

Maintaining your Memory

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No Conflicts to Declare

A common older adult challenge is changes in memory

- it is common for older adults to experience memory lapses, e.g., in being able to recall names
- this is part of normal aging

With age it is normal to

- Experience some memory failures/need to look things up
- Be less able to attend to several things at once
- Take longer to learn new material
- Need to write things down

Part of the reason for feeling concerned is the worry that one is on the path to dementia

- at age 65, lifetime risk of developing dementia is 22% for women and 14% for men

Normal Memory Problems Versus Dementia

Normal

Forgetting where you put your checkbook

Getting lost in an unfamiliar place

Forgetting where you parked your car in a shopping mall lot

Dementia

Forgetting which bank your money is in

Getting lost in your own neighborhood

Forgetting that you drove to the shopping mall

Dementia defined: Is it dementia or is it Alzheimer's disease?

- Dementia is a term that defines a group of disorders
- Decline in memory, language, judgment and reasoning, sufficient to interfere with daily, social and occupational functioning
- The 2 main causes of dementia are Alzheimer disease and stroke

Reversible causes of problematic memory changes

- Side effects of medication
- B12 deficiency
- Untreated infection
- Depression

This is why it is important to seek assessment

Evidence-based recommendations
for lessening memory lapses and
maintaining cognitive health as we
age

Three Phases of Memory



- Learning: Placing information into the mind for the first time
- Retention: Storage
- Recall: Finding information in long term memory

Types of Memory

- Explicit Memory
- Prospective Memory
- Procedural Memory

Memory Strategies

- Pay attention
- Repeat new information
- Create stories or rhymes or associations
- Chunk
- Remember the number of things that you need to remember

Memory Extenders

- Calendar
- To-do lists
- Post-its
- Put things in the same place
- Google
- Collaborative memory



Established risk factors for
Alzheimer's disease and related
dementias

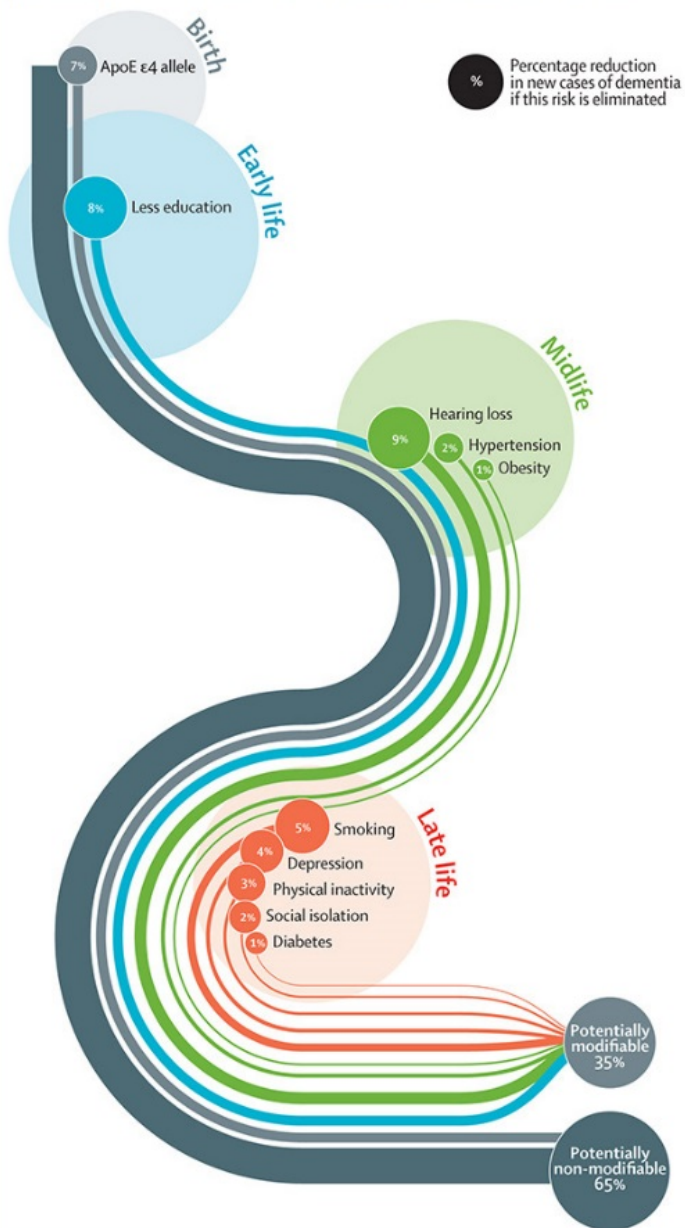
and also for poorer memory among those
aging normally

Sources of evidence about risk and protective factors for dementia

- Longitudinal studies that correlate cognitive performance in old age with lifestyle factors measured earlier
- Epidemiological studies comparing dementia patients to normal controls
- Discordant twin pairs
- Clinical trials testing whether cognition is improved (or rate of decline reduced) in those receiving a specific agent

Risk factors for dementia

The Lancet Commission presents a new life-course model showing potentially modifiable, and non-modifiable, risk factors for dementia.



APOE4 gene

Low education

Hearing loss
Hypertension
Obesity

Smoking
Depression
Physical inactivity
Social isolation
Diabetes

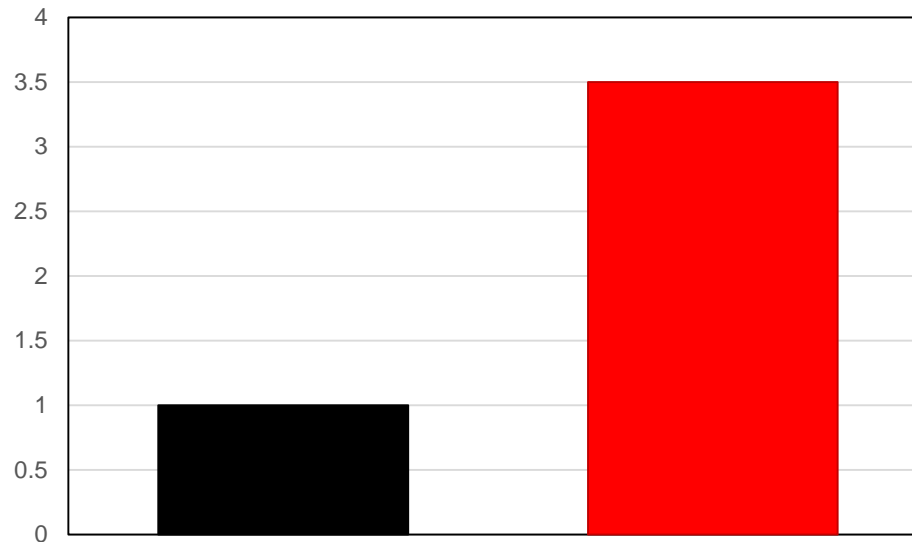
Poor early nutrition

Traumatic brain injury
Anxiety
Low engagement
Poor diet

Blood Pressure and Dementia

For every one person with normal midlife blood pressure who develops AD or dementia....

On average, three and a half times as many people with midlife untreated hypertension develop AD or dementia.

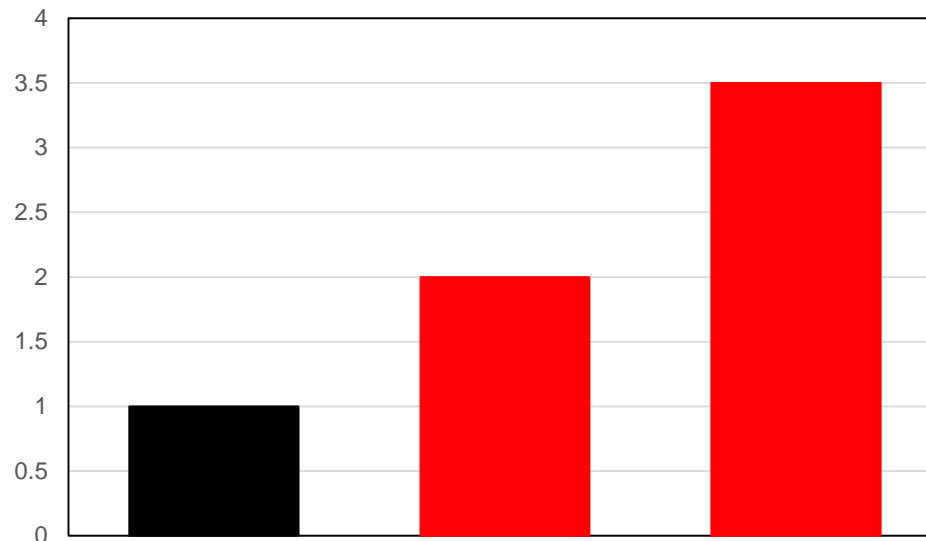


SOURCES: HAAS (Honolulu Asian Aging Study): : Korf et al 2004; Launer et al 2000; FINMONICA (North Karelia Project and the Finnish part of the Multinational Monitoring of Trends and Determinants in Cardiovascular Disease): Kivipelto et al 2002

Midlife Overweight and Obesity and Dementia

For every one person with normal range weight in midlife who develops AD or dementia....

On average, two times as many overweight and three and a half times as many obese people develop AD or dementia.

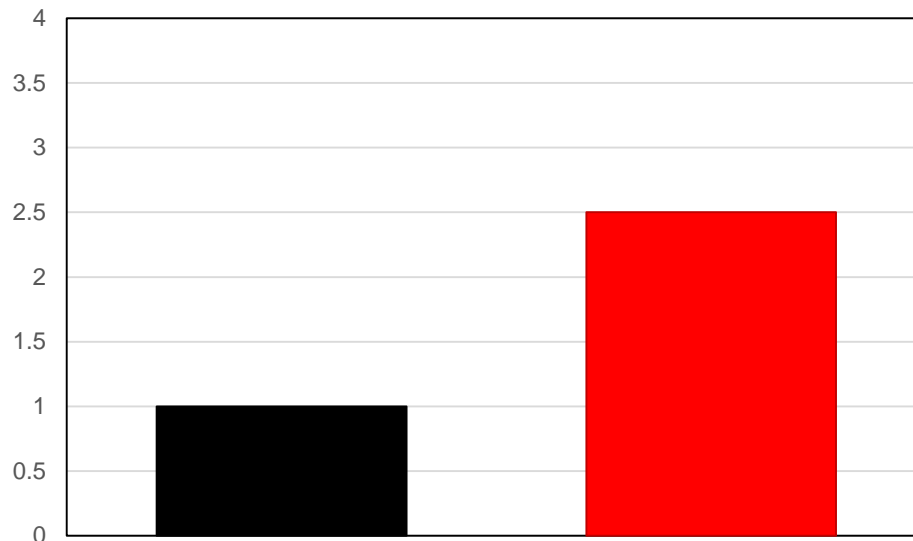


SOURCES: KP (Kaiser Permanente of Northern California): Witmer et al 2000;
Swedish twin studies: Xu et al 2011; Dahl et al 2010

Diabetes mellitus and Dementia

For every one person without diabetes who develops AD or dementia....

On average, two and a half times as many people with diabetes in midlife develop AD or dementia.

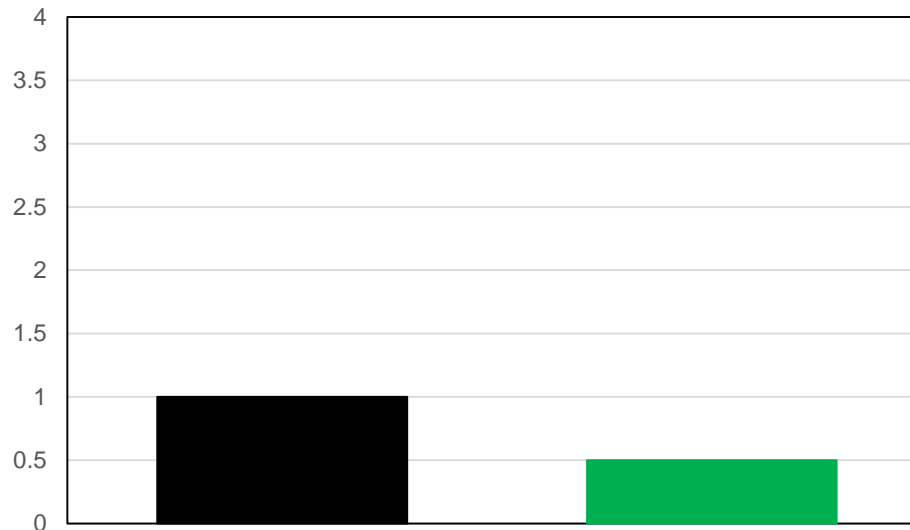


SOURCES: WHICAP (Washington Heights/Hamilton Heights Aging Project): Luchsinger et al 2005;
HAAS (Honolulu Asian Aging Study): Akomolafe et al 2006;Korf et al 2006;
Swedish Twin studies: Xu et al 2009

Physical exercise and dementia

For every one person with midlife physical inactivity who develops AD or dementia...

On average, one half of one person who is physically active develops AD or dementia.



SOURCES: Hamer & Chida 2008 meta-analysis; Swedish twin studies: Andel et al 2008; Cleveland Clinic: Smith et al 2014

Mediterranean diet is protective against cognitive impairment and dementia

- Eating primarily plant-based foods, such as fruits and vegetables, whole grains, legumes and nuts
- Replacing butter with healthy fats, such as olive oil; using low fat dairy
- Using herbs and spices instead of salt to flavor foods
- Limiting red meat to no more than a few times a month
- Eating fish and poultry at least twice a week
- Drinking red wine in moderation (optional)

An engaged lifestyle is protective against cognitive impairment and dementia

- Greater midlife participation in intellectual/cultural activities is protective against cognitive impairment, especially for women
- People who report being lonely have an increased risk of developing AD and show lower cognitive function over the lifespan
- Productive engagement leads to improved memory compared with usual social activities

Summary

There are things that people can do to maintain memory and brain health with age, and to reduce risk of developing Alzheimer's disease

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