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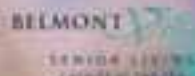
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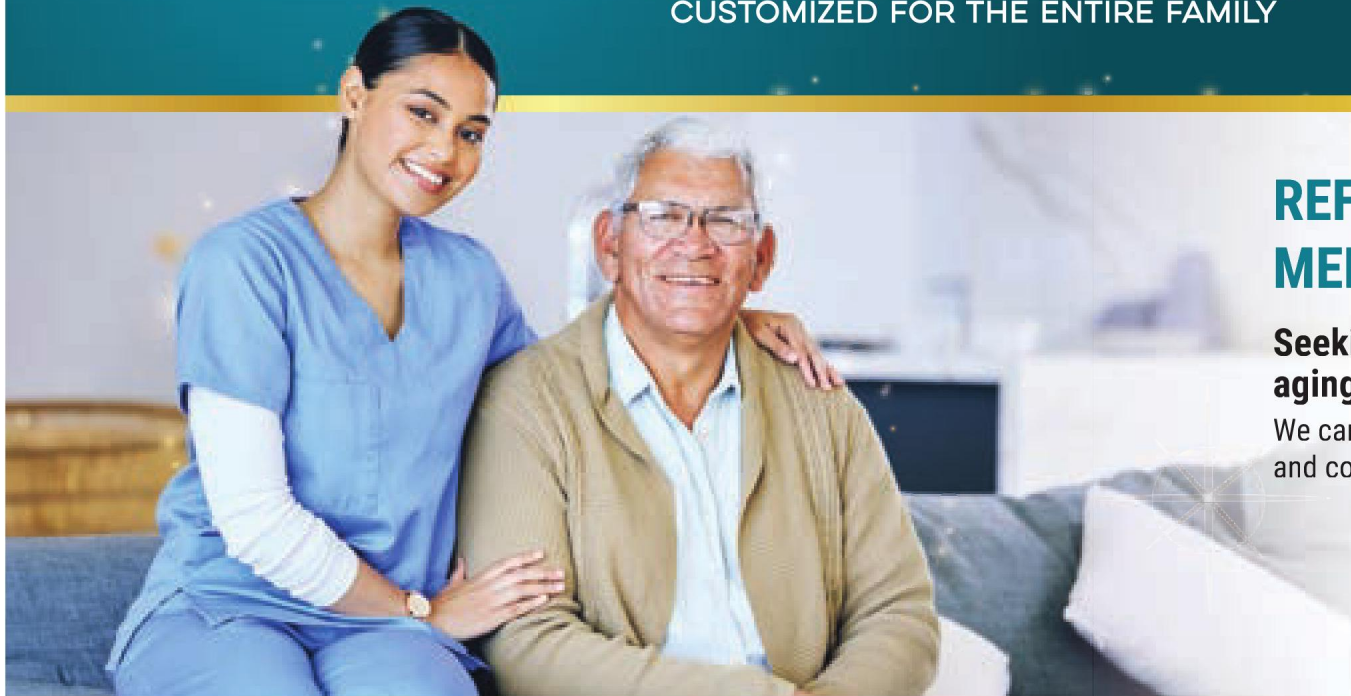


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Volunteering, donating money and/or participating in fundraising events are just a few of the ways you can help the Alzheimer's Association in the fight against Alzheimer's disease.

JOIN THE FIGHT

BY ALZHEIMER'S ASSOCIATION

June is Alzheimer's & Brain Awareness Month – a reminder that right now is the right time to take charge of your brain health and join the Alzheimer's Association San Diego/Imperial Chapter in the fight to end Alzheimer's. Whatever your age or stage of life, changes you make now can have a big impact.

While there is currently no cure for Alzheimer's, we know more than ever about brain health, risk reduction and ways to live well with the disease.

Science shows that adopting healthy habits may help reduce the risk of dementia.

- As many as 40% of dementia cases may be attributable to modifiable risk factors, such as high blood pressure and lack of physical activity. Research shows that adopting healthy behaviors — like getting exercise and good quality sleep — may reduce the risk of cognitive decline.
- The Alzheimer's Association leads and funds groundbreaking research that has shown that healthy habits are good for the brain. This includes the U.S. POINTER study, which tests the effectiveness of healthy lifestyle interventions for preventing dementia in 2,000 at-risk

American adults.

Early detection and diagnosis of Alzheimer's is more important than ever.

- Only half of those with Alzheimer's disease ever receive a diagnosis, delaying needed care and potentially putting them at risk.
- Early detection of Alzheimer's or another dementia offers significant benefits for the person diagnosed and their loved ones, including greater access to treatment options and the ability to plan for the future.

Early diagnosis offers a better chance of benefiting from treatment.

- There are now treatments that may slow disease progression for people in the early stage of Alzheimer's, making a timely diagnosis critically important. (Page 11.)
- There are many potential treatments advancing in the pipeline. The Alzheimer's Association is supporting promising research that is tackling the disease from multiple angles.

Steps you can take now to help end Alzheimer's:

- **Adopt the '10 Healthy Habits':** It is never too early or too late to start taking positive actions

for your brain. See Page 13 and/or visit alz.org/healthyhabits to learn more.

- **Go purple:** Throughout the month of June, go purple — the color of the Alzheimer's movement — to raise awareness of the disease. Dress in purple and share your story on social media using the hashtag #ENDALZ.
- **Join the fight:** The Longest Day® is the day with the most light — the summer solstice. Join the Alzheimer's Association to fight the darkness of Alzheimer's and all other dementia through a fundraising activity of your choice on a day that works for you. The funds you raise advance the care, support and research efforts of the Alzheimer's Association. Visit alz.org/theLongestDay to learn more.
- **Walk with the Alzheimer's Association:** Held in communities across the country, the Alzheimer's

Association Walk to End Alzheimer's® is the world's largest event to raise awareness and funds for Alzheimer's care, support and research. Visit alz.org/walk to register for an event near you.

- **Volunteer with the Alzheimer's Association:** As an Alzheimer's Association volunteer, you can help people in your community take steps to reduce their dementia risk and recognize the signs of Alzheimer's. Visit alz.org/volunteer.
- **Advocate:** Urge lawmakers to pass the BOLD Reauthorization Act, to continue strengthening the dementia public health infrastructure in communities nationwide. Visit alzimpact.org/BOLD_Reauthorization.
- **Donate:** Empower people at every age and stage of life to take charge of their brain health — support the Alzheimer's Association! Visit alz.org/donate.

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ENDING ALZHEIMER'S FOR ALL

Clinical trials that include people from diverse communities are key to unlocking new therapies

BY ERIC THOMPSON
ALZHEIMER'S ASSOCIATION
SAN DIEGO/IMPERIAL CHAPTER

As a kid, Doris Molina-Henry was endlessly curious and eager to understand new things. "I was the perpetual student, always wanting to learn more, to go a little deeper," she recalled.

That trait would become the driving force behind her career in science. Molina-Henry, Ph.D., is now Assistant Professor at the USC Keck School of Medicine Alzheimer's Therapeutic Research Institute and a member of the institute's leadership group, focused on the science of recruiting and retaining diverse participants in clinical trials.

Studying and expanding treatment options in diverse communities can help unlock new findings and eventually therapies aimed at preventing the symptoms of Alzheimer's, well before they begin, Molina-Henry said. Science is getting closer to that goal.

"There is a sense of purpose, an urgency in the work we are doing," she said. "We are on the path to ending Alzheimer's. I feel fortunate to be here at a time of explosive growth and transformation in the field, with an emphasis on ensuring we have an inclusive approach to trials."

"I'm excited to be part of the solution, to have an impact," she added. "It makes me emotional."

Of course, there is much work ahead. Nearly 7 million people are living with Alzheimer's disease in the U.S. and more than 11 million Americans provide unpaid care for people with Alzheimer's and other types of dementia. Racial and ethnic underrepresented groups and underserved communities are disproportionately impacted by Alzheimer's disease.

Studies show Blacks are twice as likely as Whites to develop Alzheimer's and Hispanics are 1.5 times more likely than Whites to develop Alzheimer's disease. At the same time, underrepresented communities are less likely to be diagnosed, less likely to participate in research and less likely to have access to care and support services.

The Alzheimer's Association and researchers like Molina-Henry are determined to change that narrative. Participating in clinical trials is a powerful way to help move the needle. A 2022 article in *Scientific American* noted that nearly 40% of Americans belong to a racial or ethnic minority, but that patients who participate in clinical trials are almost overwhelmingly White.

People with dementia, caregivers and healthy volunteers from diverse communities are all needed to join research studies.



Doris Molina-Henry, Ph.D., Assistant Professor at the USC Keck School of Medicine Alzheimer's Therapeutic Research Institute.

"We are only as healthy as the unhealthiest person in our community," Dr. Molina-Henry stressed. "The more people we can engage and involve in our trials, the more people we can help."

The Alzheimer's Association works hard to educate and support patients and families living with Alzheimer's disease, including those from underserved and underrepresented communities. The association has also provided \$1.3 million to help fund research at the Alzheimer's Therapeutic Research Institute, with money raised from events like the Walk to End Alzheimer's, the Brilliance Gala and The Longest Day.

Other than funding challenges, recruiting and retaining diverse trial participants is the greatest obstacle to developing the next generation of Alzheimer's treatments.

"Without representative participation in trials, it is impossible to get a complete understanding of how treatments will be safe and effective for everyone," Molina-Henry said, adding that when diversity is added to science, science is enriched.

People interested in participating in clinical trials can learn more at alz.org/alzheimers-dementia/research_progress/clinical-trials.

"Don't just hope for a cure," Molina-Henry said. "Help us find one."



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People with dementia, caregivers and healthy volunteers from diverse communities are all needed to join research studies on Alzheimer's disease.

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Brent Aulston, Ph.D., is an Alzheimer's Association Fellow at UC San Diego in the Subhojit Roy lab.



As a young man, Brent Aulston's grandfather (pictured here in the 1930s) was an amateur boxer who at one point was professionally ranked.



A young Brent Aulston with his grandfather. Aulston, now an Alzheimer's disease researcher, was just a boy when he lost his grandfather to the disease.

PHOTOS COURTESY OF BRENT AULSTON

BUILDING ON THE PAST

Inspired by loss of his grandfather, UCSD researcher pursues new treatments for Alzheimer's

BY ERIC THOMPSON
ALZHEIMER'S ASSOCIATION
SAN DIEGO/IMPERIAL CHAPTER

As a researcher studying the neurodegenerative mechanisms of Alzheimer's disease, Brent Aulston, Ph.D., is working to break new boundaries in the understanding and treatment of Alzheimer's disease. His inspiration hits close to home.

Aulston, an Alzheimer's Association Fellow at UC San Diego in the Subhojit Roy lab, said his family – and particularly his grandparents – played a central role in shaping who he is.

Originally from Oklahoma, Aulston's grandfather moved to Colorado in the late 1920s and pursued his passion for amateur boxing, at one point becoming professionally ranked. He eventually started a farm in Yellow Jacket, Colo., with little more than the shirt on his back and grew it into a successful enterprise. The farm remains in the family.

Though Aulston has heard countless stories about how amazing his grandfather was, he didn't get a chance to truly know him. Aulston was just a child when he lost his grandfather to Alzheimer's disease.

Aulston is now hoping to keep other families from experiencing the same kind of heartbreak.

"People need their grandparents and they need their moms, dads, wives and husbands," he said. "I don't think we should let Alzheimer's get in the way of that. We are doing all that we can to stop that cycle."

Aulston's current work focuses on the use of CRISPR-based gene editing technology to target a genetic sequence in Alzheimer's disease. The sequence applies in both familial Alzheimer's and sporadic Alzheimer's, which doesn't run in families, so a potential breakthrough would be relevant for anyone with the disease.

That makes the research particularly exciting, said Aulston, who has been working on the project for more than five years, building on work that was started more than a decade ago.

"I went into science because that's how you solve problems," he said. "Realistically, even

five years ago, (editing a genetic sequence in Alzheimer's disease) was probably a pie in the sky idea. But there's so many people that are developing the technology and working on different things. My attitude is that anything can happen if we just keep going at it – that's how you break those barriers and that's what we're trying to do."

The Alzheimer's Association supports researchers like Aulston, his colleagues at UC San Diego and scientists across the globe working diligently in the fight against Alzheimer's disease and other forms of dementia. Aulston said he's encouraged at how far science has come in treating Alzheimer's and increasingly optimistic about what's ahead.

"We're making progress," he said. "There are now treatments that may slow the progression for people in the early stage of Alzheimer's and there are many potential treatments advancing in the pipeline."

The impact of exponential growth in technology is a major factor, Aulston said, comparing it to how advances in cellular technology transformed the telecommunications industry and then the world.

"You think about when we had the rotary telephone, and then landlines for decades and decades," he said. "As soon as we got the first cell phones, look what happened over the next 20 years. The technological improvement was immeasurable. One breakthrough and the entire industry changed."

"I think we're at that point with the research being done in the field of Alzheimer's and dementia," he said.

In terms of prevention, Aulston said science has reinforced how lifestyle choices like exercising, eating right and not smoking or drinking can strengthen cognitive health and help stave off certain types of dementia.

"At 94 years old, my grandmother was still doing the New York Times crossword... (and) she was also kind of a gossip," he said. "I think talking

about everybody and gossiping probably helped keep her mind intact."

His advice to others is to "keep those strong cognitive relations, keep your mind doing the things you want to do. If you're a musician, keep playing music, if you're an artist, keep painting – keep doing whatever keeps your mind engaged. It all helps."

"People need their grandparents and they need their moms, dads, wives and husbands. I don't think we should let Alzheimer's get in the way of that. We are doing all that we can to stop that cycle."

Brent Aulston, Ph.D.,
UC San Diego, Subhojit Roy lab

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FACTS ABOUT ALZHEIMER'S DISEASE

More than **60,000**
people in San Diego and
Imperial counties are living
with Alzheimer's disease.

Lifetime risk for
Alzheimer's at age 45:

1 in 5 | **1 in 10**
for women | for men

More than **11 million** people
provide unpaid care for people living
with Alzheimer's or other dementias.

In San Diego and Imperial counties, more than **160,000**
people are providing care for people with Alzheimer's or dementia.

An estimated **6.9 million**
Americans 65 and older are living
with Alzheimer's. By 2050, this
number is projected to rise to nearly
13 million.

1 in 3 seniors dies with
Alzheimer's or another dementia.

Alzheimer's and other dementias
will cost the nation
\$360 billion
in 2024. (By 2050, these costs
could rise to nearly \$1 trillion.)

Unpaid caregivers provided an
estimated **18.4 billion** hours
of care in 2023 valued at
\$346.6 billion.



Jason Spark's abuelita, left, with his mother, her primary caregiver.

IMAGES COURTESY OF JASON SPARK

MAKING A DIFFERENCE

Local volunteer works to spare other families from the pain of Alzheimer's

BY ERIC THOMPSON
ALZHEIMER'S ASSOCIATION
SAN DIEGO/IMPERIAL CHAPTER

As someone whose family has experienced the heartbreak of Alzheimer's disease and the trauma it can leave in its wake, Jason Spark wants others to know they aren't alone and that the Alzheimer's Association can help. He just wishes he'd known that years ago when his grandmother started developing symptoms of the disease.

"My grandmother, my abuelita, was just so full of life, so vibrant," he said. "She moved with her children from Colombia (to California), met someone, got married and raised five kids, one of which was my mom. She managed to successfully build and grow this amazing family."

Holidays at his grandmother's place were full of fun and family, Spark said.

"I'll always remember as a kid going to those Christmases and Thanksgiving dinners and family members being everywhere - cousins running around all over the place in a small little condo in Arcadia," he said. "The smiles, laughter and warmth - she was at the center of it all. She was the core."

When his grandmother started struggling with forgetfulness, opinions in the family differed on how bad it was. As she approached her mid-80s, however, her confusion became impossible to ignore.

"I remember she'd ask, 'Who is this man?' And my mom would say 'this is your grandson, Jason,'" Spark recalled. "But my abuelita would say 'No, no, no. My grandson is a little boy. Who is this man?' It was so hard to hear that she didn't know who I was."

"That was my first real experience with Alzheimer's disease," he added.

As painful as her decline was, the effect it had on the family seemed worse. A cascade of fear, stress, misunderstanding and disagreements erupted over her condition and what kind of care she needed, he said.

"That incredibly close, tight family just fell apart," Spark said. "Her diagnosis and decline devastated them. It completely broke them."

Spark's grandmother passed away in 2017, but the extended family still does not speak - and hasn't in years. Part of that breakdown was the difficulty in recognizing what was happening to his grandma, Spark said, and the toll it was taking on her and his mom.

Throughout the years of disease progression, Spark said, his mom's interactions with her siblings grew strained and stressful as it became clearer that something was seriously wrong with his grandmother.

"My mom became my abuelita's greatest advocate," Spark said. "She drove 50 miles nearly every day to help with her home care. She immersed herself in her mother's world and saw the difficulties of daily living that others could not. They didn't see the medication

(my grandmother) was taking, how she wasn't eating, how she wasn't brushing her teeth."

Spark said his mom put it on herself to carry the burden.

"My mom essentially acted as the primary caregiver, and she did it (largely) without the family support that could have made a difficult situation a little easier," he said. "In fact, the disagreements on care and medication and a breakdown in communication made my mom's caregiver role even more difficult."

Spark said when his mom eventually accepted that both she and his grandma needed some help, it led to more family disagreements about the next step.

"I think everyone felt they were doing what needed to be done," he said. "Some wanted to sell her condo, some were surprised there was even consideration of relocating her away from her home. It just seemed the family could not really align on the options that were available."

Spark said he wishes he knew then about the Alzheimer's Association programs and services. Calling the 24/7 Helpline alone would have helped create a shared foundation to start the conversation, reducing the likelihood of conflict.

"The Alzheimer's Association has all these resources - the support mechanisms, the educational materials, the advice for primary caregivers and how to navigate these situations," he said. "I think that could have been helpful for my mom and her entire family."

As an Alzheimer's Association volunteer, Spark is helping to support research and raise awareness about resources and programs that help families better understand, prepare and cope with the disease.

This summer, he'll host a charity golf event, Teeing Off on Alzheimer's, to benefit the Alzheimer's Association San Diego/Imperial Chapter. The tournament will be held Aug. 16 at the Rancho Bernardo Inn.



Jason Spark with his abuelita, who died of Alzheimer's disease in 2017

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An SRG Community



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iSTOCK

New or worsening confusion and struggles with everyday tasks are good reasons to talk to your doctor.

10 EARLY SIGNS AND SYMPTOMS OF ALZHEIMER'S DISEASE

BY ALZHEIMER'S ASSOCIATION

Memory loss that disrupts daily life may be a symptom of Alzheimer's or other dementia. Alzheimer's is a brain disease that causes a slow decline in memory, thinking and reasoning skills.

There are 10 warning signs and symptoms. If you notice any of them, don't ignore them - schedule an appointment with your doctor.

1. Memory loss that disrupts daily life

One of the most common signs of Alzheimer's disease, especially in the early stage, is forgetting recently learned information. Others include forgetting important dates or events, asking the same questions over and over, and increasingly needing to rely on memory aids (like sticky notes) or family members for things they used to handle on their own.

What's a typical age-related change? Sometimes forgetting names or appointments, but remembering them later.

2. Challenges in planning or solving problems

Some people living with dementia may experience changes in their ability to develop and follow a plan or work with numbers. They may have trouble following a familiar recipe or keeping track of monthly bills. They may have difficulty concentrating and take much longer to do things than they did before.

What's a typical age-related change? Making occasional errors when managing finances or household bills.

3. Difficulty completing familiar tasks

People with Alzheimer's often find it hard to complete daily tasks. Sometimes they may have trouble driving to a familiar location, organizing a grocery list or remembering the rules of a favorite game.

What's a typical age-related change? Occasionally needing help to use microwave settings or to record a TV show.

4. Confusion with time or place

People living with Alzheimer's can lose track of dates, seasons and the passage of time. They may have trouble understanding something if it is not happening immediately. Sometimes they may forget where they are or how they got there.

What's a typical age-related change? Getting confused about the day of the week but figuring it out later.

5. Trouble understanding visual images and spatial relationships

For some people, having vision problems is a sign of

Alzheimer's. This may lead to difficulty with balance or trouble reading. They may also have problems judging distance and determining color or contrast, causing issues with driving.

What's a typical age-related change? Vision changes related to cataracts.

6. New problems with words in speaking or writing

People living with Alzheimer's may have trouble following or joining a conversation. They may stop in the middle of a conversation and have no idea how to continue or they may repeat themselves. They may struggle with vocabulary, have trouble naming a familiar object or use the wrong name (e.g., calling a "watch" a "hand-clock").

What's a typical age-related change? Sometimes having trouble finding the right word.

7. Misplacing things and losing the ability to retrace steps

A person living with Alzheimer's disease may put things in unusual places. They may lose things and be unable to go back over their steps to find them again. He or she may accuse others of stealing, especially as the disease progresses.

What's a typical age-related change? Misplacing things from time to time and retracing steps to find them.

8. Decreased or poor judgment

Individuals may experience changes in judgment or decision-making. For example, they may use poor judgment when dealing with money or pay less attention to grooming or keeping themselves clean.

What's a typical age-related change? Making a bad decision or mistake once in a while, like neglecting to change the oil in the car.

9. Withdrawal from work or social activities

A person living with Alzheimer's disease may experience changes in the ability to hold or follow a conversation. As a result, he or she may withdraw from hobbies, social activities or other engagements. They may have trouble keeping up with a favorite team or activity.

What's a typical age-related change? Sometimes feeling uninterested in family or social obligations.

10. Changes in mood and personality

Individuals living with Alzheimer's may experience mood and personality changes. They can become confused, suspicious, depressed, fearful or anxious. They may be easily upset at home, with friends or when out of their comfort zone.

What's a typical age-related change? Developing very specific ways of doing things and becoming irritable when a routine is disrupted.

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NAVIGATING TREATMENT OPTIONS

Research leads to promising new medications in treatment of Alzheimer's

BY ALZHEIMER'S ASSOCIATION

There is exciting progress in Alzheimer's and dementia research that is creating promising new treatments for people living with the disease. It is important for patients and families to learn as much as they can about which drugs are available and talk about options with their doctor.

The U.S. Food and Drug Administration (FDA) has approved medications for Alzheimer's that fall into two categories:

- Drugs that temporarily ease some symptoms of Alzheimer's disease.
- Drugs that change disease progression in people living with Alzheimer's.

A doctor who is experienced in using these medications should monitor people who are taking them and provide information that can help people make informed decisions about their usage and care.

Drugs that treat memory and thinking

As Alzheimer's progresses, brain cells die and connections among cells are lost. This causes cognitive (memory and thinking) and noncognitive (behavioral and psychological) symptoms to worsen. While the following medications do not stop the damage Alzheimer's causes to brain cells, they may help lessen or stabilize cognitive symptoms for a limited time.

- Donepezil (Aricept®): approved to treat all stages of Alzheimer's disease.
- Rivastigmine (Exelon®): approved for mild-to-moderate Alzheimer's as well as mild-to-moderate dementia associated with Parkinson's disease.
- Galantamine (Razadyne®): approved for mild-to-moderate stages of Alzheimer's disease.
- Memantine (Namenda®): approved for moderate-to-severe Alzheimer's disease. Can cause side effects, including headache, constipation, confusion and dizziness.
- Donepezil and memantine (Namzaric®): approved for moderate-to-severe Alzheimer's disease. Possible side effects include nausea, vomiting, loss of appetite, increased frequency of bowel movements, headache, constipation, confusion and dizziness.

Drugs that change disease progression

Drugs in this category slow disease progression, including the decline of memory and thinking, as well as function, in people living with Alzheimer's disease.

- Aducanumab (Aduhelm®)
Aducanumab (Aduhelm®) is an anti-amyloid antibody intravenous (IV) infusion therapy that is delivered every month. It has received accelerated approval from the FDA to treat early Alzheimer's disease, including people living with mild cognitive impairment (MCI) or mild dementia due to Alzheimer's disease who have confirmation of elevated beta-amyloid in the brain.

Aducanumab was the first therapy to demonstrate that removing beta-amyloid from the brain reduces cognitive and functional decline in people living with early Alzheimer's. The most common side effects are amyloid-related imaging abnormalities (ARIA), headache and fall.

Aducanumab is being discontinued by its manufacturer, Biogen. The company stated that people who are now receiving the drug as part of a clinical trial will continue to have access to it until May 1, 2024, and that people who are now receiving it by prescription will have it available to them until Nov. 1, 2024.

- Lecanemab (Leqembi®)

Lecanemab (Leqembi®) is an anti-amyloid antibody intravenous (IV) infusion therapy that is delivered every two weeks. It has received traditional approval from the FDA to treat early Alzheimer's disease, including people living with mild cognitive impairment (MCI) or mild dementia due to Alzheimer's disease who have confirmation of elevated beta-amyloid in the brain.

Lecanemab was the second therapy to demonstrate that removing beta-amyloid from the brain reduces cognitive and functional decline in people living with early Alzheimer's.

The most common reported side effects were infusion-related reactions, amyloid-related imaging abnormalities (ARIA) and headache.

Importance of early diagnosis

It is important to seek a diagnosis as early as possible. The earlier someone is diagnosed, the more treatment options are available. Some medications are only effective in the early stages of the disease.

To determine if someone can take a specific treatment, a doctor will need to consider which stage of the disease they are in. Some treatments are only approved for people in a specific stage.

Alzheimer's is a progressive brain disease. This means the disease and resulting symptoms worsen over time. The disease often progresses in the following stages:

- Asymptomatic: No cognitive symptoms but possible biological changes in the brain.
- Mild cognitive impairment (MCI) due to Alzheimer's disease: Symptoms of cognitive ability loss begin to appear.
- Early stage (mild): Typically involves symptoms that interfere with some daily activities.
- Middle stage (moderate): More pronounced symptoms that interfere with many daily activities.
- Late stage (severe): Symptoms interfere with most daily activities.

Insurance coverage

If your doctor says you are medically able to take a treatment, your next questions may be about cost and insurance coverage. Because drugs that treat the progression of the disease are newer, coverage is an evolving issue. You should talk to your doctor about coverage and if they can help with appeals.



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If you or a loved one has Alzheimer's disease, talk to your doctor about new treatments that can temporarily ease symptoms or slow disease progression.

The Centers for Medicare & Medicaid Services (CMS) announced it will cover lecanemab (Leqembi) as long as an individual's physician enrolls them in a CMS-run registry.

Insurance appeals

If you are denied coverage of an Alzheimer's treatment, there are actions you can take. You may want to file an appeal with your health insurance provider. This can be difficult. You should think about your needs and your medical history before you begin. All insurance companies and Medicare

have a formal appeal process.

- Call the number on the back of your insurance card. Ask for instructions for how to make a formal appeal. Provide all the information requested on the appeal form.
- There is often a time limit on appeals. Don't delay taking action.
- Keep records/copies of all conversations with the insurance provider.
- Your doctor may be able to help you with the appeal. Ask them about your options during a visit.

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ISTOCK

Creating a calm atmosphere and speaking in a relaxed voice can help ease agitation in people with Alzheimer's disease or related dementias.

COPING WITH BEHAVIOR CHANGES

How to help ease anxiety, agitation and other personality changes

BY ALZHEIMER'S ASSOCIATION

Many people find the changes in behavior caused by Alzheimer's to be the most challenging and distressing effect of the disease. The chief cause of behavioral symptoms is the progressive deterioration of brain cells. However, medication, environmental influences and some medical conditions also can cause symptoms or make them worse.

In early stages, people may experience behavior and personality changes such as:

- Irritability
- Anxiety
- Depression

In later stages, other symptoms may occur including:

- Aggression and anger
- Anxiety and agitation
- General emotional distress
- Physical or verbal outbursts
- Restlessness, pacing, shredding paper or tissues
- Hallucinations (seeing, hearing or feeling things that are not really there)
- Delusions (firmly held belief in things that are not true)
- Sleep Issues and sundowning

Triggering situations

Events or changes in a person's surroundings often play a role in triggering behavioral symptoms.

Change can be stressful for anyone and can be especially difficult for a person with Alzheimer's disease. It can increase the fear and fatigue of trying to make sense out of an increasingly confusing world.

Situations affecting behavior may include:

- Moving to a new residence or nursing home
- Changes in a familiar environment or caregiver arrangements
- Misperceived threats
- Admission to a hospital
- Being asked to bathe or change clothes

Identifying what has triggered a behavior can often help in selecting the best approach to deal with it.

Medical evaluation for contributing factors

Everyone who develops behavior changes should receive a thorough medical evaluation, especially if symptoms appear suddenly.

Even though the chief cause of behavioral symptoms is the effect of Alzheimer's disease on the brain, an examination may reveal other treatable conditions that are contributing to the behavior.

Contributing conditions may include:

- Drug side effects. Many people with Alzheimer's take prescription medications for other health issues. Drug side effects or interactions among drugs can affect behavior.
- Discomfort from infections or other conditions. As the disease gets worse, those with Alzheimer's have increasing difficulty communicating with others about their experience. As a result, they may be unable to report symptoms of common illnesses, including pain from infections of the urinary tract, ear or sinuses may lead to restlessness or agitation.
- Uncorrected problems with hearing or vision. These can contribute to confusion and frustration and foster a sense of isolation.

Non-drug approaches

Many of these strategies aim to identify and address needs that the person with Alzheimer's may have difficulty expressing as the disease progresses. Non-drug approaches should always be tried first.

Steps to developing successful non-drug treatments include:

- Recognizing that the person is not just "acting mean or ornery," but is having further symptoms of the disease.
- Identifying the cause and how the symptom may relate to the experience of the person with Alzheimer's.
- Changing the environment to resolve challenges and obstacles to comfort, security and ease of mind.

Coping tips

- Monitor personal comfort. Check for pain, hunger, thirst, constipation, full bladder, fatigue, infections and skin irritation. Maintain a comfortable room temperature.
- Avoid being confrontational or arguing about facts. For example, if a person expresses a wish to go visit a parent who died years ago, don't point out that the parent is dead. Instead, say, "Your mother

is a wonderful person. I would like to see her too."

- Redirect the person's attention. Try to remain flexible, patient and supportive by responding to the emotion, not the behavior.
- Create a calm environment. Avoid noise, glare, insecure space and too much background distraction, including television.
- Allow adequate rest between stimulating events.
- Provide a security object.
- Acknowledge requests, and respond to them.
- Look for reasons behind each behavior. Consult a physician to identify any causes related to medications or illness.

Medications for behavioral and psychological symptoms

If non-drug approaches fail after being applied consistently, introducing medications may be appropriate for individuals with severe symptoms or who have the potential to harm themselves or others. While prescription medications can be effective in some situations, they must be used carefully and are most effective when combined with non-drug approaches.

Find a list of FDA-approved medications for dementia, as well as other medications that can be prescribed "off-label" at alz.org/treatments.

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iSTOCK

10 HEALTHY HABITS FOR YOUR BRAIN

BY ALZHEIMER'S ASSOCIATION

Positive, everyday actions can make a difference in brain health, lowering the risk of cognitive decline and possibly Alzheimer's and dementia. Incorporate some or all of these habits into your life to help maintain a healthy brain.

Challenge your mind

Put your brain to work and do something that is new for you. Learn a new skill. Try something artistic.

Stay in school

Education reduces the risk of cognitive decline and dementia. Encourage youth to stay in school. Continue your own education by taking a class at a local library or college, or online.

Get moving

Engage in regular exercise, including activities that raise your heart rate and increase blood flow to the brain and body. Find ways to build more movement into your day, like walking, dancing or gardening.

Sleep well

Good quality sleep is important for brain health. Stay off screens before bed and make your sleep space as comfortable as possible. Do all you can to minimize

disruptions. If you have any sleep-related problems, such as sleep apnea, talk to a healthcare provider.

Protect your head

Wear a helmet for activities like biking, and wear a seatbelt. Protect yourself while playing sports. Do what you can to prevent falls, especially for older adults.

Be smoke-free

Quitting smoking can lower the risk of cognitive decline back to levels similar to those who have not smoked. It's never too late to stop.

Control your blood pressure

Medications can help lower high blood pressure, as can healthy habits like eating right and physical activity. Work with a health care provider to control your blood pressure.

Manage diabetes

Type 2 diabetes can be prevented or controlled by eating healthier, increasing physical activity and taking medication, if necessary.

Eat right

Eating healthier foods can help reduce your risk of cognitive decline. This includes more vegetables and leaner meats/proteins, along with foods that are less processed and lower in fat.

Maintain a healthy weight

Talk to your health care provider about the weight that is healthy for you. Other healthy habits like eating right, exercising and sleeping well can help you maintain healthy weight.

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ISTOCK

Practicing self-care and getting exercise are important strategies for avoiding burnout when you're helping to care for a loved one with Alzheimer's disease.

BY ALZHEIMER'S ASSOCIATION

Alzheimer's caregivers frequently report experiencing high levels of stress. It can be overwhelming to take care of a loved one with Alzheimer's or other dementia, but too much stress can be harmful to both of you. If you're a caregiver, here are 10 symptoms to watch out for, along with tips to avoid burnout.

SYMPTOMS

1. Denial about the disease and its effect on the person who has been diagnosed.
2. Anger at the person with Alzheimer's or frustration that he or she can't do the things they used to be able to do.
3. Social withdrawal from friends and activities that used to make you feel good.
4. Anxiety about the future and facing another day.
5. Depression that breaks your spirit and affects your ability to cope.
6. Exhaustion that makes it nearly impossible to complete necessary daily tasks.
7. Sleeplessness caused by a never-ending list of concerns.
8. Irritability that leads to moodiness and triggers negative responses and actions.
9. Lack of concentration that makes it difficult to perform familiar tasks.
10. Health problems that begin to take a mental and physical toll.

If you experience any of these signs of stress on a regular basis, make time to talk to your doctor. Here are some additional tips for managing caregiver stress:

HOW TO BE A HEALTHY CAREGIVER

AVOIDING BURNOUT

Know what community resources are available. Adult day programs, in-home assistance, visiting nurses and meal delivery are just some of the services that can help you manage daily tasks. Use our online Community Resource Finder or contact your local Alzheimer's Association® chapter for assistance in finding Alzheimer's care resources in your community.

Get help and find support. Our online Care Team Calendar helps you organize friends and family who want to help provide care and support. Our 24/7 Helpline (800.272.3900), ALZConnected online community and local support groups are all good sources for finding comfort and reassurance. If stress becomes overwhelming, seek professional help.

Use relaxation techniques. There are several simple relaxation techniques that can help relieve stress:

- Visualization (mentally picturing a place or

situation that is peaceful and calm)

- Meditation (which can be as simple as dedicating 15 minutes a day to letting go of all stressful thoughts)
- Breathing exercises (slowing your breathing and focusing on taking deep breaths)
- Progressive muscle relaxation (tightening and then relaxing each muscle group, starting at one end of your body and working your way to the other end)

Get moving. Physical activity — in any form — can help reduce stress and improve overall well-being. Even 10 minutes of exercise a day can help. Take a walk. Do an activity you love, such as gardening or dancing.

Find time for yourself. Consider taking advantage of respite care so you can spend time doing something you enjoy. Respite care provides caregivers with a temporary rest from caregiving, while the person with Alzheimer's disease continues to receive care in a safe environment.

Become an educated caregiver. As the disease progresses, new caregiving skills may be necessary. The Alzheimer's Association offers programs to help you better understand and cope with the behaviors and personality changes that often accompany Alzheimer's.

Take care of yourself. Visit your doctor regularly. Try to eat well, exercise and get plenty of rest. Making sure that you are healthy can help you be a better caregiver.

Maintain your sense of humor. Keeping your sense of humor doesn't mean that you're making light of the situation or poking fun at it. Humor can be a valuable coping strategy.

Make legal and financial plans. Putting legal and financial plans in place after an Alzheimer's diagnosis is important so that the person with the disease can participate. Having future plans in place can provide comfort to the entire family.

Call us anytime at our 24/7 helpline, **1-800-272-3900**
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Senior Director of Scientific Engagement

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FREE EDUCATION PROGRAMS AND CAREGIVER SUPPORT GROUPS

**JUNE
2024**



CAREGIVER SUPPORT GROUPS

IN PERSON:

Caregiver Group DEL CERRO
3rd Wednesday of each month
12:30pm-2:00pm

Caregiver Group DEL MAR
2nd Thursday of each month
11:30am-1:00pm

Caregiver Group ENCINITAS
1st Wednesday of each month
10:30am-12:00pm

Caregiver Group EL CENTRO
1st Wednesday of each month
10:00am - 11:30am

Caregiver Group MISSION VALLEY
3rd Thursday of each month
11:30am-1:00pm

Caregiver Group LA MESA
1st Tuesday of each month
11:00am - 12:30pm

SPANISH (ESPAÑOL):

Grupo para Cuidadores- South Bay
Segundo jueves de cada mes
10:30-11:30 AM

VIRTUAL:

Caregiver Group for Adult Children
1st and 3rd Wednesday of each month
Zoom & Phone
6:00-7:30PM

To register for a support group, please click here or call (800) 272-3900
Para registrarse haga clic aquí o llame al (800) 272-3900

EDUCATION PROGRAMS FOR THE MONTH OF JUNE*

*Programs as of May. Please check website for updated calendar.



IN PERSON:

Tuesday, June 11 | **The 10 Warning Signs of Alzheimer's** @ Mission Valley YMCA | 11AM-12PM

Wednesday, June 12 | **The 10 Warning Signs of Alzheimer's** @ El Cajon Silvercrest Senior Apartments | 10-11AM

Tuesday, June 25 | **Understanding Alzheimer's and Dementia** @ Mission Valley YMCA | 11AM-12PM

VIRTUAL:

Tuesday, June 4 | **Building a Foundation of Caregiving** | 6-7PM

Thursday, June 6 | **Supporting Independence** | 6-7PM

Tuesday, June 11 | **Exploring Care & Support** | 6-7PM

Thursday, June 13 | **Communicating Effectively** | 6-7PM

Tuesday, June 18 | **Responding to Dementia-Related Behaviors** | 6-7PM

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