or more people. Most are providing care for a relative (86%), and more than one-third are taking care of a parent (36%).

On average, caregivers have been at the task for some time. The average for respondents was 4.6 years in the caregiving role, and 31% had been providing care for 5 years or more.

The typical person receiving the help of an unpaid caregiver is also a female (62%) who is 61 years old, on average. In the years 2004–09, the average caregiver has aged from an average of 46.4 years of age to 49.2. Similarly, recipients of that care are now on average 69.3 years of age, up from 66.5 in 2004.

## Other Factors in Caregiving

On average, caregivers spent 20.4 hours per week actively providing care for their loved ones. That time commitment points to a need for schedule flexibility where they work. "Caregivers have more unplanned absences. Their performance on the job is also compromised by a lack of focus on their work due to distractions, like phone calls and care coordination, that occupy their time," says Gail Hunt, president and CEO of the National Alliance for

## Who's Behind the Report

**MetLife Foundation** was established in 1976 by MetLife to carry on its longstanding tradition of corporate contributions and community involvement. In the area of aging, the Foundation funds programs that promote healthy aging and address issues of caregiving, intergenerational activities, aging in place, mental fitness and civic engagement. More information about MetLife Foundation is available at [www.metlife.org](http://www.metlife.org).

**The National Alliance for Caregiving** is dedicated to providing support to family caregivers and the professionals who help them and to increasing public awareness of issues affecting family caregivers.

Established in 1996, The National Alliance for Caregiving is a nonprofit coalition of national organizations focusing on issues of family caregiving. Alliance members include grassroots organizations, professional associations, service organizations, disease-specific organizations, a government agency and corporations. For more information on The National Alliance for Caregiving, visit: [www.caregiving.org](http://www.caregiving.org).

**AARP** is a nonprofit, nonpartisan membership organization that helps people 50+ have independence, choice and control in ways that are beneficial and affordable to them and society as a whole. AARP's website is: [www.aarp.org](http://www.aarp.org).



## Emotional Stress of Caregiving

Q36. Using a scale from 1 to 5, where 1 is not at all stressful and 5 is very stressful, how emotionally stressful would you say that caring for your [relation] is/was for you?

Base: 2009 All caregivers (n=1,480)

Not at all Stressful 1	2	3	4	Very Stressful 5
25%	22%	22%	14%	17%

### % Highly Stressed (4-5)

Caregivers of Recipient Age 18+

2004 (n=1,247)	2009 (n=1,307)
35%	31%

Caregiving. “They need solutions so they can be healthier and perform better.” Getting in and out of beds, chairs and other sitting furniture was the most common task, with personal care tasks a close second (getting dressed, bathing/showering, etc.).

In part because so many unpaid caregivers work outside the home, as well, caregiving was rated as a high or medium burden by 51% of respondents. Not surprisingly, some 35% of respondents said they rely on paid caregivers to help out, while 66% relied on other unpaid caregivers.

Just over half of responding caregivers reported that their care recipients live in their own homes, while about 29% live with the care recipient. Those who reside with their loved ones were more likely to have a household income below \$50,000 annually (38%, vs. 23% in higher-income households), which points to the possibility that financial concerns drive the decision to live with the care recipient in many cases.

The stress of caregiving is a factor for many caregivers, too. Although 57% report that their health is excellent or very good, 17% report it as fair or poor—compared to 13% of the general adult population. The longer caregiving goes on, the more of a toll it takes; 23% of those who have been providing care for 5 years or longer report fair or poor health.

Of course, stress itself is a factor in health, and 31% of caregivers report feeling very stressed by their situation. But even with the recent economic decline, caregivers are not reporting a huge hit to their own finances related to caregiving. Only 15% reported a strong financial hardship because of providing care.

### The Need for Information

Certainly one of the keenest needs any unpaid caregiver has is for information—where to turn for help, what to

do in an emergency situation, how best to help their loved ones, etc. Only 19% of respondents reported receiving formal caregiving training, while more than three-quarters (78%) would like more help or information about at least one of 14 vital caregiving topic areas identified in the survey.

For getting that information, caregivers are likely to turn to two sources: their health care providers and the Internet. Among respondents, 36% said they’d turn to their health care providers, and 25% would opt for the Internet.

Technology is also playing an increasingly larger part in caregiving. Nearly half (45%) of caregivers reported using some type of technology in the care of their loved one, with electronic organizers and calendars leading the way at 24%, and emergency response systems following at 12%. Close behind were devices that transmit health information to a doctor’s office automatically, at 11%, and home-based electronic systems that transmit alerts about safety problems (such as falls or wandering) to a caregiver or dispatching system.

### Looking Ahead

With emerging technologies now being deployed or soon on the way, there is help for unpaid caregivers that simply was not available before. The ability to connect with needed support via the Internet is obviously a huge factor, but other personal technologies, including GPS locators to help with the wandering problem, alert systems that can be set to monitor potential issues for Alzheimer’s patients, and online health records should help take the load off a group of people who are taking an enormous load off our overburdened health care system: America’s caregivers. You can download a copy of the report at [www.caregiving.org](http://www.caregiving.org). ■



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Tracie Thoms and Jeremy Ratchford on the set of *Cold Case*.

# Tracie Thoms: Keeping Alzheimer's in the Spotlight

This very busy and very talented performer always makes time to put Alzheimer's and brain health out front for all her fans.

**Y**ou may have encountered the multitalented Tracie Thoms in more than one venue. After all, she starred in the hit CBS series, *Cold Case* and is also a Broadway veteran, having starred in *Rent* (including the film version). She performs her cabaret act regularly at Feinstein's in New York and elsewhere. We talked with Tracie about her ever-expanding career, her own experiences with Alzheimer's and her passion for Alzheimer's research.



**Preserving Your Memory: You are an actor, a singer, and a dancer. You are a renowned performer across a variety of media, in particular the stage and both TV and movies. Do you have a preference, or natural inclination, for one form over the other?**

**Tracie Thoms:** Stage will always be my first love. There's nothing like being in front of an audience exchanging energy with them. It's magical ... Although I won't call myself a dancer. I prefer actor/dancer/move-weller!

**PYM: I've read that, as gifted a singer as you obviously are, you are very nervous singing on stage. Yet you've been hailed for your work in musical theater, particularly in the film version of *Rent*. How do you overcome that fear?**

**TT:** It's a process. I just have to do it as often as possible and really know my songs well. The more prepared I am, the more secure I feel. The more I sing in front of people, the less nervous I am. In theory ... like I said, it's a process.

**PYM: You were a regular cast member of *Cold Case*, but yours was a recurring character at first. Given all your film and stage work, were you hesitant to make the full-time commitment to a TV series, especially one that has been successful this long?**

**TT:** Well, it's funny. *Cold Case* came along right as *Rent* was being released, so I really did have to consider the possibility that I'd be doing the show for a while. But I really love the show, so it wasn't a long consideration. I've really enjoyed doing *Cold Case*—the cast, crew and story lines are so fantastic. And financial stability for an actor is a wonderful thing.

**PYM: I read that you're returning to your hometown, Baltimore, for a performance there in April. Is this the first time you've performed there as an adult? Are you looking forward to the trip back "home"?**

**TT:** One of my first jobs out of Juilliard was at Center Stage—the same theatre that I'm returning to! It's my first official cabaret ... And the thought of an evening of singing songs in front of people is at once exciting and terrifying. But I decided that this year I'd say yes every time someone asked me to sing to conquer this fear I have. And starting in Baltimore is the best way to do it because I know I'm singing for family, friends and supporters.

**PYM: When and how did Alzheimer's disease become an issue you were aware of?**

**TT:** My babysitter in elementary school had a grandmother that would watch me some afternoons. Her name was Ms. Nellie. She was incredibly sweet, and we'd hang out and watch *He-Man* and *Mr. Rogers' Neighborhood*. She was a sharp, spunky little lady! Ms. Nellie was diagnosed with Alzheimer's and I watched her deteriorate to the point where she didn't seem to know anyone—including me, her after-school buddy. It was so confusing to my 8-year old brain, but I'll never forget her. Later my great Aunt Susie was diagnosed and I watched not only her suffer with it, but her husband also suffered greatly as her caretaker. It's a terrible disease.

**PYM: Please tell us what you do to care for your brain health, especially in terms of diet and exercise.**

**TT:** Well, I work out a great deal. And I do a lot of stability training and I'm constantly changing things up and challenging my body and my mind to do different things. My trainer, Jini Cicero, is a master at this kind of cross-training. It continues to test my balance and instincts to keep my mind and body tight. I also try to drink plenty of water and keep all my multivitamins handy—especially omega-3 fish oils. But I recently downloaded this series of brain games to my phone from a Web site called Lumosity. It's full of brain challenges to strengthen your memory, reaction time and mental flexibility. It's difficult, but you get better at it and it records your growth. I highly recommend it!

**PYM: How do you share your passion over the issue of Alzheimer's within your own extended family?**

**TT:** I just talk to them about it. They support me.

**PYM: When did you decide to "go public" with your Alzheimer's advocacy? What inspired that decision?**

**TT:** Well, four years ago I was asked to sing in the Sardi's event in LA, and I was bitten by the bug there. I'm so glad I can help in any way to bring awareness to this awful illness. As we get older, our memories are what we cherish the most. We've earned them. We have a right to have our experiences stay with us. I want to do what I can to protect those memories, and to protect the right to have rich relationships with our loved ones in the later years of our lives. ■

# An Alzheimer's Diary

**June 9, 2007**

My memory problems have persisted. Sometimes I forget where I am going when driving. Names, places and words are not always in my mind. My short-term memory is less. Sometimes I tell my husband or family members the same thing three or four times. They'll say, "You already told us," and I say, "Well, now you know again." When I first started becoming repetitive, I became quite frustrated. I'd cry as feelings of being inadequate transcended.

I would try hard to concentrate yet I still had memory lapses.

**July 14, 2007**

This week has been extremely hard. I try to forget or pretend. Then I can't remember something and reality hits me cold and clear!

## Adrift

Sometimes I feel lost  
I'm loosing cognitive control  
Can't remember words, places  
Don't know what I was doing  
Become repetitive and confused  
Feel inadequate and frustrated  
Hope lingers in the distance  
For a medical miracle

Life goes on at an uneven pace  
As I face an uncertain future.

**July 6, 2008**

I was diagnosed with Alzheimer's. I had been having memory lapses, fragmented thoughts, misplacing things. I'd forget words in the middle of a sentence. It was hard to separate things in my mind. Someone had to be in the car when I drove, so I wouldn't get lost. It was a time of turmoil, hopelessness and frustration,



Keeping a diary can be helpful for Alzheimer's patients and caregivers.

as I tried to come to terms with the diagnosis and facing the eventuality of my death in a most unpleasant way.

I had seen my Grandpa and uncle die from it. I had cared for people with it and watched as they were slowly robbed of their mind and ability to function. I saw families torn apart, as their loved ones stared unknowingly at them, succumbing in increments to the fatal disease.

This is my fate, my reality!! I had to face it. I couldn't run away from what was happening to me.

**July 20, 2008**

Sometimes problems and burdens can be overwhelming.

## Color Me, Lord

Color me gray on cloudy days when the sun does not come shining through

Consider me lost when I can't find the right path as fears of uncertainty transcend

Color me blue as tears flood my way, while I search for a better day

Cover me with hope for new tomorrows that will end this journey of pain

*(continued on page 27)*



## New PET Scan Marker May Promise Hope for Earlier Alzheimer's Detection

The results of a Phase II study presented this spring may offer hope for earlier diagnosis of Alzheimer's disease. The study, presented in April at the annual American Academy of Neurology conference in Toronto, focused on a compound called Flutemetamol that is being developed by GE Healthcare as a marker for Alzheimer-related amyloid plaques.

When Flutemetamol was introduced in patients showing signs of Alzheimer's and a control group of healthy adults, the study found that PET image readers were able to reliably differentiate between Alzheimer's patients and the controls.

The results could have important implications for diagnosis and treatment, says Dr. Rik Vandenberghe, the lead investigator of the trial and a professor of neurology at the University Hospital in Leuven, Belgium.

"Although many more questions remain," he says, "the results are an important step in the process of validating this compound for clinical use."

Flutemetamol may eventually aid in earlier detection of Alzheimer's, Vandenberghe says.

"At present, Alzheimer's can be diagnosed only when a patient has already advanced to the dementia stage," he says, "and there's already an impact on daily living. One potential use of this agent is to allow us to make a reliable diagnosis at an earlier stage. Of course, that is most useful if it goes hand in hand with more efficacious treatment, applied earlier."



Dr. Rik Vandenberghe, a professor of neurology at the University Hospital in Leuven, Belgium, is the lead investigator of the Phase II study of Flutemetamol.

The study introduced Flutemetamol in 52 subjects, 27 of whom showed signs of Alzheimer's while 25 showed no signs. Five image readers independently examined the study subjects' brain scans and were able to accurately differentiate between the two groups.

The study also found that Flutemetamol binding was easy to replicate within the same subject over time. Subjects were scanned initially, then rescanned one week later. The results were similar, meaning that Flutemetamol might be used reliably in longer-term clinical trials, Vandenberghe says.

In addition, the study found a very high correlation between the effectiveness of Flutemetamol and its parent

molecule, 11C Pittsburgh compound B (PiB). PiB can be used to detect Alzheimer's but has a shorter half-life than Flutemetamol and cannot be transported, limiting its practical use. Flutemetamol, with a longer half-life, "can be produced at one site and be transported to another," Vandenberghe says.

Phase III will examine whether Flutemetamol allows doctors to predict who will develop Alzheimer's and dementia. It will also examine how well Flutemetamol's effectiveness correlates with direct measures performed on brain tissue from deceased donors.

Vandenberghe emphasizes the importance of these further, Phase III trials. "At this stage," he says, "we do not want to make claims about the clinical usefulness of Flutemetamol. This is just one important step in the process, and it entails Phase III as well." ■

### GE Healthcare's Role in Alzheimer's Research

Aiming to develop new technologies that can transform health care and medical research, GE Healthcare specializes in medical imaging and IT, medical diagnostics, patient monitoring systems, drug discovery, biopharmaceutical manufacturing technologies, performance improvement and performance solutions services. GE Healthcare is a unit of General Electric Company.

# Can Barbecue Sauce Improve Brain Health?

The right marinade can add big benefits to your favorite midsummer meals.

**F**eel free to fire up the grill this summer, because barbecue just got a little healthier. A new study from the University of Western Ontario has shown that certain barbecue sauces and marinades can serve as a significant source of antioxidants.

Doctors recommend a diet high in antioxidants, which are believed to reduce the risk of cancers and cardiovascular diseases, and may provide some protection against neurodegenerative diseases such as Alzheimer's and Parkinson's. Antioxidants mop up free radicals, the natural byproducts of the metabolic process that can also be introduced through environmental sources like smoking. Free radicals damage healthy cells by oxidizing biomolecules such as fats, proteins and DNA, which damages cells and may lead to disease states. In the case of Alzheimer's disease, excess free radicals are believed to contribute to the disease process and may be associated with the build up of amyloid plaques in the brain. Antioxidants neutralize free radicals and may protect against disease.

People can add antioxidants to their diet through a variety of sources, including blueberries, cranberries, red and black beans, avocados, spinach, green tea and red wine. It is not known whether artificial supplements work better or worse than the anti-oxidants in food, and very high amounts of certain supplement-derived antioxidants may be harmful. Good nutrition is thought to be the best delivery method, and researchers are pay-



Good news for barbecue lovers: The sauce can be very good for you.

ing greater attention to the antioxidant levels in common dietary sources.

Raymond Thomas, lead author of the study and an avid cook, decided to study sauces one day as he was preparing a meal for himself. “I was cooking with a lemon-garlic sauce and a jerk sauce, and I started wondering which has the highest antioxidant content,” says Thomas, a biology and psychology postdoctoral fellow at the University of Western Ontario. Thomas surmised that if herbs and spices pack an antioxidant punch, then sauces with herbs and spices as a main ingredient would deliver a good dose, despite the loss of some nutritional value through manufacture and packaging. When he discovered that no one else had studied antioxidant levels in an ingredient sitting in most kitchen cabinets, he embarked on the research.

The study, co-authored by Mark Bernards and Christopher Guglielmo, tested seven popular brands of marinades and sauces, including jerk sauce, garlic and herb, honey garlic, roasted red pepper, lemon pepper garlic, sesame ginger teriyaki and green seasoning. Researchers found that all of the brands delivered some antioxidant effect, but Thomas, who hails from Jamaica, was pleasantly surprised that jerk seasoning, the most famous of Jamaican spices, actually contained the highest amount of antioxidants. Grace Jerk Sauce and Renee’s Sesame Ginger Teriyaki outperformed the other brands by a significant margin due to large amounts of scotch bonnet peppers, allspice, sesame and ginger, which all have proven antioxidant properties.

Marinating and cooking with the sauce actually reduced antioxidant levels by 40% to 70%. “We recommend that for the best benefit, people should add the sauces at the end of the cooking process or even eat them raw as a salad dressing where appropriate,” Thomas says. Yet, even with the reduction during



the cooking process, Thomas says, “It’s better to marinate than not to marinate to get the [antioxidant] contribution.”

After publishing his study in the *Journal of Food Composition and Analysis*, Thomas says he received a phone call from a company that made a pomegranate-based marinade, asking if he had included the sauce in his study. Pomegranates contain significant quantities of antioxidants. “There certainly might be other sauces out there that might have higher content

than what we tested,” Thomas says. He recommends that people choose marinades that have herbs, spices, vegetables and fruits as the main ingredient for a simple and effective way to add antioxidants to your diet.

Of course, the study leads one to wonder whether these antioxidant benefits can offset the negative health effects of fatty content in certain meats or the carcinogenic effects of compounds produced during the high-temperature cooking of meat. However, eating good foods to counteract bad ones is usually not a good idea. It’s better to stick to good foods and avoid bad ones. Thomas plans to further study various meats and cooking methods to determine their effects on antioxidants. Until then, folks can enjoy a barbecue picnic, that much-loved ritual of summer. Just slather on barbecue sauce and rest assured that you’ve done yourself a little good. ■

## A Drink to Think About

A drink called Souvenaid may prove a powerful brew for improving memory and thinking skills for Alzheimer’s patients. The drink, a medical food to be taken under the guidance of a physician, is currently being tested as a supplemental therapy for those with mild to moderate Alzheimer’s disease (AD).

The concoction contains uridine, choline, and the omega-3 fatty acid DHA. Uridine is used in the genetic coding for RNA; choline forms part of acetylcholine, which plays a role in memory formation; and DHA is found in certain fish and fish oils. In combination, the molecules may help restore synapses, which would help delay the development of Alzheimer’s symptoms.

In a study of 225 AD patients, researchers gave some of the participants 4 ounces of Souvenaid daily and others a placebo for 12 weeks. During the study, researchers saw significant improvement among those taking Souvenaid in a verbal recall task, in which participants were asked to remember what they had been told earlier.

The study is being expanded to 500 patients through 40 medical centers nationwide. A control group will receive a placebo while other patients will drink 4 ounces of Souvenaid daily for 24 weeks. Further studies may be needed to compare the drink to other over-the-counter supplements such as fish oil, and also to determine how to improve memory skills other than verbal recall. If the study proves successful, Danone (Dannon in the U.S.) could make Souvenaid commercially available as early as next year.



## Jerk Chicken Skewers

Spicy jerk sauce is a bedrock of Jamaican cuisine, and as with any barbecue sauce, local kitchens battle over whose reigns supreme. Traditional ingredients include Scotch Bonnet peppers, allspice, scallions, tomato paste, thyme, black pepper, cider or cane vinegar, raw cane sugar, salt, garlic, sugar, ginger, nutmeg, and cinnamon. A majority of these ingredients offer antioxidant benefits. Regardless of which version lights up your taste buds most, a meal with jerk sauce does a body more good than the same meal served without it.

Sandals Montego Bay shared their recipe for Jerk Chicken Skewers. Make this the centerpiece of your next barbecue.

## Sandals Montego Bay Jerk Chicken Skewers

### Ingredients

- 1 lb. Boneless Chicken Breast
- 1 Scotch Bonnet Pepper (cubed)
- 1 Green Pepper (cubed)
- 1 Onion (cubed)
- 1 Pineapple (cubed)
- 3 oz. One Love Jerk Sauce
- 4 8-in. Wooden Skewers

### Directions

Soak skewers in water before using. Prepare skewers alternating chicken, onions, peppers, and pineapple. Brush with One Love Jerk Sauce and place on grill. Continue brushing with One Love until cooked. For best results, grill over charcoal, or ideally, pimento wood.

*For more jerk recipes visit [www.sandalslifestyle.com](http://www.sandalslifestyle.com).*



# Living with Alzheimer's Disease

## Products That Make Life Easier, Simpler, and Safer

Every 72 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](http://www.alzstore.com) or call (800) 752-3238.**

Do you have a question you would like to ask the experts at the Fisher Center for Alzheimer's Research Foundation? If so, please call 1-800-ALZINFO, visit ALZinfo.org or send surface mail to Fisher Center for Alzheimer's Research Foundation, West 46th Street & 12th Avenue, New York, NY 10036, or e-mail [info@alzinfo.org](mailto:info@alzinfo.org).

## Finessing In-home Visits

By Mary Adam Thomas

How to prepare, whether you're the host or the guest.

Even as specific memories fade for individuals with Alzheimer's disease (AD) and other forms of dementia, emotional recognition may remain even into advanced stages. A person may have difficulty recalling a name and might stumble trying to remember her relationship to another, but she still often has the capacity for human connection. This is why it is so important for family and friends of AD patients to visit whenever they can.

Visits to the home or care facility of a person with AD can be both exhilarating and exhausting for all parties. Patients, caregivers and visitors must all prepare for visits to ensure that everybody gets the most out of the experience. Each AD patient has unique preferences and patterns, and some days usher in new challenges. So plan visits according to typical behaviors, but be prepared for unscripted moments.

### Tips for Caregivers

**Schedule a good time.** Plan visits during a time of day that suits the AD patient best. Work around the patient's meal times, energy levels and daily routines.

**Involve the patient in the planning.** For some AD sufferers, planning for a visit from loved ones is exciting and creates a focus for the day or the week. If such tasks are enjoyable to the patient, take him or her along to do the shopping, give her food preparation assignments or have her clear an area where young kids can play when they arrive.



Visits from family and friends are important for Alzheimer's patients.

**Offer reminders leading up to the visit.** In the days preceding the visit, talk about who's coming and when. You can even use a calendar as a countdown tool. (Use your best judgment here. If the AD patient usually becomes confused by the mention of future events, simply wait until the morning of the visit to mention it.)

**Use photos as flash cards.** Show pictures of the individuals who will be visiting to familiarize the AD patient with their faces, names and relationships.

**Bring visitors up to date.** If it's been a while since the visitors have seen their loved one, his or her behavioral patterns

may be new and different to them. Let them know ahead of time about the patient's current strengths and weaknesses so those don't become the focus of the visit.

**Follow up.** Once the visitors have left, recap the event with the AD patient in order to stimulate the patient's memory. List the names of those who were there, summarize the conversations they had and ask if there were any favorite moments from the visit.

### Tips for Visitors

**Do your homework.** Find out from the caregiver if there are any subjects of conversation that you can bring up in



order to engage the AD patient. At the same time, ask if there are topics you should avoid.

**Remain flexible.** Given the ever-changing nature of AD and its effect on people, you may find a new and different version of your loved one when you arrive for a visit. Expect the unexpected, since the patient may exhibit behaviors you've never seen before. If so, do your best to adapt to the realities of that day.

**Watch your phrasing.** People struggling with memory loss are easily embarrassed by questions they have difficulty answering. Instead of putting your loved one on the spot with direct

inquiries ("What did you do yesterday?"), consider making conversation in other ways. ("I took the kids to the baseball game yesterday. You used to take me when I was a kid; that was always such fun.")

**Consider an activity.** Visiting a loved one doesn't always have to involve sitting around the house. The patient may enjoy a drive, a visit to a park, a trip to a museum or going to the movies.

**Keep things light.** Visits are easier on everyone when the conversation and activities remain lighthearted. Laughing helps relieve tension. Playing music that the patient loves can help keep the mood light and fun for the patient.

**Simplify.** Visits should be limited to just a few people at a time. Large groups can be overwhelming and limit the opportunity for real conversation and companionship.

**Clarify your departure plans.** Be sure to prepare your loved one before you leave, even if it means the patient may protest, to minimize any sense of loss that may come with your departure. Enlist the help of the caregiver if necessary. If you already know the date and time of your next visit, communicate that clearly—write it down on the calendar the patient uses—so there's a clear indication of when you'll return for another visit. ■

*(continued from page 20)*

Color me with your divine  
perfection so I can find  
solace in your strong arms

Lord, take my hand and lead me  
to peace I need to find,  
which will ease my troubled mind

### July 12, 2009

I have been noticing some changes  
in my husband's attitude and memory.  
What's happening is life altering, hard  
to accept! I hope I AM WRONG! Tests  
will soon be done.

### Changes in You

Something is amiss  
Things are just not right  
Something is happening,  
as you repeat some questions twice

Sometimes you're very snappy,  
when things don't go your way.  
You huff and puff in anger,  
gradually driving every one away

You say your mind feels blank  
at times, memories aren't in place

Unseeing eyes stare briefly  
into vacant space

I think I know what's happening,  
though I pray it isn't true  
Alzheimer's first set its deadly  
sights on me, and now is  
attacking you.

### Aug 31, 2009

My husband, Richard, has been hav-  
ing memory problems. He stated he  
felt like there were blank spaces in his  
brain. He was having many of the same  
symptoms I had the previous year.

His doctor ordered a PET scan. The  
results showed that he has Alzheimer's.  
The news was overpowering!

This poem is an attempt at some dry  
Irish humor:

### Remembering Together

We try to remember  
the little things in daily life.

If I forget something,  
I'll ask him once or twice:  
Did I do this,

where'd I put that,

Oh I forgot to tell you,  
the car has a flat.

Patiently he tells me,  
the things I need to know.

I try to do the same for him,  
especially when he's watching a TV show.

He'll ask me who that person is,  
I'll say that's so-and-so

He's always been in show biz,  
or on that special show.

I guess we're kind of lucky  
there are two brains, instead of one

We still can enjoy the little  
things, have some home-time fun

So count your blessings every day  
as you travel life's curving road

You'll never know until it's your turn,  
to help carry a heavy load. ■

# A walk in the park

Taking a stroll outside offers many benefits.

**B**y now, everyone knows the health benefits of walking: improved cardiovascular function, weight loss, bone building, stress reduction. But did you know that taking a walk *outside* offers even more rewards?

Numerous studies show that getting outdoors improves not only your body but also your mind and spirit. Connecting with nature can help you see things in a new light. Keep in mind that it's important even for early-stage Alzheimer's patients to walk with caregivers, given the risk of wandering. It's also important to talk with your doctor before taking on any exercise, particularly if you haven't been exercising as a matter of habit.

## Boost for the Body

While any physical activity improves the body, walking outdoors offers a bigger challenge. Professional trainer Tina Vindum, author of *Step Out of the Gym and Into the Best Shape of Your Life*, explains.

"From a physiological standpoint, we pull in more muscle fibers when we're outdoors versus a flat gym floor or a treadmill, because we go up, we go down, we walk on grass, gravel, sand," Vindum says. "We're stressing the joint and the muscles more, and we're actually strengthening the muscle fibers that we typically wouldn't, so we burn more calories."

Another physical benefit comes from breathing in the fresh air. According to the U.S. Environmental Protection Agency and the California Air Resources Board, indoor pollution rates



Walking outside offers more benefits than walking indoors.

are higher than outdoor rates, so people who spend most of their time inside are at greater risk. In fact, the indoor levels of some toxins range from two to 50 times higher than those outside.

Regular outdoor walks stimulate your brain. "Getting that fresh air to circulate through our bodies is critically important," Vindum, faculty member of the American Council on Exercise says. "When we move our bodies and get our heart pumping and circulation

going, our brain feeds on oxygen. We need it for energy—it is literally food for the brain and muscles."

## Rest for the Mind

Getting outdoors doesn't boost only your physical capabilities. It also enhances your mental and emotional well-being by giving your brain a break and improving your mood.

In her article "The Healing Power of Nature," Denise Mitten, Ph.D.,

professor of recreation, leisure services and wellness at Ferris State University, says eco-psychology blends environmental philosophy, ecology and psychology into a discipline that studies how the health of the planet impacts human health. "It is believed that the mind can be comforted and healed through time in natural environments," she writes.

Research appears to support this theory. A 2003 study in the journal *Psychology of Sport and Exercise* found that running in a park resulted in a greater reduction in anxiety and depression than running through an urban area. And a 2008 study in *Psychological Science* shows the cognitive benefits of interacting with the great outdoors.

Frances E. Kuo, Ph.D., a faculty member at the University of Illinois at Urbana-Champaign who researches the effects of nature on human functioning, says, "We think that spending time in nature helps rest a part of the brain that's involved in mental effort, giving it a chance to recuperate and be ready to tackle effortful tasks afterward."

Also, exposure to the outdoors also seems to affect the nervous system and the brain actions responsible for our changing moods, Kuo adds. Part of this effect appears to come from the switch between artificial and natural light.

Vindum says, "Studies have been done on mood, where somebody goes from a naturally lit environment to an artificially lit environment and their mood changes toward the negative."

### **Binding a Community**

Of course, nature offers societal benefits as well. Green spaces and parks become gathering places for communities, where people get to know one another and learn to look out for each other. Add the fact that greenery helps humans relax and renew, and it's not hard to see why a 2001 study by Kuo

and her colleagues showed that crime decreases in urban areas with green spaces.

On a more personal level, taking a walk around the block can enhance your social life. "We need the ability to interact with others, and it's key to have that social time every day," Vindum says. "When I go for a walk around my neighborhood, just a smile for a neighbor goes a long way. Just knowing and being familiar with our surroundings helps us feel like part of a community."

Another thing Vindum has noticed is exercise becoming more of a social event. "People are not meeting up for food and drinks so much anymore. It's 'Let's meet at the trailhead or let's meet at the park,' and that's great quality time spent together interacting."

### **Connecting with Spirit**

Finally, taking a walk in the park can help you feel connected to the world as a whole and feel part of something bigger than your community.

Many scientists believe that humans have a biological need to connect with nature. In 1984, Pulitzer Prize-winning scientist E.O. Wilson published *Biophilia*, an exploration of the basis of this attraction to the outdoors. In her paper, Mitten says that Wilson's theory means that "people's success in their search for a coherent and fulfilling existence depends on their relationship to nature."

Vindum adds, "Research suggests that we have an affinity for nature that's hardwired into us. We need it, we want it, if we don't have it we become unwell."

So the next time you put on your walking shoes, just walk on past the treadmill. Don't get in your car. Just head out the door to the nature trail. Or to the beach. Or down by the river. Improving your health is as easy as a walk in the park. ■

## **Getting Started**

Vindum offers these tips for taking a walk outside:

- Go for 10 minutes.
- Just walk. You don't need to have a plan.
- Take it easy on yourself.

When you're ready to bump up your outdoor stroll, try these suggestions:

- Look for green spaces on maps and walk there.
- Learn the trees, flowers, and birds on your trail.
- Smell the pine boughs or eucalyptus leaves.
- Incorporate textures. Walk on cobblestones. Take off your shoes for a stroll in the grass.



A walk outdoors provides mental health benefits, as well.



# Let me tell you a story. . .

Reading aloud can be a great way to connect with an Alzheimer's patient. Just follow a few guidelines and open a new world of sharing with your loved one and a good book.

Most people read every day. Even if it's only reading slogans on commercials or billboards, skimming a restaurant menu or checking out celebrity gossip on the Web, your daily life is filled with the written word. That's a good thing, especially for caregivers and family members of people with Alzheimer's disease (AD). Research has shown that reading can help improve the quality of life for people with AD. "Reading, especially reading aloud, benefits patients by keeping them involved in stimulating activities that may be helpful in maintaining cognitive abilities, and it allows social interaction," says Marwan Sabbagh, M.D., F.A.A.N., director of clinical research at Banner Sun Health Research Institute in Sun City, Ariz., and author of *The Alzheimer's Answer* (Wiley, 2008).

Here's how to make reading aloud an activity your loved one will enjoy:

## Choose Wisely

When reading to someone with Alzheimer's, forget the thriller with numerous plot twists. Unless the person is in the earliest stages of the disease and enjoys that kind of book, it may be overwhelming. "Finding a topic of interest to the person is the best way to choose reading material," says Audette Rackley, M.S., head of special programs at the Center for BrainHealth at The University of Texas at Dallas. If Grandpa loves sports, you can read an article from the sports page. If Aunt Tallie has a green thumb, a magazine article about planting a rock garden may capture her attention. Short articles from newspapers or magazines, short story collections like the *Chicken Soup* series, poetry, trivia and books with pictures all make for good reads.

Some people may even enjoy children's books. "Not only are children's books of shorter length, the reduced complexity of the contents of the material, the visual stimuli and the written stimuli are all beneficial for

memory-challenged individuals," Dr. Sabbagh says. However, for some, children's books aren't the way to go. "Some people may feel that reading a children's book is an insult to their intelligence," says Katie Griffith, CTRS, a recreational therapist who works with Alzheimer's patients at LifeBridge Health in Baltimore. If so, try a different genre. The only way to make this activity into something they enjoy is by reading something they enjoy, Griffith says.

## Create a Comfort Zone

People with AD thrive on routine, Dr. Sabbagh says, so rather than reading after breakfast one day and then before bedtime the next day, it's better to have a specific time when you'll read each day.

Alzheimer's also makes people more easily distracted and bothered. For reading to be a success, distractions must be minimal, says Griffith. "Unless the whole family is engaged in the reading activity (which is a good idea), it's best to go into another room where the two of you can be alone," she says. "You also don't want a radio or a television on at the same time because that can be over-stimulating and cause agitation," she says. Making sure the room isn't too cold or too warm can also help with comfort.

## Talk About It

An easy way to bore and frustrate someone with Alzheimer's is to simply read to them. Conversation has to be a factor, says Rackley, who is also author of *I Can Still Laugh: Stories of Inspiration and Hope from Individuals Living with Alzheimer's* (BookSurge Publishing, 2009). "In my opinion, the value of the reading is the discussion that can result from the reading—the engagement in new topics, the opportunity to share opinions, the introduction of topics of long-time interest and the opportunity to trigger memories," she says.

Asking for opinions, sharing experiences and talking

about images in the reading material are good ways to get the conversation flowing.

You can also get your loved one actively involved by taking turns reading (be sure to get large-print text if there are any vision problems). “Although the interest and ability to read kind of dissipates over time as the Alzheimer’s progresses, most people in the mild stage can read,” Dr. Sabbagh says. So, if possible, allow your family member to read to you. It doesn’t have to be a whole book or even a whole paragraph. Even reading a sentence or two will help them feel like an active participant, Rackley says.

### Practice Patience

Like many other things, read-aloud activities can sometimes cause frustration. Caregivers may feel the person should understand the story, or they may get tired of repeating things and reading the same story over and over, Dr. Sabbagh says. People with AD may get angry or confused because they don’t understand or can’t remember what they’ve read.

To deal with these frustrations, “remind yourself that they’re the same loving person, but they’re no longer able to think the way you think,” Griffith says. Keeping that in mind and breathing deeply can help things stay calm.

If things get too overwhelming for either you or your loved one, take a break and try again the next day. The goal isn’t to make reading a dreaded chore. Reading should be an enjoyable way for families to have continued engagement with their loved ones, Rackley says. ■



Reading aloud can bring out the best in family relationships.

### Books to Get You Started

- *The Sunshine on My Face: A Read-Aloud Book for Memory-Challenged Adults* (Health Professions Press, 2004) by Lydia Burdick
- *Chicken Soup for the Soul: All in the Family: 101 Incredible Stories about our Funny, Quirky, Lovable & “Dysfunctional” Families* (Chicken Soup for the Soul, 2009) by Jack Canfield
- *Let’s Do Nothing!* (Candlewick, 2009) by Tony Fucile

# It Can Happen to You

Identity theft is a major concern for anyone, and the elderly are no exception.

**W**e hear about it on the news all the time, yet we think it can't happen to us. Well, guess what: It can. Identity theft is a growing problem, especially among seniors and those with cognitive impairments. The consequences of being an identity theft victim can be devastating, sometimes ruining a lifetime history of good credit. However, there are things each of us can do to minimize the possibility of identity theft or effectively deal with it if it happens. Some of these tips come from the National Consumer Law Center.

**Checks:** You probably shouldn't put your telephone number on your checks. If you want to put a telephone number on your checks, use your work number instead of your home number. Don't put your home address on your checks, either. If you have a post office box, use that instead. Better yet, don't put any address on your checks. Above all, never have your Social Security number printed on your checks. If your Social Security number is printed on your checks, anyone can have access to it. You should be very careful about whom you give your Social Security number to since that number can be used by undesirables to access much of your private information.

**Wallet:** Photocopy the contents of your wallet. Copy both sides of each document in your wallet, including your driver's license, other identification cards, and credit and debit cards. This



Take precautions to keep your identity safe.

will permit you to know what you had in your wallet, including account numbers, so you know what account holders need to be notified in case your wallet is lost or stolen. Keep the photocopy in a safe place. Some credit and debit card companies offer a registry as part of their services. It may be worth the fee to call one number, and then have the registry notify all of your credit and debit card issuers about a loss or a theft.

Other tips to avoid identity theft:

- Sign your credit cards immediately.
- Do not carry your Social Security card with you; keep it in a safe place.

- Do not attach a personal identification number (PIN) or Social Security number (SSN) to any card that you carry with you, or on any receipt or paper that you are going to throw away.
- Shred any document that contains a PIN, SSN or account number before you throw it away. Garbage cans are feeding grounds for others who wish to gain access to your personal information.
- Check your receipts to make sure you have received your own, not someone else's.
- Alert your credit or debit card issuer if you do not receive your statement; someone may be stealing your mail.
- Do not give your personal information to anyone until you have confirmed the identity of the person and verified that you need to provide the information.
- Check your credit reports on a regular basis. There are services you can sign up for which will notify you of any changes in your reports.
- Put passwords on your accounts, but do not use something easily available, such as your mother's maiden name or your date of birth.

If your wallet or credit and debit cards are lost or stolen, or if you suspect identity theft, then you should notify the card issuers immediately. This is easier to accomplish if you have kept a list of your card numbers and the toll-free telephone numbers of the card issuers. Keep this list in a place where you can





Identity theft is one of the fastest-growing crimes in the U.S.

find it, or subscribe to a registry. You should also immediately file a police report where your wallet or credit or debit cards were lost or stolen.

You should also notify the three major credit reporting agencies to place a fraud or identity theft alert on your accounts. This is important because thieves may apply over the Internet for credit in your name. In fact, you might not even know you have become a victim of identity theft until several months after it happens. By setting up this alert, you will be able to tell any company that is checking your credit in order to issue new credit in your name that your information was stolen. They will have to contact you by telephone to authorize new credit. The names and phone numbers for the three major

credit-reporting agencies are:

**Equifax: 800-525-6285**  
**Experian: 888-397-3742**  
**Trans Union: 800-680-7289**

You can order copies of your credit reports from each of these agencies, and review the credit reports to see if any new accounts in your name have been opened fraudulently. You can receive a free copy of your credit report once every 12 months from each of these agencies. To get your free credit reports, go to [www.annualcreditreport.com](http://www.annualcreditreport.com) or call 877-322-8228. Of course, in order to get your free credit report, you will have to provide some personal information so that they know you are the person who is really asking for the report. None of

the consumer reporting agencies will attempt to contact you to secure personal information. Do not respond to any emails or phone calls from anyone claiming to be a representative of any of the consumer reporting agencies as this is likely a scam.

Identity theft is a one of the fastest-growing crimes. You can help protect yourself against this menace by following these tips. ■

*Bernard A. Krooks, J.D., CPA, LL.M (in taxation), CELA, is immediate past president and founding member of the N.Y. chapter of the National Academy of Elder Law Attorneys and a nationally known, widely quoted expert on elder law. For more information, visit the firm's website at [www.littmankrooks.com](http://www.littmankrooks.com).*

# 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

Can you match each US presidential candidate to the year he lost (got the second highest electoral count)?

- |                           |         |
|---------------------------|---------|
| 1. _____ George McGovern  | a. 1948 |
| 2. _____ Walter Mondale   | b. 1952 |
| 3. _____ Robert Dole      | c. 1960 |
| 4. _____ Richard Nixon    | d. 1964 |
| 5. _____ George H.W. Bush | e. 1968 |
| 6. _____ Adlai Stevenson  | f. 1972 |
| 7. _____ Barry Goldwater  | g. 1976 |
| 8. _____ Hubert Humphrey  | h. 1980 |
| 9. _____ Jimmy Carter     | i. 1984 |
| 10. _____ Thomas Dewey    | j. 1988 |
| 11. _____ Gerald Ford     | k. 1992 |
| 12. _____ Michael Dukakis | l. 1996 |

## 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 read from left to right spell out a short quote from Milton Berle. The black squares are the spaces between words. One letter has been dropped in place to start you off.

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

## LEAPFROG

Here’s a list of US cities that have two-word names. The letters of the two halves are in the correct order, but they overlap. All you have to do to find the place names is separate the letters.

Example: SBEONUTDH — SOUTH BEND

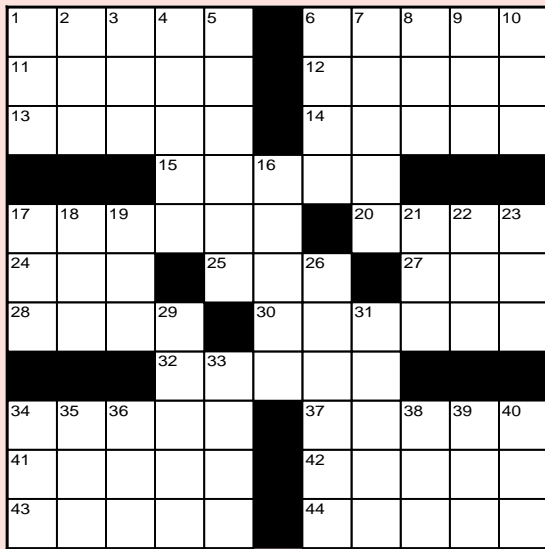
- |                                  |       |
|----------------------------------|-------|
| 1. W A F O Y R N T E             | _____ |
| 2. B R O A T O U N G E           | _____ |
| 3. L R I T O T C L E K           | _____ |
| 4. G R R A P A N I D S D         | _____ |
| 5. S W I A N L S E T M O N       | _____ |
| 6. F A W I C L H I L T A S       | _____ |
| 7. C O C H R R I P S U T I S     | _____ |
| 8. V B E I R G A I C N I H A     | _____ |
| 9. S C O P R L O I R N A D O G S | _____ |

•VISIT US AT KAPPAPUZZLES.COM•

# 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 the number of words in the answers haven't been given. The second puzzle is also a thematic puzzle: the title "What's New?" is a hint. Have fun testing your knowledge while doing something that's good for you!



## Across

1. Internet messages (hyph.)
6. Aroma
11. Bea Arthur sitcom
12. Nat and Natalie
13. Advised strongly
14. Stage whisper
15. Secret \_\_\_\_
17. Selected
20. French friends
24. Doctors' gp.
25. Cheering shout
27. Play a part
28. Decays
30. Eye part
32. \_\_\_\_-frutti
34. Tension reliever
37. Taboo things
41. Alarm signal

## Down

1. Australian bird
2. Third mo.
3. Popular vacation mo.
4. Concepts
5. Account book
6. Look over
7. \_\_\_\_ Mesa, California
8. Biblical judge
9. Homer's wholesome neighbor
10. Half a fly
16. Pass a law
17. Ford product

42. Fragrances
43. Ship docking spaces
44. Wish granter
18. PPO alternative
19. Cereal grass
21. Adult male
22. \_\_\_\_ cubes
23. RR stop
26. Frankfurter (2 wds.)
29. High-priced
31. \_\_\_\_ Janeiro (2 wds.)
33. Ornamental vases
34. Double curve
35. Suffer poor health
36. \_\_\_\_ Lanka
38. Negative prefix
39. Angle starter
40. Compass point (abbr.)

## What's New?

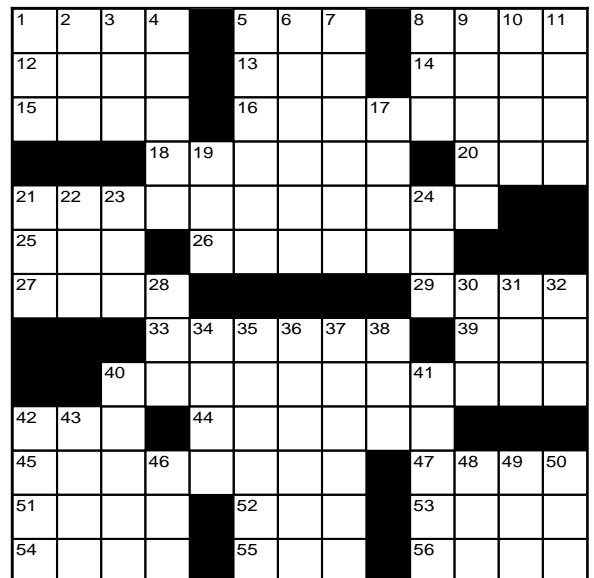
### Across

1. Tropical wading bird
5. Nine-digit ID
8. Actress Perlman
12. "The Secret of \_\_\_\_" (1982 film)
13. Snead need
14. Coliseum
15. National Weather Service agcy.
16. NEW (like an idea)
18. Belligerent response to "Do it!"
20. Some Scrabble tiles
21. NEW (like a new man)
25. Robert of "Quincy"
26. Locale of Walesa's shipyard
27. Willie of Cooperstown
29. Transcript nos.
33. Inferior
39. Lennon's second missus
40. NEW (like a replacement)
42. \_\_\_\_ diligence
44. 3-D blockbuster of 2009

45. NEW (like a fashion)
47. Singer Anita
51. \_\_\_\_ dry eye in the house
52. Library
53. Delta builder
54. Granny, e.g.
55. Sum up
56. Done's partner

### Down

1. Rest stop
2. Degradable start
3. "\_\_\_\_ Fool to Want You"
4. Sea World whale
5. Tended the fire
6. One of tennis's Williams sisters
7. Colorful pop artist LeRoy
8. Stat for a slugger
9. Whetted
10. McGregor of "Trainspotting"
11. Start of a Shakespearean title
17. Secures
19. Std.
21. Basketball hoop
22. Timetable abbr.
23. Regis Philbin's better half
24. Medical test: abbr.
28. R-V link
30. Luau dish
31. Darrow whom King Kong loved
32. Soak
34. Apple's latest device
35. Virginia City's locale
36. Chattered
37. Belgian coastal city
38. Dim sum accompaniment
40. Sharp argument
41. Mine refuse
42. Moisten a doughnut
43. Conversant with
46. Meal starter
48. 24 hours, in Barcelona
49. "Prince \_\_\_\_" ("Aladdin" song)
50. Accounting abbr.





# BRAIN-BOOSTING PUZZLES

## HIDDEN-MESSAGE WORD-FIND™

After you have circled all of these wine-grape varieties, read the leftover letters from left to right, line by line, to discover an apt quote from Galileo.

You are looking for a 32-letter phrase.

BARBERA	PETIT VERDOT	W	S	I	C	N	P	C	E	C	I	C	T	S	S
CABERNET	PIGATO	I	I	C	U	E	O	I	O	N	R	N	O	L	B
CHARDONNAY	PINOT BLANC	I	L	G	A	R	B	L	N	E	H	A	L	A	Y
CHENIN BLANC	PINOT NOIR	S	V	L	V	B	O	L	G	O	E	L	R	V	A
CLAIRETTE	SANGIOVESE	Y	A	I	E	M	E	N	A	N	T	B	E	E	N
COLOMBARD	SILVANER	R	N	E	B	N	I	R	N	M	E	N	M	R	N
CORVINA	SYRAH	A	E	A	T	L	A	A	N	R	T	I	O	D	O
MALBEC	TROLLINGER	H	R	H	L	T	S	C	A	E	E	N	L	I	D
MARSANNE	VERDICCHIO	D	T	O	D	R	E	V	T	I	T	E	P	C	R
MERLOT	ZINFANDEL	D	R	T	A	O	G	R	E	A	T	H	H	C	A
MUSCAT CANELLI		T	E	M	O	T	A	G	I	P	C	C	R	H	H
		E	S	E	V	O	I	G	N	A	S	S	B	I	C
		Y	Z	I	N	F	A	N	D	E	L	W	U	O	A
		T	P	I	N	O	T	B	L	A	N	C	E	M	R

## 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.

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

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# PUZZLE ANSWERS

## Match These

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

## Dropline

A committee is a group that keeps the minutes and loses hours.

## Leapfrog

1. Fort Wayne; 2. Baton Rouge;
3. Little Rock; 4. Grand Rapids;
5. Winston-Salem; 6. Wichita Falls;
7. Corpus Christi; 8. Virginia Beach;
9. Colorado Springs.

## Hidden Message

Wine is sunlight, held together by water.

## Crossword 1

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

## Crossword 2

I	B	I	S	S	S	N	R	H	E	A		
N	I	M	H	T	E	E	B	O	W	L		
N	O	A	A	O	R	I	G	I	N	A	L	
		M	A	K	E	M	E	E	N	S		
R	E	J	U	V	E	N	A	T	E	D		
I	T	O	G	D	A	N	S	K				
M	A	Y	S				G	P	A	S		
		T	I	N	P	O	T	O	N	O		
		S	U	P	E	R	S	E	D	I	N	G
D	U	E	A	V	A	T	A	R				
U	P	T	O	D	A	T	E	O	D	A	Y	
N	O	T	A	D	E	N	S	I	L	T		
K	N	O	T	A	D	D	S	A	I	D		

## Word-Find

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

## Sudoku

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

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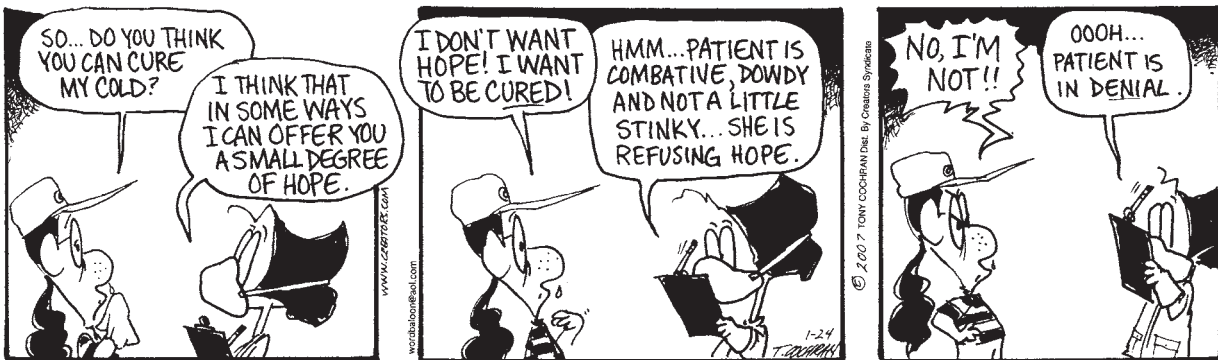
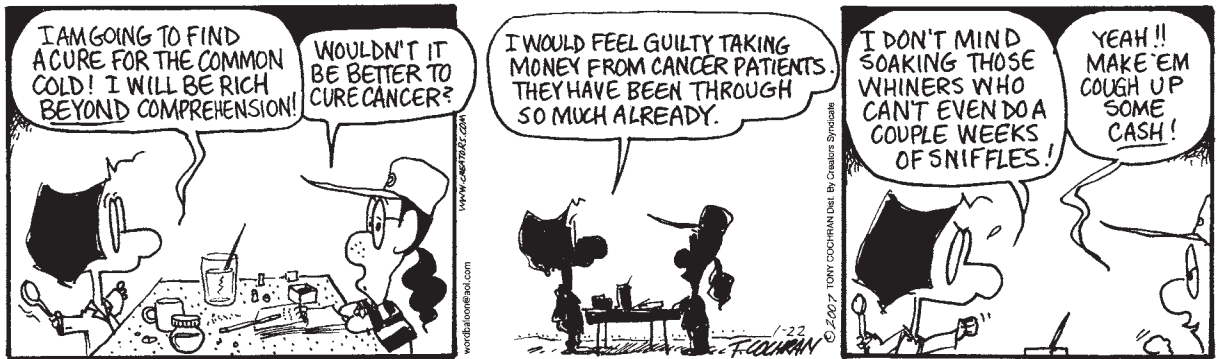
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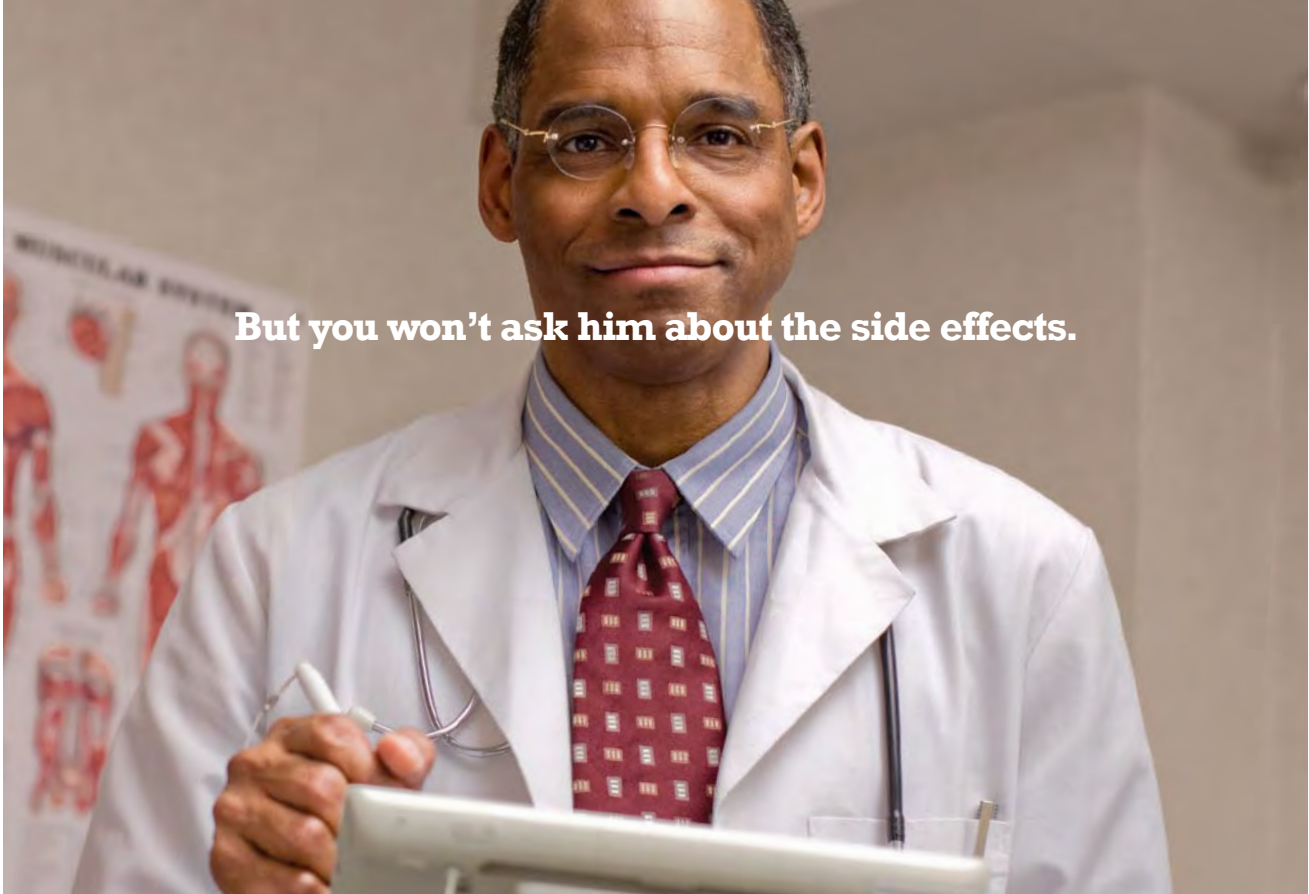
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**But you won't ask him about the side effects.**



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