CLOSE TO YOU

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**CHAIR’S MESSAGE**

**BRAVE NEW WORLD**

As we know, there are people all over Australia living with dementia. Our association was formed more than 30 years ago, and during this time Alzheimer’s Australia has grown into a national federation that annually supports tens of thousands of people adjusting to the impact of a diagnosis of dementia.

However, the services offered by Alzheimer’s Australia are very different depending on your postcode. This is due to the fact that Alzheimer’s Australia has different boards, styles and services in each state and territory. For many years, there have been conversations about combining all the strengths of the various state associations into one Australia-wide, dementia-specific organisation. I’m happy to report that it looks like all those talks are finally bearing fruit.

Our operating environment is also changing. Alzheimer’s Australia is preparing for a period of unparalleled transformation as we adapt to the structural reforms brought about by the National Disability Insurance Scheme (NDIS), My Aged Care, and the principles of consumer-directed care in aged care. Responsibility for aged and dementia care is increasingly moving to the Commonwealth, with a new funding model whereby the consumer has choice over how their individualised funding is to be used.

This ‘new world’ of consumer-directed care is widely welcomed – especially by your board of directors and the management team. However, it does present significant challenges to the way we operate. To be an effective and sustainable organisation, we need to become more efficient and effective in all our operations.

I, and the entire board of directors of Alzheimer’s Australia NSW, am very excited by the prospect of creating a new, single, unified organisation and the many benefits that such a structure will bring. By being more nimble and efficient, we will be able to deliver improved services and supports to more people, more quickly.

What won’t change is the caring spirit and dedication to all people living with dementia and their families and carers. This is entrenched in the DNA of the organisation.

This is a very exciting time, and I look forward to keeping you informed about the opportunities and challenges that lay ahead.

Paul Robertson AM
Chair, Alzheimer’s Australia NSW

**CEO’S MESSAGE**

**PURSuing PERFECTION**

It has been a busy time for us at Alzheimer’s Australia NSW. As I write this, I am reflecting with delight on the success of Dementia Awareness Month 2016. I had the privilege of attending events held across the state and was inspired to see people embracing this year’s theme: You Are Not Alone.

Highlights of Dementia Awareness Month included a speaking tour by one of the world’s leading dementia experts, Dr Ron Petersen, who presented both in Sydney at NSW Parliament House and at the National Press Club in Canberra, along with Alzheimer’s Australia Ambassador Ita Buttrose AO, OBE.

This year, our fundraising team embarked on new and exciting initiatives to help provide invaluable support and resources for people living with dementia, their carers and families. These included ThinkFit, a series of fun games and trivia events to boost brain health, and A Trek to Remember, in which a team of fundraisers conquered Mount Kilimanjaro in Africa in October.

The annual series of Memory Walk & Jog events in 2016 were a great success and included a new event in Penrith in Sydney’s west. We are happy to announce that in 2017 another brand new location will host an event for the first time: the Northern Beaches in Sydney, bringing the total number of Memory Walk & Jog events to be held across NSW to six.

I am also proud to announce that the Dementia Training Australia consortium, led by the University of Wollongong, and of which Alzheimer’s Australia NSW and all other state and territory offices are a part, was successful in gaining the tender to deliver the Commonwealth-funded Dementia Training Program. Alzheimer’s Australia is pleased to play a key role in delivering Dementia Essentials, a leading international vocational training program, which provides free dementia training and education to over 16,000 staff working directly with people living with dementia. This unique collaboration and national approach to dementia training will ensure that the next generation of dementia training is based on the most up-to-date, evidence-based best practice, delivered in a coordinated, nationally consistent way. The training will be accessible to a broad range of health and aged-care personnel, from personal care assistants in the community and residential care to medical specialists in hospitals. This will ensure the very best available knowledge in dementia training is translated into best practice on the ground, so the outcomes for people with dementia and their families and carers can be improved.

As our Chairman Paul Robertson AM outlines in his *In Touch* report, the recent move towards a new governance model for our federation is both timely and welcome. With significant changes in Federal Government funding and policy, reform is essential.

As this is the final issue of *In Touch* for 2016, I would like to take this opportunity to thank everyone who supported Alzheimer’s Australia NSW this year. I wish you all a safe and happy holiday season and look forward to seeing you all in 2017.

The Hon. John Watkins AM
CEO, Alzheimer’s Australia NSW

SUMMER 2016 IN TOUCH 3
**NEWS**

**A NIGHT TO REMEMBER**

The official Launch of Thinko!, a new fundraising initiative to help fight dementia, took place on 1 September in Sydney. Alzheimer's Australia NSW, in conjunction with Navarra Venues, hosted a star-studded gala and trivia night at Le Montage in Lilyfield. More than 1000 people attended, including celebrity MC the ABC’s Richard Glover, and Ten’s Natarsha Belling and Hugh Riminton. Thanks to the support of individuals and organisations on the night, we raised a record $230,000 to help people living with dementia and their carers!

**THAT’S A WRAP ON DEMENTIA AWARENESS MONTH**

One of the world's leading dementia experts, Dr Ron Petersen, spoke in Sydney at NSW Parliament House as part of a national speaking tour for Dementia Awareness Month in September. He was there to support Alzheimer's Australia in its call for a fully-funded, national strategy to tackle the growing challenge of dementia.

Dr Petersen – who also spoke at the National Press Club in Canberra, along with Alzheimer’s Australia Ambassador Ita Buttrose AO, OBE to mark World Alzheimer’s Day on 21 September – presented on the latest insights and findings in dementia research, the importance of an early diagnosis, as well as current diagnostic techniques, how the diagnosis is made, treatment options and future directions.

Dr Petersen is the director of the US Mayo Clinic Alzheimer’s Disease Research Center and was appointed by US President Barack Obama’s Administration to head up the Advisory Council for the National Alzheimer’s Project Act (NAPA), which is an integrated national plan to overcome Alzheimer’s disease in the US by 2025.

“The value of a national approach to addressing dementia and Alzheimer’s disease not only has the potential to create the same success that has been demonstrated in the fights against other diseases, such as influenza and pneumonia; it allows governments to assess whether the nation is meeting the challenges of the condition for people living with dementia, their families, for communities as well as the nation’s economy,” he says.

Other Dementia Awareness Month events included:

- A regional lecture tour by Australian dementia expert Professor Jacqui Close
- Still Dementia in a Changing World: A free public forum that talked about consumer directed care, and assistive technology and dementia
- Stories of Me: A Baptist Care professional development forum exploring how technology and creative ageing programs are being embraced to support aged-care residents who are living with a dementia diagnosis
- Healthy Ageing and Dementia forums: Free public brain health information sessions held across the state, including forums tailored to Culturally and Linguistically Diverse Communities through bilingual workers

**AWARD-WINNING CARERS**

A big congratulations to Bev Nihill, who won a Senior Carer Award at the 2016 NSW Carer Awards. Bev worked for the Red Cross for 25 years before giving up full-time employment to care for her husband, Steve, who was diagnosed with younger onset dementia. She is a Dementia Advocate and started a younger onset dementia social club in Gosford.

Described as a “tireless worker whose every moment is trying to find a better way to care for people,” Bev was presented her award at a ceremony at NSW Parliament House by the Hon. John Ajaka, MLC, Minister for Ageing and Disability Services.

Congratulations also to Jill Edmondson, who was a Senior Finalist Sydney Mid West at the NSW Volunteer of the Year Awards thanks to her work volunteering for Alzheimer’s Australia NSW at events including the 2016 Memory Walk & Jog series.

“I really do enjoy volunteering, which has given me an opportunity to meet so many wonderful people. It certainly has been a privilege.”
HEADS TOGETHER

The Alzheimer’s Australia NSW Living Well with Dementia Conference was held in Sydney in August. Experts came together to discuss strategies for better health and wellbeing for people with dementia and their carers. More than 200 people attended, including 50 people living with dementia and carers.

The Living Well with Dementia discussion paper was launched by Alzheimer’s Australia NSW CEO The Hon. John Watkins AM. He called for a shift in attitudes to support people with dementia.

Speakers included Associate Professor Lee-Fay Low from the University of Sydney, who presented on social support and recreation in home care, Dr Frank Brennan from St George and Calvary Hospitals, who spoke on palliative care, and Professor Sharon Naismith from the University of Sydney’s Brain and Mind Centre, who presented strategies for improving sleep. Alzheimer’s Australia NSW Dementia Advocates Trevor Crosby, and Robyn and Peter Ashley-Brown shared insights into living well with dementia.

COURAGEOUS CONVERSATIONS

What have you learned from dementia? How do you want to be remembered? People living with dementia and their carers gave their thoughts on these important questions and more in the latest Courageous Conversations video series, released in September during Dementia Awareness Month. To view the moving videos on the Alzheimer’s Australia NSW YouTube channel, visit: bit.ly/CourageousConversationsDementia

PROFESSOR HENRY BRODATY HONOURED

Professor Henry Brodaty AO has been recognised for his long-standing dedication and contribution to dementia research. He was named the first Alzheimer’s Australia Dementia Research Foundation Patron.

Professor Brodaty joins Ita Buttrose and Sue Pieters-Hawke as a National Ambassador for Alzheimer’s Australia.

As well as leading the AADRF, his career includes Scientia Professor of Ageing and Mental Health, UNSW; Consultant Psychogeriatrician, Aged Care Psychiatry and Head of the Memory Disorders Clinic, Prince of Wales Hospital. He is the director of the Dementia Collaborative Research Centre (Assessment and Better Care) and co-director of the Centre for Healthy Brain Ageing (CHeBA) at UNSW.

Professor Brodaty was presented with the honours at the inaugural Professor Henry Brodaty AO Dementia Lecture on 19 September, which also featured Dementia Awareness Month guest speaker Dr Ron Petersen.

ON YOUR MARK!

Time to dust off those joggers, because Memory Walk & Jog is just around the corner! Dates for the 2017 tour have just been announced and exciting new locations have been added to the list. Memory Walk & Jog will visit six locations around the state, kicking-off in the Illawarra in February and – for the first time – will visit the Northern Beaches in March.

The Memory Walk & Jog team is pleased to welcome back Opal Aged Care as the major supporter of 2017 Memory Walk & Jog. “We’re very excited to be continuing our partnership with Alzheimer’s Australia through our sponsorship of Memory Walk & Jog. We want people to come and walk, run or jog together to support Australians and their families who are living with the disease,” said Gary Barnier, managing director, Opal Aged Care.

If you can’t make one of our Memory Walk & Jog events, you can still get involved by creating your own Memory Walk & Jog in your community with our DIY kit, or simply race against dementia in May 2016 by participating in My Memory Walk & Jog.

For more information visit: memorywalk.com.au/find-a-walk/nsw/events
There are an estimated 115,000 people living with dementia in NSW and three times that amount involved in their care.

While the experience of living with or caring for someone with dementia can at times feel isolating and lonely, for each person living with the disease throughout the state, there are others living nearby in similar circumstances.

It is this fact that led to the development of Close To You, a new initiative designed specifically to help people living with the condition and their carers feel less isolated and alone.

This innovative new element of Alzheimer’s Australia NSW’s website Dementia Daily features personal stories of people living with dementia in communities across NSW, and allows readers to enter their own postcode to find stories closest to their own local area.

Close To You will officially launch in early 2017, but we want our members to be the first to know about this new section so you can take a look. If you like the look of what you see and want to be among those who share their own story with others, we would love to give you the opportunity to do so before we officially launch the section next year. You can find it at www.dementiadaily.org.au/close-to-you.

Sydney resident Barry, whose wife Josie has dementia, says for him, “a major benefit came from listening to the experiences of others.”

GENEVIEVE – SYDNEY

My father-in-law was diagnosed with younger onset dementia in 2014, aged just 63.

The first telltale signs were lapses in his memory. These went on for about a year before we, as a family, sat down to raise our concerns with him. It wasn’t an easy thing to do.

When his dementia was eventually diagnosed, I was astonished by the lack of support offered by the specialist. There was very little explanation about what the diagnosis actually meant, particularly in somebody so young, and there was no advice given on coping strategies. It was as if we were being told things had just stopped. That was the end.

But life doesn’t stop with a diagnosis of dementia. There are so many things you can do to continue to live well.

Initially, my father-in-law didn’t want to make any changes or put in place any strategies to help him cope. He was forgetting things at the shops, so he stopped shopping. His driving began...
to cause problems, so we took over the driving. He was always an avid reader, but he seemed to get less pleasure from reading as time went on. And, as communication became increasingly difficult, he became disengaged with life in general.

Ultimately, we made a conscious effort to be as inclusive as possible, involving him in more decision-making and as many activities as possible. We encouraged him to focus on the things he had always found enjoyable and was still able to do. So far, he has responded well. He’s gardening a lot, he’s also painting, sketching and is focusing on photography. He even joined a bird-watching group, meaning he’s now much more socially engaged. And, what’s more, he seems to find great pleasure in sharing all of this with his family and friends.

The biggest lesson we’ve learned is that dementia doesn’t mean everything has to stop. You can still live well, and have lots of fun!

Because of his diagnosis, my father-in-law lives entirely in the present. He’s completely in the moment, and as a consequence, his appreciation of the world and its natural beauty is amazing.

LISA AND EMMA - SOUTH COAST OF NSW
No one tells you this, but caring is hard! Caring for a loved one with dementia is both physically and mentally challenging. But what is perhaps even harder to deal with is the social isolation – both for the person with the diagnosis, and their families and carers.

Mum was diagnosed with younger onset dementia in May 2015, although we had been noticing the subtle signs for two or three years before that. She was forgetting how to do basic tasks, and frequently becoming confused and having difficulties with language.

We joined the Alzheimer’s Australia NSW Younger Onset Dementia Key Worker Program, which has been amazing. Our key worker has supported mum and the rest of the family throughout the entire journey so far.

Accompanied by other family members, while she was still able to, mum attended get-togethers specifically for people with younger onset dementia. This gave her and us a place to relax and chat to other people who really understood the challenges of dementia and the love involved with caring.

Mum loves to chat! We always said she would talk to anyone. She has family and friends all over the state who used to call and visit regularly. Following her diagnosis, however, the calls gradually reduced and the visits stopped. It’s no one’s fault, but as mum struggled more and more with language, her social isolation increased.

Mum is now in full-time residential care, and will hopefully transition to a permanent placement. She hates it and just wants to come home! However, we know it’s the best place for her. We visit and take her shopping, or to visit places and people. We are trying to normalise the experience as much as possible and to nurture the social relationships that remain.

WHILE THE EXPERIENCE OF LIVING WITH OR CARING FOR SOMEONE WITH DEMENTIA CAN AT TIMES FEEL ISOLATING AND LONELY, FOR EACH PERSON LIVING WITH THE DISEASE THROUGHOUT THE STATE, THERE ARE OTHERS LIVING NEARBY IN SIMILAR CIRCUMSTANCES.
**Steve – Central Coast**

I’ve been diagnosed with younger onset dementia for four years now. My symptoms first became apparent at work, prompting a colleague to call my wife, Beverley, out of concern.

I kept telling myself it was better than having cancer. I don’t get too down about it, and always try to stay positive. Having a good sense of humour helps!

We have a very supportive family and a great group of friends. We are lucky, but there are others we know with the disease whose family and friends don’t visit or socialise any more. I guess they don’t know how to react.

Following the diagnosis, Beverley took early retirement, so we could enjoy the time we have left together, as we didn’t know how quickly the disease would progress. I’ve been fortunate because my dementia has progressed slowly. I’m 67 now, I’m still sociable and I still drive, which is important to me.

I do struggle with some day-to-day tasks. Fortunately for me, I have Bev as my back-up brain. I’m so lucky to have her. She organises everything and has been amazing.

I enjoy going to the footy with my sons. We are all strong supporters of Manly and Hawthorn. I also play lawn bowls and go on a monthly outing with the Touring Old Farts (a group of retired men). We get to do all sorts of interesting things and I have lots of laughs with the guys. Plus, I have my two dogs to look after and walk each day.

Because of the lack of services for people living with younger onset dementia, particularly men, we teamed up with some people in the same situation as us and started our own social club. We meet every week for games, music and crafts.

We love to socialise and try to get out and do something every day. You can’t just sit at home and wait for life to find you … you have to get out there and find life!

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**Leonie – Mid North Coast**

Four years ago, I noticed that mum was beginning to display some unusual behaviours. I lived three hours away and every time I called mum she would make the same comment: “I can’t cope.” It got to the point where she was struggling with everyday tasks like paying bills. Later, she began having problems with her speech.

Initially, she was diagnosed with depression and possibly psychosis, and spent eight months in a mental health unit. Mum was not formally diagnosed with younger onset dementia until we moved her to a different hospital. There, the very first doctor to see her recognised that she had frontotemporal dementia. Although I’d had my suspicions, it was still hard to accept; she was only 64.

Our lives have changed immensely. I’ve had to make decisions that I never wanted to make. Mum wasn’t well enough to look after herself or my father anymore, so the next step was finding suitable residential care. Eventually we found a place close to my home. She has her own room, a lovely garden, and the nurses are fantastic. It’s clear how much they care for their residents.

You go through so many emotions when a loved one is diagnosed with dementia – anger, guilt, sadness. But you have to be strong because this person who has always been there for you now needs your help, love and support.

It’s just become a normal part of life. Mum walks us to the door each time we leave, then goes to the window and waves goodbye. That breaks my heart every time.

We try to do things with mum that she has always enjoyed. She used to be an avid gardener, so we planted sunflower seeds at the care facility. Mum also loved watercolour painting, so I set up an easel and now we paint together. It’s amazing what a person with dementia can do if you spend time with them. It’s important that you never give up on them.
KEVIN – SOUTH EAST NSW

In 2002 my wife, Maree, began to experience memory lapses. When driving familiar streets, she would get lost. When cooking, she would forget to add ingredients to dishes she had been preparing all her life.

Maree had been working as Head of Finance at a local high school. By 2006, she was not coping and she began to work part-time. Extended sick leave followed, and she never returned to work. She was diagnosed with Alzheimer’s disease at 58.

Immediately after diagnosis, life at home didn’t change too much. We have no family locally, but instead a close network of friends, most of whom have been a wonderful support. Some friends, however, seemed to disappear. I can only assume they felt uncomfortable.

About five years ago, I returned home from work to discover Maree wasn’t there. I panicked, rang friends and even called the police. Eventually we found her – at 10:30pm, 5km away from home.

In March 2012, an Aged Care Assessment Team (ACAT) deemed Maree eligible for low-care support. A year later, she was reassessed and high care was recommended, and Maree’s eligibility for a nursing home placement was confirmed.

Despite this, I chose instead to accept assistance from the Federal Government, which provided additional in-home support. I cannot express how grateful I am for the existence of such community services, designed to help people with dementia stay at home for as long as possible. Despite my ongoing grief, being able to care for Maree in our own home has brought me great joy.

As Maree’s mobility problems increased, myself and her carers began having to use a lifter to transfer her from a wheel chair to a reclining chair and into bed. That was one of the major factors in my decision three months ago that Maree should move permanently into a residential facility. It was one of the hardest decisions I have ever had to make. But, as a friend pointed out, I need to focus on being the best husband I can be, and leave the caring to the professionals.

Carers should not to be afraid to ask for help. For me, using the services available – for instance, my carer support group and Alzheimer’s Australia’s free counselling service – has provided a lifeline.

ON NOT BEING ALONE

PROFESSOR HENRY BRODATY AO AND PROFESSOR PERMINDER SACHDEV AM, CO-DIRECTORS, CENTRE FOR HEALTHY BRAIN AGEING (CHEBA)

Social isolation has strong links with dementia. Perhaps people destined to develop dementia already start to withdraw because of the slow build-up of brain pathology, or could social isolation predispose people to dementia? There is evidence that social connectedness can be a buffer against the development of dementia independently of other possible explanations such as age, sex, education and general health.

If a person develops dementia, this can lead to being alone. The dementias including Alzheimer’s disease still carry a stigma. Friends, and sometimes family, stay away because they feel embarrassed about fending off repeated questions, awkward about not knowing what to say, and possibly afraid to confront something we all fear. It used to be that way with cancer. Golf buddies or bridge partners stop inviting the person to share in their games. Dinner invitations become more infrequent. The supporting spouse also becomes more isolated just when they need more support.

About 30 per cent of people with dementia live alone. Living alone makes any ill person more vulnerable, more so if the person has difficulty with memory and organisational skills. Community supports are essential.

Anne-Nicole Casey at our Dementia Collaborative Research Centre at UNSW observed residents in one nursing home carefully over many weeks and mapped their relationships. What she found was striking: Residents with dementia had an average of one friend in the home. Some had more than one, but many had none! The few positive connections between residents were often countered by negative interactions. Relationships were almost solely with staff and visitors.

The take home messages are intuitive:

- Social connectedness is good for our brain.
- If you have dementia, reach out to your friends and ask for their help. Make them feel comfortable with your memory loss, and explain it to them.
- If you have dementia and live alone, allow community services to help you maintain your independence as long as possible.
- If you have friends or relatives with dementia, don’t abandon them. People with dementia often prefer one-to-one socialisation or just two to three others. Go for a walk, visit an art gallery, watch old movies or listen to music together. These are activities that can be easily shared and do not rely on memory.

Find out more about CHEBA at www.cheba.unsw.edu.au. Professor Brodaty is an Honorary Medical Advisor to Alzheimer’s Australia NSW.
FAT CHANCE
NEW RESEARCH OUT OF THE UK PUTS A DIFFERENT TWIST ON THE ‘HEALTHY BODY, HEALTHY MIND’ MANTRA.

It’s common knowledge that good health, such as a nutritional diet and moderate exercise, can enhance both the body and mind. New research puts a different spin on this message by finding that obesity might actually hasten brain shrinkage, thus increasing brain-age and putting you at an increased risk of neurodegeneration.

The result was published in Neurobiology of Ageing by researchers from Cambridge University. The research team analysed data from 527 healthy individuals aged between 20 and 87. Participants were grouped by body mass index and categorised as lean, overweight and obese. All participants also received MRI brain scans, which measure for brain mass and matter and identify brain atrophy (aka shrinkage).

Based on this dataset, the researchers found that those participants who were identified as obese had a greater degree of brain atrophy. This was particularly apparent in middle-aged participants, with the researchers noting that obesity increased brain-age by 10 years.

“As our brains age, they naturally shrink in size, but it isn’t clear why people who are overweight have a greater reduction in the amount of white matter. We can only speculate on whether obesity might in some way cause these changes or whether obesity is a consequence of brain changes,” study leader Dr Lisa Ronan from the Department of Psychiatry at the University of Cambridge says.

Adding further intrigue to this result was that the researchers did not find any correlation between cognitive abilities of those who were overweight, as measured by using a standardised IQ test.

Professor Paul Fletcher, who was also involved in the trial, says, “We’re living in an ageing population with increasing levels of obesity. It’s essential that we establish how these two factors might interact.

“The fact that we only saw differences from middle-age onwards raises the possibility that we might be vulnerable at this age. It will be important to find out if these changes could be reversible with weight loss, which might well be the case.”

Although there are still a few more questions to answer as to why, the study does suggest that obesity might increase the risk of neurodegeneration and gives further emphasis to the message that a healthy body can equal a healthy brain and mind.

OVERACTIVE THYROID LINKED TO DEMENTIA
A new study has found that higher than normal levels of a thyroid gland hormone called thyroxine can put a person at greater risk of developing dementia. This result was published in the journal Neurology.

The Rotterdam Study is a population-based cohort study that began in 1990 and recruited close to 10,000 men and women from the Netherlands aged 55 years and over. The aim of the study was to investigate factors that determine the occurrence of cardiovascular, neurological, ophthalmological, endocrinological and psychiatric diseases in elderly people.

Researchers looked at two specific hormones produced by the thyroid gland: the thyroid stimulating hormone (TSH), produced by the thyroid gland; and free thyroxine, which is produced based on levels of TSH and helps control the body’s metabolism. Over the course of the analysis, 601 participants developed dementia. The researchers noted that dementia risk was higher in individuals with higher levels of free thyroxine.

In this study, it seems that dementia risk may be linked to an overproduction of thyroxine, but the ‘why’ remains unknown.

An alternate hypothesis suggests that excess thyroxine might alter gene expression in critical neural pathways or that neurotoxicity might lead to premature neuronal death.

However, further study is needed to better understand the pathways in which thyroid function affects dementia risk, and whether treating this problem can reduce the risk of developing dementia.
OUT OF BODY EXPERIENCE

SCIENTISTS ARE NOW ABLE TO LOOK INSIDE THE MUSCLES AND ORGANS OF MICE. WHAT COULD THIS BREAKTHROUGH MEAN FOR ALZHEIMER’S RESEARCH?

It sounds like something from a Hollywood movie script, but researchers have developed a specialised system to see into the muscles and organs of a mouse’s body.

This groundbreaking research was published in the journal Nature by researchers from the Ludwig Maximilians University (LMU) of Munich. Now, you might be thinking ‘So what?’, but this is quite groundbreaking for our knowledge of brain disease and neurodegeneration.

This new process, called ‘ultimate DISCO’ (or uDISCO for short), allows researchers an alternative way to trace neurons from the brain through to the spinal cord and even down through to fingers and toes. The research method is being hailed as a potential new way of providing extensive insights into the structure of neuronal networks and can be used to identify disruptive processes that might lead to functional decline in the brain. Most importantly, it is completely non-invasive, with no biopsies or tissue samples required.

The new imaging method is based on a ‘clearing-and-shrinkage’ procedure that can render whole organs and organisms transparent. As the nervous system and its cells are all connected, the technique is able to identify and mark individual cells and visualise their movement through the body simply by watching the marker travel through the body.

“Since it allows individual cells to be localised, the method could be used to detect and characterise metastatic tumours at an earlier stage than is now feasible, or to monitor how stem cells behave in the body following a bone-marrow transplant,” says Dr Ali Ertürk, who leads the research group at the LMU medical centre.

The other exciting aspect is that it enables researchers to map complex neuronal networks in 3D, a significant step in revealing insights into how brains work.

This method has so far only been tested on mice and rats, but the research team is planning further studies to optimise the procedure for potential testing in humans down the track.

CAN WE AVOID MEMORY LOSS?

Doctors from the Massachusetts General Hospital have been studying the brains of older adults affectionately known as ‘superagers’: adults aged 60-80 who have the brain power similar to that of a person aged 20-30.

In this study, published in the Journal of Neuroscience, researchers examined the structural integrity of brain networks and regions within a superager’s brain. They noted that the thickness of certain regions correlated with improved memory performance, as did the volume of the hippocampus.

Dr Bradford Dickerson, who was involved in the study and based at the Massachusetts General Hospital, says that understanding which factors protect against memory decline could lead to important advances in preventing and treating age-related memory loss and possibly even various forms of dementia.

“We desperately need to understand how some older adults are able to function into old age. This could provide clues about how to prevent the decline in memory and thinking that accompanies ageing,” Dr Dickerson says.
RESEARCH

PARTY OF ONE
WHY DO PEOPLE WITH DEMENTIA AND CARERS FEEL LONELY?

People with dementia are twice as likely to be lonely compared to the rest of the population, according to research from Alzheimer’s Australia.

The Loneliness and Dementia Survey 2016, released in September, sparked calls for more understanding of the disease so people living with dementia don’t feel isolated.

Alzheimer’s Australia NSW CEO The Hon. John Watkins AM says the results were, sadly, not a surprise.

“This research backs up what we are told by our clients. When they received a diagnosis of dementia, friendships and some family relationships fell away,” John says.

“We believe part of that is because of the general lack of understanding of dementia. People simply don’t know how to interact with their friend or loved one anymore.

“They are still the same person as they were before the diagnosis. They just might need a little bit more time, understanding and support.”

More than 1500 people took part in the survey. This included people with a dementia diagnosis, their loved ones, carers and some members of the general public.

The survey also found that people with dementia report fewer relationships than the general public.

People with dementia are twice as likely not to see any friends or family as compared to the general public.

In surveys conducted with people with dementia, many respondents expressed a desire for attitudinal change.

“I like to take part in new and exciting things, but my wife thinks they’ll do me more harm than good. I understand the risk involved, but it’s what I want to do,” says one of the respondents.

“Another says: “If you get involved in something you get pleasure and enjoyment from, I guess that means you’re experiencing joy to some extent.”

Similarly, carers highlighted a need for change both in general community attitudes and in the provision of care and support services, with some expressing concerns about the lack of purposeful and engaging activities offered by service providers and the community.

“The activities offered by the respite service do not have a purpose. They are just entertaining and try to fill in the day. From my perspective, they seem more like a babysitting service. People with dementia can and should live a meaningful life, but quite often don’t as there isn’t the support and infrastructure for them in the community,” one carer says.

The research looks at key concerns and potential solutions to the challenges faced by people with dementia and their carers.

It is hoped the findings will help to reframe the conversation.

“As a society, we need to shift our thinking regarding people with dementia,” John says. “If we want to truly provide the best support to people with dementia, we cannot focus solely on clinical care. We must place more emphasis on the mental and emotional needs of individuals.

“A diagnosis of dementia does not define a person and does not mean they do not know what they want and how they wish to live their lives. People with dementia can be capable of making their own decisions and it is important they be allowed to do so.”

A copy of the survey can be found at: www.fightdementia.org.au/dementia-and-loneliness

ATTITUDE ADJUSTMENT
NEW RESEARCH REVEALS ONE OF THE BEST THINGS WE CAN DO TO HELP PEOPLE LIVE WELL WITH DEMENTIA.

The discussion paper Living Well with Dementia recommends a shift away from the common belief that a diagnosis means people are incapable of making their own decisions, and focusing instead on supporting them to do what they enjoy for as long as possible.

It was released to coincide with the inaugural Alzheimer’s Australia NSW Living Well with Dementia Conference in Sydney in August.

Alzheimer’s Australia NSW CEO The Hon. John Watkins AM says the research shows people with dementia don’t want to be told what to do or not to do; rather, they want to be supported to do what they want to do for as long as they can.

“We know all too well how difficult and devastating a diagnosis of dementia can be,” John says. “But our research shows that people can live well with dementia by staying active and being supported to maintain their independence and do the things they enjoy.

There has to be broad societal cultural change so that when someone receives a diagnosis, they are not just written off, ignored and forgotten.”

John says that in order to achieve this cultural change, government investment in creating a more dementia-friendly nation is crucial.

In surveys conducted with people with dementia, many respondents expressed a desire for attitudinal change.

“I like to take part in new and exciting things, but my wife thinks they’ll do me more harm than good. I understand the risk involved, but it’s what I want to do,” says one of the respondents.

Another says: “If you get involved in something you get pleasure and enjoyment from, I guess that means you’re experiencing joy to some extent.”

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“A diagnosis of dementia does not define a person and does not mean they do not know what they want and how they wish to live their lives. People with dementia can be capable of making their own decisions and it is important they be allowed to do so.”

A full copy of the discussion paper can be found at: nsw.fightdementia.org.au/nsw/research

12 IN TOUCH SUMMER 2016
Q&A

Is it legal to drive with a dementia diagnosis?
Drivers in NSW are required to notify Roads and Marine Services (RMS) if they have been diagnosed with any medical conditions that might impair their driving. If you’re involved in a crash and it’s found that your health condition was a contributing factor, you might be prosecuted and your insurance might be invalidated. Having a diagnosis of dementia doesn’t mean that you can’t drive, but you might need to provide a satisfactory medical report before you can apply for or renew your licence. In some cases, you might be required to pass a driving test.

Any tips for encouraging people with dementia to shower?
There are many reasons why people affected by dementia avoid showering. They might feel scared and unsteady when they are in the shower, or find it difficult to get it to a comfortable temperature or pressure. They might have forgotten how long it has been since they’ve last had a shower. Try and make showering a pleasant experience. Talk through each step of the process, be patient and don’t rush. Use soft, warm towels, heat the bathroom if need be, ensure that there is plenty of light, and try using a shower chair. Make sure that the person with dementia has plenty of privacy so that they feel secure, and choose a shower time of day that is likely to suit them.

DEMENTIA, THE NDIS, AND YOU.

If you are under 65 years of age and have a diagnosis of dementia, find out more about the National Disability Insurance Scheme (NDIS) and how it affects you.

What is the NDIS? The National Disability Insurance Scheme (NDIS) is a new way of providing individualised support and services for eligible people living with younger onset dementia (a diagnosis under the age of 65 years). Hundreds of people affected by younger onset dementia are accessing NDIS-funded support and services across Australia. We’re here to keep you informed about NDIS developments, help you understand what this means for you and help you prepare for entry into the scheme.

Who can access the NDIS? You can access the NDIS if you are under 65 years old, are an Australian citizen or a permanent resident, live in an NDIS rollout area and have a diagnosis of dementia.

Who can assist? Alzheimer’s Australia NSW Younger Onset Dementia Key Workers are here to help you. They can assist you with:

- Application process by providing guidance and support to obtain and complete the NDIS Access Request Form.
- Preparation for a planning meeting with the National Disability Insurance Agency (NDIA) planner.
- Support coordination and plan implementation, including linking you with providers, coordinating a range of supports and services, helping to resolve issues related to your plan, and regular monitoring and review of your plan.
- Specialist support coordination, helping you to address barriers, reducing issues and building capacity with the providers you choose.

Alzheimer’s Australia NSW is experienced in providing support and services for people with younger onset dementia. Younger Onset Dementia Key Workers understand the progression of dementia and that individualised support is key to maximising quality of life.

Let’s chat! To discuss your NDIA Plan please contact the National Dementia Helpline and ask to talk with a YOD Key worker.

National Dementia Helpline: 1800 100 500
The National Dementia Helpline is funded by the Australian Government

ALZHEIMER’S AND DEMENTIA AUSTRALIA AND HOPE
FIGHTDEMENTIA.ORG.AU
BENCHMARKING BEHAVIOUR

A RECENTLY COMPLETED PROJECT AIMS TO HELP AGED-CARE PROVIDERS REACH A BETTER UNDERSTANDING OF INDUSTRY STANDARDS.

Alzheimer’s Australia NSW recently completed an Australian Government funded project titled ‘Transitions into Care: Building capacity and improving experiences for residents and carers’. The project followed on from ‘The Most Difficult Choice: Dementia and the move into residential care’, which highlighted the distress and loss of control that carers and residents feel during this time. Carers reported overwhelming feelings of guilt, anxiety, relief, disempowerment, inadequacy and sadness. Alzheimer’s Australia NSW received an Aged Care Service Improvement and Healthy Ageing Grant for a three-year project. We worked with smaller providers of residential aged care in NSW and ACT.

Sally Lambourne, Evan Rollins and Ed Stewart worked with 102 providers to:
• benchmark their practice against baseline data and current research;
• identify what is working well and areas for improvement; and
• develop realistic, achievable actions.

The project team used the following framework to guide their interactions, communications and engagement with the providers.

The project reached 152 facilities (pictured in the figure above right), 12,491 residents and a similar number of staff working in the facilities. In addition to this, there were seven newsletter articles, five journal articles and 14 conference presentations about the project and the research translation activity.

Each symbol on the map represents the location of the facility and how many total beds it has. The number of beds can be used to gain a sense of scale of the project by giving an idea of the potential amount of residents and families reached.

FEEDBACK FROM PROVIDERS HAS ALL BEEN POSITIVE. HERE ARE JUST SOME OF THE COMMENTS WE RECEIVED:

“The assessment report was informative, useful and easy to understand.”

“The workshop supports the identification of practical, meaningful and achievable strategies.”

FURTHER QUOTES FROM STAFF WHO TOOK PART IN THE PROJECT INCLUDE:

“The Moving into Care project provided a framework for our organisation to follow; we were all wanting to provide person-centred care but did not have a process of where to start.”

“Thanks for the opportunity to reach for the stars when it comes to providing quality and meaningful care to our residents.”

Alzheimer’s Australia NSW is offering all residential aged-care providers the chance to benefit from the knowledge and insights gained from the project. To learn more, please contact Sally Lambourne at: E: movingintocare@alzheimers.org.au | T: (02) 8875 4633
Everyone has a different story to tell, and it’s so important that people share their stories with others. This is why I decided to become a Dementia Advocate.

Why did you become a Dementia Advocate?
I was a young carer for my dad before he moved into an aged-care facility. My dad was diagnosed with younger onset Alzheimer’s five years ago when he was 54. I want to share my experience to help raise community awareness of the disease, reduce the stigma associated with dementia in our society, and reach out to young carers to help them better understand the dementia journey.

What is one thing that all carers need to hear?
Take care of yourself. Being a young carer is a rewarding experience, but it can prove to be difficult at times. Make sure you take some time out to talk to someone about how you’re feeling and do things that make you happy. Also, know you are not alone. There are so many accessible support services for carers that have helped my family and me along our journey.

What would you say to someone who wants to be a Dementia Advocate?
I would say ‘your voice matters’. It is important to have people who know about dementia firsthand speak up about their journey and experience.

The most important thing is we still have each other. We decided one day that we need to make the most of every day and get on with our lives. Our aim is to try and make each day like nothing has changed.

Everyone has a different story to tell, and it’s so important that people share their stories with others. This is why I decided to become a Dementia Advocate.

This September, David and I will have been married for 49 years. We raised three much-loved daughters who have also blessed us with 10 grandchildren.

I’ve gone over and over in my mind countless times trying to think of when David first showed symptoms of Alzheimer’s. Some changes were big, such as a change in his personality and behaviour. This naturally worried us both, as David had always been a very gentle, caring and loving person. But others were smaller, such as his signature changing, or occasionally taking much smaller steps, almost like a shuffle.

I spoke to our GP and, after a series of tests, David was diagnosed with younger onset Alzheimer’s disease. We were shocked, not realising how much our lives would change.

Getting an early diagnosis is so important because you know where you’re going and there is so much help out there. We were given people to contact for support, including Alzheimer’s Australia NSW and local community contacts.

David having Alzheimer’s has not changed anything drastically. There are many new responsibilities and challenges I face every day, and naturally for David as well. I often look at David, when he’s sitting seemingly deep in thought, and wonder what must be going on in his mind now.

The most important thing is, we still have each other. We decided one day that we need to make the most of every day and get on with our lives. Our aim is to try and make each day like nothing has changed. That’s very challenging, but it helps us both.

I’ve become much stronger with all the new challenges and responsibilities of our life. It really upsets David if he gets annoyed or angry, so I try to stay strong and calm, but we are all human and tears happen. I’ll do whatever I can to help David and keep praying and dreaming that someday there will be a cure for all those affected by this horrible disease.

I feel so sad that there is so much stigma around dementia and Alzheimer’s. People need to know that having this disease does not mean a person is ‘demented’ in any way, or cannot go on living well.

Communication – between couples, loved ones and families – is the key to living well and accepting what’s happening around you. In the beginning, I was so in the dark about this disease, and it’s not until you start talking to others that you realise properly what it’s all about. Spreading the word to others is vital.

Dementia Advocates give a voice to people living with dementia and their carers. If you would like to be a Dementia Advocate, contact Jo-Ann Brown or visit the Alzheimer’s Australia website. T: (02) 8875 4636 | E: jo-ann.brown@alzheimers.org.au | W: nsw.fightdementia.org.au/nsw/support-us/dementia-advocates-program
EDUCATION

ALZHEIMER'S AUSTRALIA NSW COURSES

THE ALZHEIMER'S AUSTRALIA NSW EDUCATION PROGRAM OFFERS COURSES FOR CARE WORKERS, FAMILY CARERS AND VOLUNTEERS.

CARE WORKER COURSES – FEES APPLY

Working with Families
North Ryde: 23 February
Meaningful Engagement in Activities for People with Dementia
North Ryde: 21 March
Experiencing Dementia and Challenging Perceptions of Behaviour Associated with Dementia
North Ryde: 1 May
Understanding Dementia and Communicating with a Person Living with Dementia
North Ryde: 20 June

FAMILY CARER EDUCATION

3 Day Carer Course
North Ryde: 8, 15, 22 March
4 Evening Carer Course
North Ryde: 17, 24, 30 May, 7 June
Sylvania: 13, 20, 27 February, 6 March, 19, 26 June, 3, 10 July
Family and Friends
North Ryde: 22 February, 3 May

VOLUNTEER COURSES

Interacting with a Person with Dementia
North Ryde: 7 March, 15 May

GROUP LEADERSHIP

Introduction to Group Leadership
Dapto: 24, 25 January
Dubbo: 16, 17 May
North Ryde: 13, 14 February, 22, 23 May
Port Macquarie: 5, 6 April
Advanced Group Leadership
North Ryde: 26 June

Loss and Grief in Carer Support Group (1 Day)
Orange: 2 February
Loss and Grief in Carer Support Group (2 Day)
Ballina: 16, 17 March
Dapto: 3, 4 May
North Ryde: 5, 6 June

Group Leader’s Forum: Promoting Resilience in Carer Support Groups
Ballina: 15 March
North Ryde: 11 April
Port Macquarie: 4 April
Queanbeyan: 30 March
Tuggerah: 14 June

Facilitating Aboriginal and Torres Strait Islander Yarning Circles
Orange: 31 January

DEMENTIA ESSENTIALS CHCAGE005

Provide support to people living with dementia.
The Dementia Essentials three-day program is free to aged-care and healthcare staff working directly with people living with dementia.
North Ryde: 3 February, 6 March, 3 April, 3 May, 2 June
Hamilton: 15 March, 17 May
STARS Campsie: 6 February
Tumbi Umbi: 14 February, 5 April, 1 May
Port Macquarie: 15 February

For more information or to register, please contact:
T: (02) 8875 4640
E: nsw.education@alzheimers.org.au

MEMORY VAN

The Alzheimer’s Australia NSW Memory Van raises awareness of the importance of brain health and provides information on dementia for people living with dementia and their families, service providers and the community.
COMMUNITY EVENTS

OPPORTUNITIES FOR PEOPLE WITH DEMENTIA, THEIR CARERS AND FAMILIES TO SOCIALISE, BUILD SUPPORT NETWORKS AND LEARN.

**CAFÉ CONNECT**

**Bowral**
10.30am – 12pm
15 December, 19 January, 16 February
Jane Bushell
(02) 4869 5651

**Bundanoon**
10.30am – 12pm
5 January, 2 February
Alison Hall
(02) 4869 5651

**Coffs Harbour**
10 – 11.30am
15 February
Marg Coutts
(02) 6651 7101

**Nelson Bay**
9.30 – 11am
12 January, 9 February
Miriam Low
(02) 4962 7000

**Newcastle**
10 – 11.30am
19 December, 16 January, 20 February
Stuart Torrance
(02) 4962 7000

**Maitland**
11am – 12.30pm
15 December, 19 January, 16 February
Stuart Torrance
(02) 4962 7000

**Sutherland Shire**
9.30 – 11am
28 February
Julie Sinnis
(02) 9531 1928

**Raymond Terrace**
10 – 11.30am
13 January, 10 February
Miriam Low
(02) 4962 7000

**Toronto**
10 – 11.30am
23 February, 23 March
Genelle Sharrock
(02) 4962 7000

**Young**
2 – 3.30pm
7 February
Libby Smith
(02) 6241 0881

**YOUNGER ONSET DEMENTIA CAFÉ CONNECT (UNDER 65)**

**Avoca**
12 – 3pm
16 December
Justine Sneddon
0438 715 518

**Tuggerah**
9.30 – 11am
12 January, 16 February
Justine Sneddon
0438 715 518

**Newcastle**
10am – 12pm
7 December, 1 February
Clare Coyle
(02) 4962 7000

**Wollongong**
10 – 11.30am
20 December, 24 January, 21 February
Sandra Kay
(04) 38 702 418

**COFFEE AND CHAT**

**Bateman’s Bay**
10.30am – 12pm
1 February
Gaye Finch
(02) 4474 3843

**Bungendore**
9 – 11am
20 December, 17 January, 21 February
Libby Smith
(02) 6241 0881

**Cooma**
10.30am – 12.30pm
24 January, 28 February
Libby Smith
(02) 6241 0881

**YOUNGER ONSET DEMENTIA SUPPORT GROUPS (UNDER 65)**

**Braidwood**
12 – 2pm
20 December, 17 January, 21 February
Libby Smith
(02) 6241 0881

**Hamilton**
5.30 – 7.30pm
24 January, 28 February
Clare Coyle or Deb Veness
(02) 4962 7000

**Milton**
10am
21 December, 18 January, 15 February
Sandra Kay
(04) 38 702 418

**Laurieton**
27 January, 24 February
Kath Storey
(02) 6584 7444

**Laurieton Lunch Group**
9 December, 10 February
Kath Storey
(02) 6584 7444

**Narooma**
10am – 12pm
16 February
Gaye Finch
(02) 4474 3843

**Port Macquarie**
23 February
Kath Storey
(02) 6584 7444

**Port Macquarie Dinner Group**
13 December, 14 February
Kath Storey
(02) 6584 7444

**Yass**
10am – 12pm
19 December, 16 January, 20 February
Libby Smith
(02) 6241 0881

**CARER SUPPORT GROUPS**

**Corrimal**
10am – 12.30pm
14 December, 11 January, 8 February
Val Fell
(02) 4229 5926

**Goulburn**
10am – 12pm
14 December, 8 February
Jane Bushell
(02) 4869 5651

**Moss Vale**
10.30am – 12pm
13 December, 10 January, 14 February
Jane Bushell
(02) 4869 5651

**North Ryde**
10am – 12pm
22 January, 23 February
Jan Blenkinsop
(02) 8875 4667

**North Ryde (Daughters & Sons Group)**
6.30pm for 7 – 9pm
8 December, 9 February
Lyndell Huskins
(02) 8875 4615

**North Ryde (AD-HOC Group)**
12.30 for 1pm
25 February
Marina Agostino
(02) 9888 4268

**COMMUNITY EVENTS OPPORTUNITIES FOR PEOPLE WITH DEMENTIA, THEIR CARERS AND FAMILIES TO SOCIALISE, BUILD SUPPORT NETWORKS AND LEARN.**
FUNDRAISING

TESTED TOUGH

FUNDRAISING IS MORE EXCITING THAN EVER! THREE BIG EVENTS SEE PARTICIPANTS REACH THE HIGHEST PEAKS AND TRAVERSE SOME OF THE TOUGHEST TERRAIN – ALL IN THE NAME OF DEMENTIA RESEARCH.

PEDAL PUSHERS

THE INAUGURAL BONDI2BERRY RIDE TO REMEMBER TOOK PLACE IN EARLY SEPTEMBER 2016.

Starting at North Bondi Surf Life Saving Club, 40 riders, including The Hon. Tony Abbott MP and Andrew ‘Reidy’ Reid from Bondi Rescue, were sent on their way by Alzheimer’s Australia Ambassador Ita Buttrose. The group travelled 150km through parts of the Royal National Park and followed the coast to Wollongong and Kiama before finishing in beautiful Berry.

Organisers Nick Young, Pierre Sullivan and James Trude all have witnessed the stress dementia places on carers and family, through parents living with the disease or from working in aged care, and decided to use their passion for cycling to both raise awareness and funds to help find a cure. The event raised a massive $53,000!

“‘It was nice to be able to leverage something we are passionate about – bike riding – to be able to help others in a much bigger and more important issue like raising awareness and funds for dementia;” says James.

For more information about community fundraising, please contact Emma Jackson-South. T: 02 8875 4625 | M: 0413 178 158 | E: emma.jackson-south@alzheimers.org.au

PEAK PERFORMANCE

With the success of our Kilimanjaro challenge event, the launch of the next two overseas challenges for Alzheimer’s Australia is just around the corner – and both are rather spectacular! In 2017, we will be taking on one of the world’s great treks: the Kokoda trail. Travelling over the 90km where Australian and Japanese armies engaged in warfare during World War II, our group will experience Papua New Guinea’s rugged wilderness on an unforgettable and life-changing Trek to Remember. If that isn’t exciting enough, 2018 will be the year we reach Everest Base Camp. Framed by the majestic Himalayas, this Nepalese trek is a stunning 92km journey to the bottom of the highest mountain in the world, a truly spectacular experience and one that we simply have to take our supporters on. Our overseas challenges are a truly wonderful and effective way for us to raise significant funds and awareness in our fight against dementia and we hope that you will be able to join us in making these bigger and better each year.

For more information on our challenge events, please contact Emma Jackson-South. P: 02 8875 4625 | M: 0413 178 158 | E: Emma.Jackson-South@alzheimers.org.au

A TREK TO REMEMBER

In October, 17 people embarked on A Trek to Remember – a dementia fundraising expedition to conquer Mount Kilimanjaro in Tanzania, Africa. The challenging trek saw members of the team battling through a physical and emotional roller coaster of altitude sickness, sub zero temperatures and some of the biggest blisters imaginable. Amazingly, most of the team made it to Uhuru Peak - the uppermost point - and those who didn’t, really weren’t far behind, reports Emma Jackson-South from the Alzheimer’s Australia NSW fundraising team, who took part in the trek.

“This was a truly challenging and wonderful experience which has raised a great deal of money and awareness for Alzheimer’s Australia NSW and we are very thankful for all who have helped make it happen,” Emma says.

“It was so moving to be on such an intense trip with a group of people all supporting the same cause for very personal reasons. We are so incredibly proud of our fundraisers who all did very well and have collectively raised over $50,000! Well done and thank you to each and every one of you!”
WE OFFER OUR CONDOLENCES TO THE FAMILIES WHO HAVE LOST THEIR LOVED ONES. WE ALSO THANK THEIR FRIENDS AND FAMILIES WHO HAVE DONATED TO ALZHEIMER’S AUSTRALIA NSW.

A
Shirley Frances Alford
Immacolata Angillette

B
John Philip Barnard
Beryl Barry
Domenica Battisti
May Baxter
Domenico Benussi
Vincenza Bove
Gordon Brown
Laurie Burns

C
Nazzareno Carchidi
Rosario Cassone
William Castagnoli
Janina Chrobak
Spencer Haydon Clarke
Lorna Emily Clarke
Sylvia Confos
Olympios Constantinou
Elizabeth Cox
Robert Culkin

D
Michael D’Arbon
Ann Day
Maria Delfakis
Maria Di Maria
Maria Duggan

E
Catherine Edgar
Diane Beverley Epfanis

F
Margaret Fisher
Angelo Fonti
Anna Franco
Pauline Marjorie Fraser
Rocco Vincenzo Fuda
Arnold Leslie Fuller
Salvatore Gambacorta
Antoine Geagea
Patricia Gock
Janice Gordon
Dorothy Hando
Allan Henry
Graham Hild
Esme Hodges
Richard John William Hogg
Alwyn Francis Horadam
Victoria Mary Howard Smith

K
Christine Kalis
George Kavo
Anthony ‘Tory’ Kelly
Sylvia Koitka
Neil Leitch

L
Douglas Mackenzie
Dorothy Mann
Antonio Marchione

M
Pauline Agnes McCulloch
Donald Graeme McGregor
John McLaughlin
Helen McPherson
Assunta Merenda
Maria Elisa Moreno
Betty Musgrove
William Newbigging
Stavroula Nicolopoulos
Herbert Ober
Keith Noel Olsen
Anthoula Pappas
Silvano Pighin
Robert Piper
Giuseppe Puglisi
Noel Reidy
Giuseppina Rinaldi
Audrey Margaret Roper
Joanne Ryan
Earle Onslow Schmidt
Kevin Lloyd Selwood
Clare Sligo
Vasiliki Stavrakis
Noeline Stevenson
John William Street
Netta Sultana
Erika Szwavik

T
Norma Mae Taggart
Bruce William Thomson
Annunziata Verducci
Henricus ‘Hans’ Franciscus Verhoeven
Benito Virgona
Phyllis Alma Washbrook
Cynthia Young Watson
Eileen Webb
Estella Myrtle Whitney
Gordon Wong
Chris Wood
Helena Zapasnik
Annunziata Zeppieri
Constandinos Zissimopoulos

Alzheimer’s Australia NSW wants to thank the executors of the recently received bequests from which people with dementia, carers and their families have received lasting benefit.
LIBRARY RESOURCES

THE ALZHEIMER’S AUSTRALIA NSW LIBRARY OFFERS FREE LOANS OF BOOKS, DVDS AND OTHER RESOURCES TO MEMBERS THROUGHOUT THE STATE. HERE ARE REVIEWS OF SOME OF THE ITEMS CURRENTLY AVAILABLE.

It’s Never too Late to Change Your Mind: The latest medical thinking on what you can do to avoid dementia by Dr Michael J Valenzuela
This audio book teaches you about dementia and being a carer. Using the latest research, the authors help you understand the importance of having a healthy heart, as the link between vascular health and forms of dementia is paramount. This book teaches you: the link between diabetes and dementia and how the oxidation theory works; how cholesterol and what we eat can affect brain function; how mental activity promotes brain growth; and which mental activities are best.

Grain Brain: The surprising truth about wheat, carbs, and sugar – your brain’s silent killers by David Perlmutter, MD
Renowned neurologist David Perlmutter, MD, blows the lid off a topic that’s been buried for far too long: Carbs are destroying your brain. Even healthy ones like whole grains can cause dementia, ADHD, anxiety, chronic headaches, depression and much more. Dr Perlmutter explains what happens when the brain encounters carbs, why your brain thrives on fat and cholesterol, and how you can spur the growth of new brain cells at any age. He offers an in-depth look at how we can take control of our ‘smart genes’ through specific dietary choices and lifestyle habits. With a revolutionary four-week plan, Grain Brain teaches us how we can reprogram our genetic destiny.

Life Is Short – Wear Your Party Pants: 10 simple truths that lead to an amazing life by Loretta LaRoche
Loretta LaRoche has helped millions of people find ways to lighten up and overcome stress. In this book, she gives you the tools you need to bring joy, passion and gusto into your life. Her techniques are a brilliant blend of old-world common sense and the most contemporary research in brain chemistry, psychology and mind-body studies. Loretta gives you dozens of proven techniques for recognising the 10 simple truths that will lead you to an intense, happy and successful life.

When Breath Becomes Air by Paul Kalanithi
A profoundly moving, exquisitely observed memoir by a young neurosurgeon faced with a terminal cancer diagnosis who attempts to answer the question: What makes a life worth living? When Breath Becomes Air chronicles Kalanithi’s transformation. Kalanithi, a neurosurgeon at Stanford working in the brain, the most critical place for human identity, and finally into a patient and new father confronting his own mortality. Paul Kalanithi died in March 2015 while working on this book, yet his words live on as a guide and a gift to us all. When Breath Becomes Air is an unforgettable, life-affirming reflection on the challenges of facing death, and the relationship between doctor and patient from a brilliant writer who became both.

Being Mortal by Atul Gawande
Medicine has triumphed in modern times, but in the inevitable condition of ageing and death, the goals of medicine seem too frequently to run counter to the interest of the human spirit. Gawande, a practicing surgeon, argues that quality of life is the desired goal for patients and families. Gawande offers examples of freer, more socially fulfilling models for assisting the infirm and dependent elderly, and he explores the varieties of hospice care to demonstrate that a person’s last weeks or months may be rich and dignified. Full of eye-opening research and riveting storytelling, Being Mortal asserts that medicine can comfort and enhance our experience even to the end, providing not only a good life but also a good end.

These titles are also available as audio books in CD format.