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Winter 2018

Kim Cattrall

A look at the actress's career and her family's battle with Alzheimer's

FISHER CENTER FOUNDATION CEO and President SPEAKS

On the important role of therapeutic art in the lives of Alzheimer's

Talking with a Person Who Has
ALZHEIMER'S
What to do—and not to do



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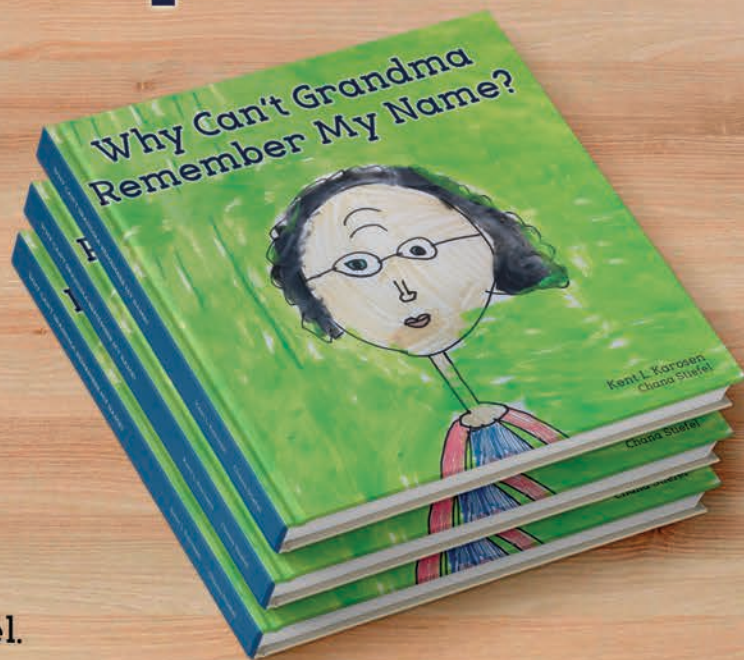
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Why Can't Grandma Remember My Name?

A book explaining Alzheimer's disease using artwork created by children juxtaposed with art created by Alzheimer's patients, demonstrating the power of therapeutic art for all ages.

The book is written by the Foundation's President, Kent L. Karosen, and co-author Chana Stiefel.



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We look at the career of a celebrated TV and film star, and her family's struggle with Alzheimer's.

Photo: Scott Barbour / Getty Images



Kim Cattrall

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An Amazing Year at the Fisher Center!



Kent L. Karosen

2017 was an extraordinary year for the Fisher Center and our scientists and researchers we support. That success would not have been possible without your generosity. Thank you for all that you have done for us. Together, we can achieve even more in 2018 as we continue our mission to find a cure for Alzheimer's and to improve the lives of all who are affected by it.

Here's a quick rundown of the incredible advancements you helped us achieve:

Our scientists working under Nobel Laureate Dr. Paul Greengard at the Fisher Center for Alzheimer's Research laboratory, for example, published and presented several significant breakthroughs. Those include the publication of two novel studies on beta amyloid, which contributes to memory loss and other symptoms associated with Alzheimer's.

The team also optimized a state-of-the-art way to measure amyloid plaques and developed a new technology that will accelerate Alzheimer's research by allowing scientists to analyze thousands of genes at once, instead of one at a time, to help identify the factors that make people vulnerable to the disease.

Meanwhile, our team of researchers at the Fisher Alzheimer's Disease Education and Research Program at NYU Langone Medical Center, under the direction of Dr. Barry Reisberg, combined a specific patient care management program with a commonly prescribed drug for Alzheimer's to improve the daily function of people with Alzheimer's by 750 percent, stalling some of the disease's most damaging effects! That program will have a significant and positive impact on people with Alzheimer's and their caregivers when the team begins introducing it nationwide.

Your continued support ensures that those scientists and researchers continue to provide new treatments and hope to millions of people with Alzheimer's and their caregivers during the coming year.

Speaking of hope, we know you'll find inspiration from *Sex and the City* star Kim Cattrall, who we feature on the cover of this issue. She took the death of her father, Dennis, from Alzheimer's in 2012 as a wakeup call to enjoy life to the fullest and make the most out of each day. She does that, in part, by staying healthy, active, positive and productive. We hope you'll do the same throughout the entire new year.

Sincerely,

Kent L. Karosen
President & CEO

Please send your tips, stories or questions to:

Fisher Center for Alzheimer's Research Foundation
110 East 42nd Street, 16th Floor
New York, NY 10017

or by e-mail to info@ALZinfo.org

We can end Alzheimer's.

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. The Fisher Center Foundation has earned Charity Navigator's highest 4-Star rating six years in a row for fiscal management and commitment to accountability and transparency. For more information or to make a donation, go to www.ALZinfo.org.

The **LATEST NEWS** on Alzheimer's Disease and Brain Health

One in Three Dementia Cases Could Be Prevented

An estimated 35 percent of cases of Alzheimer's disease and other forms of dementia could be delayed or perhaps even prevented if people adopted certain measures beginning early in life that can modify the course of the disease. Those are the findings of a report from 24 international experts that was published in the *Lancet*.

One of the most important measures early in life, the report notes, is to stay in school past the age of 15, which reduced the risk of dementia in old age by 8 percent, the researchers estimate. Formal education may help to strengthen brain connections and delay the onset of memory loss and other symptoms years down the road.

In midlife, between the ages of 45 and 65, stemming a decline in hearing reduced lifetime dementia risk by as much as 9 percent. Good hearing sparks stimulation from the environment and can help people maintain social connections, which is thought to play an important role in keeping the mind sharp. Keeping blood pressure in check and maintaining a healthy weight also reduced risk.



Later in life, stopping smoking, avoiding depression and diabetes, staying physically active and remaining socially connected were all important.

The experts also recommend that anyone caring for a family member with Alzheimer's be offered counseling and other measures to help reduce the risk of depression that may ensue as a toll of caretaking.

Crossword Puzzles May Help Keep the Brain Young



Doing crossword puzzles regularly may help to keep the brain up to 10 years younger late in life. And the more frequently you engage in crossword puzzles or other word games, the better your brain function may be.

Those are the findings of a study from researchers at the University of Exeter Medical School and Kings

College London in Britain. They add to a growing body of evidence that mentally challenging activities may help to keep the mind sharp as we age.

For the study, the researchers surveyed more than 17,000 healthy men and women aged 50 and older who were part of a large and ongoing research initiative. They filled out questionnaires about how often they played word games such as crossword puzzles.

Participants were also given a research test to assess various aspects of memory and thinking skills. The investigators found that the more regularly participants engaged with word puzzles throughout life, the better they performed on tasks assessing attention, reasoning and memory.

From their results, the researchers calculated that people who regularly engaged in word puzzles have brain function equivalent to up to 10 years younger than their age. The findings were presented at the Alzheimer's Association International Conference.





Men, Women and Alzheimer's Risk

Are men and women who are at increased genetic risk of Alzheimer's equally likely to get the disease in old age? A new analysis suggests they are, though women may develop symptoms at an earlier age.

The findings, from researchers at the Keck School of Medicine at the University of Southern California in Los Angeles, raise intriguing questions about when treatment for Alzheimer's disease should be started in men and women.

The study, in *JAMA Neurology*, pooled data from 27 different studies that looked at nearly 58,000 men and women over 55.

Participants were given tests to determine whether they carry the APOE-E4 gene, a common gene variant that increases the risk of developing Alzheimer's. If you inherit the gene from one or both parents, your risk of developing Alzheimer's is increased, though many people who carry the gene never get Alzheimer's.

The researchers found that among the gene carriers, women were more likely than men to develop Alzheimer's between the ages of 65 to 75.

"If women are at increased risk for Alzheimer's disease at younger ages, it is plausible that treatments for women may need to be initiated earlier," the authors wrote.



Aricept Ranks Highest Among Alzheimer's Drugs

A new analysis that looked at the four drugs currently approved to treat the memory decline of Alzheimer's disease—Aricept, Exelon, Razadyne and Namenda—found that Aricept ranked highest in terms of easing cognitive decline.

For the study, researchers reviewed evidence from 142 clinical trials that evaluated the four drugs, alone or in combination. The review, published in the *Journal of the American Geriatrics Society*, looked at almost 34,000 patients overall.

Patients were assessed for memory, alertness, mood and concentration. Aricept ranked highest in terms of curbing the memory loss of Alzheimer's disease as well as behavior and general health.

People who took Aricept, however, were more likely to experience side effects, including nausea, vomiting and diarrhea, than those who received a dummy pill.

Although no significant risk of serious harm, falls or reduced heart rate was associated with any of the medications in the study, the data was limited on these specific outcomes.

All the drugs carry side effects, and some may be better for some people than others. And while the medications may ease symptoms for a time, none stop the relentless downward progression of the disease.



For more information: Visit www.ALZinfo.org often for up-to-date and expert-reviewed scientific news.

America's Toughest Job

By Jennifer Sellers

Caregiving for a loved one with dementia is challenging. Identifying and dealing with common frustrations can help make it easier.

There's no shortage of content online and on TV about tough jobs and how they rank. With a few clicks of the mouse or remote, you can learn all about the varied stresses of oil drillers, ice road truckers and many others who work in perilous vocations. But conspicuously absent is one the toughest of jobs—one that goes unnoticed and unpaid; one that takes a toll on the body, mind and soul. A truly tough job, as anyone who has a loved one with Alzheimer's disease can tell you, is caregiving for someone with dementia.

Many Sources of Frustration

Frustrations for caregivers are wide-ranging and include many challenges, such as:

- Dealing with behavioral changes in the loved one, and combating related disappointment, resentment and grief
- Navigating the diagnosis and treatment options, as well as the medical system in general
- Adapting to the changing stages of the disease
- Managing the logistics of care and support for the patient
- Losing a sense of self and relationship as roles change
- Coping with changes in routine and personal reality
- Experiencing physical, emotional and spiritual burnout

Sometimes multiple challenges will land on the caregiver at once, creating an overwhelming avalanche effect. At other times, dealing with the frustrations seem like a maddening game of whack-a-mole—just as one problem is dealt with, another pops up. But regardless of the intensity, most caregiver frustrations have a common theme.

Kenya Miles, BSW, caregiver support coordinator at CarePartners Adult Day Services in Asheville, N.C., says that the frustrations of caregiving can most often be categorized as a feeling of being overwhelmed.

"It's a broad category that has a lot of frustrations

that fall under it," she says. "Caregivers can be overwhelmed by so many things, whether its the sheer amount of new information they have to learn, or their frustration over role reversals and the changing dynamics of a relationship. Frustrations can range from little annoyances to overwhelming fear."

The sheer number of choices and decisions one must face when caring for a loved one with dementia are often enough to leave the caregiver in frustrated tears—especially if the person who once used to help in decision-making, such as a spouse or parent, is the person who is now being cared for.

"Suddenly, there are a lot of choices that need to be made, and you feel overwhelmed because the roles have changed," says Miles. "The person who once took care of you is who you're now having to make decisions for. Or the person who used to be your partner in making decisions is now depending on you to lead the way without them."

Miles points out that the unpredictable nature of dementia adds to a caregiver's stress.

"It can seem incomprehensible at times," she says. "One day you're planning a vacation with a loved one—or maybe even something simple, like a trip to the grocery store—and the next they may not even be able to communicate with you."

Dealing with the Stress

Among the many frustrations of caregiving for someone with dementia is that the challenges feel perpetually ongoing. "What makes caregiving such tough work is that it's basically a fulltime job that can last for many years," says Miles. "Persons with cognitive impairment can continue to live for a long period of time. While the caregiver wants to spend as many years as possible with the loved one, the process can be physically, socially, financially and even spiritually intense."

To help caregivers build resilience in the face of long-term frustrations, Miles recommends two very important things: access to support resources and a change of perspective.





Sometimes multiple challenges will land on the caregiver at once, creating an overwhelming avalanche effect.

When it comes to support, she recommends local resources as well as national/broad resources. In her community of Asheville, she often points her clients to Memory Care, a nonprofit serving those with dementia (and their caregivers) in western North Carolina. A number of communities throughout the country have organizations devoted specifically to patients and families dealing with Alzheimer's disease. Talk to your loved one's doctor or eldercare provider for recommendations.

Miles also recommends that caregivers read about the experiences of other caregivers, whether it be in the form of advice guides or memoirs.

For support resources on a national level, she highly recommends:

- National Institute on Aging—nia.nih.gov
- Family Caregiver Alliance—caregiver.org
- Caregiver Action Network—caregiveraction.org

While tangible support is invaluable, Miles says a positive mindset is often underrated.

“There are a lot of resources that can ease your frustrations, but your caregiving challenges are never going to go away completely,” she says. “One of the best things you can do is to change how you look at the situation. Yes, there are frustrations, but there are also rewards.

“Caregiving can give you a sense of purpose and commitment,” continues Miles. “It can also provide you with an opportunity to give back to a loved one who has given so much to you over the years. Caregiving strengthens family bonds and, in many cases, can renew religious faith and spiritual connections. For all its hardships, it offers opportunities to experience some of the truly authentic moments in life.” ●

Foundation Supports Key Aging Programs

For 67 years, the Brookdale Foundation has been a leader in grant-making for beneficent programs. The organization was started in 1950 by brothers Henry, Irving, Robert, Benjamin, and Arnold Schwartz, with a focus on serving the medical field and higher education scholarship support. The vision and compassion of the Schwartz family continues to serve as the foundation's driving force to this day.

In 1984, the foundation shifted its focus to providing leadership and funding for programs that address senior issues. Since then, the foundation has developed and sponsored several programs all its own, including the Relatives as Parents Program (RAPP) and the National Group Respite Program, among others.

The National Group Respite Program

In 1989, the foundation launched this initiative in order to provide seed grants to organizations for developing and implementing social model group respite programs. The program also supports people with early memory loss due to dementia through grants.

The program's goals are:

- To provide opportunities for people with Alzheimer's disease or a related to dementia to participate in a program of meaningful social and recreational activities in a secure and supportive setting, all with an eye toward maximizing their cognitive and social abilities.
- To provide relief and support to primary caregivers of people with Alzheimer's disease or a related dementia, as well as other family members.

The National Group Respite Program also offers caregivers and family members access to such services as counseling, support groups, information and referral, and training and education. The aim is to address the special needs of Alzheimer's families through a nationwide network of cost-effective, social model adult day service programs.

The Early Memory Loss initiative is an engaging, educational service model that prepares adults to be productive, involved members of the community and to participate in a program that enhances their independence. The EML program also seeks to teach practical skills in a non-threatening peer setting.

Relatives as Parents Program (RAPP)

After a foundation-funded study by the University of California at Berkeley found that there was a need for more support services for grandparent caregivers in the U.S.,

the Brookdale Foundation launched the Relatives as Parents Program in 1996. The program was set up to encourage and promote the expansion of services aimed at grandparents and other relatives who have become surrogate parents due to the absence of the child's birth parents.

Today RAPP provides extensive services that primarily affect relative caregivers who are caring for children outside of the foster care system. One of RAPP's functions is the National Orientation and Training Conference to train, network with, and exchange information and provide technical assistance to the entire RAPP network. They do this through their listservs, site bulletins, conference calls, web chats and their annual newsletter. ●



Workshop Focuses on Person-Based Technology

One of the highlights of the Brookdale Foundation's National Conference in Denver, Colo., in October was a workshop for grantees of the National Group Respite Program, "The Fun Theory: Transforming Dementia Care Through Person-Based Technology." This emerging field seeks to empower activity and rehab professionals with opportunities both to engage and care for people who are undergoing physical and cognitive decline by leveraging their strengths and interests and by fostering creativity, self-expression and personal development.

The idea is to put technology that is fun to use into the hands of older adults so they can enhance their well-being by being focused and engaged on the meaningful activities presented to them. There is a growing body of research underscoring the value of non-medication interventions, such as music therapy, therapeutic art, physical activity and interactive games to improve the overall quality of life of older adults with dementia while keeping their brain active.

"Many existing technology developers and health programs fail to activate the elder's participation in their wellness and care," writes Juliet Kerlin in a recent article. She is the director of research at It's Never 2 Late, a company that creates computer software and other programs for older adults living with dementia. "These products are not utilizing the potential of interactive, adaptive technology to provide unique, person-centered experiences that relieve stress and anxiety and provide opportunities for elders, especially those with dementia, to reconnect with lifelong passions and interests."

Person-centered technology and programs help people with dementia enjoy their time participating in the activity while relaxing, reminiscing, laughing and being entertained, Kerlin writes. "Like never before, adaptive computer technology is empowering frail people with the opportunity to maintain or achieve increased self-management and well-being, and most importantly, an overall better quality of life as age-related physical and cognitive decline become more prevalent," she adds. ●

New Research Shows Patient-Centered Care Beneficial

Newly published research from the Fisher Center for Alzheimer's Disease Research's Education and Research Program at NYU Langone Medical Center laboratory, led by Dr. Barry Reisberg, reveals the power of combining a patient-centered care program with a commonly prescribed drug for Alzheimer's disease, memantine.

Memantine was the first treatment for later-stage Alzheimer's disease. It was approved by the FDA in 2003 following a Reisberg study of the medication.

In the randomized trial, 10 patient-caregiver groups were enrolled in a program called the Comprehensive, Individualized, Person-Centered Management program (CI-PCM), while the patients were taking memantine. CI-PCM includes caregiver training, residence assessment, therapeutic home visits and caregiver support groups, all of which were developed and conducted by study co-investigator Sunnie Kenowsky, DVM, who is co-director of the Fisher Alzheimer's Disease Program and clinical instructor of Psychiatry at NYU Langone.

The other 10 patient-caregiver groups were enrolled in a program of standard community care, which included a clinic visit, referrals to resources for caregiver training, care counseling, physical, speech and occupational therapy, medic-alert bracelets training, day care centers and support group programs. These patients were also taking memantine.

At the end of 28 weeks, the patients in the memantine plus CI-PCM group tested 7.5 times higher in the Functional Assessment Staging (FAST) test, which measures the ability of a person to independently carry out daily activities, than the original 2003 memantine-only group.

"Our new research shows that a comprehensive, patient-centered care program brings significant benefits in daily activities, which are important to individuals with Alzheimer's and those who care for and about them," said Dr. Reisberg.

Fisher Center Foundation President/CEO Addresses National Conference

In October, Fisher Center Foundation President and CEO Kent Karosen spoke at the National Conference of the Brookdale Foundation in Denver, Colo. Karosen addressed the attendees about the Fisher Center for Alzheimer's Research's continued search for better treatments and a cure for Alzheimer's disease, as well as the important role therapeutic art can play in the care of those living with the disease.

Karosen is the author of a book, *Why Can't Grandma Remember My Name?*, along with Chana Stiefel. The book shows the artwork of Alzheimer's patients juxtaposed with the artwork of kindergarteners and first-graders, all to help explain Alzheimer's disease to children. Karosen pointed out that given that there are nearly 6 million people with Alzheimer's in the U.S., there are probably around 24 million grandchildren "struggling with the reality that their grandparent has Alzheimer's," he said.

"Placing the children's and the seniors' artwork side by side shows children that someone with Alzheimer's can still do some of the things that they like to do, such as drawing and painting," Karosen explained. "By demonstrating this commonality, we show that creativity can live within all of us and is undiminished by dementia."

The Role of Therapeutic Art

Karosen said that therapeutic art sessions are led by a trained artist, rather than a therapist, and the goal is "to help the elderly apply their remaining strengths to express themselves creatively."

The Fisher Center Foundation worked with Dr. Elizabeth Lokon, who founded the Opening Minds Through Art program (OMA) at the Scripps Gerontology Center at Miami University in Ohio. OMA places trained volunteers with people suffering from dementia to help the dementia sufferers explore

their creativity through the visual arts. That program has expanded to include 50 locations.

"Many people with Alzheimer's live in nursing homes or other institutional settings where they are constantly told what to do and how to do it," Karosen said. "Having them create their own art at their own pace encourages them to make their own decisions and gives them a sense of independence."

Part of the focus of OMA is to create an environment where people with dementia can manage and comprehend what's going on. "During the art sessions, the world is now suited to their needs. They flourish in this environment. They feel in control. They feel human. And because they work with the artist one-on-one for 10 consecutive weeks, they also feel like they have a new friend," Karosen said.

The results of this program have been overwhelmingly positive. Karosen said that staff members videotape the sessions and compare them to videos taken of the patients in other settings. "When they make art, the seniors are more focused and engaged than they are in other activities," he said. "They show a greater amount of pleasure. They don't fall asleep or stare into space. The stimulation they receive from the art sessions is important and special because boredom, loneliness and depression are among the most common problems for people living in institutionalized settings."

The families of people with dementia notice, too. Dr. Lokon noted previously that family members say that their loved ones talk about the art classes and the friends they made at them. "When hearing the news, the family member tends to feel less guilty about institutionalizing their relative," Karosen said. "They also see that this person, in many ways, can still react and respond and remember. Many of them start visiting their relatives more often because they realize that this loved one is in fact still a person."



Writing the Book

Karosen said that writing *Why Can't Grandma Remember My Name?* and compiling the artwork in the book was “an eye-opening and mind-expanding experience.” The reception of the book has been overwhelmingly welcoming, too. “We have gotten such warm and positive feedback from parents, public school teachers, art teachers and even some Alzheimer’s patients themselves,” he said. “It has inspired families and caregivers to start incorporating art and other creative activities into the routine of their afflicted loved ones and the children in their families.”

A further benefit of the book: It has expanded awareness of the important work that the Fisher Center for Alzheimer’s Research scientists are doing, which the Foundation supports. Karosen pointed out that the researchers, led by Nobel Laureate Dr. Paul Greengard, have recently made new breakthrough discoveries. That new work, some of which was published within the last 12 months, includes two

recent studies showing the novel biological processes regulating the levels of beta-amyloid, the protein implicated in memory loss and other symptoms of Alzheimer’s disease, as well as the development of a state-of-the-art methodology for studying and analyzing amyloid plaques in a three-dimensional way, while still accounting for neighboring structures such as blood vessels and cells. They also developed a breakthrough technology that allows scientists to analyze thousands of genes at once, rather than one at a time, and to identify pathways responsible for vulnerability to Alzheimer’s disease.

Why Can't Grandma Remember My Name? Available Through Fisher Center Foundation

To order your own copy of *Why Can't Grandma Remember My Name?*, written by Fisher Center Foundation President and CEO Kent Karosen and co-author Chana Stiefel, go to www.ALZinfo.org/book or visit Amazon.com. ●

Talking Points

Do's and Don'ts for Conversing with a Dementia Patient

By Mary Adam Thomas

It's not always easy to talk with someone dealing with Alzheimer's disease or another form of dementia. Whether the person is a parent, spouse, friend or casual acquaintance, you may not know exactly how to go about communicating. The fact that cognitive impairment changes all the time means that the person's ability to interact with you—verbally, socially, personally—might be quite different from one visit to the next. Degenerative brain diseases are just that: degenerative. So you have to be ready to adapt to whatever the person's cognitive reality is on any given day.

Still, there are a few ways to smooth the process for both of you. Simply tailor the tips below to suit your relationship, the situation and the stage where the person is on his or her journey. And don't forget to listen to your instincts—they usually have a lot of valuable things to say!

DO introduce yourself to him or her at the start of each conversation. This relieves the person of the burden of remembering your name or recalling the nature of your relationship. Some examples: "Hey, Mom. It's Jonathan. You're looking beautiful as always this morning." Or, "Hi, Louise. It's Nancy from next door. Everyone in the neighborhood asked me to say hello to you." Even if she responds by saying, "Of course I know who you are," beginning each interaction with a quick, casual reminder means she won't have to strain to remember you and can focus more on the fact that you're there.

DON'T speak to him or her like a child. This person is an adult. Use a tone of voice that is always respectful and never patronizing.

DO be prepared for the conversation to be unpredictable. You might end up doing more of the talking—especially if he or she is experiencing aphasia (difficulty with speech and language that is a symptom of some forms of dementia). Or you may find that he or she picks up on a topical thread and takes it in a completely different direction than what makes

logical sense to you. The key is to be a flexible and accommodating conversationalist.

DON'T sprinkle your conversation with the word, "Remember?" It's perfectly natural to want to talk about experiences you've shared with him or her or stories the person has told you from his or her past, but don't expect him or her to have the same recollections you do. Instead, gently frame the memories for him or her: "You told me once that your favorite place to go when you were a kid was the treehouse in your backyard. Now I'm building one like that with my kids." Or, "I was thinking the other day about how you and I used to do jigsaw puzzles on the special table we set up in the living room. I just started a new puzzle last week and I brought a picture of it to show you."

DO follow his or her lead about how—if at all—to interact. For some people with memory issues, engaging in conversation is just too much work and a source of stress. Watch for clues about whether he or she is enjoying the interaction and adapt accordingly. Opt to do most of the talking yourself, change the subject altogether, offer to take the person outside for fresh air, shift to a non-verbal activity or be comfortable with the idea of simply sitting together in silence.

DON'T use complex or flowery language. Keep your words and messages simple and clear. Avoid irony, sarcasm and rhetorical questions. Instead of, "Can traffic get any worse around here?" consider, "I found an easy way to drive here from my house. It takes me by a beautiful garden that I think you'd really like."

DO express warmth. Studies have shown that an individual with cognitive impairment retains emotional recognition well past the time when his or her memories fade. So even if he or she doesn't fully grasp who you are or track what you're talking about, the person will likely understand that you are



It's perfectly natural to want to talk about experiences you've shared with him or her or stories the person has told you from his or her past, but don't expect him or her to have the same recollections you do.

important to her on an emotional level. So worry less about *what you say* to him or her; focus instead on *how you are* with him or her. Being kind and affectionate can be the greatest gift you can give.

DON'T lose your patience. Attempting conversation with a person experiencing dementia can be frustrating and emotionally draining, particularly if you're grieving the loss of the cognitively healthy individual he or she once was. Embrace the repetition,

the potential boredom, the occasionally taxing nature of the situation and try to find the beauty in the interaction. Don't be afraid to use simple humor as a way of lightening the mood.

DO turn to music as a way to connect—music has a different pathway to the brain.

Even if a person struggles with short-term memory and day-to-day functions, he or she may have impressive recall when it comes to the melodies and lyrics of her favorite songs. In fact, playing familiar music has been shown to reduce stress in dementia patients. Experiment by playing different tunes from his or her past and see what seems to inspire the person.

DON'T forget to ask yourself how you would want to be treated if the situation were reversed. Talk to him or her with the same kindness, respect and compassion that you would desire. ●

Going the Distance

Tips for traveling with someone with dementia so you can stress less.

By Margie Monin Dombrowski

When you're caring for someone with dementia, you want to anticipate and plan for every possible scenario, whether good or bad. You not only feel responsible for their day-to-day and overall well-being, but you can also feel overprotective—and rightly so.

But when it comes to deciding whether to take the person outside of their comfort zone and off their routine by traveling, is it worth the risk? While the answer depends on the individual, the following tips can help you plan for a successful trip with someone with dementia.

When, Why and Where You Should Travel

Travel is typically easier when the person is in the earlier stages of dementia, although traveling with someone in the later stages isn't impossible with the right precautions.

"It depends on the stage of the disease," says Grace LeRoux, Assistant Director of Nursing at Bethesda Meadow, a skilled nursing home community in Ellisville, Mo. "For somebody who's in the late stages of Alzheimer's or dementia, the stress of the trip might be detrimental to them with the change. Earlier on I think it depends on the trip, especially if it's a place they've been before, like a yearly trip to a loved one's house for the holidays or a family vacation. Those are usually the best circumstances."

The type of destination should be tailored to each person. While you probably want to avoid hectic and crowded settings, a relaxing vacation would be a better plan. Ideally, it's a place the person has been before or that has sentimental value.



"I love the idea of going somewhere that was familiar before the onset of dementia," says Dr. Nora O'Brien, executive director of Willow Towers Assisted Living and Willow Gardens Memory Care, both in New Rochelle, N.Y. "So if every year you went as a family to Cape Cod and it's a place that holds wonderful memories for your loved one, hopefully he or she remembers. You want to keep it as familiar and simple as you can."

Realistic Expectations

Before booking the trip, be sure you're traveling for the right reasons. Are you taking the person along because you think it's important? Are your expectations for the trip realistic?

"You're going to balance the difficulties to the benefits, but if it's important for grandma to see her granddaughter get married, you might choose to do it even if it's a challenge," says Dr. O'Brien. "Maybe keep

her at the wedding only part of the time, then have her go stay with a caregiver back at the hotel.”

Are you taking the person along because you think it’s important? Are your expectations for the trip realistic?

How to Plan a Stress-free Trip

While you’re away, building in comfort and consistency with the person’s routine is key to a smooth trip. Even though you’re in a new or different place, try to keep the daily itinerary simple and close to normal to keep stress and confusion at bay. Because of sundowning and the fact that most people are at their best in the morning, this is an ideal time to be out and about while on a trip.

“Keep the time they go to bed or eat meals as close to the same as possible,” says LeRoux. “Bring along special items they might like, like a blanket they sleep with, books they like to read or a TV show they watch every evening, and incorporate that into the trip to create consistency.”

Factor in the extra time (and patience) you’ll need to help your loved one throughout the trip, with

getting ready in the morning, for example. You may even consider having an extra caregiver on hand for additional support, which can be another family member who can step in to help or someone you hire.

“One thing caregivers should know is to anticipate the changes in how their loved one acts,” says LeRoux. “They thrive a lot on routine. They may need help dressing or going to the bathroom. It may change when they’re out of familiar surroundings ... Expect the unexpected.”

Being prepared can make the trip easier on you and your loved one. If you’re taking a plane, choose a direct flight rather than making a connecting flight. Be sure to take the person to the bathroom before boarding a plane or leaving anywhere. Take breaks when you’re on the road and remember to enjoy each moment.

“Always allow extra time. They won’t always fit into our time schedule; we’ll have to fit into theirs,” says Dr. O’Brien.

With a proactive, positive approach, traveling with your loved one can benefit you both.

“Don’t think just because you bring her back to Cape Cod that all her deficits are going to go away. But it is nice to change the routine as long as the person can handle it,” says Dr. O’Brien. “Make sure you’re doing it for your loved one.” ●

Things to bring

- Identification and emergency contact information (on a lanyard or something tucked inside a pocket)
- Copy of power of attorney
- Medications (plus extra), list of medications
- Water and snacks
- Extra changes of clothes
- Comfort or stress relief items (fidget or sensory toys)
- Familiar items (pillow, blanket, photos, trinkets, etc.)
- Take a daily picture of your loved one on your phone
- Travel insurance



Kim Cattrall:

Her Career, Love Life and Struggle Through Grief

Photo: Francois Durand / Getty Images

Mention the name Samantha Jones and the person you're speaking with will most likely think of the super sexy and sassy character from the hit HBO series *Sex and the City* (*SATC*). Jones, a 30-something public relations executive, was one of four friends navigating relationships and life in New York City. The Samantha Jones character was a first-of-its-kind at the time: She was successful in her career, independent, confident and unapologetically sexually aware. She became an immediate favorite for millions of fans.

Kim Cattrall portrayed Jones and earned a Golden Globe, two Screen Actors Guild Awards and several other nominations over the years for her performance.

To this day, Cattrall, now 61, is best known for her *SATC* role. However, there's more to her than just Samantha Jones. Cattrall has written three books (two on sexual satisfaction, and another book for young women). She's appeared in a number of shows and movies, including Disney's *Ice Princess* (2005), *Meet Monica Velour* (2010), *The Witness for the Prosecution* (2016), and the HBO Canada series *Sensitive Skin* (2014-2016), for which she was an executive producer. She has also graced stages in Canada, England and on Broadway, taking on roles in a variety of theatrical productions, including *Antony and Cleopatra* and *Private Lives*.

In addition, Cattrall is one of the millions of people who has been affected by Alzheimer's. Her father, Dennis Cattrall, died in 2012 after a long battle with the disease.

A Star is Born

Cattrall was born on August 21, 1956, in Mossley Hill, Liverpool, England. Her father, Dennis, was a construction engineer, and her mother, Gladys Shane, was a secretary. The family, which also included Cattrall's three siblings, moved from Liverpool to Vancouver Island in British Columbia, Canada, when she was a baby. They returned to Liverpool for a year when Cattrall was eleven. It was then that the



Photo: Cameron Spencer / Getty Images

**"In 1998, people's idea of a woman being sexy and powerful in her forties was, well, that she was past it."
—Kim Cattrall**

acting bug bit her. Between school hours, she and her dad would spend time taking in various plays and musicals. When Cattrall saw Shakespeare's *As You Like It*, she immediately decided to become an actress. "It was one of those moments that just sets off a spark in you," she has said. "I had an epiphany of 'Wow, I would like to do that or try to do it.'" She began to take courses at the London Academy of Music and Dramatic Art, and later after she graduated from high school at the Banff School of Fine Arts in Vancouver at age 16, she won a scholarship to the American Academy of Dramatic Arts in New York City.

Shortly after, she landed her first role in the 1975 movie *Rosebud*.

A Life-Changing Role

Over the years, Cattrall would continue picking up acting jobs, appearing in TV shows and movies that included *Starsky and Hutch* (1978), *The Incredible Hulk* (1979), *Porky's* (1981), *Police Academy* (1984), *Big Trouble in Little China* (1986), *Star Trek VI: The Undiscovered Country* (1991) and her first lead role, *The Mannequin* (1987).

However, it wasn't until the late nineties that she scored the gig that would catapult her to international stardom: Samantha Jones in *Sex and the City*. Initially,

Cattrall wasn't interested. She turned down the role three times! "In 1998, people's idea of a woman being sexy and powerful in her forties was, well, that she was past it," Cattrall has said. She wasn't sure she could pull it off. However, after some convincing by the boyfriend of Darren Starr, the show's creator, she stepped into Jones' shoes and nailed it!

Samantha Jones and the other characters on the show (played by Sarah Jessica Parker, Kristin Davis and Cynthia Nixon) resonated so well with viewers that *SATC* became an instant hit.

The show was so successful that six seasons later, 10.6 million viewers tuned in to watch its final episode in 2004. Then fans begged for a spinoff movie. The cast reunited for the *Sex and the City* film, which was released in 2008, and the sequel, *Sex and the City 2*, followed in 2010.

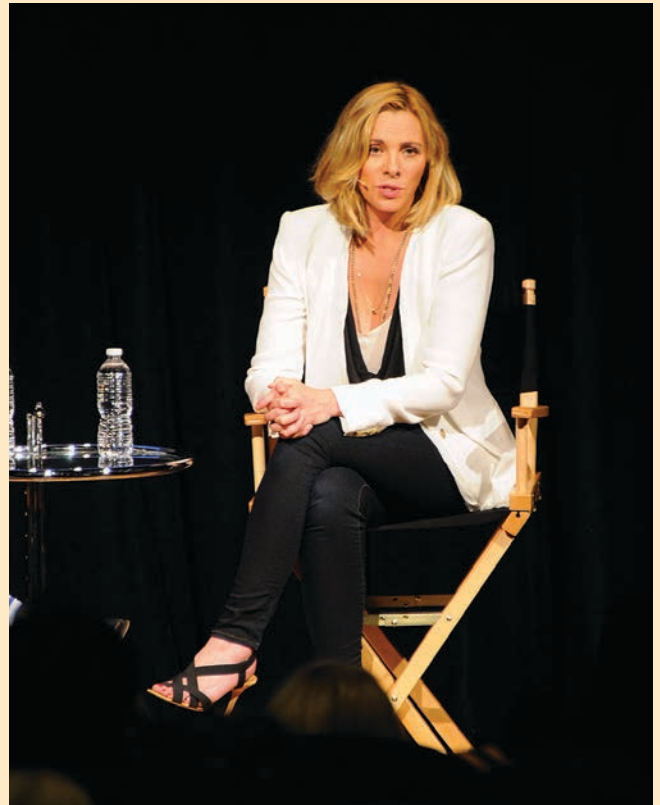


Photo: Andrew H. Walker / Getty Images

Kim has made herself a mom of sorts by mentoring young actresses. "As much as I give, I get two-fold back."

Behind the Scenes

Because of the character she played on *SATC*, people sometimes think that Cattrall must be a pro when it comes to dating. However, that's far from true. She has been married and divorced two times (technically three times if you count her first marriage, which was annulled after two years). Rather than looking at her love life in a negative light, Cattrall focuses on the positive. Speaking of her marriages, Cattrall has said, "It amazes me that some people make such a big deal out of the fact that I've been married more than once ... They never think, here is someone who had the guts to stand up and say, twice, I'm scared but I'm going to try this."

She has a similar positive view on her not having children, which she says wasn't intentional and just kind of happened. She's made herself a mom of sorts by mentoring young actresses. "I thought I have a

Photo: Jeff Spicer / Getty Images





**“No matter what your relationship is with a parent, you never truly get over it.”
—Kim Cattrall**

place to be a mom here. Not a biological mom but a mom and an auntie and a friend,” she has said. “And that has really given me so much. As much as I give, I get two-fold back.” She’s also very close to her nieces and nephews.

An Unbreakable Bond

Family has always been important to Cattrall, especially the close relationship she shared with her father, whom she says played a huge role in her career. “Like very many men of his generation, he didn’t grow up with a dad. He had a dream but he didn’t have a dad to support him,” she’s said. So when any of his kids had a goal in mind, he did all he could to support it. “He took me to the theatre; he really fostered and nurtured me. Without that, I wouldn’t be [where I am today]. I’m very grateful for that,” Cattrall said.

So it was devastating when her dad was diagnosed with Alzheimer’s in 2004. As expected, her father’s condition worsened over time. “He would have some good days and some days he was in another world,” Cattrall recalled. She remembers one of the good episodes clearly. “He came to New York [to visit]. He was very joyful and very happy, and we spent Christmas together,” she said. Her dad always had beautiful teeth but they were looking dark and he had lost a couple, so they went to the dentist. “That’s what he wanted,” Cattrall remembers.

Little did she know, that would be the last time she would see him conscious. Her father died of pneumonia in 2012. Cattrall and other family members were by his bedside.

A Daughter’s Grief

After her father’s death, Cattrall tried to get through her grief by throwing herself into work. Three years later, she burned out. Cattrall would get as little as three hours of sleep at night and was losing her ability to hold onto ideas, thoughts and tasks. She actually wondered if she was being affected by dementia. Part of the reason she had trouble sleeping was thoughts of her dad’s death. “It was almost like if I slept I would have to deal with the grief underneath it, not coming to terms intellectually with my dad passing, but the emotional loss of that. I literally hit a cement wall,” Cattrall explained.

She was diagnosed with exhaustion due to insomnia and later attended cognitive behavioral therapy to help her sleep. Eventually, she did come to terms with her dad’s death—or as close as is possible. “No matter what your relationship is with a parent, you never truly get over it,” she has stated.

Like most other children of a parent who had dementia, Cattrall is concerned about whether or not Alzheimer’s will be part of her future. However, she doesn’t let those thoughts overwhelm her. Instead, she finds peace in the fact that her mom is in her late eighties and still “all there.” And she’s taking her father’s illness as an opportunity to appreciate life more fully. “It’s a wake-up call to enjoy life, more than anything else,” Cattrall has said. “I want to make the most of the time that I have where I’m healthy and mobile.” ●

Food for the Soul

Satisfying soups and stews can make a perfectly nutritious winter meal

By Jason Schneider

On those cold winter days, few things are more comforting than a warm, hearty bowl of soup or stew.

“Comfort food is ‘soul food,’” says Isabel Maples, MEd, RDN, registered dietitian nutritionist and spokesperson for the Academy of Nutrition and Dietetics. “It evokes feelings of love and well-being. Typically, comfort foods are hearty, so soups and stews fit the bill because they can fill you up as they ‘feed your soul.’”

Good Source of Energy

A great thing about soups and stews, says Maples, is that they combine more than one food group into one dish, so they offer a wider variety of nutrients. “That combination of food groups also means a mix of carbohydrates, proteins and fats—and that mix of energy sources is more satisfying, because the energy from the meal lasts longer,” she says. “Vegetables, beans and whole grains (like barley or brown rice) are

common fiber-packed ingredients in soups and stews. Fiber foods fill us up, usually with fewer calories.”

Maples adds that fiber is more and more important for bowel regularity, to lower cholesterol and to stabilize blood sugars.

Food for Thought

Many of the ingredients typically used in soups and stews can be beneficial for cognitive health, as well. “The MIND diet has been shown to protect against cognitive decline,” says Maples. “Specifically, the MIND diet encourages berries, nuts, beans, whole grains, poultry, green leafy vegetables, fish, olive oil and moderate wine consumption (one serving per day). Other foods, like red meat and butter, are allowed but in modest amounts.

“Choose soup and stew recipes with some of those ingredients,” Maples adds. “Or tweak your own favorite recipes to include at least one of the MIND diet favorite foods.” ●

FOOD





Isabel Maples, MEd, RDN, registered dietitian, nutritionist and spokesperson for the Academy of Nutrition and Dietetics, shares some tips for creating soups and stews that are filling, healthy and satisfying.

- Mix up the meat/protein source. Poultry (chicken, turkey), red meat (beef, pork, lamb), fish/seafood. Beans, peas and lentils also add lots of protein, fiber and nutrients.
- Add nuts and seeds (pecans, pine nuts, sesame seeds, flax seeds, walnuts, pecans, pistachios, etc.) in the soup or stew, or as a topping or accompaniment. Nuts offer healthy fats, plus fiber and key nutrients we typically don't get enough of (like magnesium).
- Mix up the colors to get more variety in vitamins, minerals and other natural, disease-fighting compounds (antioxidants): dark green leafy vegetables (spinach, kale, broccoli), orange/dark yellow vegetables (winter squash, pumpkin, sweet potatoes, carrots), white vegetables (cauliflower, potatoes, turnips), purple (eggplant). Brown vegetables count, too, including mushrooms.
- Spices and herbs add flavor (and inflammation-lowering compounds), so you can use less salt.
- Ingredients don't need to be fresh to be nourishing! Frozen, canned and dried ingredients work well, too. Rinsing canned vegetables can reduce sodium by 40 percent.
- Incorporate some of the MIND diet favorites, like olive oil, beans, spinach, broccoli, kale, chicken. Fish can work in some stews. Wine can be used in cooking. Whole grains like barley are easy additions to soups (and make them heartier).
- Puree some of the vegetables and broth and add them to the soup or stew to create a smooth, velvety texture.
- Use lowfat or skim milk rather than heavy cream in cream soups, then add vegetables and puree for a thicker broth.
- Use store-bought or stock to save time. Look for no salt or low-sodium versions.
- Freeze leftover soup or stew in individual portions for later meals.
- Utilize leftovers: Cook a turkey or chicken carcass in broth, then make soup.

See Italian Bean Soup recipe on page 30.

Making Sure That Pets Get the Care They Deserve

A pet trust ensures funds and day-to-day care for pets

By Kevin Gault

Edited by Bernard A. Krooks, JD, CPA, LL.M., CELA

For many people, pets are far more than just animals—they're beloved members of the family. In the unfortunate event that a senior pet owner becomes incapacitated or passes away, setting up a pet trust helps ensure that their pet receives the compassionate care they deserve.

What exactly is a pet trust? It's a legal agreement that provides for the care and maintenance of one or more companion animals. The *grantor* is the person who creates the trust and the *trustee* holds funds for the care of the grantor's pets. The trustee makes regular payments to a designated *caregiver* to cover a pet's food, day-to-day living expenses and medical costs.

Many seniors never think about creating a pet trust, and that can lead to unfortunate consequences. Failure to properly plan for the pet's life after the pet owner dies causes an estimated 100,000 to 500,000 pets to be sent to animal shelters each year after their owners become incapacitated or pass away. In communities with many senior citizens, pets outliving their owners can comprise half an animal shelter's population.

Depending on the state in which it is established, a pet trust will continue for the life of the pet or 21 years, whichever comes first. Some states allow a pet trust to continue for the life of the pet without regard for the 21-year limit, which is a good thing for animals with longer life expectancies.

It's appropriate that the word "trust" is part of the term pet trust—it's essential to have total trust in the people whom you designate for this agreement. "When a person creates a pet trust, it's essential that they're absolutely sure the trustee and caregiver are people who have nothing but the animal's best interest at heart," says Michael J. Amoruso, Esq., of Amoruso & Amoruso, LLP in Rye Brook, N.Y.

According to Hyman Darling, President, National Academy of Elder Law Attorneys (NAELA), having open communication is essential: "You have to talk to the people who you're naming in the trust to make sure they're willing to take on that responsibility. Give them specific instructions—spell out in specific terms the things you want them to do and make sure they're OK with it. Make sure that they're the right people to take care of your pet the way you want them to."





Here are some tips for setting up a pet trust the right way:

Establish Expectations—Create an information packet that details your pet’s medical history and daily care needs. Make sure the information is easily accessible and specifies the standard of living you want for your pet, including medical care and end-of-life decisions. Review the information closely with your trustee and caregiver.

Talk About Money—Determine the funds needed to cover expenses for your pet’s care and specify how they should be distributed from the trustee to the caregiver. Be sure to make the pet trust separate from other trusts in your family. Don’t commingle the money with anybody else’s—in the future, they might claim they have a right to it.

Safeguard the Trust—“It’s important to have someone in the role of trust protector,” says Darling. “That person isn’t the trustee or the caregiver. They’re an independent party who watches over everything to make sure the pet is getting the proper care and money is being administered correctly. That person makes sure the people involved are doing the right thing.”

Beware of Scams—Stay on guard for trustees and caregivers who have their own best interests

at heart, not your pet’s—they agree to provide care solely because there is a financial incentive to do so. There have been cases in which, when the grantor of the trust passes away, the trustee and caregiver took the money and left town, abandoned the animal or had it euthanized. In a few cases in which a pet has died while under their care, the trustee and caregiver replaced it with a similar-looking pet so they continue to receive payments from the trust.

Contact An Elder Law Attorney—“To make sure the pet trust is done right, I highly recommend seeking out a qualified elder law attorney through NAELA (www.naela.org),” says Amoruso. “Many people are attracted to estate planning documents online that they prepare themselves, but to make sure your documents are executed properly, it’s best to work with an experienced elder law attorney. That way, you’ll be sure that the pet trust will stand up in court if it’s challenged. Also, doing it the right way gives the pet owner peace of mind, knowing that their pet is going to be well taken care of and always have good quality of life.” ●

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

Brain-Boosting Puzzles

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

(Answers on page 29)

MATCH THESE

Can you identify these unsuccessful U.S. presidential candidates by matching them to their vice presidential running mates?

- | | |
|-------------------------|----------------------|
| 1. ___ Robert Dole | a. Geraldine Ferraro |
| 2. ___ Walter Mondale | b. Sargent Shriver |
| 3. ___ Mitt Romney | c. Edmund Muskie |
| 4. ___ Thomas Dewey | d. John Edwards |
| 5. ___ George McGovern | e. Sarah Palin |
| 6. ___ Al Gore | f. Lloyd Bentsen |
| 7. ___ Michael Dukakis | g. Earl Warren |
| 8. ___ Hubert Humphrey | h. Joe Lieberman |
| 9. ___ John McCain | i. Jack Kemp |
| 10. ___ Barry Goldwater | j. William Miller |
| 11. ___ John Kerry | k. Paul Ryan |
| 12. ___ Adlai Stevenson | l. Estes Kefauver |

DROPLINE

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

L	H	T	A	E	E	A	Q	S	E	E	T	E	O	N	S
L	L	E	N	V	Y	O	T	U	K	S	K	W	D	Y	L
U		H	H	E	N	U		A	N	R	I		A	A	
W			T				N		W	S	O	S			O
W															

LEAPFROG

Here’s a list of kitchen gadgets — one two-word term for each number. Their letters are in the correct order, but they overlap. All you have to do to find the gadgets is separate the letters.

Example: **EMLEIXCTERIRC — ELECTRIC MIXER**

- | | |
|--------------------|-------|
| 1. COCOUTKITERE | _____ |
| 2. ACOPPRELER | _____ |
| 3. IPICCEK | _____ |
| 4. RUSPABTUBELAR | _____ |
| 5. MBEALLOLNER | _____ |
| 6. GAPPRELSICS | _____ |
| 7. GRASPEPOFORUNIT | _____ |
| 8. BOOPTENTERLE | _____ |
| 9. TBAURSKETERY | _____ |
| 10. COGFRINFEDDER | _____ |

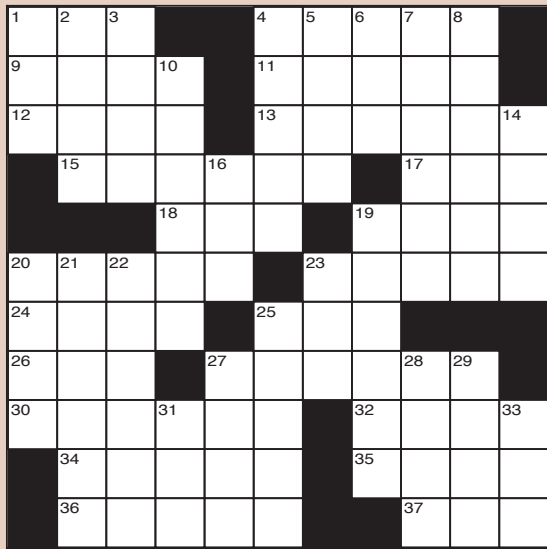


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BRAIN-BOOSTING CROSSWORDS

(Answers on page 29)

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



Across

1. Best on a team (abbr.)
4. Chaos
9. They're worse than cees
11. "Aida," for one
12. Exude
13. Color again
15. Prairies
17. Glop
18. "Treasure Island" inits.
19. Testament
20. Best Animated Picture of 2001
23. Ultimate
24. Troublesome plant
25. "Leaving ____ Vegas"

26. Treasury dept. bureau
27. Drifted off
30. Fruit Loops bird
32. Spanish hurrahs
34. Gush
35. "Venus de ____"
36. Spanish "mister"
37. One, in Berlin
8. "Healthy" cooking oil
10. Relieved
14. ____ booth
16. Class
19. King Solomon's
20. Actress Loretta
21. Role models
22. Take up again
23. Craze
25. Friendless fellow
27. Intl. pact
28. Writer Wiesel
29. Pastrami parlor
31. Swindle
33. Junior

Down

1. Physicians (abbr.)
2. Mondale, once
3. Slippery banana part
4. Brass instruments
5. Imitates
6. Pet doc
7. Source

The Light of Day

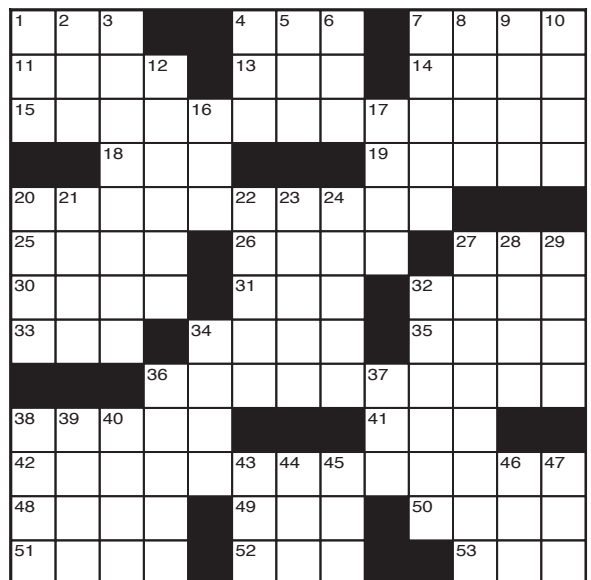
Across

1. Guiding rope
4. Summon a lamp genie
7. Onetime video game leader
11. Zwei follower
13. Metallic rock
14. Joie de vivre
15. 1951 Clift classic, with "A"
18. Mem. of Congress
19. Fred's twinkl-toed sis
20. They catch rays
25. SEATO's sphere
26. Caesar's summation starter
27. British clothespin
30. Serpent's tooth
31. ____ Marino
32. Opposite of Amer., in baseball
33. D-H connection
34. Where llamas lope
35. It's right on a map of Madrid
36. West coast view
38. Pertaining to certain queens and drones

41. Bungler
42. Florida nickname
48. ____ and sciences
49. Win at musical chairs
50. Shamrock isle
51. Subterfuge
52. Lobbying gp.
53. Fib

Down

1. Measure of economic activity
2. Web address: abbr.
3. Spiritual hunger
4. King, in Caen
5. Church coffee pot
6. Daily double, e.g.
7. Feeder filler
8. Alternative indicator
9. Ancient France
10. Archer of "Fatal Attraction"
12. Hangover headgear
16. Clean air gp.
17. Mata ____ (famed WWI spy)
20. One way to play it
21. Persian Gulf heroes: abbr.
22. Samsung product
23. McCullers's lonely hunter
24. Existential boredom
27. Grading option for some college courses
28. "____, Brute!"
29. Singer Campbell
32. Nullify
34. Phnom ____
36. Fresh
37. Basis of arithmetic: abbr.
38. Expediency initials
39. Linda of "Matlock"
40. Fascinated by
43. AOL, e.g.
44. Peebles of "Fame"
45. And so forth: abbr.
46. Three: prefix
47. Hard-to-find shoe width



BRAIN-BOOSTING PUZZLES

HIDDEN-MESSAGE WORD-FIND™

After you have located and circled in the diagram all of the words in the Word List below, read the leftover (unused) letters from left to right, line by line, to reveal an appropriate message written by Walt Disney. The words from the list are found in the diagram reading forward, backward, up, down, and diagonally, and always in a straight line.

You are looking for a 57-letter phrase.

AURORA
BASHFUL
CRUELLA DE VIL
DAISY
DEWEY
DOC
DONALD
DOPEY
DUMBO
FAUNA
FLORA
FLOWER
GOOFY
GRUMPY
GUS
HAPPY
HUEY

JIMINY CRICKET
LADY
LOUIE
MALEFICENT
MERRIWETHER
MICKEY
MINNIE
MRS. JUMBO
PERDITA
PLUTO
SLEEPY
SNEEZY
THUMPER
TRAMP
TRUSTY

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

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.

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

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Preserving Your Memory

Winter 2018

PUZZLE ANSWERS

Match These

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

Dropline

When you know all the answers, you haven't asked all the questions.

Leapfrog

1. Cookie cutter; 2. Apple corer;
3. Ice pick; 4. Rubber spatula;
5. Melon baller; 6. Garlic press;
7. Grapefruit spoon; 8. Bottle opener;
9. Turkey baster; 10. Coffee grinder.

Hidden Message

Fancy being remembered around the world for the invention of a mouse.

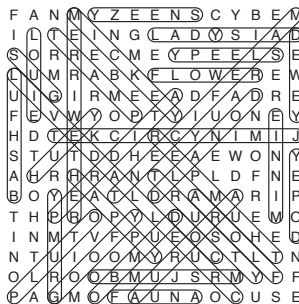
Crossword 1



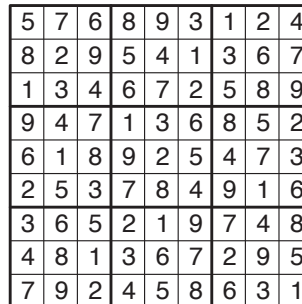
Crossword 2



Word-Find



Sudoku



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Italian Bean Soup

Ingredients

- 2 Tbsp. olive oil
- 2 c. ground turkey
- 2 c. diced onions
- 2 c. sliced carrots
- 2 c. fennel bulb, diced (well washed)
- 2 Tbsp. minced garlic
- 2 Tbsp. Italian seasoning
- ¼ tsp. ground nutmeg
- ½ c. white wine
- 2 Tbsp. chicken base (like Better Than Bouillon)
- 12 c. low sodium chicken broth
- ¾ c. barley, preferably hulled barley
- 2 cans white and/or red kidney beans, drained and rinsed
- Salt
- Pepper
- ½ tsp. crushed red pepper flakes
- 7 c. spinach leaves



Directions

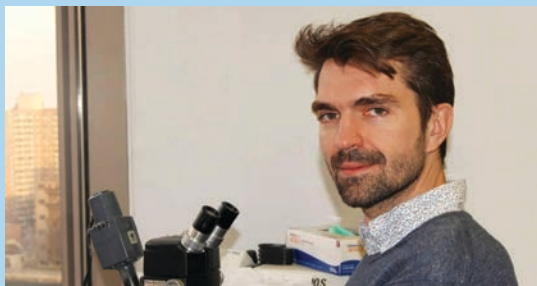
Heat olive oil in large pot over medium heat. Add ground turkey, stirring to break up any large pieces with the back of the spoon. Cook until no pink remains. Add onions, carrots, fennel and garlic and cook for 5 more minutes, stirring occasionally. Add Italian seasoning and nutmeg.

Stir in white wine, scraping the bottom of the pan. Simmer until wine is almost evaporated. Stir in chicken base then chicken broth. Increase heat, bring to a boil and then reduce heat to a simmer. Rinse barley in a colander then add to the soup. Simmer 35 minutes. Add the beans and cook 5 more minutes. Add salt, pepper and crushed red pepper flakes to taste. Stir in spinach leaves until wilted. Serve topped with grated parmesan cheese. Makes 8-10 servings.

Recipe courtesy of Isabel Maples, MEd, RDN

Fisher Center Scientist Spotlight

Due to the outstanding work of Fisher Center's world-renowned scientists, we are getting closer to finding a cure!



Dr. Jean-Pierre Roussarie

Senior Research Associate at the Fisher Center for Alzheimer's Research at The Rockefeller University

Hometown:

Dr. Jean-Pierre Roussarie grew up in a tiny village, with only 100 inhabitants, in the suburbs of Paris, called Maincourt-sur-Yvette.

Education:

He was initially trained as an engineer at the Ecole Polytechnique before deciding he wanted to embrace the more meaningful endeavor of biomedical research. He completed his PhD at the Pasteur Institute in Paris on an animal model of Multiple Sclerosis, before finally joining the Greengard Laboratory in 2007 to work on Alzheimer's disease.

Fun Fact:

Dr. Jean-Pierre Roussarie was born in California, where his father was a postdoctoral fellow in physics at Stanford University. Dr. Jean-Pierre Roussarie moved back to France at the age of 2, and grew up there. As you can imagine his accent is closer to a Parisian accent than to a Californian accent!

Research Discoveries:

Under the direction of Nobel Laureate Dr. Paul Greengard, Dr. Jean-Pierre Roussarie's research focuses on an understudied aspect of the disease: the difference between various parts of the brain in their susceptibility to the disease. Using a technology that the Fisher Center scientists invented a few years ago to map all proteins present in a given type of neuron, Dr. Jean-Pierre Roussarie is trying to find the particularities of the most vulnerable neurons of the brain.

Dr. Jean-Pierre Roussarie is also teaming up with bio-statisticians from Princeton University to apply the most cutting-edge deep learning algorithms to use both the knowledge gathered from these vulnerable neurons, and publicly available data coming from genetics studies. This approach should reveal what exactly is the "Achilles heel" of vulnerable neurons, and what molecular process makes them degenerate. The final objective is to pinpoint proteins that could then be new targets for drugs that would prevent neurons from degenerating. Dr. Jean-Pierre Roussarie is going to submit these exciting results for publication very soon, so stay tuned!

We want to thank Dr. Jean-Pierre Roussarie and all of our world-renowned scientists at the Fisher Center who work hard every day in the quest to find a cure.



Zachary & Elizabeth M. Fisher Center
for Alzheimer's Research Foundation
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