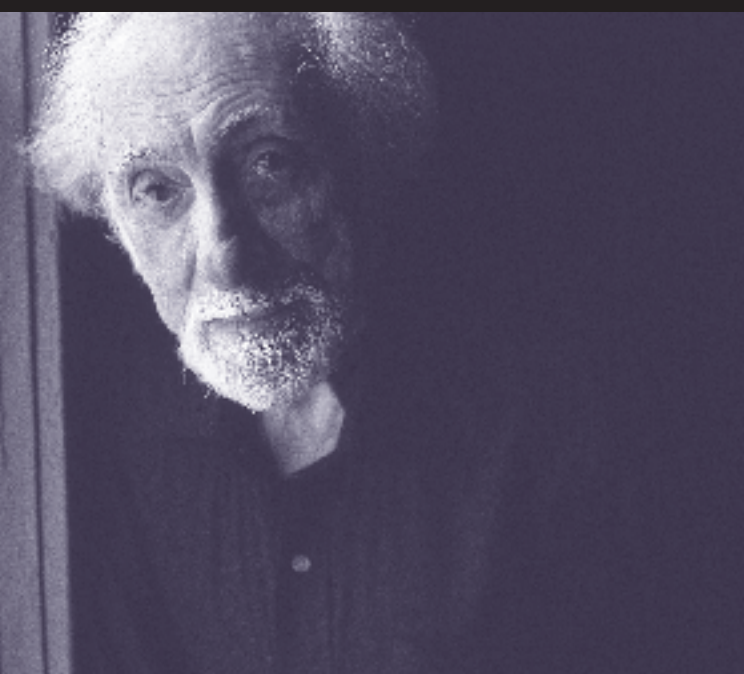


Understanding Alzheimer's Disease:
**IT'S NOT JUST
FORGETFULNESS**



Alzheimer's disease affects your memory, but it involves far more than simple forgetfulness. It is a progressive, degenerative, and incurable brain disorder that ends in death. Its cause remains unknown.



Alzheimer's disease is the seventh leading cause of death among older Americans and the most frequent cause of irreversible dementia today. Approximately 4.5 million Americans now have Alzheimer's disease. As our population ages, 13.2 million Americans could become victims before the middle of this century.

This year alone, an estimated 350,000 people from all races and socioeconomic classes will be diagnosed as suffering from Alzheimer's disease.

The Stages of Alzheimer's Disease

Alzheimer's disease usually progresses gradually over time. The disease lasts from two to twenty years, with seven years being the average.

Alzheimer's disease is difficult to diagnose. If you suspect that you or someone you know may have the disease, the first step is to see a doctor for a thorough medical exam.

Alzheimer's disease does not affect every patient at the same rate or in the same way. The stages listed represent the general course it follows.



Stage 1

Early in the illness, Alzheimer's patients tend to have less energy and spontaneity, though often no one notices anything unusual. They exhibit minor memory loss and mood swings and are slow to learn and react. After awhile they start to shy away from anything new and prefer the familiar.

In this stage, the Alzheimer's victim can still perform tasks independently, but may need assistance with more complicated activities. Speech and understanding become slower, and patients often lose their train of thought in mid-sentence. They may also get lost while traveling or forget to pay bills. As Alzheimer's victims become aware of this loss of control, they may become depressed, irritable, and restless.

Stage 2

The individual is clearly becoming disabled. The distant past may be recalled, while recent events become difficult to remember. Advancing Alzheimer's affects the victim's ability to comprehend his location, the day, and the time. Caregivers must give clear instructions and repeat them often. As the Alzheimer's victim's mind continues to slip away, the patient may invent words and not recognize familiar faces.

Stage 3

The patient becomes more and more unresponsive. Memory becomes poor and no one is recognizable.

Patients lose bowel and bladder control and eventually need constant care. During the final stage, patients lose the ability to chew and swallow. They become bedridden and vulnerable to pneumonia, infection, and other illnesses.

Respiratory problems worsen, particularly when the patient becomes bedridden. This terminal stage eventually leads to coma and death.

Essential Facts about Alzheimer's Disease

The Mystery of Alzheimer's Disease

The cause of Alzheimer's disease is still unknown, but researchers continue each day to search for its causes as well as a cure.

One research focus is on a protein called beta-amyloid, that appears to be abnormally processed in Alzheimer's-diseased brains. This may lead to the accumulation of beta-amyloid plaques in the dying nervous tissue of the brain. These plaques are also found in normal aged brains, but they exist in much greater numbers in Alzheimer's-diseased brains. What triggers beta-amyloid plaque formation in Alzheimer's disease has yet to be discovered.

Coping

Physicians are not yet able to stop the progression of Alzheimer's disease or reverse its damage to the victim's brain. Caregivers can only strive to make the patient's last months or years more meaningful and pleasant.

The best approach involves treating some of the symptoms of the dementia which may include wandering, sleeping problems, and hallucinations. A number of medications are available to help with these problems. Patients can be more comfortable and the family can better manage the patient.

Hereditary Factors

There are two basic types of Alzheimer's disease: familial and late-onset.

Familial Alzheimer's disease (FAD) is a rare form of the illness, affecting less than 10 percent of Alzheimer's patients. All FAD is early-onset, meaning the disease develops before age 65. FAD results from gene mutations on three chromosomes. Even if one of these mutated genes is inherited from a parent, the person will almost always develop early-onset Alzheimer's disease.

The majority of Alzheimer's disease cases are late-onset, usually developing after age 65. Late-onset Alzheimer's has no known cause and shows no obvious inheritance pattern. Although a specific gene has not been identified as the cause of the late-onset type, genetic factors do appear to play a role in its development.

More than Senility

Alzheimer's is a disease and should not be confused with "senility," or old age. Some of the early symptoms of the disease, such as forgetfulness, do cor-

respond with old age. The memory loss caused by Alzheimer's, however, is far more severe and progressive.

Eventually, Alzheimer's disease destroys not just the memory of details, but all memory of the event itself.

A Degenerative Medical Condition

Though psychiatric symptoms are a significant part of the illness, Alzheimer's is a degenerative medical condition and not a mental disorder. It results from physical deterioration of the brain. It leads to a loss of intellectual abilities and personality changes that are severe enough to interfere with social and occupational functioning.

Caring for an Alzheimer's Patient

Each Alzheimer's patient is an individual and his situation should be assessed realistically by the caregiver and family.

Caring for Alzheimer's patients at home usually helps them adjust to the loss of mental and physical abilities. Currently, approximately 70% of patients are cared for at home. It is important, however, for caregivers to familiarize themselves with Alzheimer's disease and understand what they will encounter emotionally and financially.

As the disease progresses, patients eventually need around-the-clock care. Community resources—such as support groups, day care and respite care centers, nursing homes, and other community agencies—can be a great source of information. They can help in dealing with the present and assist in planning for the future.

Not all families have the resources to properly care for their loved one at home. Some eventually have to call upon outside care when the disease reaches the final stages.

Nursing home care is another alternative for Alzheimer's patients, although it can be quite expensive. If the family chooses a nursing home, the facility should be visited to determine its quality of care and its ability to meet the special needs of an Alzheimer's patient.

The Caregiver

Care for an Alzheimer's patient drains both physical and emotional energy. As the disease progresses, patients require 24-hour-a-day care. Caregivers can experience feelings of isolation, loneliness and depression, which can seriously affect their own health. Respite or short-term care allows primary caregivers time for themselves, which is necessary to regain emotional and physical strength.

This separation benefits both the caregiver and the Alzheimer's patient. Even a friend taking over for

Getting Help

If your loved one has Alzheimer's disease, the first step is to talk to the physician who made the diagnosis. He should be able to direct you to community support groups, social services, long-term and respite care, and other resources.

The Alzheimer's Disease Research program offers a variety of educational booklets and brochures on Alzheimer's disease that provide a basic understanding of the disease and contain information on where to go for help and how best to deal with the Alzheimer's patient. These publications can be ordered by calling 1-800-437-2423 or by visiting our website at www.ahaf.org.

Your state Area Agency on Aging is another excellent resource. The agency can give you specific information on services in your area, and connect you with a local Agency on Aging, if one exists in your community.

Other good resources include the reference librarian at your local library, social workers, insurance companies, the local government mental health or social services department, religious groups, community service organizations, and most of all, your friends.

Remember to check the telephone book. You may find "community services" grouped at the beginning of the book, or they may appear under a variety of headings. Some possibilities include: aging, medicine, Alzheimer's, mental health, senior citizens, geriatric, senior center, health, social services, home health, and social security.

There are many services available to the Alzheimer's patient, family, and caregiver - utilize them.

a few hours can give the necessary break a caregiver needs and deserves.

Home/Nursing Home Care

Providing caring for an Alzheimer's patient can require substantial financial resources.

The Alzheimer's patient and his family have two main choices:

- Provide care for the patient in a home setting.
- Arrange for care in an assisted living facility, nursing home or other health care facility.

Care in the home is less costly than a nursing home, although the expenses are still considerable. For example, many families ultimately have to pay for some kind of adult day services for the patient. The national average cost for a home health aide is \$19 per hour, according to the 2005 MetLife Market Survey of Nursing Home & Home Care Costs. In addition, paying for items such as medicine and adult diapers quickly adds up.

The average cost of a private room in a nursing home in the United States is \$203 per day or \$74,095 annually, according to the survey. The average cost for residing in an assisted living facility is \$34,860 annually. Of course, remember that these numbers are national averages and the price for health care services can vary widely by geographic location.

Many families ultimately deplete their life savings because of the costs and the longevity of the disease.

Covering the Cost of Care

Many traditional health insurance policies typically cover only the medical costs associated with a patient's condition. Medications and doctor visits, which are considered medical costs, are generally covered by health insurance. Health insurance generally does not cover the supervisory care and help with daily living needed by Alzheimer's patients. Each policy is different, but often supplemental insurance, such as Medigap, is needed to cover custodial care of Alzheimer's disease patients.

American Health Assistance Foundation

The American Health Assistance Foundation (AHAF) is a nonprofit organization that funds scientific research on and educates the public about age-related and degenerative diseases, particularly Alzheimer's disease.

AHAF is committed to both finding a cure for Alzheimer's disease and to alleviating the suffering it brings to the victims and their families. Since 1985, AHAF's Alzheimer's Disease Research (ADR) program has provided millions of dollars in grants to support promising biomedical research on Alzheimer's disease.

As part of its public education effort, ADR produces a variety of written material on Alzheimer's disease. These include:

- Alzheimer's Research Review
- Care for the Caregiver: Managing Stress (English and Spanish)
- Family Caregiver Health Guide
- Honest Answers for the Recently Diagnosed Alzheimer's Patient (English and Spanish)
- I'll Be There: Caring For Your Parents, Kids, Job and Marriage
- Safety and the Older Driver
- Staying Safe: Wandering & the Alzheimer's Patient (English and Spanish)
- Through Tara's Eyes
- Understanding Alzheimer's Disease (English and Spanish)

For more information on prices and ordering, write to:

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