learned a lot about memory and why. Over the past few years, scientists have found, though, that given the right treatment, some memory problems can be improved in areas of mental function or prevent or delay symptoms of Alzheimer’s. Studies suggest that moderate alcohol use has health benefits, heavy or binge drinking can help:

- Engage in physical activity and exercise.
- Develop interests or hobbies and stay involved in activities that can help keep the mind and body healthy and active.
- Limit alcohol use. Although some social experts say that moderate alcohol use can help to maintain brain function, although more research is needed to say for sure whether exercise can help to maintain brain function or prevent or delay symptoms of Alzheimer’s.
- Keep up to date with your personal health and medical history.
- Keep up with your doctor visits. A complete medical exam for the person’s problem-solving and language abilities. A computed tomography (CT) scan can help rule out other causes of the memory problems.

More Serious Memory Problems

For some older people, memory problems are a sign of a serious problem, such as mild cognitive impairment or dementia. People who are worried about memory problems should see a doctor. The doctor might conduct or order a thorough physical and mental health evaluation to reach a diagnosis. Often, these evaluations are included in a diagnosis of Alzheimer’s disease, a specialist in problems related to the brain and central nervous system.

Harold is now undergoing a medical exam for memory loss to review the person’s medical history, including the use of prescription and over-the-counter medicines, diet, past medical problems, and general health. A correct diagnosis depends on accurate details, so in addition to talking with the patient, the doctor might ask a family member, caregiver, or close friend for information.

Blood and urine tests can help the doctor find the cause of the memory problems or dementia. The doctor also might do tests for memory loss and test the person’s problems and language abilities. A cheap frontal optical (CT) brain scan can help rule out other causes of the memory problems.

Anamnetic Mild Cognitive Impairment (MCI)

Some people with memory problems have a condition called anamnetic mild cognitive impairment, or anamnetic MCI. People with this condition have more memory problems than normal for people their age, but their symptoms are not as severe as those of Alzheimer’s disease, and they are able to carry out their normal daily activities. Some memory problems are non-dementia or non-Alzheimer’s things often, forgetting to go to important events and appointments, and having trouble coming up with desired words. Family and friends may notice memory lapses, and the person with MCI may worry about losing his or her memory. These worries may prompt the person to see a doctor for a diagnosis.

Researchers have found that more people with MCI than those without it go on to develop Alzheimer’s within a certain timeframe. However, not every- one who has MCI develops AD. Studies are underway to learn why some people with MCI progress to AD and others do not.

There currently is no standard treatment for MCI. Typically, the doctor will help the person to manage the condition. A computerized tomography (CT) scan can help rule out other causes of the memory problems.

Dementia

Dementia is a loss of thinking, memory, and reasoning skills to such an extent that it seriously affects a person’s ability to carry out daily activities. Dementia is not a disease itself but a group of symptoms caused by:

- A complete medical exam for the person’s problem-solving and language abilities.
- A computerized tomography (CT) scan can help rule out other causes of the memory problems.
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Learned a lot about memory and why.

Over the past few years, scientists have found, though, that given a variety of techniques that may help them stay healthy and maintain their memory and mental skills. Here are some tips that can help:

- Plan tasks, make "to do" lists, and use memory aids like notes and calendars. Some people find they remember things better if they mentally connect them to other meaningful things, such as a familiar name, song, book, or TV show. Some others find they remember things better if they mentally connect them to other meaningful things, such as a familiar name, song, book, or TV show.

- Develop interests or hobbies and stay involved in activities that can help keep the mind and body engaged. Engage in physical activity and exercise. Several studies have associated exercise (such as walking) with better brain function, although more research is needed to say for sure whether exercise can help to maintain brain function or prevent or delay symptoms of Alzheimer’s.

- Limit alcohol use. Although some studies suggest that moderate alcohol use (as defined by health benefits) is associated with age-related memory loss and permanent brain damage. For example, medication side effects, vitamin B deficiencies, chronic alcoholism, tumors or infections in the brain, or blood clots in the brain can cause memory loss or possibly dementia. Some thyroid, kidney, or liver disorders also can lead to memory loss by the body. A neurologist, a specialist in problems related to the brain and central nervous system.

- Some medications for memory loss should review the person’s medical history, including the use of prescription and over-the-counter medicines, diet, past medical problems, and general health. A correct diagnosis depends on accurate details, so in addition to talking with the patient, the doctor might ask a family member, caregiver, or close friend for information. Blood and urine tests can help the doctor find the cause of the memory problems or dementia. The doctor also might do tests for memory loss and test the person’s problems and language function. A computerized axial tomography (CT) brain scan can help rule out some causes of the memory problems.

- Anamnestic Mild Cognitive Impairment (MCI). Some people with memory problems have a condition called anamnestic mild cognitive impairment, or MCI. People with this condition have more memory problems than normal for people their age, but their symptoms are not as severe as those of Alzheimer’s disease, and they are able to carry out their normal daily activities. Some people who have MCI develop things often, forgetting to go to important events and appointments, and having trouble coming up with desired words. Family and friends may notice memory lapses, and the person with MCI may worry about losing his or her memory. These worries may prompt the person to see a doctor for a diagnosis. Researchers have found that more people with MCI than those without it go on to develop Alzheimer’s within a certain timeframe. However, not every- one who has MCI develops AD. Studies are underway to learn why some people with MCI progress to AD and others do not.

- Dementia. Dementia is the loss of things, such as memory, learning, or thinking skills to such an extent that it seriously affects a person’s ability to carry out daily activities. Dementia is not a disease itself but a group of symptoms caused by the brain’s age-related changes and the number of years of Alzheimer’s.
Forgetting can be a normal part of aging. As people get older, changes occur in all parts of the body, including the brain. As a result, some people may notice that it takes longer to learn new things, they don’t remember information as well as they used to, or they often misplace things like their glasses. These usually are signs of mild forgetfulness, not serious memory problems.

Some older adults also find that they don’t do as well as younger people on complex memory or learning tests. Scientists have found, though, that given enough time, healthy adults can do as well as younger people do on these tests. In fact, as they age, healthy adults usually improve in areas of mental ability such as vocabulary.

Other Causes of Memory Loss

Some memory problems are related to health issues that may be treatable. For example, medication side effects, vitamin B12 deficiency, chronic alcoholism, tumors or infections in the brain, or blood clots in the brain can cause

memory loss or possibly dementia. Some thyroid, kidney, or liver disorders also can lead to memory loss. People who experience such memory problems should treat serious medical conditions like these as soon as possible.

Emotional problems, such as stress, anxiety, or depression, can make a person more forgetful and can be mistaken for dementia. For instance, someone who has recently retired or who is coping with the death of a spouse, relative, or friend may feel sad, lonely, worried, or bored. Trying to deal with these life changes leaves some people confused or forgetful.

The confusion and forgetfulness caused by emotions usually are temporary and go away when the feelings fade. Emotional problems can be eased by supportive families and friends, but if these feelings last for long time, it is important to get help from a therapist, counselor, or doctor. Treatment may include counseling, medication, or both.

More Serious Memory Problems

For some older people, memory problems are a sign of a serious problem, such as mild cognitive impairment or dementia. People who are worried about memory problems should see a doctor. The doctor might conduct or order a thorough physical and mental health examination to review the patient’s medical history, including the use of prescription and over-the-counter medications, diet, past medical problems, and general health. A correct diagnosis depends on accurate details, so in addition to talking with the patient, the doctor might ask a family member, caregiver, or close friend for information.

Some medical exams for memory loss should review the person’s medical history, including the use of prescription and over-the-counter medications, diet, past medical problems, and general health. A correct diagnosis depends on accurate details, so in addition to talking with the patient, the doctor might ask a family member, caregiver, or close friend for information.

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Dementia in a series of strokes or changes in the brain’s blood supply that leads to the death of brain cells. Symptoms of vascular dementia can vary but usually begin suddenly, depending on where in the brain the strokes occurred and how severe they were. The person’s memory, language, reasoning, and coordination may be affected. Mood and personality changes are common as well. It’s not possible to reverse damage already caused by a stroke, so it’s very important to get medical care right away if you or a family member recognizes family and friends, and the ability to perform daily activities like driving a car or handling money. Eventually, problems with thinking, judgment, and speaking skills, and may lessen certain behavioral problems for a few months to a few years in some people. However, they don’t stop AD from progressing. Studies are underway to test medications to slow cognitive decline and to prevent the development of AD.

People with vascular dementia should take steps to prevent further strokes, which worsen vascular dementia symptoms. Some people have both Alzheimer’s and vascular dementia.

Treatment for Dementia

A person with dementia should be under a doctor’s care. The doctor might be a neurologist, family doctor, internist, geriatrician, or psychiatrist. He or she can treat the patient’s physical and behavioral problems (such as aggression, agitation, or wandering) and answer many questions that the person or family may have.

People with dementia caused by Alzheimer’s disease may be treated with medications. Four medications are approved by the U.S. Food and Drug Administration to treat AD. Donepezil (Aricept®), rivastigmine (Exelon®), galantamine (Reminyl®) are used to treat mild to moderate AD. (donepezil has been approved to treat severe AD as well). Memantine (Namenda®) is used to treat moderate to severe AD. These drugs may help maintain thinking, memory, and speaking skills, and may lessen certain behavioral problems for a few months to a few years in some people. However, they don’t stop AD from progressing. Studies are underway to test medications to slow cognitive decline and to prevent the development of AD.

People with vascular dementia should take steps to prevent further strokes. These steps include controlling high blood pressure, monitoring and treating high blood cholesterol and diabetes, and not smoking. People are urged to develop medicines to reduce the severity of memory and thinking problems that come with vascular dementia. Other studies are looking at the effects of drugs to relieve certain symptoms of this type of dementia. Family members and friends may help people in the early stages of dementia to continue their daily routines, physical activities, and social contacts. People with dementia should be kept up-to-date about the details of their lives, such as the time of day, where they live, and what is happening at home or in the world. Some aids may help. Some families find that a big calendar, a list of daily plans, notes about simple safety measures, and written directions describing how to use common household items are useful aids.

What You Can Do

If you’re concerned that you or someone you know has a serious memory problem, talk with your doctor. He or she may be able to diagnose the problem or refer you to a specialist in neurology or geriatric psychiatry. Health care professionals who specialize in Alzheimer’s can recommend ways to manage the problem or suggest treatment services or other tools that might help. More information is available from the organizations listed below.

People with AD, MCI, or a family history of AD, and healthy people with no memory problems and no family history of AD may be able to take part in clinical trials. Participating in clinical trials is an effective way to help the fight against Alzheimer’s. To find out more about clinical trials, call the Alzheimer’s Disease Education and Refererral (AHEAD) Center toll-free at 800-438-4380 or visit the AHEAD Center website at www.nia.nih.gov/Alzheimers. More information is available at www.ClinicalTrials.gov.

For More Information

Here are some helpful Federal and non-Federal resources:

Alzheimer’s Disease Education and Refererral (AHEAD) Center P.O. Box 8057 Silver Spring, MD 20907-8250 800-438-4380 (toll-free) www.nia.nih.gov/Alzheimers

A service of the National Institute on Aging, NIA, the ADEAR Center offers information and publications in English and Spanish for families and caregivers on diagnosis, treatment, patient care, caregiver needs, long-term care, and research related to AD.

Alzheimer’s Association 225 North Michigan Avenue, Floor 17 Chicago, IL 60601-7633 800-272-3300 (phone) 866-803-3073 (TDD/toll free) www.alz.org

Eldercare Locator 800-677-1116 (toll-free) www.eldercare.gov

For more information on health and aging, contact:

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In vascular dementia, a series of strokes or changes in the brain’s blood supply can lead to the death of brain cells. Symptoms of vascular dementia can vary but usually begin slowly, depending on where in the brain the strokes occurred and how severe they were. The person’s memory, language, reasoning, and coordination may be affected. Mood and personality changes are common as well. It’s not possible to reverse damage already caused by a stroke, so it’s very important to get medical care right away if you notice any signs of a stroke. It’s also important to take steps to prevent further strokes, which worsen vascular dementia symptoms. Some people have both Alzheimer’s and vascular dementia.

**Treatment for Dementia**

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People with vascular dementia should take steps to prevent further strokes. These steps include controlling high blood pressure, monitoring and treating high blood cholesterol and diabetes, not smoking, and taking steps to reduce memory loss and thinking problems that come with vascular dementia. Other studies are looking at the effects of drugs to relieve certain symptoms of this type of dementia. Family members should talk with their doctor to determine if they are needed and whether they are effective.

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**National Institute on Aging**

National Institutes of Health
U.S. Department of Health and Human Services

**National Library of Medicine**

MedlinePlus
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For more information on health and aging:

Visit NIHSeniorHealth (www.nihseniorhealth.gov), a senior-friendly website from the National Institute on Aging and the National Library of Medicine. This website has health information for older adults. Special features make it simple to use. For example, you can click on a button to have the text read out loud or to make the type larger.
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800-438-4380 (toll-free)

www.nia.nih.gov/Alzheimers

866-403-3073 (TDD/toll-free)

571-308-4070

**Eldercare Locator**

800-677-3334 (toll-free) in English; 800-883-3777 (toll-free) in Spanish

www.eldercare.gov

**National Library of Medicine MedlinePlus**

For more information on health and aging contact:

**National Institute on Aging Information Center**

P.O. Box 8057
Gaithersburg, MD 20899-8057
800-868-7860 (toll-free)

800-222-2225 (TTY/toll-free)

www.nia.nih.gov

www.nia.nih.gov/Esparol

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**National Institute on Aging**

National Institutes of Health
U.S. Department of Health and Human Services

**National Library of Medicine**

www.nlm.nih.gov

October 2008

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