

ATTENTION SENIORS,
PROTECT YOUR MOST VALUABLE ASSET,
YOUR MEMORY

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Two years ago, I asked my readers what is your most valuable asset? Was it your physical health? Your emotional health? The amount of money you have saved for your retirement?

Next to your medical health, most of you responded “my memory”. I base this on the large number of patients that have been coming to my office for a “memory check-up”.

The last article I wrote noted how when I asked 100 seniors the meaning of the three letters, MCI, not one hand rose. At my more recent lectures on memory, many more older adults knew that MCI means “mild cognitive impairment”, a marker for possible Alzheimer’s disease.

As in prior years, when I ask the audience how many knew what Alzheimer’s disease was, all parties raised their hands. With nearly 10 times the number of patients with MCI than there are with Alzheimer’s disease in the United States, and the number is growing exponentially every decade, it is imperative that all of you reading this article pay close attention to what follows.

In my office practice of geriatric medicine, in providing both primary care and consultative care for residents of Monmouth and Ocean County, most of my patients now know a great deal about the need to have their cholesterol level checked, blood sugar tested, skin examination for cancer, colonoscopies performed, mammogram results, EKG readings, PSA levels, stress test reports, carotid artery scan reports et al.

Five years ago none of them would even want to discuss how they thought their memory was functioning. Now however, they all know that I will ask them about their memory. Most who admit their memory is

not as good as “it used to be” want to be tested to determine if it is of concern or just a simple nuisance (what my patients refer to as “senior moments”).

As mentioned earlier, MCI stands for Mild Cognitive Impairment. Every senior citizen must learn those letters now and never “forget” them. Why? Because 30-40% of older Americans with MCI will progress to Alzheimer’s disease. **Yes progress to Alzheimer’s disease.** This may take one year or maybe 10 years but it will happen to such MCI individuals.

Why has this condition not been well publicized before the older American population? Why are these letters, MCI, not known as well as PSA for men or PAP smear for women?

The answers are found in looking into the causes and treatments of MCI: There have been no known effective treatments for MCI. And there are no established standards for diagnosis of MCI by physicians. MCI can now be diagnosed accurately and treatment options can begin immediately after an accurate diagnosis is made.

How can MCI be diagnosed?

MCI is first suspected when an individual admits to having memory problems. These concerns are about recalling recent events; difficulty in recognizing previously familiar friends/relatives; needing frequent reminders for keeping appointments; entering into a room and forgetting what she/he came in for; losing personal items frequently; yet, has a preserved long term memory. This memory loss may be only noticeable to the patient but maybe apparent to a close relative/love one. These individuals are perfectly capable of managing their own health care and other personal needs; they are still safe drivers (if they were previously so); they can handle their finances appropriately; they all continue to live independently, (unlike Alzheimer’s Disease patients who often cannot easily perform these important functions).

What is the cause of MCI? There are many theories but one fact can be stated with certainty. It is not due to “old age”. Why not? Because many patients are living to 100 years and over and do not have MCI.

Thus age may be a risk factor, but advancing age does not always mean an inevitable loss of memory or the development of MCI for the majority of older Americans.

High blood pressure, cigarette smoking, diabetes, stroke, head trauma, depression, anxiety, over-medication (frequently from too many sleeping pills or narcotic type of analgesics), too much alcohol consumption, vitamin deficiency (especially folic acid and B12), underactive thyroid, as well as certain disorders of the brain are just a few of the many contributing factors for MCI.

EVERY OLDER AMERICAN NEEDS AN ANNUAL TEST OF THEIR MEMORY.

What would be considered the best test of memory function to detect MCI or reassure a patient that MCI is not present?

The test of choice is an extremely new and exciting memory test called the CANS-MCI. The Memory Enhancement Center of Long Branch has now performed over 250 CANS-MCI over the past two years. The CANS-MCI report indicates what risk the particular individual has to progress to Alzheimer's Disease if two or more tests are performed over a 6 to 12 month period. Patients may pass the test and be given the "all-clear" and no MCI has been diagnosed. If over a 12 month period, no change is seen on performance of the CANS-MCI, it is highly unlikely that Alzheimer's Disease is on the horizon. However, if sequential studies show significant decline in memory on the CANS-MCI, then it is imperative that further testing be done. This might include a brain scan (CT or MRI of the brain)(as well as a PET scan if necessary. Performed in the doctors office, using a special "touch screen" testing tool on the doctors office computer, the CANS-MCI can assist the doctor accurately diagnose MCI when administered by a qualified specialist in memory loss. The MEC has the exclusive rights in NJ, Pennsylvania and New York to administer the CANS-MCI and incorporate it into a customized and personalized report recommending treatment to reduce the risk of MCI progressing to Alzheimer's Disease.

Fortunately for the patient, the CANS-MCI is a test fully covered by Medicare and it is my opinion, it will soon become the gold standard for the testing of all older Americans as a baseline when they reach age 65. I recommend this test be performed every year in all older patients irrespective if they think their memory is perfect or just a little slower than years before.

It now appears that all patients with Alzheimer's Disease start first with MCI. Not all patients I diagnose with MCI will however progress to Alzheimer's Disease.

The Memory Enhancement Center in Long Branch is the only facility in the tri-state area dedicated exclusively to the early diagnosis and treatment of memory concerns in older patients. Staffed by board certified geriatricians, psychometricians, nurse practitioners and geriatric social workers/therapists, the MEC can offer state-of-the-art treatments for patients with MCI as well as Alzheimer's Disease.

Treatment can be as simple as beginning on memory training tools, using the latest cognitive enhancement techniques, both computer-based as well as non-computer based training tools.

Non-prescription (such as vitamin supplements) may be offered as well.

Additionally, certain patients with MCI might be eligible to participate in a pharmaceutical sponsored clinical trial of a medication that is being tested to prevent or reduce the likelihood of MCI progressing to Alzheimer's Disease.

You can contact the Memory Enhancement Center by calling 732-263-0101.

Visit the Memory Enhancement Center website at: www.memorycenternj.com

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Your mind remember, is your most important asset.