Disease Research Center (MADRC) conducts extensive research, training and outreach programs. It is affiliated with the Center for Alzheimer Research and Treatment (CART) at Brigham and Women's Hospital, Harvard Medical School and Massachusetts General Hospital. Our centers are at the forefront of dementia clinical care and research.

MADRC and CART strive to maintain a diverse and inclusive research population. If only one group of people are studied, the information may only apply to that group. Understanding why African Americans are at greater risk for AD requires African Americans to participate in research.

The Centers benefit greatly from the expertise of their Community Advisory Board (CAB) and African American Advisory Board (CLAB), comprised of leaders in the Boston community. The CAB and CLAB guide the research team on strategies to encourage active, long-term participation of African Americans in memory and aging studies. Research participants from a variety of backgrounds play an important role in helping to find truly effective therapies for everyone with AD.

Currently more than 600 volunteers participate in studies at the Centers. Some volunteers have AD, and others are healthy older adults. Research participants undergo periodic assessments including memory and thinking abilities and brain scans. There is no cost to participate in any procedure or study, and participants can agree to participate or withdraw at any time.

For most people, the brain can retain the majority of its memory power for a lifetime. Alzheimer's, however, remains a real threat.

If you would like more information about participating in our studies, please call:

(617) 278-0383

10 WARNING SIGNS OF AD:

- 1. Memory loss that disrupts daily life
- 2. Challenges in planning or solving problems
- 3. Difficulty completing familiar tasks at home, at work or at leisure
- 4. Confusion with time or place
- 5. Trouble understanding visual images and spatial relationships
- 6. New problems with words in speaking or writing
- 7. Misplacing things and losing the ability to retrace steps
- 8. Decreased or poor judgment
- 9. Withdrawal from work or social activities
- 10. Changes in mood and personality

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Credit is due to Knight ADRC Washington University in St. Louis, MO for original copy of this information.

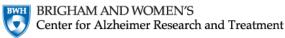








BRIGHAM HEALTH



Alzheimer's Disease and African Americans



Center for Alzheimer Research and Treatment & Massachusetts Alzheimer's Disease Research Center

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MEMORY LOSS IS NOT A PART OF NORMAL AGING...

Abnormal memory loss can be related to a variety of brain diseases. The most common cause of memory loss in older adulthood is Alzheimer disease (AD), the sixth leading cause of death in the United States.

Many older adults complain of memory lapses, such as temporarily misplacing eyeglasses, but

continue to live independently without needing help from others. This is normal aging and not AD. By contrast, a person with AD has consistent short-term memory loss, which can include repeated questions and thinking problems that interfere with carrying out usual activities such as shopping, cooking, or driving.



AD is marked by gradual but certain worsening of memory and thinking.

Symptoms may include:

- Poor decision-making in activities such as household finances and driving
- Language difficulties such as inability to come up with names or words
- Emotional distress, including irritability, anxiety, or depression

AFRICAN AMERICANS AND RISK

Alzheimer's and related dementias are a major public health problem. About 11% of Caucasians age 70 and older have AD. For reasons yet unclear, it appears to affect 21% of African Americans of the same age. Pos-

sible factors for this doubled risk may relate to high blood pressure and diabetes, which are more common in older African Americans than older Caucasians, and may increase the risk of AD.



WHAT IS GOOD FOR THE HEART IS GOOD FOR THE BRAIN

Conditions such as high blood pressure or activities such as smoking may reduce heart health and increase the risk for AD. Steps to improve heart health and possibly decrease AD risk include:

- Monitoring your blood pressure and taking medicines as prescribed
- Reducing high cholesterol through medication and diet
- Managing diabetes with diet, medication, and regular doctor visits
- Getting regular exercise, such as walking, gardening, or dancing
- Eating a healthy diet rich in fruits, vegetables, and lean protein such as fish
- Giving up smoking

And, exercise your brain!

- Challenge yourself with new activities such as riddles or puzzles
- Learn something new or begin a hobby
- Engage in social activities with friends, family, your faith community, or other special interest groups
- Stay well rested. Going to bed and rising at the same times each day helps your brain's internal clock establish a healthy pattern

WHAT IF I AM CONCERNED ABOUT MY-SELF OR A LOVED ONE?

Like other diseases, early detection of AD can lead to faster support and treatment to address symptoms; and better support for you and your loved ones. It is important to see a doctor soon when any symptoms appear. Many people begin with a visit to their pri-



mary care physician, who may suggest a visit to a specialist, such as a neurologist, geriatrician, or neuropsychologist. These specialists are trained to diagnose and treat older adults

with changes in brain health.

HELP US TO PREVENT AND TREAT ALZ-HEIMER'S DISEASE AND FIND A CURE HERE IN BOSTON

We have several studies available and provide transportation, as needed. As a specialized research center funded by the United States Department of Health and Human Services, the Massachusetts Alzheimer's