Thank you for your continued participation in our research program! We follow a target of 500 people with normal memory and thinking and another 300 with brain diseases like Alzheimer’s. This year marks the 30th anniversary of the National Institute on Aging Alzheimer Disease Center here at UK. We were one of the original 10 centers and your participation over the years has made us #1 among the 27 existing centers in the US for total research visits contributed to the national efforts to promote brain health and find new ways to prevent or cure diseases like Alzheimer’s.

Everyone knows that sleep is something we need to stay healthy, but what many of us don’t know is that our sleep patterns constantly change as we age. As babies, we slept 16 hours a day, and only as we matured, did we settle into an average 8 hour sleep cycle. As we enter our senior years, the brain mechanisms that control sleep change again. Sleep can become more fragmented for a variety of reasons. Our natural melatonin levels decline in part from calcification of the pineal gland in the brain. The need to go to the bathroom, often several times per night, can take its toll. Medications can disrupt the quality of our sleep. Medical problems like sleep apnea not only disrupt sleep, but can also increase our risk of developing Alzheimer’s disease and dementia!

Dr. Erin Abner, UK-Sanders-Brown professor, examined the effect of sleep apnea on risk for dementia in 4,271 participants in the International PREADVISE study that is led by our team here at UK and the Sanders-Brown Center on Aging.

(continued on page 4)
REDDUCING YOUR HEART-HEALTH RISKS CAN IMPROVE YOUR MEMORY!

OUR LATEST RESEARCH SHOWS THAT YOU CAN TAKE CHARGE OF YOUR CARDIOVASCULAR RISKS AND BOOST YOUR BRAIN POWER!

We have been studying mild memory problems caused by cerebrovascular disease (which used to be known as “hardening of the arteries”). This is wear and tear on the brain at the level of the smallest blood vessels and capillaries; it is more common than Alzheimer changes and just as devastating. Our study examines patient involvement in reducing their cardiovascular risks including blood pressure, cholesterol, diabetes, obesity, poor diet, and smoking. We designed the study thinking that we could change these risks and reduce injury to the brain responsible for memory problems.

We presented the preliminary data from the first six months of the 3-year study at the American Academy of Neurology in April. The results were astounding! Blood pressure was lowered by 7 mmHg and “bad” cholesterol (LDL) by 10 points. Improvements were also seen in weight, and glucose (sugar) control. Across the board, the patients that began playing an active role in reducing their stroke and cardiovascular risks were successful compared to the patients that left their risk factor control up to their primary care physicians. Most importantly, those that fought back against their risks actually improved their memory scores. In contrast, the patients who didn’t intervene worsened over this same period at a rate similar to that seen in Alzheimer's!

***The take-home message: Take charge of your brain health, and you can boost your brain power and reduce your risk for memory decline and dementia***

Find these words in the puzzle: cortex, medulla, cerebellum, hippocampus, amygdala, ventricles, thalamus, striatum, insula, pons, temporal, occipital, parietal, frontal, cingulate


BRAIN TEASERS FOR BRAIN HEALTH!

PLAY This is an unusual paragraph. I'm curious as to just how quickly you can find out what is so unusual about it. It looks so ordinary and plain that you would think nothing was wrong with it! It is highly unusual though. Study it and think about it, but you still might not find anything odd. You can do it! (Answer p. 4)
HOME SAFETY AS YOU AGE? DON’T GET CAUGHT UNPREPARED!
LEARN HOW TO MAKE YOUR HOME SAFER TODAY!

Many of you recently completed a survey on home safety as part of your research participation. This survey evaluates accidents that have occurred in the home, focusing on the three issues related to most in-home accidents for seniors: 1) Falls, 2) Home hazards, and 3) Medication errors. Almost 1 in 5 of you (18%) reported an in-home accident in the last year.

Whether or not you have experienced a home accident, now is the time to take action!

First you should perform a home safety inspection. You can do this yourself, or you can contract this through most home-health agencies that use occupational therapists. Depending on your medical conditions, you may be able to get your health insurance to cover the cost with a written prescription or referral from your doctor. If you decide to do this yourself, start from the floor and work your way up.

Thick carpets and especially throw rugs are accidents waiting to happen. Don’t sacrifice your safety for aesthetics. Floor areas that may get wet and slippery (entranceways, kitchen sink, and bathrooms) may need skid tape (tape with rough texture to prevent slipping), available in most hardware and home supply stores. Carpets on stairs can be a major hazard and should be removed. Ottoman’s, stepstools and other floor clutter less than waist-high should be stored away to prevent tripping. Bathrooms should have grab bars installed near toilets and in shower/bath areas.

Kitchen safety is another concern. Even very mild memory problems can lead to a fire if the telephone rings or another distraction occurs while you’re cooking. Install a smoke detector in nearby so you can turn it off easily if you burn your toast, but can catch a fire before your safety is endangered. Have a Class ABC fire extinguisher nearby and know how to use it!

Don’t overload power outlets and make sure power cords are secured away from traffic paths where they could trip you.

Importantly, get into the habit of using a pill box (manual or automatic) to make sure you always take your medicines correctly.

By following these simple steps you can prevent the accident today that could rob you of your independence tomorrow! For more help on home safety planning and resources call our family care specialists (Robin or Marie) at (859) 323-5550.

New faces at the Sanders-Brown Research Clinic!

Dr. Allison Caban-Holt holds a PhD in Neuropsychology and is an Assistant Professor at Sanders-Brown and the Department of Behavioral Science in the UK College of Medicine. She has extensive experience in the administration and interpretation of memory and thinking tests, including the ones you take at your yearly visits. In May, she replaced Jeff Howe as Clinic Director. Jeff has retired after almost 3 decades of service to the Center. We will all miss him dearly, but are delighted with his replacement!

Dr. Shani Bardach holds a PhD in Gerontology and is an Assistant Professor at Sanders-Brown and the Department of Gerontology in the UK College of Public Health. Dr. Bardach’s expertise in aging issues will serve us well as she replaces Ms. Sarah Tarrant as Director of Educational Outreach and Recruitment for the clinic. Sarah is leaving to pursue her PhD in Gerontology at the University of Maryland. She has been instrumental in making our educational activities and research engagement #1 nationally; we wish her the best!
This is the largest prevention trial for AD in the world, marking our center again as #1 in the world! Dr. Abner found that sleep apnea can increase your risk of Alzheimer’s by 72%, depending on your genetic risks for AD. Those with low genetic risk were more at risk from sleep apnea than those with high genetic risk! **Bottom-line… If you have sleep apnea, get it taken care of now!** Your primary care doctor can arrange a sleep evaluation for you if you are having trouble with excessive daytime sleepiness and are known to snore or have pauses in breathing when sleeping.

Other things you can do to improve your sleep as you age include: 1) Increase daytime liquids, and don’t drink right before bed, 2) Eliminate caffeine intake in the evening, 3) Have a pharmacist review your medicines to make sure they are not causing sleep problems, and 4) Consider taking melatonin as a safe alternative to prescription sleep aids that can be sedating, reducing your risk of nighttime falls and injury. If you choose to take melatonin, we recommend 5 mg every evening taken about 2 hours before you go to bed. Improving your sleep will improve your daytime functioning, energy levels, and memory!

The information collected from your yearly visits is pooled with the data from the other 26 ADCs in what is known as the National Alzheimer’s Coordinating Center. Ensuring regular yearly visits for everyone helping with this research is a priority for these national efforts.

We work hard to ensure your visits go smoothly and to alert you to upcoming appointments with letter reminders and personal phone calls before your appointment. Despite these efforts our no-show rate can be as high as 50%. This places a tremendous stress on our limited resources. Your research participation is completely voluntary; if your appointment date and time do not work for you, we are happy to find alternatives that better fit into your schedule. Just let us know in advance and we will bend over backwards for you!

We have found that one reason for missed appointments and or drop out from the program is the development of an early memory problem. While thinking you might be developing a memory problem can be scary, we’re here to help. If you are developing an early memory problem, getting in to see us is extremely important so that we can work together to find out why and work on fixing the problem!

***If you are one of our research participants or a loved one of one of our participants and have not been seen or contacted for over a year, please call (859) 323-5550 and get an appointment now for your brain health***

Wordplay answer: There are no “e”s, the most commonly used English letter.