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Mind, Mood & Memory™

Maintaining Mental Fitness From Middle Age and Beyond

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Slow Walking Speed and Other Unexpected Warning Signs of Cognitive Decline

Memory lapses and moments of confusion are only some of the indications that thinking-skills changes are underway.

Forgetting a name or a doctor’s appointment, becoming momentarily confused in familiar surroundings, and struggling to find the right word to explain something are all signals that your cognition may be changing. When these episodes occur once in a while, they may be chalked up to age-related brain changes. When they become more frequent and start to affect your everyday functioning and quality of life, these symptoms could signify mild cognitive impairment (MCI) or the early stages of dementia.

But there are also other MCI or dementia indications that aren’t so obvious. These signs include traits and behaviors that don’t seem to have a direct connection to memory and cognition.



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Slower walking speed may be a sign that you are at higher risk for dementia later in life. It’s important to understand other warning signs, too.

For example, a recent study published in *JAMA Network Open* suggests that older adults who exhibit slower walking speed and slower mental processing speed are more likely to develop dementia, making gait a potentially helpful factor in dementia risk assessment. Researchers noted that having both slower gait and slower processing speed posed a greater dementia risk than having one or the other of those traits. But what does walking speed have to do with cognitive decline?

“This association may be multifactorial,” explains Massachusetts General Hospital psychiatrist Jennifer R. Gatchel MD, PhD. “For example, there may be underlying shared risk factors, including cardiovascular disease,

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MIGRAINE DRUG MAY HELP WHERE PREVIOUS TREATMENTS FAILED

The drug eptinezumab (Vyepti) reduced the number of monthly migraine days for individuals who had two to four previous migraine treatment failures, according to study results published recently in the journal *Lancet Neurology*. Eptinezumab is a monoclonal antibody that targets calcitonin gene-related peptide (CGRP), which plays a role in several bodily functions, including appetite suppression and stem cell mobilization. Elevated levels of CGRP in the body also appear to contribute to migraine. Eptinezumab is administered intravenously. In the study, participants who received 100-milligram (mg) doses had

nearly five fewer migraine days per month, while those who received 300-mg doses experienced more than five fewer monthly migraine days. Study participants included men and women who had episodic or chronic migraine. The researchers acknowledged that the findings may not apply to the general migraine population or to all individuals with migraine who have had multiple treatment failures. However, the researchers did suggest that eptinezumab provides a “viable treatment option” for people whose migraines have not been adequately controlled or reduced through other traditional therapies. **MMM**

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Researchers Tout Benefits of “Travel Therapy” for People with Dementia



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Art therapy and music therapy have been shown to break through the wall of dementia in some people and spark a sense of creativity, expression, and recollections that may have been dormant for many years. A new approach, known unofficially as “travel therapy” may produce similar benefits for individuals with significant cognitive decline. Australian researchers recently published a report in the journal *Tourism Management* in which they highlight some of the many possible ways travel may be cognitively stimulating for people with dementia. For example, the researchers note that being in a new environment and having new experiences may provide both cognitive and sensory stimulation. The social nature of dining while on a holiday may positively influence the eating habits and outlook of someone with dementia. Outdoor travel may provide additional benefits by boosting vitamin D and serotonin levels.

Feelings of Detachment After Trauma May Portend Worse Mental Health Outcomes

Individuals who experience trauma and then develop dissociation—the profound feeling of detachment from one’s sense of self or surroundings—may be at greater risk for developing serious mental health challenges. These include severe post-traumatic stress disorder, depression, anxiety, physical pain, and social impairment. In a study led by researchers at McLean Hospital—an affiliate of Harvard Medical School—investigators studied more than 1,400 adults who were treated at hospital emergency departments across the country. Those individuals who developed an especially severe type of dissociation, called derealization, tended to have higher levels of post-traumatic stress, anxiety, depression, and functional impairment after just three months. The findings, published in the *American Journal of Psychiatry*, suggest that individuals treated for trauma also be screened for dissociation-related symptoms. When a person is determined to be at risk, it could be helpful to connect that individual with services aimed at helping trauma victims work through their experiences and process them in a healthy, proactive way.

Fatty Foods May Wreak Havoc on Your Brain, Not Just Your Waistline

It’s well established that a high-fat diet can lead to obesity and type 2 diabetes, at least in animal models. But in a study published recently in the journal *Metabolic Brain Disease*, researchers in Australia found that consuming too many fatty foods may also lead to brain shrinkage and a reduction in cognitive abilities. Though the study was done on mice, the findings underscore other research that has implicated obesity and diabetes in brain function changes affecting memory and other thinking skills. It appears that obesity and diabetes impair the central nervous system, raising the risk of cognitive decline and the development of psychiatric disorders, such as depression and anxiety. If you need help making changes needed to manage your weight, talk with your doctor and consider working with a registered dietitian who is also a diabetes educator.

Does Coffee Make You Spend More When Shopping?

If you’re sticking to a tight budget, you may want to skip the coffee before you go shopping. In a study published in the *Journal of Marketing*, researchers found that shoppers who drank a cup of complimentary caffeinated coffee prior to roaming a store spent about 50 percent more money and bought about 30 percent more items compared with shoppers who drank decaf or water. To conduct the study, researchers set up coffee bars at store entrances, and tracked what beverages shoppers drank and then reviewed their receipts on the way out of the store. In addition to spending more money and buying more items, the shoppers who drank caffeinated coffee also tended to purchase more non-essential items, such as scented candles, compared with other shoppers. The researchers also conducted a similar experiment with online shoppers, and again the caffeinated shoppers outspent their peers who opted for decaf or water. The findings suggest that caffeine may make people more less able to control impulse shopping. **MMM**



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Brain Fog, Fatigue, Other Symptoms Often Persist for COVID-19 ‘Long Haulers’

Massachusetts General Hospital researchers are part of a massive study to learn about who is most at risk and why.

For many people who recover from even a relatively mild COVID-19 infection, the symptoms don't completely disappear. The Centers for Disease Control and Prevention reported recently that around 20 percent of people who test positive for the SARS-CoV-2 virus (COVID-19) continue to report symptoms months after their first positive test.

Several studies, including one recently published in the *Annals of Clinical and Translational Neurology*, suggest that a majority of COVID “long haulers” report at least one neurological symptom as late as 18 months after symptom onset. In a separate investigation, Zeina Chemali, MD, director of Neuropsychiatry Clinics and Training at Massachusetts General Hospital (MGH) and medical director of the McCance Center for Brain Health at MGH, and colleagues from MGH conducted a 15-month study of 87 confirmed and 13 suspected long haulers who had symptoms at least six months after COVID-19 infection. The findings, published in the *Journal of Clinical Neuroscience*, noted that some of the most prevalent symptoms of long COVID include “brain fog” (memory problems, confusion, trouble concentrating), headaches, sleep problems, fatigue, and prolonged periods of anxiety and/or depression.

“Commonly, patients with long COVID present with ‘brain fog,’ a vague description including lack of sleep, anxiety, depression and a history of headache or migraine combined with trouble with attention and word-finding difficulties, as well as executive dysfunction,” Dr. Chemali says. “In the patients we treated with long COVID who presented with brain fog we found that the root cause of this commonly used term is often multifactorial.”

Who Is Most at Risk?

The number of individuals being treated at MGH's long haulers clinic has grown significantly. As of June 2022, about 200 patients had been referred to the RECOVER study, a National Institutes of Health study meant to understand why COVID-19 affects certain people differently and why some people are more likely than others to become long haulers.

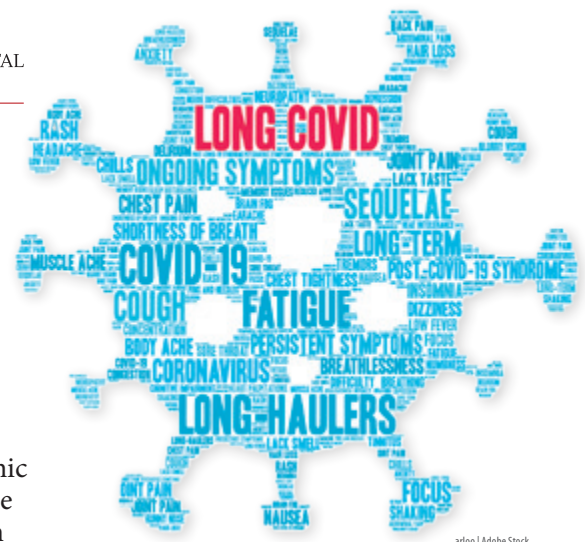
Dr. Chemali notes that while these questions are still largely unanswered, there has been research to suggest that individuals with high blood pressure, asthma, or metabolic disorders may be at higher risk. There is also evidence to suggest that women and people with a history of migraine, mild traumatic brain injury, anxiety or depression also may be at risk.

“Everyone is still grappling with understanding long COVID,” Dr. Chemali says, adding that similar symptoms are found in patients with other post-viral diseases, post-traumatic brain injury, concussive syndrome, or the complicated and not fully understood chronic fatigue syndrome.

What You Can Do

As researchers continue to explore the mysteries of COVID-19, including ways to better treat the virus and manage symptoms, some clues are emerging. “From a neurocircuitry point of view, we see that frontal networks are the most vulnerable in the post-COVID-19 phase,” Dr. Chemali says.

The frontal networks connect the frontal lobes to other regions of the brain. The frontal lobes are responsible for higher cognitive functions, such as memory, problem solving, emotions, impulse control, social interaction, and motor function.



It's estimated that more than half of the U.S. population has been infected by the coronavirus, and that one in five of those individuals have at least one COVID-19 symptom months after their infection. These so-called “long haulers” are the subjects of ongoing studies, including some by MGH researchers.

Dr. Chemali explains that while there are no medications or procedures guaranteed to halt the effects of long COVID, there are some steps individuals can take that may be helpful. She suggests, for example, supporting healthy neurocircuitry by getting sufficient quality sleep. If you struggle with insomnia, obstructive sleep apnea, or other sleep disorders, tell your doctor or consider seeing a sleep specialist.

If headaches or chronic pain affect your sleep and waking hours, talk with your physician about treatment options. Likewise, seeing a therapist for anxiety or depression may have multiple benefits, both psychologically and physically.

A healthy diet and regular exercise—to the extent that you can be physically active—can also help support your recovery.

If you are interested in participating in the RECOVER study, consider joining a study site in your area. Researchers are looking for people who have had COVID-19 and those who have so far evaded the virus. Adults and children of all ages are encouraged to participate. Lab samples, such as blood and urine, will be collected, and some imaging will be done, along with simple physical examinations.

To learn more about the research, visit: studies.recovercovid.org. **MMM**

How to Overcome the Fear of Irrelevance

If you start to feel less important in your family or community, focus on the ways you have and can still contribute to others.

Maybe you had a rewarding career with a lot of responsibility and now you're retired. Or perhaps you devoted your time to raising a family and the kids are out of the house and living far away. Or maybe your life's journey didn't center on career and children, but other pursuits and challenges that are now largely a part of your past, not your present.

Regardless of how you arrived at this point, you may find yourself quite content with how you're living your life. But if you're like a lot of older adults, you may also have a nagging sense that your relevance or importance to others—whatever you want to call it—isn't what it once was.

But it doesn't have to be that way. Indeed, if you're questioning your relevance in your family and community, it may be time to reframe your thinking about all the things you've done and all the ways you can still contribute. It's likely that you matter to others in ways you may not fully understand.

Gregory Fricchione, MD, associate chief of psychiatry at Massachusetts General Hospital (MGH) and director of the Benson-Henry Institute for Mind-Body Medicine at MGH, acknowledges that as people are living longer, there are more years to contemplate ideas such as relevance. But he cautions that how you think about it can make a significant difference in how it affects your life.

"If you let the negativity of your perceived irrelevance take hold and don't look for opportunities to grow intellectually and be part of the conversation, you're going to suffer consequences," he says.

The Dangers of Feeling Irrelevant

Several studies in recent years have noted the risks of feeling unimportant to peers and family members. A 2020 study published in *Frontiers in*



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Volunteering to help others can be rewarding in many ways, including the sense that you are relevant and important in the lives of other people.

Psychology, for example, notes that feeling as though you don't matter is a major contributor to loneliness, which in turn is a risk factor for depression and cognitive decline, as well as physical health complications, such as high blood pressure and a weakened immune system.

A 2021 study in the *International Journal of Mental Health and Addiction* echoed those findings, suggesting that older adults who feel important to others tend to thrive, while their peers who lack that sense of relevance are more likely to suffer cognitive, emotional, and physical health problems as a result. The research also found that the isolation that characterized the first several months of the COVID-19 pandemic only exacerbated the harmful effects of feeling irrelevant.

Dr. Fricchione suggests that it may not be relevance that people feel is slipping away, but connectedness. Numerous studies have underscored the necessity of interacting with other people on a regular basis to maintain healthy cognition and avoid mental health disorders, such as depression and anxiety.

"People can't do without social connections and attachments," Dr. Fricchione says, adding that living in an era where grown children and their parents and siblings often live far apart, there is an even greater

need to deliberately and intentionally maintain family bonds and form new friendships.

Overcoming Irrelevance

But even people who have a healthy social network and plenty of family responsibilities can still find themselves feeling worthless or unimportant. You may be someone who survived childhood trauma, only to carry feelings of guilt or insignificance into adulthood. Some people struggle to deal with negative criticism that affects self-esteem. And certainly difficulties handling stress or grief or having a mental health condition such as depression can seem impossible to overcome.

If you find that feeling unimportant or worthless is shaping your everyday outlook and getting in the way of maintaining healthy relationships and accomplishing your regular responsibilities, it may be time to talk with a therapist. These feelings you have are quite common, and a mental health professional experienced in working with older adults may be able to help you find the strategies to readjust your thinking or pursue new opportunities with confidence and optimism.

You can also start to find the tools that will help you by brainstorming ways you can make a difference in the lives of others. It may require playing a much different role these days, but the rewards may be even greater. "If you were a CEO you don't have to try to be relevant by getting another job as a CEO," Dr. Fricchione says, adding that many people in retirement view this time as a way to mentor younger people and pass the baton, as it were.

"The reality is that it's natural law," Dr. Fricchione adds. "Your time has changed. You can either argue with that idea and be miserable or be graceful within it and think about ways you can contribute."

Paradox of Aging

For plenty of older adults, the issue of irrelevance isn't really an issue at all. "Society has many vehicles for maintaining relevance and purpose as you

age,” Dr. Fricchione says. “In terms of your family, if you’re blessed to have children and grandchildren, feeling relevant just comes naturally.”

Even if you’re not directly involved in the everyday lives of your children, grandchildren, other relatives, friends, co-workers, and others in your world, take a few moments now and then to think about how you have influenced these people. Think about the lessons you’ve taught others or the role modeling you’ve done or just the little things here and there that have made a difference.

In the 1946 film “It’s a Wonderful Life,” Jimmy Stewart’s character George Bailey became so overwhelmed by feelings of worthlessness and a sense that the world would be better off without him that he considered taking his life. Instead, he was allowed to see just how relevant he was in the lives of so many people, and it gave him a new, grateful, and hopeful outlook.

Dr. Fricchione suggests that older adults with strong friendships or who volunteer or are otherwise engaged with other people through clubs or other organizations can also take some comfort in knowing that they are valued and appreciated by their peers. Dr. Fricchione suggests that this population represents a concept known as the “paradox of aging.”

In essence, the paradox of aging is the idea that despite having endured loss, faced health concerns or other challenges associated with growing older, and acknowledged that there are fewer years ahead than behind them, many older adults report being happier and more satisfied with life now than when they were young. They see these years as time to take care of themselves.

“One idea is that when we’re young, recognition is so important,” Dr. Fricchione explains. “There’s this sense of always striving for more. But when you reach a certain age, you realize you don’t have to be competitive anymore. You can finally relax and enjoy life a little more.” **MMM**

MEMORY MAXIMIZERS

HERE’S THE LATEST RESEARCH TO HELP YOU KEEP YOUR BRAIN SHARP.

See Your Way to a Better Memory

Taking good care of your eyes, especially in older age, may help you preserve your memory, too. A study published in *JAMA Neurology* suggests that about 62 percent of current dementia cases could have been prevented by managing several modifiable risk factors, and that about 2 percent could have been prevented through healthy vision. A separate review of 16 studies involving more than 76,000 people also found that older adults with untreated sight conditions may be at an increased risk of dementia. The research, published in the journal *Aging and Mental Health*, suggests that having vision problems diagnosed and treated may lower dementia risks, though researchers note that more studies are needed to determine whether having cataract surgery or other procedures may reverse any cognitive decline. While it’s not clear exactly how healthy vision supports better memory and brain function, one theory is that the brain’s neural system thrives through stimulation from all of its sensory organs. When one sense, such as vision, is significantly impaired, certain neurons may die and rearrangement occurs in the brain. Another theory is that vision loss can contribute to isolation and reduced social engagement, which can contribute to the onset of dementia, as well as depression. Regardless of the exact mechanism, these recent studies underscore the value of annual eye exams (unless otherwise recommended by your doctor) and of being proactive about keeping up to date with your eyeglass prescription and having other vision problems corrected if at all possible.



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Keep up to date on your eye exams to catch any vision problems as early as possible. Maintaining healthy vision may be one way to help lower your risk of memory loss.

Find a Place for Everything and Put Everything in Its Place

There’s an old saying, “A place for everything, and everything in its place,” that is ascribed to a variety of writers and philosophers through the ages. Ben Franklin is sometimes credited with that little organizational reminder, though it likely predates him by a century or so. No matter who first said it, the idea rings as true today as ever. And it’s an especially helpful concept for people who struggle to remember where they put their glasses, keys, and other everyday items. Memory experts suggest that one way to keep from driving yourself crazy searching for your phone and other necessities is to, yes, establish a place for these things and then make sure they wind up there. While this sounds like a good idea and just common sense, it can take



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Having an established place for easily misplaced items can keep you from struggling to remember where you left them.

some practice to make it work. Today, think about the best place for the items you tend to misplace. If your nightstand is the best place for your reading glasses, keep them there and put them back there even if you use them somewhere else. Likewise, really get in the habit of using a hook in the kitchen for keys or your top desk drawer for your checkbook or whatever places you choose for those things that tend to get lost easily. Don’t get lazy and toss these things anywhere. The more you get in the habit of consciously putting “everything in its place” the less trouble and stress you’ll endure trying to remember where you left them. And think of the time you’ll save with fewer searches as part of your daily routine. **MMM**

Research Uncovers Clues About the Origins and Promotion of Well-Being and Longevity

Two studies highlight the value of optimism and how insight into our own psyche may help steer us toward greater mental health.

What does it take to live a long and happy life? You might be tempted to say the answer lies in having “good genes” and plenty of friends and loved ones around you. Certainly, those are key factors for health and well-being, but there are others that are at the heart of two recent studies aimed at helping people live longer lives characterized by optimal physical and mental health.

One study focused on the importance of positivity in healthy aging. The other demonstrated how technology may one day be harnessed to help individuals and their mental health-care providers.

Positivity Prescription

While race and socioeconomic factors can have significant impacts on a person’s health and life expectancy, a recent study, led by researchers at the Harvard T.H. Chan School of Public Health, found that optimism is a simple, but important trait associated with a longer lifespan, and that a positive outlook benefits people from a variety of backgrounds.

“Although optimism itself may be affected by social structural factors, such as race and ethnicity, our research suggests that the benefits of optimism may hold across diverse groups,” says Hayami Koga, the study’s lead author and a PhD student in the Harvard University Graduate School of Arts and Sciences studying in the Population Health Sciences program in partnership with the Harvard T.H. Chan School. “A lot of previous work has focused on deficits or risk factors that increase the risks for diseases and premature death. Our findings suggest that there’s value to focusing on positive psychological factors, like optimism, as possible new ways of promoting longevity and healthy aging across diverse groups.”

The study, published in the *Journal of the American Geriatrics Society*, involved more than 159,000 women who were between the ages of 50 and 79 at the start of the 26-year study. The study included women from across racial and ethnic groups, and from a broad cross section of geographic and socioeconomic profiles.



Optimism and a positive outlook are associated with a longer, healthier life.

Of the participants, the 25 percent who were the most optimistic were likely to have a 5.4 percent longer life span and a 10 percent greater likelihood of living to at least age 90, compared with the 25 percent who were the least optimistic. And though factors such as healthy eating and regular exercise are critical to health and longevity, the study found only minor associations between a person’s healthy lifestyle and level of optimism.

Of course, for people who are not naturally optimistic, deliberate and intentional efforts pursuing optimism may be helpful. Talking with a therapist could be beneficial in many ways.

A Map to Better Mental Health

Finding your way to a more optimistic outlook and a healthier physical and mental well-being may one day come down to creating a map to help you get there. In a separate study,

led by investigators at Massachusetts General Hospital (MGH) and published in the journal *Aging*, researchers used artificial intelligence to explore psychological well-being and develop a framework for helping individuals improve their long-term life satisfaction. The researchers created a model based on a branch of artificial intelligence called deep learning, which imitates the way humans accumulate certain types of knowledge.

Questionnaires were used to estimate a participant’s psychological age (a reflection of how old one behaves and feels), as well as future well-being and depression risk. With those estimates in hand, researchers created a “self-organizing map” that laid out an assessment of the individual’s level of well-being and propensity for depression. Regions associated with high and low well-being were identified.

Based on that profile, each map included a recommended list of personalized daily tips to boost well-being—a road map, of sorts, that could take someone on the shortest path between a starting point and a destination in which their well-being could be maximized.

The MGH researchers are hopeful that this kind of information and mapping approach could be used to direct cognitive behavioral therapy and other mental health interventions to provide a personalized path toward improved well-being. The map could also be used to track progress toward goals established at the start of therapy.

Another possible form the map could take could be a computer or smartphone app that allows users to understand the behaviors and choices that could lead to low and high well-being and make daily decisions that will keep them on the right track.

“In this work, we highlight aging-related trends in well-being and have brought forward a dynamic model of human psychology that allows maximizing one’s future level of happiness,” says study co-author Nancy Etcoff, PhD, director of MGH’s Program in Aesthetics and Well-being.” **MMM**

WARNING SIGNS *(cont. from page 1)*

diabetes, or even common neuronal pathways that are disrupted by cerebrovascular disease or Alzheimer’s disease pathology. Having both cognitive decline and slower gait could indicate greater underlying cumulative risk or pathology load, thus making the dual threat of cognitive decline and slower gait indicate greater risk than just one of these indicators.”

A slower stride is one of several changes that may indicate cognitive decline is underway. But there are others worth knowing about. And just as slower walking speed may be the result of an arthritic knee or other physical challenge, the following changes may or may not portend problems with memory or thinking skills later on. They may be the result of mood disorders, medication side effects, or conditions such as chronic pain. Nevertheless, they are worth taking note of now in order to be well prepared for the years ahead.

Sleep and Brain Health

Just as the way you walk might give you some insight into your risk of cognitive decline, so too might your sleep habits. Research suggests that primary insomnia—difficulty falling asleep when medications or mood disorders aren’t factors—is associated with a greater risk of dementia.

Similarly, a study published in 2021 in *Nature Communications* suggests that individuals who usually get less than six hours of sleep a night in their 50s and 60s are also at a higher risk for dementia later in life. Sleep allows the brain to perform several important and healthy functions, including the clearing out of beta-amyloid and tau proteins. Insufficient sleep allows those proteins to build up in the brain—a hallmark of Alzheimer’s disease.

“It is increasingly recognized that quantity and quality of sleep are critical for clearance of pathological proteins associated with Alzheimer’s disease and related dementias,” Dr.



A significant change in sleeping habits may be an early sign of cognitive changes.

Gatchel adds, noting that changes in sleep patterns may occur in the prodromal stages—between the start of early symptoms and the onset of more serious complications—of various dementia syndromes. “Sleep disorders, such as obstructive sleep apnea, can negatively impact cognition. Thus, any significant change in sleep patterns in older adults should prompt an evaluation by a clinician.”

Personality Changes

Noticeable personality changes may also be signs of cognitive decline. Characteristics such as excessive worry, being more irritable, or losing enthusiasm for certain activities may be the result of brain changes that may later include memory loss, among other things.

In some cases, an awareness of cognitive decline can trigger anxiety or depression. It’s natural to worry about losing memories and what your life will be like in the years ahead. And it can be frustrating to search for a word or recall a memory that seems just out of reach.

It’s also important to know that there is an interconnectedness between the regions of the brain that control memory and emotion, so changes involving one area are likely to have effects elsewhere.

So how might individuals or their doctors make the distinction between personality changes associated with cognitive decline versus those associated with the onset of depression or anxiety?

“This can be difficult to disentangle, and many times observations over

time are required,” Dr. Gatchel says. She adds that increasing data suggest that mild changes in one or more behaviors that are not solely attributable to a previously diagnosed psychiatric disorder can represent early stages of Alzheimer’s disease and related dementias.

Decision-Making and Judgment

Early stages of cognitive decline also may be accompanied by difficulties with decision-making and the use of poor judgment. That’s because it can become more difficult to process information and think through situations. Keep in mind, however, that cognitive decline or dementia doesn’t affect all decisions, nor does it mean that the ability to exercise good judgment is impaired all the time. As with so many aspects of thinking-skills changes, it’s important to take things on a case-by-case, day-by-day basis.

“When problems with decision-making and judgment are impacting the ability to function independently and placing the individual or others at risk, they are then crossing the threshold of being early indicators of cognitive decline,” Dr. Gatchel says.

Takeaway

Any type of noticeable change in behavior, emotions, or physical health should be noted. There may be very benign reasons for some changes, but you may not know why these things are happening without involving your health-care provider.

“Definitely talk with your doctor and seek medical evaluation of these symptoms,” Dr. Gatchel advises. “Even if these symptoms are not associated with an underlying cognitive disorder, many times they may indicate another type of medical problem in an older adult, especially if these represent a change from a person’s baseline and lifelong history. This may be coupled with a more detailed evaluation of cognition and memory and thinking skills, and depending on findings, may offer opportunities for intervention or closer vigilance over time.” **MMM**

ASK THE DOCTOR



Editor-in-Chief
Maurizio Fava, MD

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SLEEP APNEAS...STATINS AND BRAIN FOG...LONELINESS VS ISOLATION

Q I've heard of obstructive sleep apnea (OSA), but my husband was recently diagnosed with central sleep apnea (CSA). What's the difference?

A OSA and CSA both lead to pauses in breathing while sleeping, but they have different causes. With OSA, which is a much more common condition, soft tissue in the back of the throat relaxes during sleep, causing the upper airway to become blocked. The diaphragm and chest muscles work harder to force open the airway and allow for continued breathing. With CSA, the problem originates in the brain. Essentially, the brain repeatedly stops sending the proper signals to the muscles that control breathing.

The use of continuous positive airway pressure (CPAP) therapy may be useful for both OSA and CSA. CPAP uses a small bedside machine to pump air through a tube that fits over the nose and mouth (or just the nose). If CPAP or other similar treatments are ineffective or not tolerable, your husband's doctor may prescribe a medication such as acetazolamide, which can stimulate breathing during sleep.

Q When I started taking statins 10 years ago, there seemed to be conflicting information about whether they cause memory loss. I don't really hear that anymore. What is the latest?

A Statins are remarkably effective medications in lowering LDL ("bad") cholesterol levels, which in turn reduce heart disease risk. You're right that for a long time, there was much debate about the side effects of statins, especially regarding complications such as "brain fog" and memory loss.

In recent years, however, several studies have found no direct link between statin use and cognitive problems. And one study, involving more than 57,000 older adults, suggests that statins actually may offer some protection against dementia. However, there remains some debate among health experts about whether this issue

is settled. Individuals who take statins and experience memory lapses or other cognitive changes may be dealing with conditions that have nothing to do with the medications. Likewise, some people may start taking statins and notice changes in their cognition soon afterward. The Food & Drug Administration has approved labeling for statins that include memory loss and confusion as "non-serious and reversible" side effects. This suggests that if those side effects develop, stopping the drug—or switching medications or changing doses—may reverse any cognitive changes that occurred. What is clear is that if your doctor prescribes a statin because you have high LDL cholesterol, the cardiovascular benefits of taking the medication probably far outweigh any risks.

Q Throughout the COVID-19 pandemic I've seen references to older people facing risks of isolation and loneliness. The terms seem to be used interchangeably, but don't they mean different things when it comes to mental health?

A Yes, loneliness and isolation (specifically "social isolation") are different, but they are related. Loneliness refers to a feeling, a sense of being alone and disconnected from others. Isolation is actually having few, if any, regular social contacts with other people.

People can feel lonely even while they are surrounded by others. Think of individuals who move to a big city without knowing anyone there. Similarly, a person might have few social contacts on a regular basis but feel contented because of hobbies, pets, and telephone or social media interactions with relatives and friends.

It's important to note, however, that social contact is an important component of good mental and cognitive health for everyone, regardless of how content they may appear. Ideally, you want to have regular in-person contact with friends, neighbors, relatives, and other people who bring positive energy and emotional support to your life. **MMM**

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The Challenges and Benefits of Starting Over

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