

# A Meaningful Life with Alzheimer's Disease

NOV. 19, 2024

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Michigan Chapter



**INSTITUTE OF GERONTOLOGY**

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# A Meaningful Life with Alzheimer's Disease

Tuesday, Nov. 19, 7:45 am – 12:05 pm

*This conference is presented in partnership with the Mental Health and Aging Project, and the Geriatric Workforce Enhancement Program (GWEP) Grant. We thank them for their support.*

## AGENDA

7:45-8:30 am | Registration Full,  
hot breakfast & visit vendors

8:30 am | Welcome

8:35 - 9:50 am | Keynote

### ***Cognition in Focus: Where We Stand in Alzheimer's Research & Practical Strategies for Supporting Brain Health*** by Ana Daugherty, PhD

*Dementia is a global health concern affecting 55 million older adults. What new milestones have been achieved in dementia diagnosis and treatment over the last five years? We will review the hallmarks of typical aging and how they differ from dementia plus offer practical advice about lifestyle and health factors that can build cognitive resiliency.*

9:50 - 10:15 am | Coffee & Beverage Break

10:15 - 11:30 am

### ***The Crossroad of Communication & Behaviors: New Approaches***

by Joanna LaFleur, TRS, BS  
CEO/Founder Memory Lane Foundation

11:30 am - Noon

### ***And the Caregiving Journey Continues . . .***

By Jim Mangi, PhD  
Caregiver and Alzheimer's Educator

Noon - 12:05 pm | Closing



**Ana Daugherty  
PhD**

Dr. Daugherty is the director of the Healthy Brain Aging Laboratory at the Institute of Gerontology where she studies health factors and behaviors that shape brain changes in structure and function. The *Detroit Aging Brain Study*, a 23-year research project in metro Detroit explores brain aging and protective factors across the lifespan.



**Joanna LaFleur  
TRS, BS**

Ms. LaFleur is founder and CEO of the Memory Lane Foundation created to raise awareness of dementia, educate the public, and provide advocacy, grief support, and resources for families and professionals. She also founded *Memory Lane Assisted Living* to offer high-quality, person-focused dementia care.



**Jim Mangi  
PhD**

Dr. Mangi is a retired environmental scientist caring for his wife diagnosed with Alzheimer's disease in 2008. He presents educational talks about his caregiving journey and how to navigate a dementia diagnosis through all its stages. He's been instrumental in establishing Saline, MI, as a dementia-friendly city.



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# A Meaningful Life with Alzheimer's Disease

NOV. 19, 2024

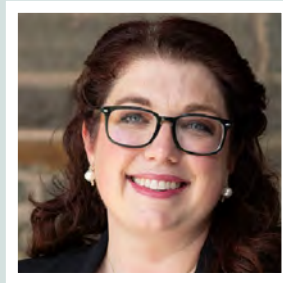
## **Cognition in Focus:**

### ***Where We Stand in Alzheimer's Research & Practical Strategies for Supporting Brain Health***

by Ana Daugherty, PhD

#### Objectives:

1. Review the current trends in Alzheimer's disease clinical research
2. Describe research advances in early detection of risk for cognitive decline and dementia
3. Summarize evidence for everyday activities that build resiliency against dementia risk



**ANA DAUGHERTY, PHD**

Dr. Daugherty is the director of the *Healthy Brain Aging Laboratory* at the WSU, Institute of Gerontology where she studies health factors and behaviors that shape brain changes in structure and function. She directs the *Detroit Aging Brain Study*, a 23-year research project in Metro Detroit to study brain aging and identify protective factors across the lifespan. She is an associate professor in Wayne State's department of psychology.

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## COGNITION IN FOCUS:

WHERE WE STAND IN ALZHEIMER'S RESEARCH &  
PRACTICAL STRATEGIES SUPPORTING BRAIN HEALTH

**ANA M. DAUGHERTY, PH.D.**

INSTITUTE OF GERONTOLOGY & DEPARTMENT OF PSYCHOLOGY  
WAYNE STATE UNIVERSITY

WAYNE STATE  
UNIVERSITY  
Institute of Gerontology



1

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DISCLOSURE: NO CONFLICTS OF INTEREST.

DR. DAUGHERTY'S RESEARCH IS FUNDED BY THE NATIONAL  
INSTITUTES OF HEALTH, AMERICAN FEDERATION FOR AGING  
RESEARCH, MICHIGAN ALZHEIMER'S DISEASE RESEARCH CENTER,  
SWISS NATIONAL SCIENCE FOUNDATION, TEVA PHARMACEUTICAL  
INDUSTRIES LTD, AND THE NATIONAL MULTIPLE SCLEROSIS  
SOCIETY.

2

2



hello My name is  
Ana Daugherty



Institute of Gerontology & Department of Psychology  
Wayne State University

Over 15 years studying brain and cognitive aging

Director, Detroit Aging Brain Study  
Website: [agingbrain.wayne.edu](http://agingbrain.wayne.edu)

# DETROIT AGING BRAIN STUDY



We thank the members of the Community Advisory Board of the Detroit Aging Brain Study for their support and insights:  
Ms. Adelia Cooley, Mr. Gary Micu, Dr. Sandra Richardson-Smith, Mr. Emanuel Sharpe Jr., Mrs. Janice Stewart.



## LEARNING OBJECTIVES

1. Review the current trends in Alzheimer's disease clinical research
2. Describe research advances in early detection of risk for cognitive decline and dementia
3. Summarize evidence for everyday activities that build resiliency against dementia risk

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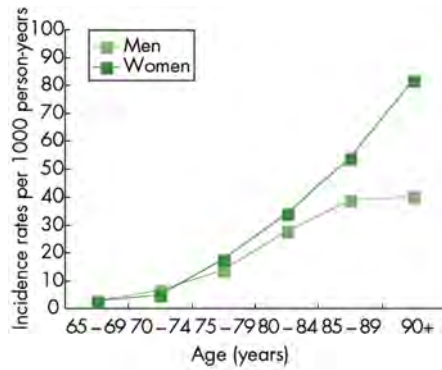
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## CURRENT TRENDS IN ALZHEIMER'S DISEASE RESEARCH

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## DIFFERENT TYPES OF DEMENTIA



van der Flier & Scheltens, 2005

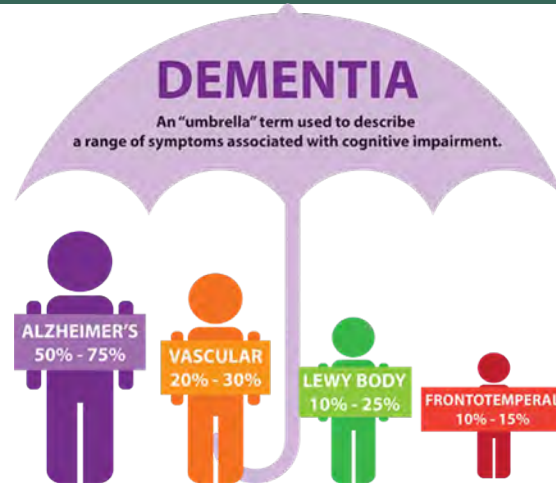
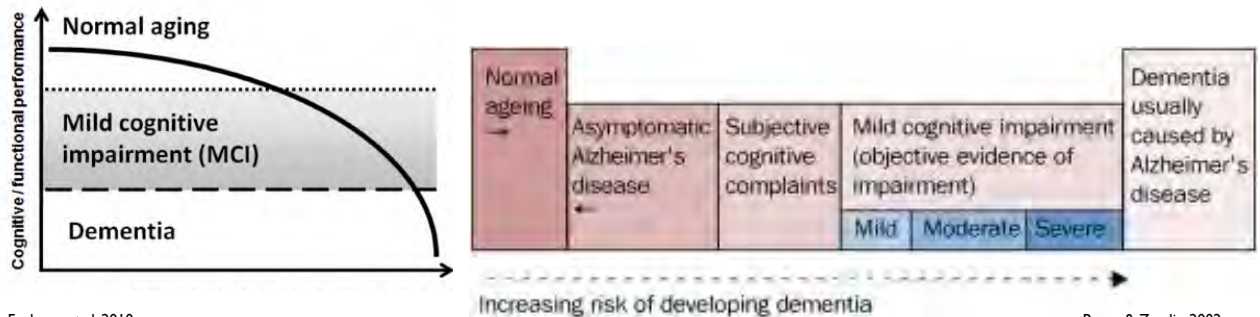


Image: <https://dfwsheridan.org/types-dementia>

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## PROGRESSION OF COGNITIVE DECLINE



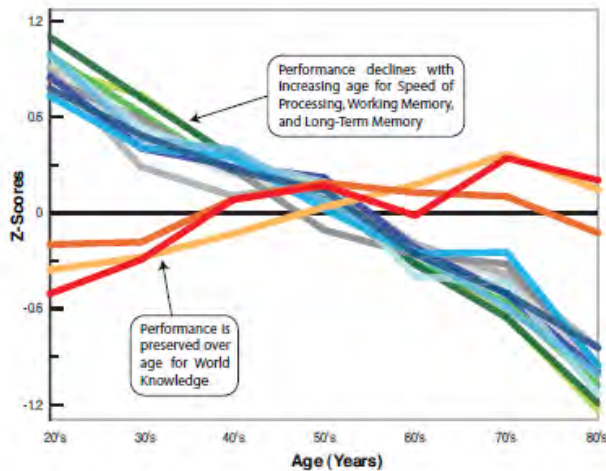
Forlenza et al. 2010

Burns & Zaudig, 2002

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## AGE-RELATED DECLINE IN COGNITION BEGINS EARLY



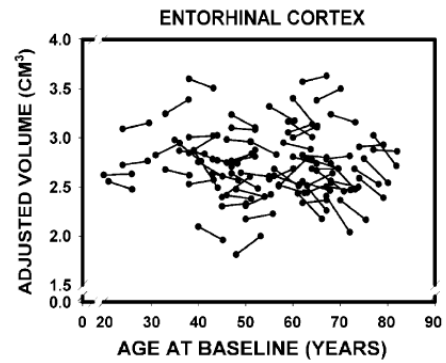
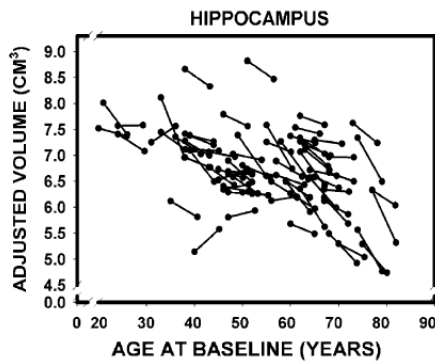
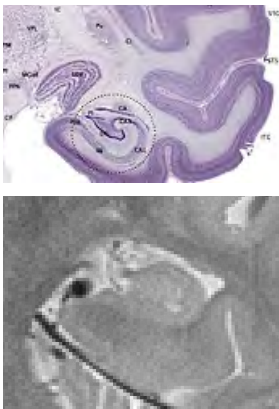
- Speed of Processing**
  - Digit Symbol
  - Letter Comparison
  - Pattern Comparison
- Working Memory**
  - Letter Rotation
  - Line Span
  - Computation Span
  - Reading Span
- Long-Term Memory**
  - Benton
  - Rey
  - Cued Recall
  - Free Recall
- World Knowledge**
  - Shipley Vocabulary
  - Antonym Vocabulary
  - Synonym Vocabulary



Figure from Park & Reuter-Lorenz, 2009

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## PEOPLE AGE DIFFERENTLY: BRAIN AND COGNITION



Variability in aging is 25% genetic; 75% is determined by lifestyle & environment

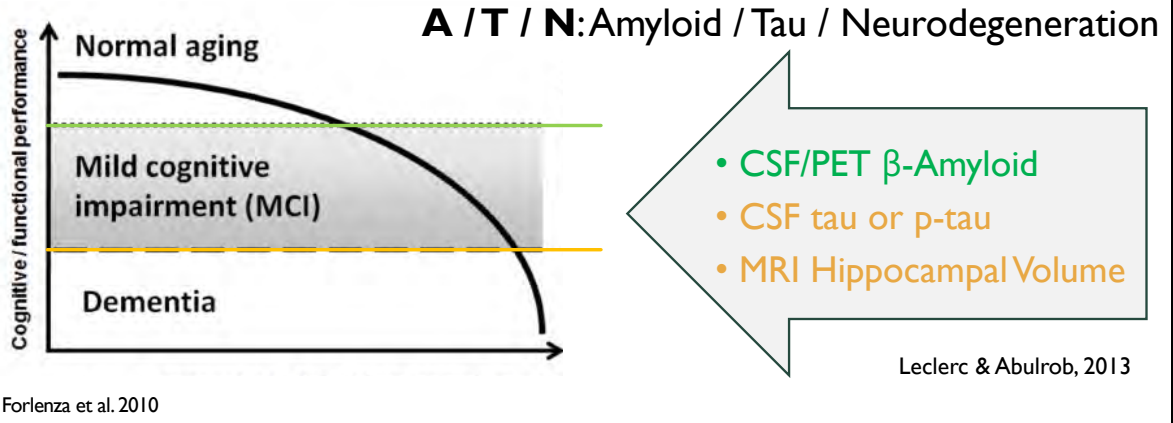
(Passarino et al., 2016)

Figures adapted from Raz et al., 2005

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## CURRENT TARGETS



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### Box 1 TYPES OF BIOMARKERS

A *biomarker* is a measurable characteristic that indicates the progression of normal biological process, pathogenic process, or responses to exposures and intervention.<sup>1</sup>

#### 1. SUSCEPTIBILITY OR RISK

Indicates potential for developing a new disease or medical condition

#### 2. DIAGNOSTIC

Used to detect or confirm the presence of disease or condition, or to identify subtype of disease

#### 3. MONITORING

Assess the status of a disease, condition, or environmental exposure with repeated measurement

#### 7. RESPONSE

Indicates a process has occurred, either marking the pharmacodynamics of a treatment or environmental exposure, or as a surrogate endpoint of a clinical trial

#### 4. PROGNOSTIC

Determines likelihood of a clinical event, disease recurrence or progression in those who have the disease or condition

#### 5. PREDICTIVE

Identify persons more likely to experience a favorable or unfavorable effect from treatment or environmental exposure

#### 6. SAFETY

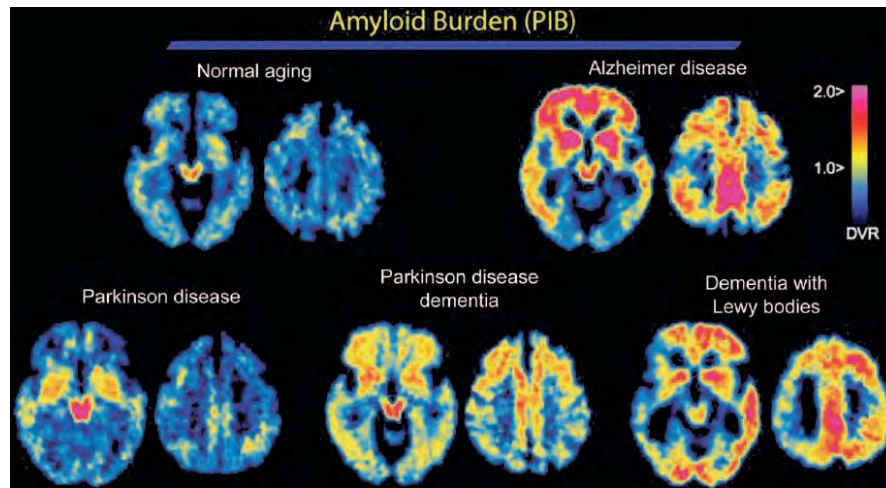
Measure before or after a treatment or environmental exposure to indicate the likelihood and extent of an adverse effect

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Daugherty & Lee, 2025 *Encyclopedia of the Human Brain 2<sup>nd</sup> ed.*

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# BETA-AMYLOID DEPOSITION

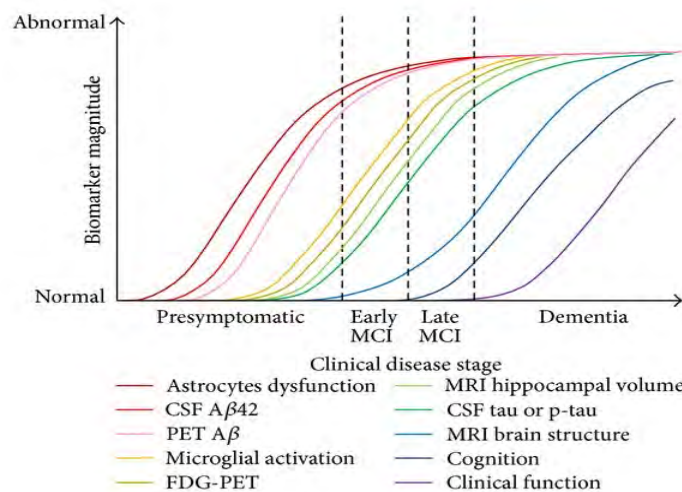


Gomperts et al., 2008

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# BIOMARKER SENSITIVITY ACROSS STAGES

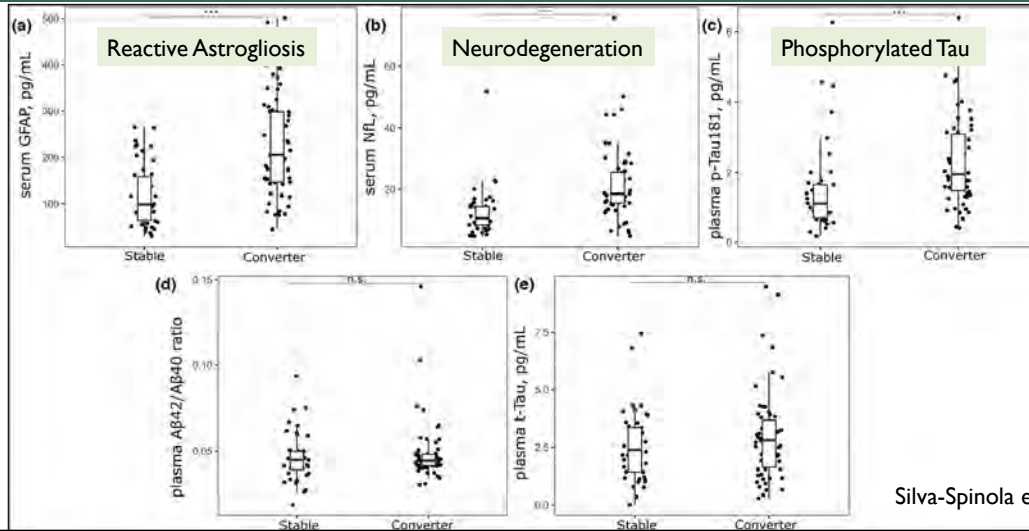


Jack et al., 2013;  
Figure: Leclerc & Abulrob, 2013

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## PROMISING DEVELOPMENT: BLOOD-BASED BIOMARKERS



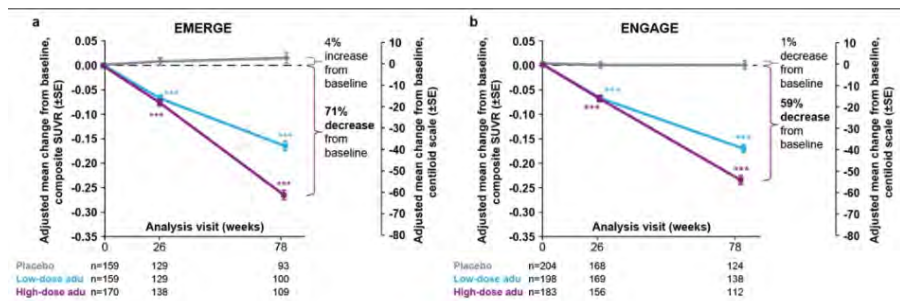
15  
Silva-Spinola et al., 2023

15

## ANTI-AMYLOID THERAPIES

- Monoclonal antibodies (MABs): Lecanemab (acc. approved), Aducanumab (acc. approved), Donanemab (Phase 2)
- Diminished clinical progression (amyloid plaque)
- Significant side effects (ARIA, microbleeds)
- Significant barriers to access

### Aducanumab: 2 Randomized Phase 3 Trials in Early Alzheimer's Disease



Budd Haerberlein et al., 2022

Cummings, 2023

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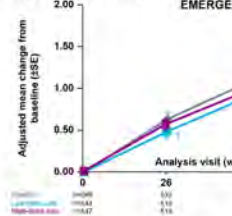
## ANTI-AMYLOID THERAPIES: COGNITIVE BENEFIT?

- Inconsistent evidence for cognitive benefit
- Some trials show ~30% reduced rate of cognitive decline vs. placebo

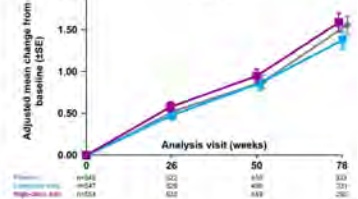
Cummings, 2023

Budd Haeberlein et al., 2022

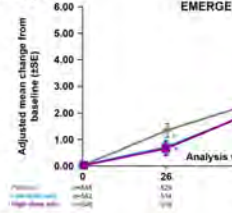
a CDR-SB (primary endpoint)



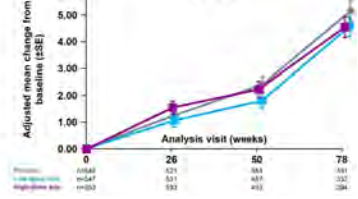
ENGAGE



c ADAS-Cog 13



ENGAGE



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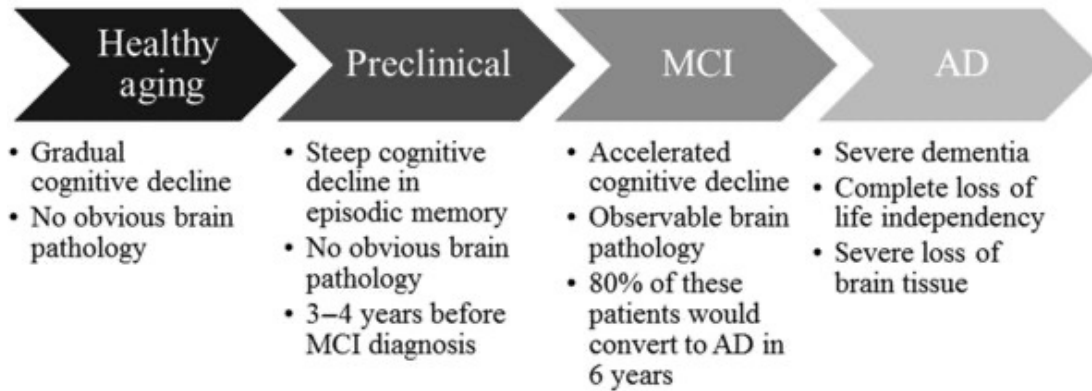
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## ADVANCES IN EARLY DETECTION METHODS OF COGNITIVE DECLINE AND DEMENTIA RISK

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## CONVERSION ACROSS DEMENTIA STAGES

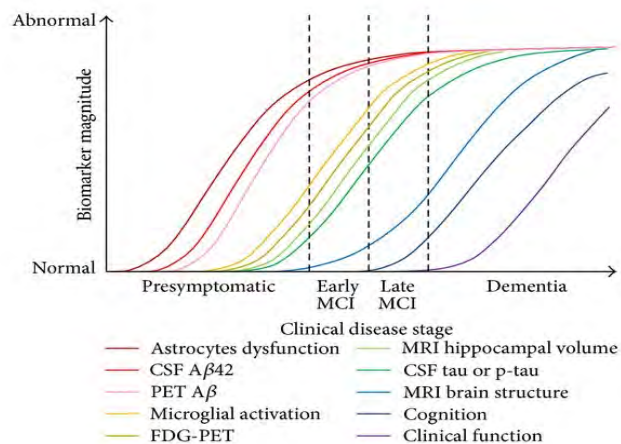


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Figure from Basak & Qin, 2018

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## BIOMARKER SENSITIVITY ACROSS STAGES



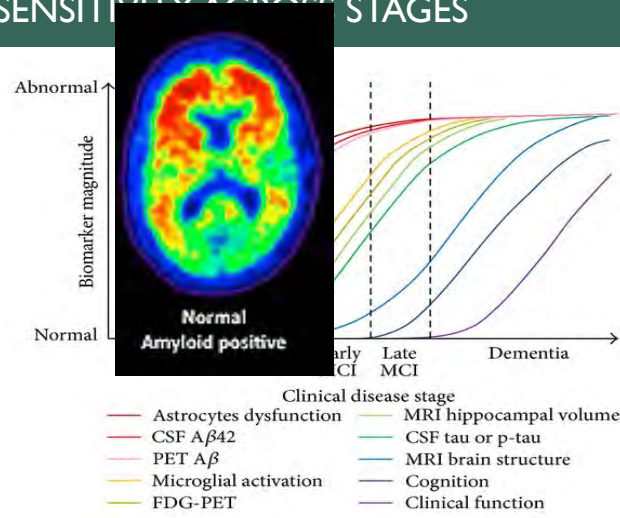
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Jack et al., 2013; Figure: Leclerc & Abulrob, 2013

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## BIOMARKER SENSITIVITY ACROSS STAGES

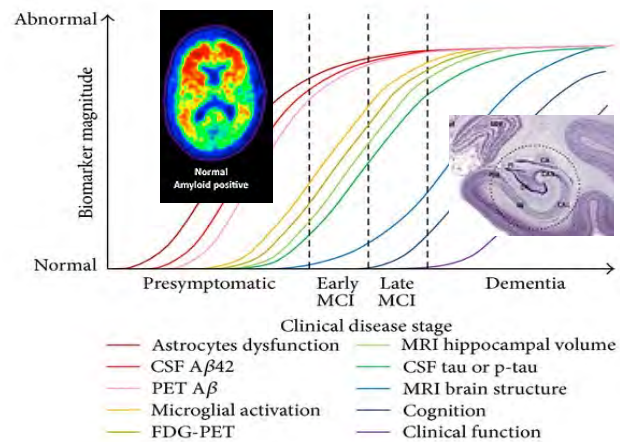


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Jack et al., 2013; Figure: Leclerc & Abulrob, 2013

21

## BIOMARKER SENSITIVITY ACROSS STAGES



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Jack et al., 2013; Figure: Leclerc & Abulrob, 2013

22

## SEEKING NEW BIOMARKERS TO DETECT MCI

### Behavioral Indicators

- Subjective cognitive decline (van Harten et al., 2018)
- Mobility impairment (Yu et al., 2019)
- Poor spatial navigation (Tangen et al., 2022)

### Cognitive Task Related Biomarkers

- Functional brain activation (fMRI, EEG) (Kavcic, Daugherty, Giordani, 2021)
- Eye tracking during challenging memory tasks (Wolf et al., 2023)

### MRI Biomarkers for Vulnerability or Staging

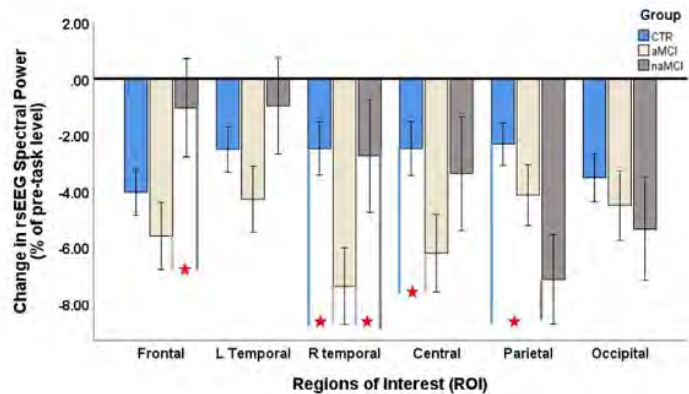
- Brain iron accumulation (Daugherty & Lee, 2024)
- Hippocampal Subfields (Wisse, Daugherty et al., 2017)



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## SLOWER RETURN OF BRAIN ACTIVITY TO REST AFTER TASK IDENTIFIES MCI



Kavcic, Daugherty, Giordani, 2020

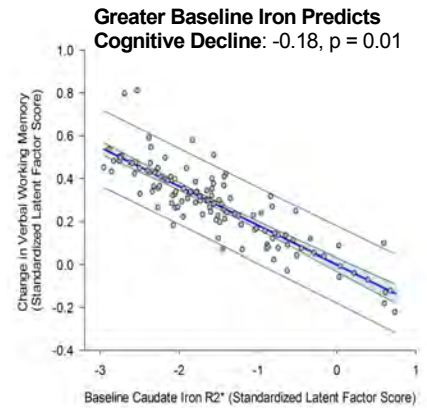
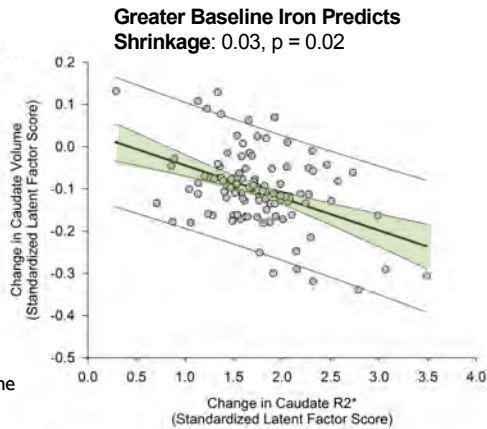
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## GREATER IRON CONTENT PREDICTS FASTER BRAIN AND COGNITIVE DECLINES IN AGING



N=125, age 18-77 years at baseline



Daugherty et al. 2015 J Neuro

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## STRATEGIES TO BUILD RESILIENCY AGAINST DEMENTIA RISK

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# PREVENTION VS. TREATMENT

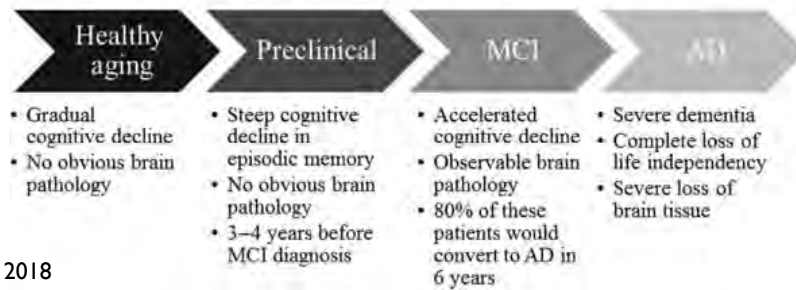


Figure from Basak & Qin, 2018

27

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# MODIFIABLE RISK

## Early Life

- Less Education

## Mid-Life

- Hearing Loss
- High LDL
- Depression
- TBI
- Physical Inactivity
- Diabetes
- Smoking
- Hypertension
- Obesity
- Excessive Alcohol Use

## Late Life

- Social isolation
- Air pollution exposure
- Visual loss

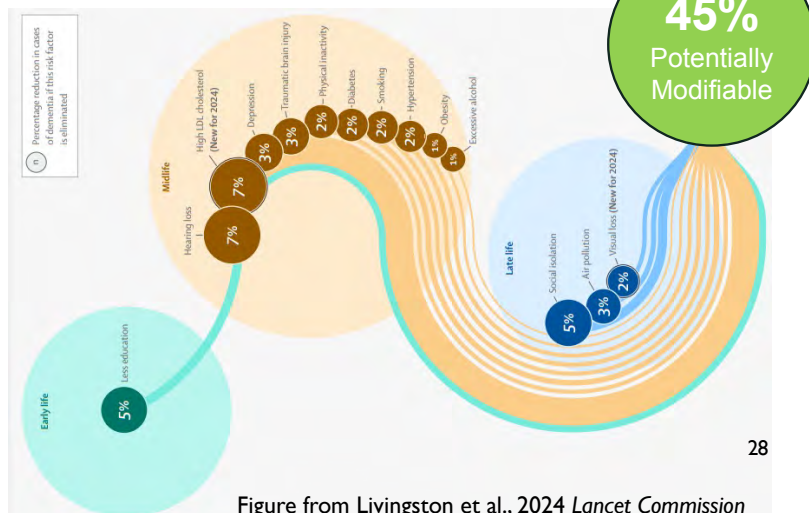


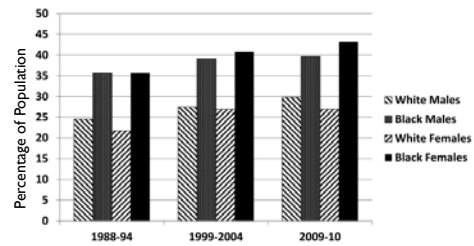
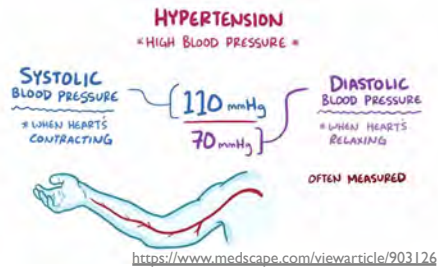
Figure from Livingston et al., 2024 *Lancet Commission*

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## RISK: HYPERTENSION

- Definition: BP 130 / 80
- Prevalence: 1 in 3 Adults
- 2 x Risk
  - Alzheimer's Disease and Related Dementia



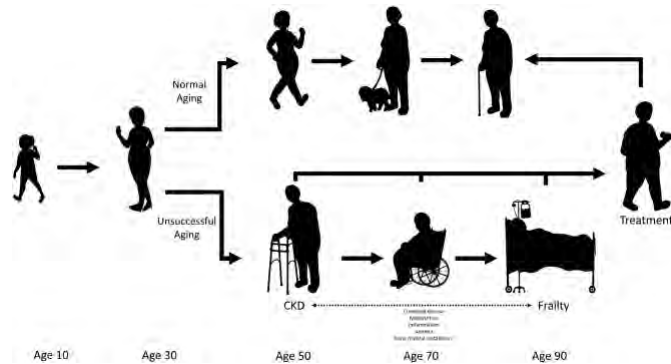
Lackland, 2014

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## RISK : FRAILITY

- Definition:
  - Weight Loss
  - Exhaustion
  - Low Activity
  - Slowness
  - Weakness
- Prevalence: 7-12% age 65+



Walker et al., 2014; Xue et al., 2011

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## AEROBIC EXERCISE, STRETCHING, STRENGTH TRAINING

### Moderate-intensity aerobic activity

Anything that gets your heart beating faster counts.

at least  
**150**  
minutes  
a week



AND

### Muscle-strengthening activity

Do activities that make your muscles work harder than usual.

at least  
**2**  
days  
a week



[https://www.cdc.gov/physicalactivity/basics/older\\_adults/index.htm](https://www.cdc.gov/physicalactivity/basics/older_adults/index.htm)



Image: <https://californiamobility.com/21-chair-exercises-for-seniors-visual-guide/>

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## SITTING LESS AND DAILY STEPS

- Reducing the amount of time we sit has big health benefits
- Increasing steps per day (walking, low impact) is one way to do this
  - Age < 60: 8,000 – 10,000 steps/day
  - Age > 60: 6,000 – 8,000 steps/day

### Moderate-intensity aerobic activity

Anything that gets your heart beating faster counts.

at least  
**150**  
minutes  
a week



7,000 – 9,000 steps/day → 150 min/week

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Lee et al., 2019

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## RISK REDUCTION + RESILIENCY

- Risk is a set of factors (typically health factors) that act together to worsen cognitive decline and increase likelihood for dementia
- Protection is often the absence of risk, or lifestyle factors that will reduce health risk
- Resiliency is a set of factors that allow tolerating more risk without showing decline; adapting and bouncing back from risk



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## RESILIENCY: COGNITIVE ENGAGEMENT

- Definition:
  - Requires Attention
  - Active
  - Stimulating
- Types:
  - Hobbies
  - Learning new skills, information
  - Reading
  - Active Listening



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Sala et al., 2019

34

## RESILIENCY: SOCIALIZATION

- Definition:
  - Other people
  - Interactive
  - Meaningful connection
- Types:
  - Family gatherings
  - Friends
  - Civic & Religious Organizations
  - One-on-One or Group Settings



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Ruthirakuhan et al., 2012

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## RESILIENCY: MINDFULNESS, MEDITATION

- Definition:
  - Internally reflective
  - Mental state of being conscious or aware
  - Thinking deeply or focused for a period of time
- Types:
  - Self-reflection
  - Guided or Oriented meditation
  - Prayer



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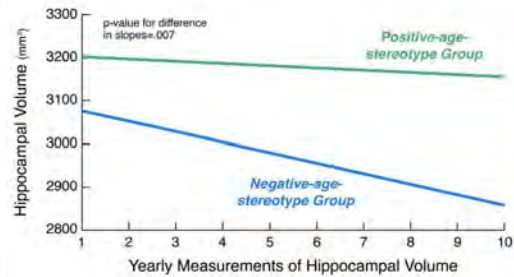
Marciniak et al., 2014

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## RESILIENCY: POSITIVE ATTITUDE TOWARDS AGING

- Definition:
  - Maintain a sense of purpose in life
  - Reject negative stereotypes



Levy et al., 2017

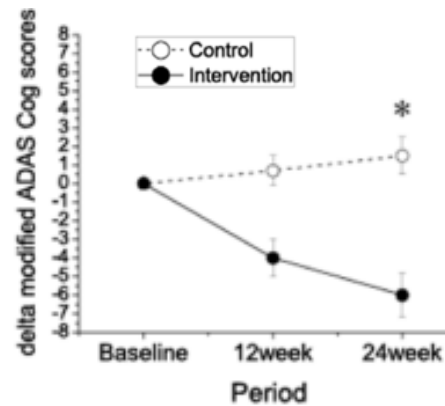
37

Nakamura et al., 2022

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## SWITCHING THINGS UP AND COMBINING

- No evidence for any single hobby/lifestyle behavior to have a greater effect than another
  - Exercise has a consistent benefit
- Switch things up when you get bored
- Some evidence for additive or synergistic effects by combining across categories



Sample = 49 MCI; Randomized to control or aerobic, cognitive dual-task (Park et al., 2019)

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## EVERYDAY RESILIENCY COMBOS

Activity	Exercise	Cognitive	Social	Mindfulness	Positivity
Cooking Class		★	★		😊
Dance Class	★	★	★		😊
Church Group		★	★	★	😊
Gardening	★			★	😊
Movie Watch Party		★	★		😊
Travel	★	★	★		😊
Journaling, Knitting, Crafting		★		★	😊
Shopping	★	★			😊

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## NEXT FRONTIERS IN ALZHEIMER'S RESEARCH

- Earlier detection of risk for late life dementia
  - Promises of blood-based biomarkers
  - Community-based implementation
  
- Mid-life is a period of vulnerability to risk, and opportunity for prevention
  - 75% of individual differences in aging outcomes are modifiable
  - Poor heart health is the most prevalent set of risk factors
  
- Resiliency is a realistic target that complements risk reduction
  - Everyday activities can make a difference in combination with wellness care

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## REFERENCES

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# A Meaningful Life with Alzheimer's Disease

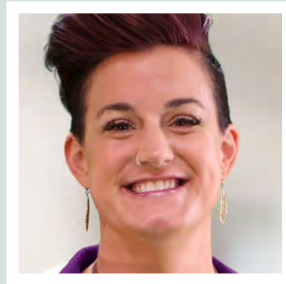
NOV. 19, 2024

## ***The Crossroad of Communication & Behaviors: New Approaches***

by Joanna LaFleur, TRS, BS

### Objectives:

1. Understand the underlying causes of dementia-related behaviors
2. Implement effective communication strategies
3. Identify the core elements of person-centered approaches in care



**JOANNA LEFLEUR, TRS, BS**

Ms. LaFleur is founder and chief executive officer of the Memory Lane Foundation created to raise awareness of dementia, educate the public, and provide advocacy, grief support, and resources for families and professionals. She previously founded and ran Memory Lane Assisted Living to offer high-quality, person-focused dementia care. She has trained and mentored hundreds of caregivers and staff on best practices in dementia care and support.

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# "The Cross Road of Dementia Communication and Behavioral Expressions: New Approaches"

BY: JOANNA LAFLEUR BS, TRS  
CEO/FOUNDER MEMORY LANE FOUNDATION

1

## Why am I so Passionate About Dementia Care?

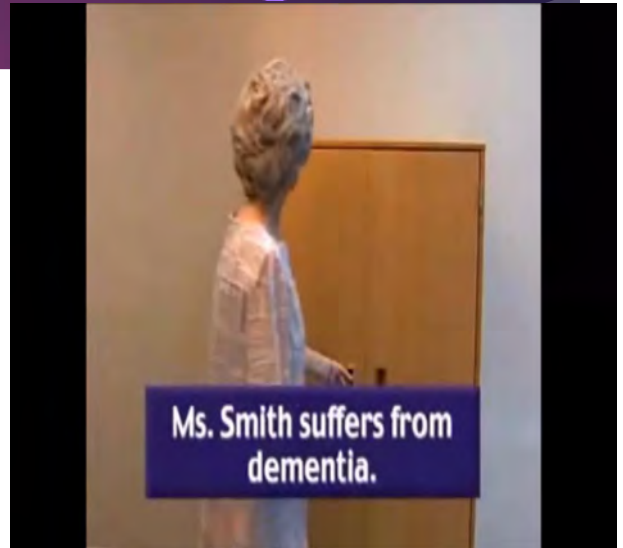


2



## Communication Needs for Alzheimer's type Dementia

- ▶ #1 Thing NOT to do in Dementia Care
- ▶ Tackling Aphasia
- ▶ Working with non-verbal persons with dementia
- ▶ Repetitive Questions/Phrases
- ▶ Location of you and the person with dementia
- ▶ Stay in the Long Term Memory



3

## Communication Needs for Vascular Dementia

- ▶ Cannot use "fibs"
- ▶ Talk them through it
- ▶ Use Positive Emotions
- ▶ Be Silly!
- ▶ Make it "their" idea
- ▶ Give autonomy



4

# Communication Needs for Dementia with Lewy Bodies and Parkinson's Dementia

## Understanding Hallucinations and Delusions:

- ▶ **What is a Delusion?**
- ▶ **What is a Hallucination?**
- ▶ **What causes delusions and hallucinations?**
  - ▶ Brain cell loss/brain damage caused by Dementia
  - ▶ Confusion
  - ▶ Medication reactions
  - ▶ Poor lighting
  - ▶ Overstimulation (i.e. watching something on TV and turning it into real life)
  - ▶ Sundowning
  - ▶ Infections (i.e. Urinary Tract Infection)



5

# Communication Needs for Dementia with Lewy Bodies and Parkinson's Dementia

## 3 Step Method for Handling Hallucinations and Delusions:

- ▶ 1.) Repeat back what they said but in a question form
- ▶ 2.) Ask probing questions
- ▶ 3.) Introduce a new outside stimuli (taste, sound, smell, visual, touch)

6

## Communication Needs for Frontotemporal Dementia

- ▶ Make them a part of the “team”
- ▶ Use those Closed Ended Questions
- ▶ Physical communication is often better
- ▶ The energy you give is the energy you’re going to get

“IF YOU WANT OTHERS TO BE HAPPY, PRACTICE COMPASSION. IF YOU WANT TO BE HAPPY, PRACTICE COMPASSION”  
- DALAI LAMA



7

## Successful Interventions for Alzheimer’s type Dementia

- ▶ First ask yourself: Is that a YOU problem or a them problem?
- ▶ Calming Anxiety
- ▶ Decreasing Depression
- ▶ “Wandering”



8

## Successful Interventions for Vascular Dementia

- ▶ Create a Relationship
- ▶ “Inappropriate” speaking
- ▶ “Agitation”
- ▶ Constant Up and Down



9

## Successful Interventions for Dementia with Lewy Bodies and Parkinson's Dementia

- ▶ **Empathize with how this situation has made them feel** – imagine if that actually did happen to you and how you would feel. “That must be so scary”
- ▶ **Come up with a solution to the “problem”** – Find a way to make them feel safe and at peace.
- ▶ **Don't argue, but it's okay to gently question them** by saying “are you sure that (event, etc.) was today? I thought that was this weekend” or “I don't think your son was in an accident today, I just talked to him earlier and he seemed okay, let's call him and check”.
- ▶ **After fixing the “problem” redirect them to something that they enjoy** “LOOK AT THIS” - offer them their favorite drink such as coffee or tea, talk about a show that's about to come on TV, tell them a funny or endearing story about your child or pet.
- ▶ **Encourage them to do a therapeutic/meaningful activity** – If they love music, put on their favorite station, or sing an old song like “Five Foot Two, Eyes of Blue”, If they love crafts – pull out a magazine and talk about doing a craft together – or paint/color a picture, if they love cooking, talk about making your favorite cookies and ask for their help, if they love reading – ask them what book they are reading, or tell them you are reading this great book and can't wait to share it with them. This is where it is very important to know your resident's preferences and use them as a redirection tool.

10

## Successful Interventions for Frontotemporal Dementia

- ▶ Don't get stuck in the "no" trap
- ▶ Respect Personal Preferences
- ▶ Working with Aggression
- ▶ Walking/Pacing
- ▶ Sexual "inappropriateness"



11

## Non Pharmacological Approaches for "behaviors": Music

### How Does Music Affect the Brain?

- ▶ The Prefrontal Cortex
- ▶ The Broca's and Wernicke's Area
- ▶ The Motor Cortex
- ▶ The Auditory Cortex
- ▶ The Visual Cortex
- ▶ The Right Cerebellum
- ▶ The Hypothalamus

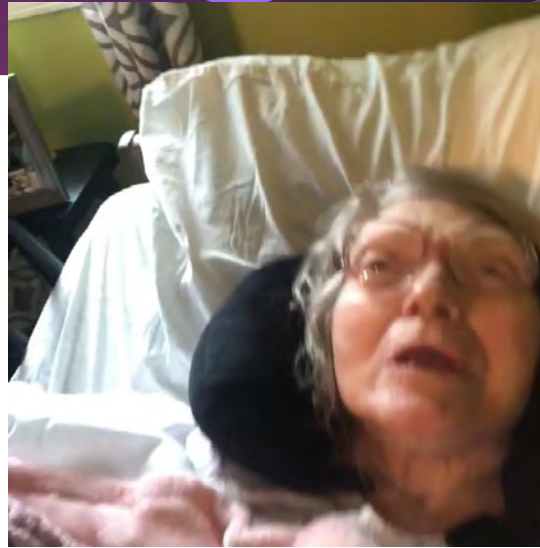


12

## Non Pharmacological Approaches for “behaviors”: Music

### Music Activities:

- ▶ Just start singing!
- ▶ Set them up next to a piano or instrument they used to play.
- ▶ Use technology. Use your smart phone or tablet to play music for your person with dementia.
- ▶ Use music with exercise.
- ▶ Use music as a stress reliever or to promote relaxation.
- ▶ Use music in personal care



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## Non Pharmacological Approaches for “behaviors”: Medical Marijuana

### Case Studies

- ▶ 1.) Lewy Body Dementia on going delusions and sleep disturbances – Sativa 10mg 3x day reduced those 50%
- ▶ 2.) Frontotemporal Dementia very aggressive especially with personal care – Indica 10mg 30 min before showers
- ▶ 3.) Alzheimer’s Dementia restless, up and down all day, and some aggressiveness – hybrid 10mg 3x day
- ▶ 4.) Alzheimer’s Dementia – Not sleeping at night – Hybrid 10mg THC/CBN 1 hour before bedtime
- ▶ 5.) Frontotemporal Dementia – Anxiety/Teeth Grinding – Indica Tincture (1 syringe – 3x daily)

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# Non Pharmacological Approaches for “behaviors”: Medical Marijuana

## Benefits of Marijuana:

### ▶ Sativa Strain:

- ▶ Reduces Hallucinations and Delusions, rigidity, tremors (Alzheimer’s, Parkinson’s, & Lewy Body Dementia)
- ▶ Reduces Depression

### ▶ Hybrid Strain

- ▶ Reduces Restlessness, Calling out, and Anxiety (Alzheimer’s & Vascular Dementia)

### ▶ Indica Strain:

- ▶ Reduces pain and aggression, improves sleep & appetite (Frontotemporal Dementia & Alzheimer’s)

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# Non Pharmacological Approaches for “behaviors”: Medical Marijuana

## Studies Done:

- ▶ <https://www.frontiersin.org/articles/10.3389/fnagi.2022.957665/full>

- ▶ 19 patients (81.4 years—17 women and two men) receiving an average of 12.4 mg THC/24.8 mg CBD per day for up to 13 months, with no reported problems related to the treatment and limited adverse drug reactions. Clinical scores showed a marked improvement that was stable over time, deprescription of other medications, and care facilitated.

- ▶ <https://www.psychiatrist.com/jcp/dispensary-obtained-tetrahydrocannabinol-treatment-neuropsychiatric-symptoms-dementia/>

- ▶ The majority of patients (30/38, 79%) who took THC had an improvement in NPS according to their caregivers. THC was recommended most often for the NPS of agitation, aggression, irritability, lability, anxiety, and insomnia. Among the 20 patients who were taking antipsychotics at baseline and took THC, over half (12/20, 60%) were able to decrease or discontinue the antipsychotic.

16

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17

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When seeking support, The Avalon's assisted living and memory care communities are here for you and your family. Discover maintenance-free living; a variety of enriching social activities; easy friendships; and healthy, chef-created meals, all of which are provided to accommodate your specialized needs and unique personality.

**Call your nearest Avalon community today to get a free copy of our assisted living guidebook and to learn more.**



**THE AVALON**

**Auburn Hills | (248) 940-3921**  
[TheAvalonOfAuburnHills.com](http://TheAvalonOfAuburnHills.com)

**Bloomfield Township | (248) 460-9668**  
[TheAvalonOfBloomfieldTownship.com](http://TheAvalonOfBloomfieldTownship.com)

**Commerce Township | (248) 265-3187**  
[TheAvalonOfCommerceTownship.com](http://TheAvalonOfCommerceTownship.com)

Assisted Living | Memory Care | Short-Term Respite Stays

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CAMPUSES IN OAK PARK AND WEST BLOOMFIELD



The Senior Alliance  
**LIVE YOUR WAY**

**The Senior Alliance provides aging adults and caregivers independence and freedom to live on their own terms.**

**As the Area Agency on Aging for western Wayne County and Downriver, our services ensure aging adults can live where and how they choose.**

**The Senior Alliance  
734-722-2830 | [www.thesenioralliance.org](http://www.thesenioralliance.org)**

# Embrace the possibilities

Presbyterian Villages of Michigan creates opportunities for seniors of all faiths. PVM embraces and engages more than 7,500 seniors of all financial needs in many villages conveniently located throughout the state.

[www.pvm.org](http://www.pvm.org) | (248) 281-2020



**Presbyterian Villages**

OF MICHIGAN  
SERVING SENIORS & COMMUNITIES



## Join us at the Michigan Alzheimer's Disease Research Center

*The Michigan Alzheimer's Disease Research Center is committed to memory and aging research, clinical care, education, and wellness.*

The center collaborates with other research institutions across the state including Wayne State University and Michigan State University, as well as local outreach organizations including the Alzheimer's Association to enhance groundbreaking research efforts and community education. The center is also one of 35 other National Institutes of Health-funded Alzheimer's Disease Research Centers across the country.



alzheimers.med.umich.edu  
UM-Ask-MADC@med.umich.edu  
734-936-8803

  @umichalzheimers

### *Interested in getting involved in research studies?*

Please call Kate Hanson at 734-936-8332 or visit [alzheimers.med.umich.edu/research](http://alzheimers.med.umich.edu/research) for a list of currently enrolling studies.

### *Interested in learning about upcoming educational events?*

To stay informed of upcoming events, please email Erin Fox at [eefox@med.umich.edu](mailto:eefox@med.umich.edu) to subscribe to our monthly e-newsletters.

### *Interested in learning more about our wellness programs?*

For more information on our wellness programs, please email Laura Rice-Oeschger at [lerice@med.umich.edu](mailto:lerice@med.umich.edu) or visit [alzheimers.med.umich.edu/wellness-initiative](http://alzheimers.med.umich.edu/wellness-initiative).

### *Interested in learning about our Lewy body dementia programs?*

For more information on our LBD programs, please email Renee Gadwa at [rgadwa@med.umich.edu](mailto:rgadwa@med.umich.edu) or visit [alzheimers.med.umich.edu/lbd](http://alzheimers.med.umich.edu/lbd).

# A Meaningful Life with Alzheimer's Disease

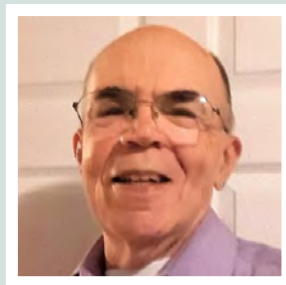
NOV. 19, 2024

## *And the Caregiving Journey Continues . . .*

by Jim Mangi, PhD

### Objectives:

1. Identify key factors affected by caregiving duties and interventions for success
2. Discuss how to develop a dementia friendly community in your area



**JIM MANGI, PHD**

Dr. Mangi is a retired environmental scientist caring for his wife since she was diagnosed with Alzheimer's disease in 2008. He presents educational talks throughout southeast Michigan about his caregiving journey and how to navigate a dementia diagnosis through all its stages. Dr. Mangi has been instrumental in establishing Saline, MI, as a dementia-friendly city. He won the 2023 Volunteer of the Year award from LeadingAge Michigan.

**ALZHEIMER'S ASSOCIATION®**

Michigan Chapter



**INSTITUTE OF GERONTOLOGY**

*Promoting Successful Aging  
in Detroit & Beyond*

# THE CAREGIVING JOURNEY CONTINUES

Jim Mangi PhD

Community Education Volunteer,  
Alzheimer's Association

Dementia Friendly Saline+, Chair

CAREGIVER

[jim.dfsaline@gmail.com](mailto:jim.dfsaline@gmail.com)



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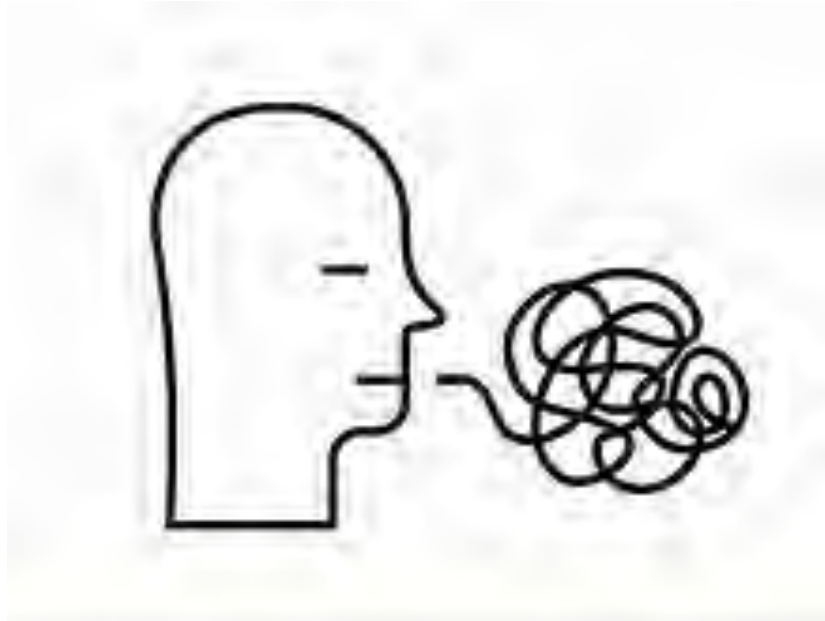
## Understanding Different Types of Dementia

As we age, it's normal to lose some neurons in the brain. People living with dementia, however, experience far greater loss. Many neurons stop working, lose connections with other brain cells, and eventually die. At first, symptoms can be mild, but they get worse over time. Read on to learn more about four different types of dementia.

### TYPES OF DEMENTIA

Alzheimer's Disease	Frontotemporal Dementia	Lewy Body Dementia	Vascular Dementia
<b>What Is Happening in the Brain?</b>			
<p>Abnormal deposits of proteins form amyloid plaques and tau tangles throughout the brain.</p>	<p>Abnormal amounts or forms of tau and TDP-43 proteins accumulate inside neurons in the frontal and temporal lobes.</p>	<p>Abnormal deposits of the alpha-synuclein protein, called "Lewy bodies," affect the brain's chemical messengers.</p>	<p>Conditions, such as blood clots, disrupt blood flow in the brain.</p>
<small>*These changes are just one piece of a complex puzzle that scientists are studying to understand the underlying causes of these forms of dementia and others.</small>			
<b>Symptoms</b>			
<p><b>Mild</b></p> <ul style="list-style-type: none"> <li>Wandering and getting lost</li> <li>Repeating questions</li> </ul> <p><b>Moderate</b></p> <ul style="list-style-type: none"> <li>Problems recognizing friends and family</li> <li>Impulsive behavior</li> </ul> <p><b>Severe</b></p> <ul style="list-style-type: none"> <li>Cannot communicate</li> </ul>	<p><b>Behavioral and Emotional</b></p> <ul style="list-style-type: none"> <li>Difficulty planning and organizing</li> <li>Impulsive behaviors</li> <li>Emotional flatness or excessive emotions</li> </ul> <p><b>Movement Problems</b></p> <ul style="list-style-type: none"> <li>Shaky hands</li> <li>Problems with balance and walking</li> </ul> <p><b>Language Problems</b></p> <ul style="list-style-type: none"> <li>Difficulty making or understanding speech</li> </ul> <p><small>There are several types of frontotemporal disorders, and symptoms can vary by type.</small></p>	<p><b>Cognitive Decline</b></p> <ul style="list-style-type: none"> <li>Inability to concentrate, pay attention, or stay alert</li> <li>Disorganized or illogical ideas</li> </ul> <p><b>Movement Problems</b></p> <ul style="list-style-type: none"> <li>Muscle rigidity</li> <li>Loss of coordination</li> <li>Reduced facial expression</li> </ul> <p><b>Sleep Disorders</b></p> <ul style="list-style-type: none"> <li>Insomnia</li> <li>Excessive daytime sleepiness</li> </ul> <p><b>Visual Hallucinations</b></p>	<ul style="list-style-type: none"> <li>Forgetting current or past events</li> <li>Misplacing items</li> <li>Trouble following instructions or learning new information</li> <li>Hallucinations or delusions</li> <li>Poor judgment</li> </ul>
<b>Typical Age of Diagnosis</b>			

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**We Do It With The Lights On**



**and no rules**

**REVERSE VALET:  
DROP YOUR PERSON OFF;  
WE'LL STAY WITH THEM  
WHILE YOU PARK!**



*Saline Emagine,  
And 5 other locations*

13



**Innovations in Alzheimer's  
Caregiving Award**

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The Encore

EVENTS & TICKETS

"Captivating"  
Huffington Post

**HEDY!**  
THE LIFE & INVENTIONS OF  
**HEDY LAMARR**

The Award-Winning  
Worldwide Sensation

**OCT 25-29, 2023**  
Wed, Thur, Fri @ 7:30 PM  
Sat @ 5 PM  
Sun @ 3 PM

Written, Performed & Produced  
by Heather Massie

**Annie**

December 5, 2024 – January 12, 2025

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# Growing List of Dementia Friendly Places



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## Help: Caregiver Companions--Friends For The Journey



---from *Dementia Friendly Saline+*



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## How To Help Your Patient The Day After A Dementia Diagnosis

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**“Plus”?** Other communities our work has touched:

- Ann Arbor
- Dexter
- Chelsea
- Milan
- Manchester
- Ypsilanti
- Dearborn
- Canton
- Birmingham
- Adrian
- Hamburg
- Brighton
- Rochester Hills
- West Bloomfield
- Jackson
- Grand Blanc
- Portage
- Vassar
- Monroe
- Hillsdale
- Devils Lake
- Toledo OH
- Batavia IL
- Geneva Lake WI
- Tulsa OK

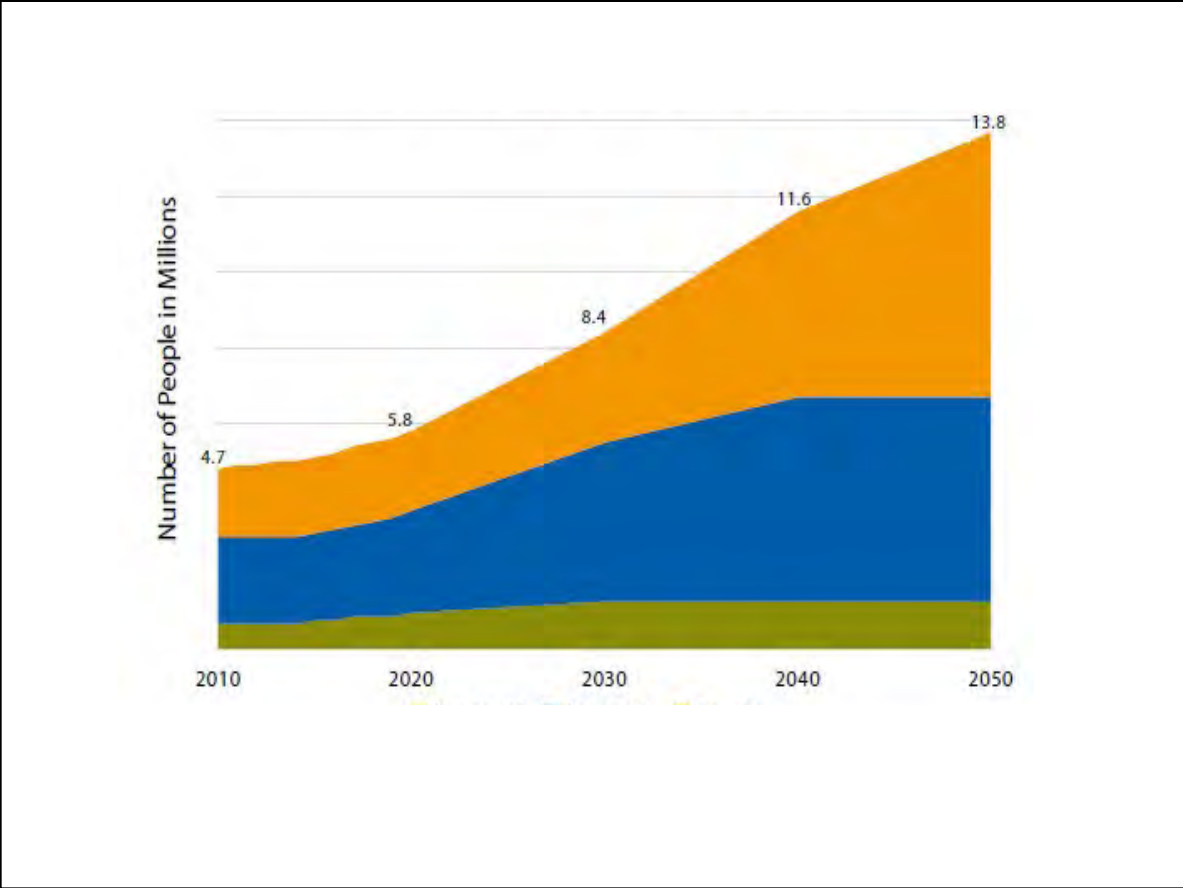


**COMMUNITY  
IMPACT  
AWARD**

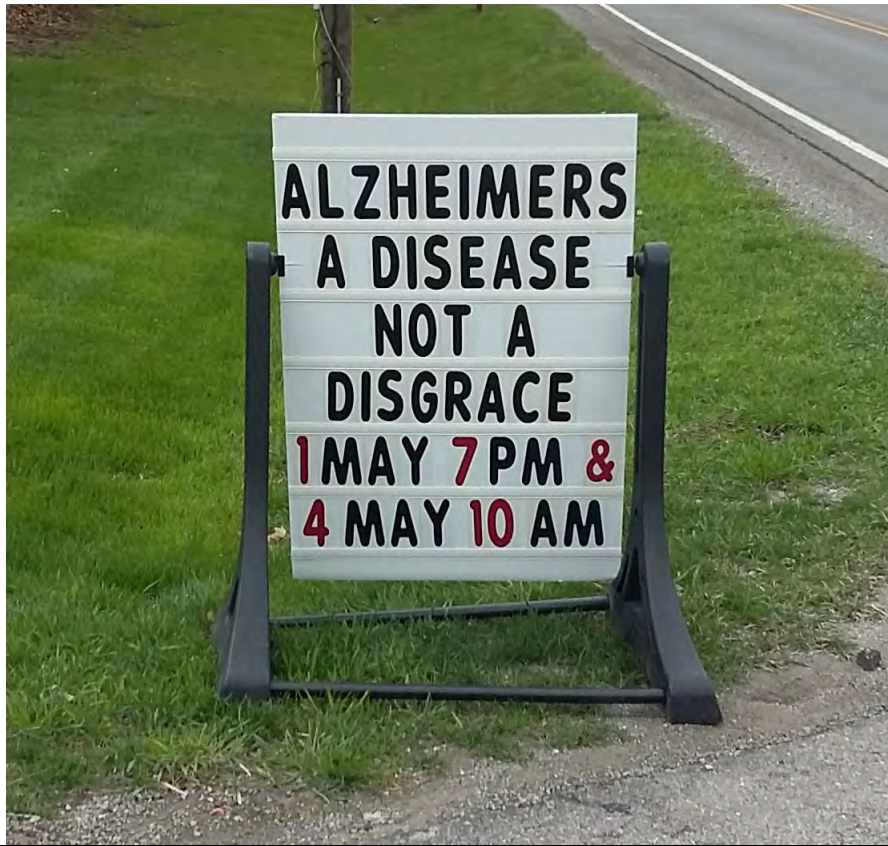




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CENTER FOR  
**DEMENTIA RESPITE**  
**INNOVATION**



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*Celebrating Every Day The  
Caregiving Journey Continues*

Jim Mangi PhD  
jim.dfsaline@gmail.com



## A Meaningful Life with Alzheimer's Disease

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### ***Cognition in Focus: Where We Stand in Alzheimer's Research & Practical Strategies for Supporting Brain Health***

by Ana Daugherty, PhD

#### Objectives

1. Review the current trends in Alzheimer's disease clinical research
2. Describe research advances in early detection of risk for cognitive decline and dementia
3. Summarize evidence for everyday activities that build resiliency against dementia risk

### ***The Crossroad of Communication & Behaviors: New Approaches***

by Joanna LaFleur, TRS, BS

#### Objectives

1. Understand the underlying causes of dementia-related behaviors
2. Implement effective communication strategies
3. Identify the core elements of person-centered approaches in care

### ***And the Caregiving Journey Continues . . .***

by Jim Mangi, PhD

#### Objectives

1. Identify key factors affected by caregiving duties and interventions for success
  2. Discuss how to develop a dementia friendly community in your area
- 

**3 CONTACT HOURS NURSING:** This nursing continuing professional development activity was approved by Louisiana State Nurses Association -Approver, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.  
LSNA-101077735-2024

**3 CEs SOCIAL WORK NASW and Michigan:** This program is approved by the National Association of Social Workers (Approval #886813915-5809) for 3 continuing education contact hours. The Institute of Gerontology at Wayne State University is an approved provider with the Michigan Social Work Continuing Education Collaborative. Approved Provider Number: MICEC-0066.

**CASE MANAGERS:** This program is pre-approved by the Commission for Case Manager Certification to provide continuing education credit to CCM® board-certified case managers. Approved for 3 CE contact hour(s). Activity code S00061322 Approval # 240003390

**Certificate of Attendance** for other disciplines including General, Recreational Therapists, Occupational Therapists and Physical Therapists.