**CONFERENCE ADDRESSES SLEEP ISSUES IN DEMENTIA PATIENTS AND THEIR CAREGIVERS**

March 13, 2003 marked a highly successful half-day conference on Management of Sleep Disturbances in Dementia Patients and Their Caregivers. About 125 professional service providers, researchers, and health professional trainees attended this conference held at the VA Palo Alto Health Care System. Faculty presented on medications to use and avoid, as well as behavioral interventions that have been successfully applied to a broad range of sleep problems. Bright-light therapy was also discussed, and several specific techniques for enhancing relaxation and reducing stress at bedtime were practiced with the audience. In addition, a number of community agencies serving dementia patients and their families set up display tables to facilitate exchange of information. A notable feature of this conference was the inclusion of about a dozen posters prepared by VA post-doctoral fellows and other trainees, which presented “works in progress” in various departments of the medical center. Several of them focused on unique issues and concerns when working with families of diverse ethnic and cultural backgrounds, such as persons of Chinese, Japanese, Latino, or African American heritage, including various barriers to their participation in clinical and research programs (e.g. language differences). A variety of translated materials were available from the Alzheimer’s Association and the Older Adult and Family Center. These were well received by the audience as they seemed to fill a very real need in the community at the present time. For further information about this conference, or to receive copies of some of the materials presented, please contact Dolores Gallagher-Thompson, Ph.D., at 650-617-2774.

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**Our Clinical Research Staff**

Back row standing (from left): Lindsay Lightbody, Helen Davies, R.N.C.S., M.S., Melissa Fehl, Kellie Takagi, Ph.D., Edward Wakabayashi, Claire Danielsen, Jared Tinklenberg, M.D., Joy Taylor, Ph.D., and Hazel Lam.

Front row seated (from left): Jessica Hawkins, Heather Sawyer, Catherine McFeters, R.N., Aimee Mott, and Janise Kim.

Not pictured: Terry Miller, M.D., Jasdeep Aulakh, M.D., Tamara Karnos, M.A., Deryl Wicks, Lori Newkirk, Dan Acheson, Pauline Liu, Candace Romandia, Larry Tuft, and Shannon Hsu.
Q & A: Cholinesterase Inhibitors

Q: WHAT ARE THE SIMILARITIES AND DIFFERENCES BETWEEN ARICEPT, EXELON, AND REMINYL?

A: Aricept, Exelon and Reminyl are FDA approved for use for people with mild to moderate Alzheimer’s disease. All three medications raise levels of acetylcholine, a chemical released by the brain to help other cells function properly. They do this by blocking an enzyme called cholinesterase, which normally recycles “used” acetylcholine between neurons. This increases the amount of acetylcholine in the brain which appears to counteract some of the effects of Alzheimer’s disease on memory and thinking.

There is some evidence which suggests the earlier these drugs are started the better. Clinical trials showed no difference in the effectiveness of these drugs in relation to age, sex, or ethnic origin. There is no convincing evidence so far that any one drug is superior in its effectiveness.

Although these drugs may help to slow the progress of Alzheimer’s disease in some patients, they cannot halt the disease altogether nor reverse any brain damage that has already taken place.

Q: WHAT ARE THE COMMON SIDE EFFECTS OF THESE THREE DRUGS?

A: Symptoms such as nausea, vomiting, loss of appetite, and increased frequency of bowel movements might be associated with any cholinesterase inhibitor. These side effects do not normally last long and are correlated with an increase in the amount of medication taken. There are few reports of slowed heart rates, some dizziness and fainting. Muscle cramps in the legs are also an infrequent side effect.

Caution is required in people with a history of peptic ulcers, asthma, or abnormally slow heart rates.

The type and rate of side effects vary depending on the drug prescribed. It is recommended that this issue be discussed with your doctor.

Q: DO YOU RECOMMEND THAT A PATIENT SWITCH ANTI-ALZHEIMER’S DRUGS?

A: No. Once a patient has been on a therapeutic and stable does of any one of the three cholinesterase inhibitors, I would not recommend switching. There is no convincing evidence to suggest that switching a patient from one drug to another will have any significant benefit in cognition.
A Walk To Remember: Memory Walk 2002

On October 12th 2002, over 4,000 walkers participated in the Alzheimer’s Association’s annual fund-raiser, The Memory Walk. The event was held at Treasure Island. A record 65 teams participated and helped raise more than $500,000 to benefit Alzheimer’s patients and their families. Among these teams was the Stanford/VA Memory Walk Team, clad in red t-shirts. The Stanford/VA Memory Walk Team was a collaborative effort of the Stanford/VA Aging and Clinical Research Center (PAD), the Stanford/VA Older Adult and Family Center (MPD), and the Stanford/VA Alzheimer’s Disease Center (PAD). Our very own Dolores Gallagher-Thompson even lead the Memory Walk’s pre-walk warm-up session!

A special thanks to the 2002 Stanford/VA memory walk team: Aimee Mott (team captain), Tamarra Duppart (assistant team captain), Quinn Kennedy, Heather Greene, Tamara Karnos, Carrie Karnos, Laura Duato, Deryl Wicks, Lori Newkirk, Lynn Walde, Abbey-Robin Durkin, Eric Crawford, Vicka Filanowsky, Chuck Filanowsky, Jessica Koran, Zoe Gillespie, Angela Sherman, Joel Kaye, Peng Chi Wang, Paulette Tang, Dolores Gallagher-Thompson, Larry Thompson, Askok Srivastava, Collins Tse, Laurie Leung, Jacob Mauger, Esther Wilson, Lani Singer, Angella Egwaikhide, and Geoffrey Lane.

The Stanford/VA Memory Walk Team raised an admirable $1262!

Up and Coming

Improve Your Memory…
A Stanford University research team is now offering free memory improvement classes.

Participants must be:
- 55 years of age or older
- Experiencing memory problems
- Free of Dementia (such as Alzheimer's disease)
- Interested in taking Donepezil*

This study tests the effectiveness of memory training and medication to improve people’s memory.

For more info, contact Hana Lee at (650) 849-0494

* An FDA-approved medication for mild to moderate dementia
Spotlight: Jasdeep Aulakh, M.D.
Psychiatry Resident at the Stanford/VA Alzheimer’s Disease Research Center of California

Dr. Aulakh has been a pleasant addition to the team of clinicians at the Stanford/VA Alzheimer’s Center. Jasdeep S. Aulakh, M.D completed his residency in general psychiatry at the University of California, Irvine. As a Fellow, he joined the Stanford/VA Alzheimer’s Research Center of California to pursue a subspecialization in Geriatric Psychiatry. Dr. Aulakh was very honored to be working with a team of such competent clinicians and researchers. Research in Psychiatry has focused on the elderly only in the last two decades and is still in its developing phase. As our population ages we will need more and more qualified physicians to deal with the wide array of disease pathology. In his pursuit of having an academically oriented career with a balance in research and hands-on patient care, he has thoroughly enjoying his training here. Patients often meet Dr. Aulakh during the administration of neurologic and physical exams and during initial evaluations. Families enjoyed interacting with him during these evaluations and family conferences. Dr. Aulakh has also worked as a physician at the Menlo Park VA Nursing Home with patients of advanced dementia and neuro-behavioral problems. His vast training has given him exposure to the full spectrum of psychiatric illnesses in the elderly. He recently submitted a poster about managing agitation in dementia focusing on newer mood stabilizers with a better tolerability and less side effect profile. In his pursuit of Geriatric Psychiatry, Dr. Aulakh’s primary focus is improving quality of life for both patients and their families. Outside of work, Jasdeep enjoys spending time with his family, playing basketball, weight training, river rafting, and learning obedience training for dogs.

Dr. Jasdeep Aulakh was interviewed by Jessica Hawkins

If you have a memory problem or know someone with memory problems and you would like to schedule a clinical assessment, contact:
JANISE KIM
650-858-3915

INTERNET CONNECTIONS

VISIT THE STANFORD/VA ALZHEIMER’S CENTER ON THE WEB:
http://arcc.stanford.edu

VISIT ACRC ON THE WEB:
http://alzheimer.stanford.edu

VISIT MIRECC ON THE WEB:
http://mirecc.stanford.edu

VISIT OAC ON THE WEB:
http://www.med.stanford.edu/oac

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There are issues unique to individuals with memory changes and their family members. Learning how to better address these issues, disseminate information to other health care professionals, and assist in the development of new services and programs is vital. We are involved in ongoing development of support groups to achieve these goals. Currently the following groups are available at our center.

**Caregivers Support Group**

This is a small group designed to provide answers to individual questions and concerns of caregivers as well as educational information; it also provides a network that offers support and guidance. The group meets on the 2nd Friday of each month from 1:30-3:00 pm.

**Mild Cognitive Impairment Group**

For individuals with a diagnosis of mild cognitive impairment (symptoms not meeting criteria for dementia) and their family members or friends. The group focuses on 1) education, 2) communication, 3) management, and 4) psychological concerns. The group meets on Tuesdays from 11:00 am to 12:30 pm for a period of three to four weeks for each topic.

**Early-Stage Alzheimer’s Patient and Caregiver Group**

This group is for early-stage Alzheimer’s patients and their caregivers. The group is designed to provide a forum for participants to discuss their concerns and ask questions about the illness. Sessions combine education, psychotherapeutic principles, and support. Enhanced understanding and coping mechanisms are developed. Opportunity is provided for caregivers to meet with other caregivers while patients are attending their own group simultaneously. The group meets every Wednesday from 2:00-3:30 pm for a period of 3 months.

**Some of our basic goals include helping participants to:**

- Develop new connections with fellow participants.
- Lessen feelings of isolation and being alone.
- Gain a better understanding of Alzheimers Disease and Mild Cognitive Impairment.
- Keep abreast of new research and possible treatments.
- Keep current with legal, financial, long term planning issues, and community resources.
- Learn about opportunities for participation in community activities.
- Acknowledge personal strengths and positive aspects.
- Share information about what works and what doesn’t work.

**Discussion topics include:**

- Living with uncertainty
- Accepting help from others
- Retaining physical health and mobility
- Maintaining interpersonal relationships
- Incorporating disease into one’s life
- Maintaining self-esteem and a sense of personal identity
- Self advocacy and establishing new roles
Caregiver Assistance Programs
Helping Caregivers Cope with Caring for a Loved-one with Memory Loss

What services do we offer?

**African-American**
- We have two programs that serve the African-American caregiver population of the Bay Area
- Both projects are designed to test multi-componet, in-home, or group interventions to help African-American caregivers deal with the stress and burden associated with their role

**Caucasian**
- We have three programs that serve the Anglo/Caucasian caregiver population of the Bay Area
- All three are designed to test multi-componet, in-home, or group interventions to help caregivers deal with the stress and burden associated with their role
- Two of the three projects, Stress Management and Inner Resources, are also doing research on the association of simple, non-invasive physiological measures on the stress of caregiving

**Chinese**
- One program specifically intended for the Chinese caregiver population of the Bay Area
- The program is designed to help caregivers understand and cope with the difficult behaviors that accompany memory problems
- In-home visits and one-on-one attention offered

**Latino**
- We have two programs that serve the growing Latino caregiver population of the Bay Area
- Both projects are designed to primarily test interventions to help Latino caregivers deal with the stress and burden associated with their role
- Interventions include multi-componet, in-home or groups designed to address problems commonly faced by caregivers

**Male Caregivers**
- Our male caregiver project is designed specifically for the stress and burden associated with being a male caregiver