

Worried About Your Memory?

Your guide to understanding memory loss



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Contents

Introduction	4
About the brain	5
How memory works	6
What happens to memory as we age?	9
What causes memory problems?	11
Strategies for improving memory	12
When you should be concerned	14
Memory concerns checklist	16
What you should ask your doctor	18
Common memory disorders	21
Ten signs of dementia	23
Healthy brain, healthy life	29

It is important to remember everyone living with dementia is unique. The content in this booklet is general in nature and we recommend you seek professional advice in relation to any specific concerns or issues you may have.

Introduction

This booklet is about memory. Many of us worry about our memory at times, especially as we get older.

Some of the questions and stories we hear:

- The word is on the tip of my tongue. 99
- It takes me a long time to remember something.
- 6 I couldn't find my car in the car park. 99
- © I meet someone new and immediately forget their name. •

This booklet explains how memory works and what happens as we age.

Major changes in memory are not normal at any age. But some changes can be normal.

If you or someone you know is experiencing difficulties, start by talking to your doctor.

About the brain

The brain helps us to:

- · plan and organise things
- make decisions
- understand information
- solve complex problems and do calculations
- · pay attention
- · behave properly
- · remember things
- · speak and communicate
- · see, hear, taste, smell and feel
- · read and write
- · recognise people and objects
- · find our way
- breathe
- · control our body temperature.

How memory works

Memory involves acquiring, storing and recalling information and images. These processes are complex. Our memory is part of who we are. In thinking about your memory, it may be helpful to consider it as a filing cabinet where your life experiences are stored.

Initially your thoughts enter this filing cabinet as data. You acquire memories using a range of techniques such as:

- · paying attention
- storing information that will be useful to you
- absorbing memories through experiences.

This data is stored temporarily as 'immediate memory', functioning like your in-tray on top of the filing cabinet. Some of this information will be later stored in the filing cabinet as 'enduring memory'. Your 'memory in-tray' can only hold a limited amount of information, the next information you put in will wipe out what was there before. Whereas, your enduring storage has no capacity limitations.

If you want to keep any of the information in your 'memory in-tray', you have to move that information into your 'memory filing cabinet'. To do this you have to 'process' the information.

You can convert 'immediate memory' into 'enduring memory' using a range of techniques. For example, if you were trying to remember a new phone number you could use techniques such as:

- · repeating the phone number to yourself
- splitting the phone number into two groups so you don't have to remember all of the numbers
- picturing what the number looks like
- making up some sort of rhyme about the phone number.

Sometimes you collect new memories without realising that you may need them later. There are many different ways to store information as memories. Some people have better systems than others. Information may be more difficult to retrieve if it hasn't been processed in a meaningful and well-organised way.



Short-term memory is where we temporarily store information. It can only hold small amounts of information for a short time. Short-term memories are more likely to decline with age and dementia.

Long-term memory is a place to store memories for long periods. These memories are more resilient and may become clearer with age.

What happens to memory as we age?

As we grow older, physical changes occur in our brains.

We lose some brain cells and the connections between them. Our brains may work slower and less efficiently.

It is normal for some changes to occur in our memory and thinking. You might:

- be more forgetful than you used to be
- · take longer to remember something
- find it hard to pay attention to several things at once
- struggle to recall names
- find it hard to learn new things.

This is all normal and is called 'age-related cognitive decline'. Every person's experience is different. Some people experience a big decline while others experience very little.

Memory issues become a problem if they significantly disrupt your everyday life.



Many memory-related issues can be managed with options that may include lifestyle management, counselling and medication.

What causes memory problems?

Many factors unrelated to dementia can affect memory loss. These include:

- stress
- · pain
- chronic illness
- some medications
- fatique.

Several medical conditions may also affect memory. These include:

- · hormone changes
- nutritional deficiencies
- dehydration
- depression
- · liver or kidney disease
- sensory loss.

If you have concerns, it is important to see a doctor. A comprehensive medical assessment will help identify the cause of your memory loss.

Strategies for improving memory

Concentrate. Pay close attention when learning things or listening.

Repetition. Repeat information to yourself and rehearse what you want to remember.

Avoid overload. Try not to switch subjects. Focus on one set of information at a time.

Reduce information. Break up long lists of information into smaller groups. Learn one group at a time

Make a mental picture. Think of an object to link with the memory.

Use pattern recognition or visualisation.

Picture what you need to remember.

Make associations. Associate a person's name with a rhyme, colour or shape.

Relax. Tension may prolong a memory loss.

Trust yourself. Feeling in control of your life can improve your brain chemistry.

There is no one solution that works for everyone. How well a memory strategy works will depend on:

- the nature of your memory issues
- your lifestyle
- your attitudes and beliefs
- the support available to you.

Use strategies that work best for you and practise them regularly in your daily life.

If your memory issues are more persistent, you may need to use back-up strategies. These include:

- making lists
- using a diary to recall dates and appointments
- routinely putting important things in the same place
- · maintaining a familiar routine
- planning ahead when visiting unfamiliar places.

For more information on improving your memory and brain health, read our risk reduction booklet **Healthy Brain**, **Healthy Life**.

When you should be concerned

Memory-related changes that disrupt daily life are not a typical part of ageing.

Sometimes, symptoms are a sign of early dementia.

Events

For an older person

Memory may sometimes be vague.

For a person with dementia

May forget part or all of an event.

Words or names

For an older person

May sometimes forget. Words or names are 'on the tip of the tongue.'

For a person with dementia

Progressively forgets.

Written and verbal directions

For an older person

Able to follow.

For a person with dementia

Increasingly unable to follow.

Stories on television or in movies and books

For an older person

Able to follow.

For a person with dementia

Progressively loses ability to follow.

Stored knowledge

For an older person

Recall may be slower. Information is essentially retained.

For a person with dementia

Progressively loses known information.

Everyday skills (e.g. cooking and dressing)

For an older person

Retains ability unless physically impaired.

For a person with dementia

Progressively loses capacity to perform tasks.

Memory concerns checklist

If you have concerns about your memory, or the memory of a family memory or friend, complete the checklist below.

	ble rememberin ○ Sometimes	•		
	ble finding the r			
	ble rememberin Sometimes	g the day and date		
	ere things are us			
I find it difficult to adjust to changes in my routine Rarely Sometimes Often				
I have trouble understanding written content or following a story on television Rarely Sometimes Often				

particularl	rd to follow and j y in groups	join in conversations,	
I have prob	olems handling f	inances, such as	
•	calculating cha	•	
finding my	•	day activities such as shopping centre Often	
•	interest in activ	rities I usually enjoy Often	
	culties thinking Osometimes	through problems Often	
Family and/or friends have made comments about my poor memory			
○ Rarely	○ Sometimes	Often	
If you have ticked 'sometimes' or 'often'			

many times, you should see your doctor.

17

What you should ask your doctor

Your doctor can help identify possible causes of your memory problems.

Your doctor will talk with you about the difficulties you are experiencing. Your doctor may also give you a physical and neurological examination.

Your symptoms may not be caused by dementia.

But if they are, earlier diagnosis will be helpful.

During your visit, you should:

- · bring a list of your concerns with you
- tell your doctor how long you have had problems and whether they have become worse
- bring a list of the medications, vitamins and supplements you take.

Your doctor may refer you to a specialist for further assessment. This may be a geriatrician, psychiatrist, neurologist or neuropsychologist.



Get the most from your appointment.

- Book a longer appointment.
- Take a friend or family member with you.
- Ask questions and let your doctor know if you do not understand something.
- · Take notes during the visit.

There is no single medical test to show if someone has dementia. Doctors use different tests to make an assessment.

These may include:

- a review of your personal history
- physical examination and laboratory tests, such as blood tests
- memory and mental abilities tests
- radiological tests, such as brain imaging.

If you need these assessments, you may wish to ask your doctor some questions.

- What tests do I need to have?
- Who will do these tests?
- How long will the tests take?
- Do I need to prepare for the tests?
- Do any tests involve pain or discomfort?
- Is there a cost involved?
- Will I need a follow-up appointment?
- · Who will see me for my follow-up appointment?
- How will I find out my test results?
- Who else will receive my test results?

Getting a diagnosis takes time.

There are many possible explanations for memory concerns. You may need to be patient while you wait for your results.

Common memory disorders

Mild cognitive impairment

People can experience greater memory loss for their age, without showing other signs of dementia. This is called mild cognitive impairment.

Mild cognitive impairment is a condition that causes a slight decline in memory. It can also affect other thinking skills, known as your cognitive abilities.

Cognitive abilities refer to the brain's ability to reason, plan, reflect and remember.

These changes are serious enough to be noticeable to yourself or your friends and family. But they generally do not interfere with daily life and activities.

People with mild cognitive impairment have more memory issues than you would expect from a person their age. These memory declines are not pronounced enough to meet the diagnostic criteria for dementia. They also show no other signs of dementia. Having mild cognitive impairment does not mean you will develop dementia. While there is an increased risk, it may take years, if it happens at all.

Dementia

Dementia is the term used to describe the symptoms of a large group of illnesses that cause a progressive decline in a person's functioning.

Dementia can happen to anybody.

It is more common over the age of 65, and especially over the age of 85.

There are many known types of dementia.

Alzheimer's disease is the most common type.

Other forms of dementia include:

- · vascular dementia
- · Lewy body disease
- · frontotemporal dementia
- · dementia caused by rare conditions.

Only a doctor or specialist can properly diagnose dementia.

Ten signs of dementia

The early signs of dementia are subtle and may not be immediately obvious.

Sometimes people fail to recognise that these symptoms mean something is wrong. Or symptoms develop gradually and go unnoticed for a long time.

If you notice any of the signs listed below, you should see your doctor. The earlier you act, the better. It can help you plan ahead for your future lifestyle, care, health and finance needs.

Memory loss that disrupts daily life.

You may:

- forget recently learned information
- forget important dates and events
- ask for the same information over and over
- rely on memory aids or family to remind you.

2 Challenges in planning and solving problems.

You may have trouble:

- · following a plan
- · following a familiar recipe
- · keeping track of monthly bills
- concentrating on a task
- · doing things as fast as you used to.

Difficulty completing familiar tasks.

You may have trouble:

- · driving to a familiar location
- managing a budget at work
- remembering the rules of your favourite game.

∠ Confusion with time and place.

You may:

- · lose track of dates, seasons and time
- have trouble understanding an event booked for a future date is not happening right now
- feel familiar places become unfamiliar at times.

Difficulty with visual and spatial relationships.

You may have difficulty:

- reading
- · judging distance
- · seeing colour or contrast
- recognising that the person in a mirror is your reflection.

6 New problems with words in speaking and writing.

You may:

- be unable to follow or join in a conversation
- stop in the middle of a conversation and not know how to continue
- repeat yourself
- · struggle with vocabulary
- · have problems finding the right word
- · call things by the wrong name.

Misplacing things.

You may:

- put things in unusual places
- lose things and be unable to retrace steps to find them again
- accuse others of stealing when you cannot recall where you have put something.

8

Decreased or poor judgement.

You may:

- have trouble making decisions
- · demonstrate poor judgement with money
- pay less attention to your grooming and keeping yourself clean.

Alzheimer's Association (United States of America) developed these '10 signs of dementia'. They refer to Alzheimer's disease but also apply to other forms of dementia.

9 Withdrawal from work and social activities.

You may:

- withdraw from social or work activities
- have trouble keeping up with sports teams
- forget how to complete your favourite hobby.
- Changes in mood and personality.

You may become:

- confused
- suspicious
- · easily upset, out of your comfort zone
- · depressed, fearful or anxious
- · more rigid in your thinking
- more exaggerated in your behaviour.

For more information about dementia and the treatments, support and services available, read The Dementia Guide at <u>dementia.org.au/the-dementia-guide</u>



For more information on improving your memory and brain health, read our risk reduction booklet **Healthy Brain**, **Healthy Life**.

Healthy brain, healthy life

There are health and lifestyle factors that contribute to between 35 per cent and 50 per cent of dementia cases worldwide. The good news is all these factors can be minimised, modified or improved on.

By incorporating simple changes into your everyday life, you can lower your risk of developing dementia. Risk reduction for dementia focuses on being brain healthy. You can do this by creating a healthier heart, body and mind. The earlier you can adopt these changes, the better.





About Dementia Australia

Dementia Australia is the source of trusted information, education and services for the more than 400,000 Australians living with dementia, and the more than 1.5 million people involved in their care. We advocate for positive change and support vital research.

We are here to support people impacted by dementia, and to enable them to live as well as possible.

Founded by carers more than 40 years ago, today we are the national peak body for people living with dementia, their families and carers.

We involve people impacted by dementia and their experiences in our activities and decision-making, to make sure we are representative of the diverse range of dementia experiences. We amplify the voices of people impacted by dementia through advocating and sharing stories to help inform and inspire others.

No matter how you are impacted by dementia or who you are, we are here for you.

National Dementia Helpline 1800 100 500



For language assistance call **131 450**

Find us online dementia.org.au











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