

## **Debunking a Dementia Myth**

*By Joan Richman Ente, AM, LCSW*

The winter holiday season – a time of year that often brings families together – has once again come and gone. Perhaps the holidays brought you closer to aging loved ones whom you had not seen for awhile. And perhaps you noticed some changes, subtle or unmistakable, in your mother or father, aunt or uncle, or long-time friend that troubled you.

Jeff and Barbara, a brother and sister who live on opposite coasts, acknowledged some unusual behavior while visiting their parents' Skokie home at Hanukkah time. They both became alarmed when their mother repeated old stories over and over again. They also noticed their usually decisive dad having difficulty making simple decisions, like who would light the menorah. The siblings came to me seeking some helpful solutions for their parents.

I asked a few questions about their parents' behavior. Were they uncharacteristically moody, testy or even combative? Did their home seem unusually disorganized or haphazard? Did they become easily confused or disoriented in conversation? Did either one fail to recognize or show affection toward a beloved grandchild? Such changes are often indicators, important early warning signs, of deterioration in brain function. When they answered "yes" several times, we decided to take the next step – arranging for each parent to get a full cognitive assessment.

When dealing with the issue of memory loss, it is important to debunk one common myth – dementia and Alzheimer's are not interchangeable terms. In our culture, "dementia" has become a catch-all term used to describe the memory loss and cognitive decline so often associated with old age. Statistics show that 50 percent of individuals 85 years and older display signs of cognitive impairment that can interfere with daily operations, clarity and decision-making. Most people don't realize, however, that dementia, per se, is not an illness or specific condition. Dementia, or forgetfulness, if you will, is only a symptom. It can actually be indicative of *many* different ailments, including frontal temporal lobe (brain) damage, Lewy Body disease, Parkinson's or Huntington's disease, Primary Progressive Aphasia or Vascular Dementia, which is the result of small strokes in the brain. All of these are degenerative diseases whose progress *may* (in some cases) be slowed with proper medication(s) and treatment.

Alzheimer's disease, on the other hand, is defined as one form of dementia characterized by the gradual loss of several important cognitive functions. It is perhaps the most common type of dementia in older Americans, and goes far beyond mild forgetfulness. Almost everyone misplaces keys or occasionally forgets where the car is parked. Signs of Alzheimer's disease are typically much more striking, like forgetting the names of one's children or where you've lived for the last decade. In some individuals, the onset of Alzheimer's can begin as young as 45 years of age if not earlier. More often, symptoms develop slowly and insidiously, later in life. Careful, correct diagnosis is important. A thorough diagnostic is complicated and usually includes consultation with a neurologist, testing with a neuropsychologist and MRI screening to look at changes in the brain.

Can family support and therapeutic activities help a loved one diagnosed with dementia symptoms? The answer is an absolute, unequivocal yes. In the early phases of memory loss,

family members can help their loved ones anticipate many of the difficulties that are likely to arise and develop systems and strategies for handling day-to-day challenges. In later stages, it can be harder to manage without help. There are many methods and programs, inside and outside the home, with proven therapeutic value that can aid older adults with memory loss.

- **Adult day services programs.** Organizations like CJE SeniorLife offer supervised, structured daily programs for people with Alzheimer's and other forms of cognitive impairment. Professional staff develops creative activities to stimulate mind and body within a group setting. Adult day programming also provides a respite for family caregivers, who can attend to their own needs, whether grocery shopping, medical appointments or social life, while knowing their loved one is safe and cared for.
- **Counseling.** Medicare and supplemental insurance make it possible for well-trained clinical staff to visit dementia-stricken individuals and families at home. In the early stages, counselors can help people manage depression and come to terms with memory loss. They also provide support for spouses feeling the stress of being a primary caregiver.
- **Medication.** There are known treatments that can slow the course of cognitive decline. Work in partnership with a trusted family physician or neurologist to determine if medication could help someone you love.
- **Creative arts.** The arts – self-expression through music, drama, dance, poetry, creative writing and visualization – are wonderful outlets. Trained creative arts therapists use these mediums to inspire self-reflection and self-discovery.

It can be extremely difficult for family members to learn new ways of relating to loved ones when illness steals memory. The changes that accompany cognitive decline can be devastating not only for the individual, but for their family as well. My next column will discuss what we know about relating to people with dementia symptoms, and how families can make life somewhat gentler and easier for all.

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