



WHAT TO DO WHEN YOU RECEIVE AN ALZHEIMER'S DIAGNOSIS

Here are some things you can do to deal with the behaviors of Alzheimer's from Lisa Skinner's Toolbox, some behaviors that you may see in your loved one in the future, and some information that will better inform you of the disease.

Everyone has a story about Alzheimer's disease.

It's time to start the conversation.

START FROM THE BEGINNING

In order to understand dementia and its related behaviors, it's also important to understand what is happening to the brain of the person with dementia. It's not mental illness, nor is the person afflicted crazy. That said, let's start from the beginning.

DEMENTIA IS NOT A SPECIFIC ILLNESS

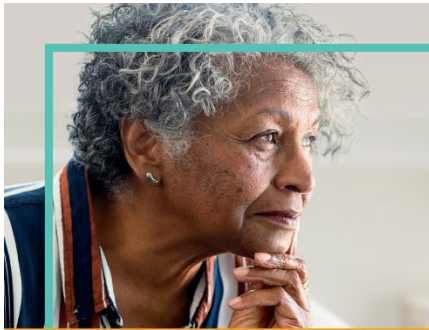
Dementia is not a specific illness. It's actually a broad term used to describe a specific set of symptoms that are caused by other illnesses. There are over 100 known causes of dementia, and most of them are irreversible.

ALZHEIMER'S DISEASE IS THE NUMBER ONE CAUSE OF DEMENTIA

Alzheimer's disease is the number one cause of dementia, affecting more than 6 million Americans today. According to the Alzheimer's Association, this number is expected to rise significantly since the baby boomer generation began to reach age 65. There are approximately 500,000 people dying each year from Alzheimer's disease. It's the 6th leading cause of death in the United States. It's also the only cause of death among the top ten in America that cannot be prevented, cured, or slowed down.

Additionally, 1 in 3 seniors die with Alzheimer's disease or another dementia, and currently, every 67 seconds, someone in the United States develops Alzheimer's disease. These numbers are compelling! Unfortunately, the fact remains, they will increasingly become worse.

Dementia is the failure of an organ just like any other major organ in our body, like our heart, or kidneys. The affected organ with dementia is the brain; however, because we can't see our brains shrinking, it is often difficult for people to relate to it in the same way as other organs that are failing. Alzheimer's disease, like most other illnesses that cause dementia, is progressive, with the symptoms growing worse over time. However, the symptoms progress at different rates and stages, and vary from person to person. There are what is considered mild symptoms, moderate symptoms, and severe symptoms; but, again, not everyone displays all of the symptoms at any one stage.



2022 Alzheimer's Disease Facts and Figures



1 in 3
seniors dies with Alzheimer's or another dementia

Over **11 million** Americans




provide unpaid care for people with Alzheimer's or other dementias

These caregivers provided more than 16 billion hours valued at nearly

\$272 billion



More than **6 million** Americans are living with Alzheimer's



In 2020, COVID-19 contributed to a **17% increase** in Alzheimer's and dementia deaths

In 2022, Alzheimer's and other dementias will cost the nation

\$321 billion

Between 2000 and 2019, deaths from heart disease have **decreased 7.3%**

It kills more than **breast cancer and prostate cancer combined**

By 2050, these costs could rise to nearly

\$1 trillion

while deaths from Alzheimer's disease have **increased 145%**

More than **80%** of Americans know little or are not familiar with mild cognitive impairment (MCI), which can be an early stage of Alzheimer's.

Dementia is also a persistent loss of intellectual functions due to a brain disorder. The decline in cognitive function in irreversible dementia is related to the destruction of the cells that transmit messages in our brains called neurons. These cells are attacked, destroyed, and lose their ability to transmit messages which enable normal, healthy function.

HOW ALZHEIMER'S DISEASE BEGINS

Alzheimer's disease, for example, begins in the part of the brain that houses memory formation, and the short-term memory begins to be affected. It then gradually spreads to other regions which affect functions such as thinking, learning, language, perception, orientation, judgment, reasoning, emotion, concentration, task sequencing, and learned behaviors.

The person with dementia loses the most recent part of their life first. For example, he/she can't remember what happened earlier that day. They first lose hours, days, weeks, and months of their lives, then years as the brain progressively shrinks and becomes more damaged. Older memories stay intact the longest. As the brain continues to shrink and cells destroyed, symptoms and behaviors become more obvious and prominent. Eventually, the disease destroys one's ability to recognize their self, their family members, and to communicate in any way. The individual becomes completely dependent on others for care. From the onset of symptoms, this process can take an average of anywhere from about 4 to 12 years; although, many people go undiagnosed for years after the most subtle symptoms begin to show. As a person loses various functions as a consequence of the different areas of their brains being destroyed, they must adapt new ways to communicate. It is in many of the behaviors that we see in people afflicted with dementia that the root of the behavior is actually their way of trying to tell us something. It is up to us to interpret what the meaning is.

Much of the anguish and frustration felt by family members and caregivers stems from watching your loved helplessly standing by, watching your loved one decline, and not knowing how to react and respond to the many behaviors that surface as a result of this disease.



**LISA
SKINNER**

There are so many aspects of living with dementia that are unexpected, and can surface out of nowhere, at any time. ٧

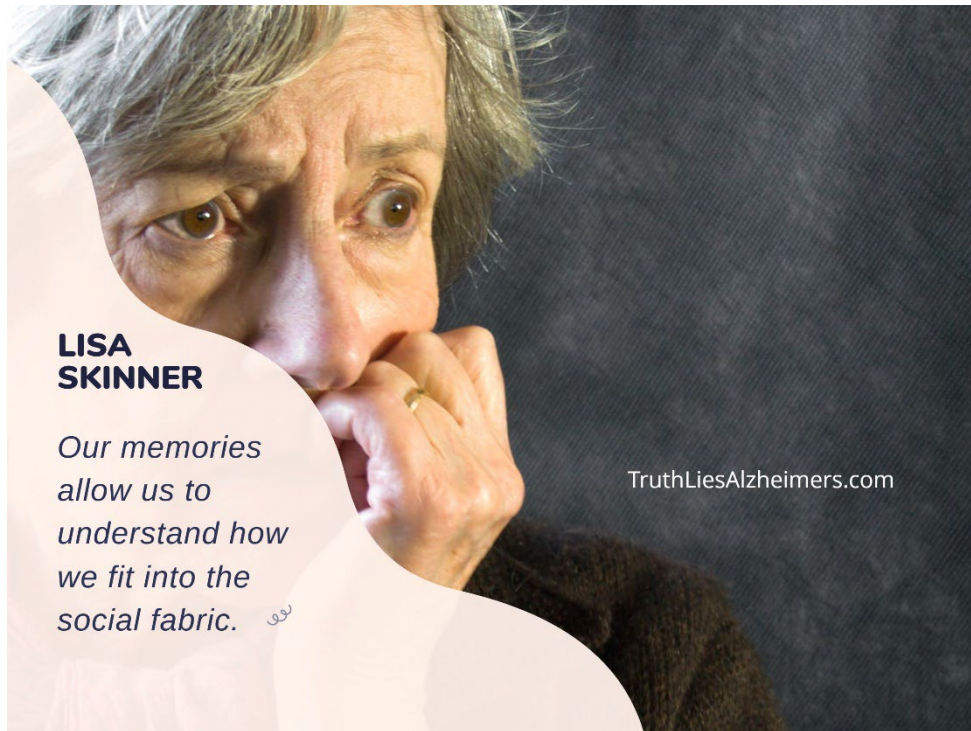
TruthLiesAlzheimers.com

My name is Lisa Skinner. I am a behavior specialist dedicated to helping families understand the stages and related behaviors that are associated with dementia-related illnesses.

My first experience with dementia was when I was a teenager, and my beloved grandma began displaying some pretty bizarre behaviors. I have been in your shoes so many times. As a matter of fact, I have personally watched 8 of my family members go through all the stages of a dementia-related illness through the end of their life.

The irony of my story is that, in addition to having 8 family members afflicted with dementia, my dog, Oliver, had also been diagnosed with doggie dementia!

I believe this is my calling in life. It is exactly why I want to help you through your turbulent journey, give you some tools to navigate the disease, and let you return to what matters. It's time to start the conversation.



BIRDS IN THE MATTRESS

My grandmother's doctor diagnosed her with what was referred to back in the 70's as senile dementia. She displayed a gamut of behaviors including paranoia, hallucinations, and delusions, all of which are symptomatic of dementia; however, not all people who suffer from dementia display all these behaviors. Everyone is different. Everyone displays different symptoms, and the cause of the dementia can be a result of over 100 different illnesses or conditions. Alzheimer's disease is the number one cause of dementia, but there are many other causes, as I will discuss.

My grandmother believed there were birds nesting in her mattress; rats running along the walls; people breaking into her home and stealing things, as well as men trying to kill her. She would call the police every day and report one or more of these occurrences.

Finally, one day, they got a hold of my mother and told her to do something with her, as she was a nutcase! I was so outraged! My grandma wasn't a nut, she had an illness! Didn't they get that? Apparently not, and neither did most other people, including the doctors.

Not much was understood about dementia then. We were at a loss for help and understanding of what was happening to my grandma, and how to manage her unpredictable day to day behaviors.

FAST FORWARD FIFTY YEARS TO 2022

Let's fast forward 50 years. I have worked in the senior living industry since 1996 and have helped thousands of families understand how to communicate with their loved one who has dementia. I have set up programming in dementia-care homes, as well as trained staff on how to care for those with dementia. I am also a certified dementia care trainer through the Alzheimer's Association. While working on a master's degree in Psychology, I made the decision to specialize in dementia-related illnesses and teach families how they can have a better-quality relationship with their loved ones through education. Working in the aging care industry, I became aware that there were still very limited resources on this subject; although there was a dire need for families to comprehend it.

YOU NEED TO LEARN TO COMMUNICATE EFFECTIVELY

The greatest obstacle for family members, caregivers, and the ones afflicted with dementia is how to communicate effectively with one another. It's a learning process, but one that can be extremely effective and bring joy to the lives of all.

Please join my co-author, Douglas Collins, and me, as we share the stories of real people and real situations of those who have endured the difficult journey through dementia. Our goal is that you will be able to relate them to your own situations and benefit from the experiences of others. Many of our readers have told us that they wished they had this information when their loved one had dementia, but that the information has given them closure now that they have a better understanding of what was happening to their loved one, and how all the behaviors that they witnessed finally make sense.

THE SECRET FACES OF ALZHEIMER'S

As many of you know, the symptoms and behaviors that accompany Alzheimer's disease and dementia are unexpected and show up out of nowhere. Many do not even realize that they are part of the disease.

We call these the **HIDDEN, OR SECRET FACES OF DEMENTIA!** They show up unannounced and are as unpredictable as a ***California earthquake!***

That's why it's so important to be prepared and to be equipped with as many tools as you can collect, so, today, let's take a closer look at what living with dementia is really like for a person, and how preparing yourself with these strategies can truly make a difference to you and the person you are caring for.

It is important to take steps to learn about the many challenges you will be facing in your role as a caregiver and steps that you can take to help yourself and to be more effective in administering care.

DON'T TRIGGER A CATASTROPHIC SITUATION

First and foremost, you want to engage in activities and actions that can IMPROVE any situation, and not trigger a more catastrophic one.

When a person suffering with dementia can no longer communicate their needs and wants, they will find alternative ways to do so, and they typically manifest in the way of a variety of behaviors that we, as family members and as caregivers, see every day!

MEMORY LOSS IS THE HALLMARK OF LIVING WITH ALZHEIMER'S

The most common association that people make with Alzheimer's disease is that people who suffer from it cannot remember things.

This is true. Memory Loss is the hallmark of living with Alzheimer's disease and dementia; however, the scope of the disease and the way it affects people is far more complicated than just memory loss and confusion.

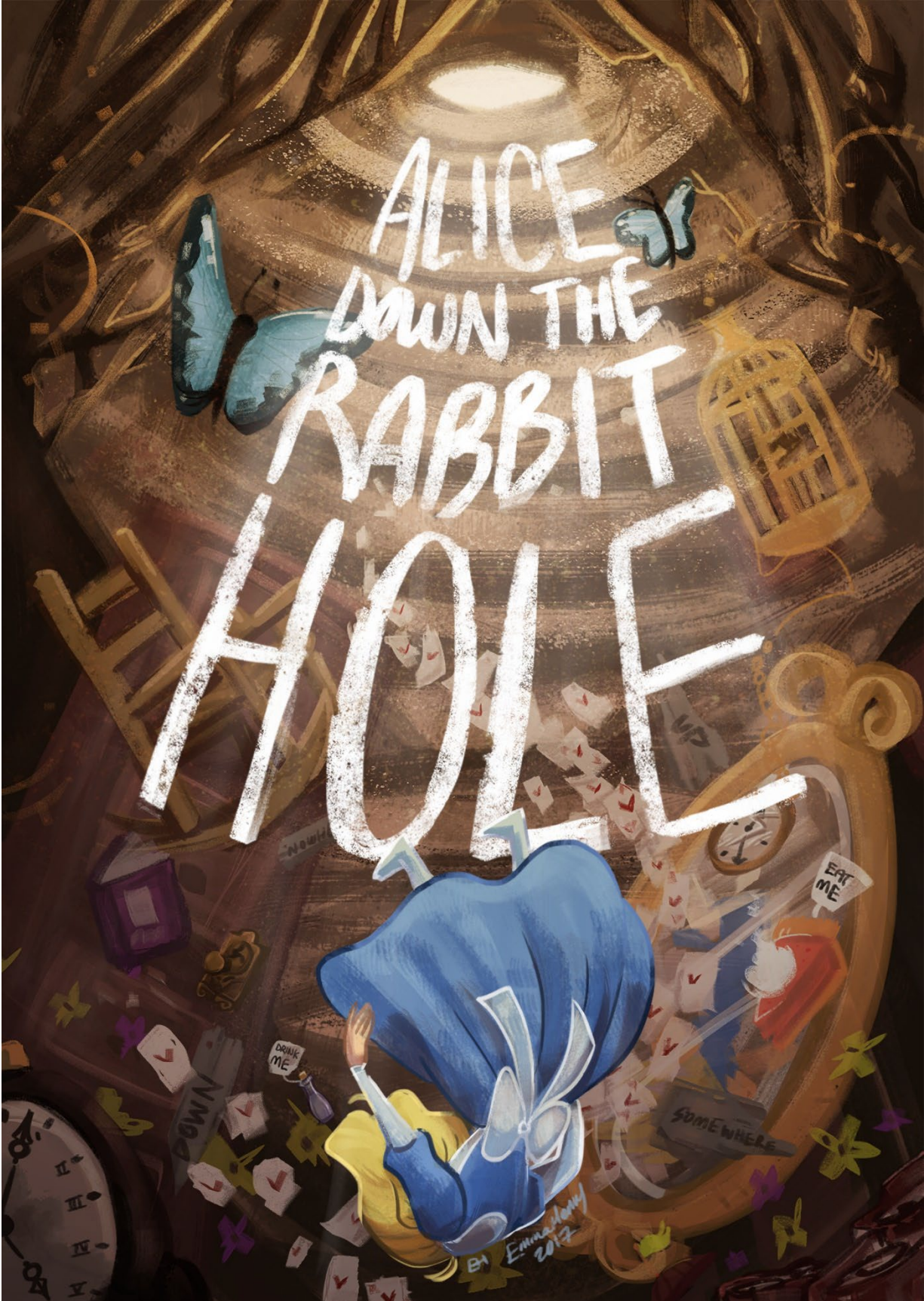
Our goal is to "zoom outside" the paradigm of it being exclusively a memory loss condition and shift people's understanding of just how dramatically this disease impacts the lives of those who have it, as well as their caregivers and family members.

COMMON BEHAVIORS OF ALZHEIMER'S DISEASE

Other aspects of living with Alzheimer's disease that people are not even aware exists or are not aware that they are a common part of the disease, for example, are wandering, delusions, hallucinations, repetition, not recognizing loved ones, suspiciousness, and paranoia.

These are just some of the common behaviors associated with dementia.

We will explain why they occur as well as how to recognize them and how to effectively react and respond to them.



Living with dementia is unlike anything you can imagine. If you think about the story of Alice in Wonderland, it would be like Alice falling into the rabbit hole and entering a world unlike anything she had ever known – one that was completely unfamiliar to her.

For example:

1. If the person you are caring for suddenly doesn't recognize you, and calls you by a different name... how would you react to that?
2. If the person you are caring for begins insisting that her spouse is on his way over to pick her up, but you knew that the spouse had been deceased for years...how would you respond to that?
3. If the person you are caring for accuses you of stealing something of theirs because they misplaced it, how would you react to that?
4. If you are leading the person you care for to the shower, as you do regularly and you enter the bathroom, then, out of nowhere, she starts screaming, "No shower, No shower!!!! Would you even know to stop to consider that person may have just seen herself in the mirror, saw her reflection, did not recognize herself and was convinced there was a stranger watching her in the bathroom and that was what triggered the response?

STRANGER IN THE MIRROR

If you did not know about the phenomenon called "*Stranger in the Mirror*," then, of course you wouldn't have even considered that.

And believe it or not, it can be an easy fix. Here is one of the solutions that you could try:

Lead the person back out of the bathroom and let her become interested in something else for a short period of time.

Go back into the bathroom and cover the mirror up with towels or a sheet.

Then try again.

If the person does not have access to their reflection in the mirror, they will not be able to see their reflection, so they won't think a stranger is standing there waiting to watch them undress.



These are just a few of the challenges that caregivers face on an ongoing basis when caring for someone with a damaged brain.

It takes very specialized training to know how to effectively respond to situations that arise like those that I just described.

WHY DOES THIS BEHAVIOR HAPPEN?

But why do these things happen?

It is equally important to understand what is at the root of the cause ... unfortunately, no amount of reasoning can talk the person experiencing a delusion out of their belief, so we must rely on alternate strategies to manage these behaviors.

MORE THAN 6 MILLION AMERICANS
ARE **LIVING WITH ALZHEIMER'S.**

According to the Alzheimer's Association, approximately one out of three Alzheimer's disease sufferers will develop paranoia or suspiciousness.

IMPAIRED REASONING AND DIMINISHED JUDGMENT

Because people with brain disease suffer from impaired reasoning, they may easily misinterpret others' intentions, and have difficulty understanding what is being communicated to them. Their ability to separate fact from fiction can become impaired.

In a person living with dementia, the ability to perceive things the same way you do diminish and will affect that person's judgment both visually and conceptually. Their level of confusion will increase over time, because they are losing the ability to make sense of what their senses take in. Consequently, this can produce several adverse reactions such as fright and/or combative behavior.

THE BRAIN IS THE CENTER OF OUR THOUGHT PROCESSES

The brain is at the center of our thought processes and is central to our lives. It takes in information from our daily experiences and enables us to make sense of our world.

Our memories are the threads that sew our lives together in sequence and continuity. However, when our memory begins to fail, the tie to our life unravels, like in the "Stranger in the Mirror" example when a person with dementia does not even recognize their own reflection in the mirror.



The first memory problems with Alzheimer’s disease typically occur with recent, or short-term memories. The person has difficulty recalling the events that have happened most recently; however, their long-term memories can remain intact far into the disease.

A person experiencing lost memories may feel confused when the world as they knew it starts disappearing, and their past and present collide. This can elicit feelings of fear and anger, as well as unveil uncharacteristic behaviors of that person.

Confusion can be triggered by lost trains of thought, mixed up memories, or a sudden change in the environment, even a change from one caregiver to another.

What we call **Reminiscence therapy** can help people with dementia cope with the loss of their core selves, another common occurrence of living with dementia.



Our memories keep us plugged into the work and play of our lives – what we do and how we do it. It also allows us to understand how we fit into the social fabric because our memories store key habits, beliefs, and values that make us unique and vital.

Sadly, dementia profoundly affects a person's ability to keep their world in order, and therefore impacts the way they live in that world and how they get along with other people in it.

Most people become confused when situations go beyond the limits of their thinking ability. Then, as the disease progresses, the mind's ability to avoid confusion declines, because they lose the normal filters and protections they once had when their brains were healthy.

You will learn to put your "Sherlock Holmes" hat on, and through the process of elimination, the underlying reason(s) can be uncovered.

Normal thinking abilities allow us to control our emotions, adjust our responses, judge the difference between a big deal and a little deal, but with dementia, that ability is gradually lost.



Alzheimer's disease is all about looking backwards as loved ones lose precious memories as their short-term memories erode and they struggle with cognitive abilities.

Our seminars help caregivers identify memory loss and behavioral issues while maintaining a focus on the future.

We look forward to new treatments and potential cures for Alzheimer's and dementia that are already on the horizon. For instance, stem cells are showing the promise of regenerating damaged neural cells.

Check out our website (truthliesalzheimers.com) and read the Foreword by Dr. Anand Srivastava to explore the advances in regenerative therapy.

WE WILL NEED MORE CAREGIVERS

Today, over 6 million people in the US live with Alzheimer's disease.

Due to the covid pandemic, we are seeing shifting changes coming to how we care people living with this heartbreaking disease.

One thing is certain. We will be needing a lot of specially trained caregivers.

And, again, this is what we do.

We educate and train caregivers on new and effective ways of communicating with people who can no longer communicate with you.

There are many effective tools out there that can make your jobs a lot less stressful and can help you take the guesswork out of a lot of the situations that WILL arise on a daily basis.

Wouldn't it be helpful to have those tools in your toolbox?

My co-author, Douglas W. Collins, and I, have a new book and a companion workbook called "Truth, Lies & Alzheimer's- It's Secret Faces."

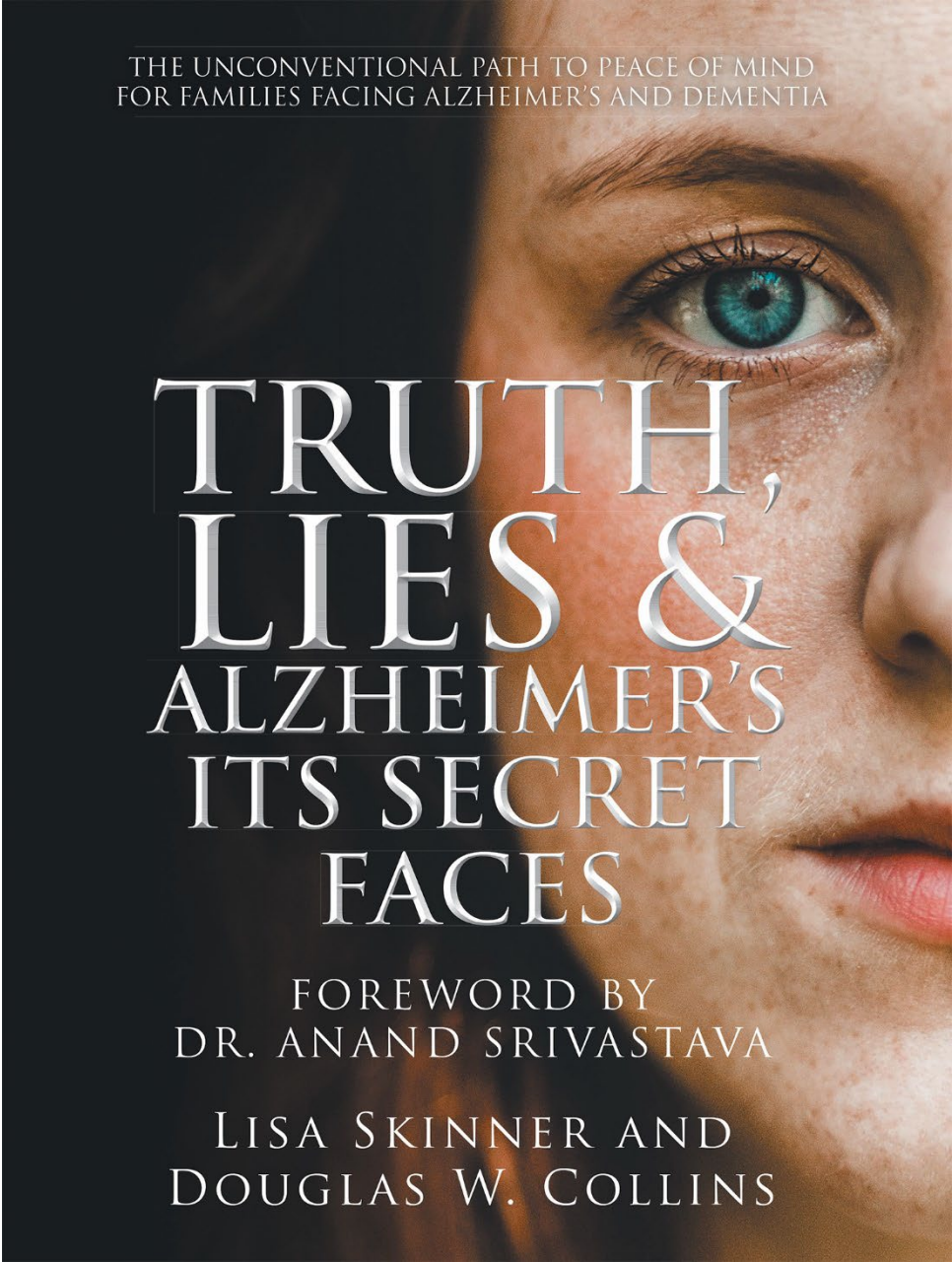
We have also written a training course that accompanies the book, so if any of you are interested in learning these strategies and techniques for caring for those with dementia, you can learn more on our website: truthliesalzheimers.com

As part of the training course, we will emphasize the importance of being aware of the ***Stranger in the Mirror*** phenomenon so, as caregivers, you, too, will know what signs and behaviors to look for to put your loved one at ease if this situation were to arise. We will also explore strategies such as ***"Joining their reality"*** and ***Reminiscence Therapy***, among many others.

If I Get Dementia

- If I get dementia, I want my friends and family to embrace my reality. If I think my spouse is still alive, or if I think we're visiting my parents for dinner, let me believe those things. I'll be much happier for it.
- If I get dementia, I don't want to be treated like a child. Talk to me like the adult that I am.
- If I get dementia, I still want to enjoy the things that I've always enjoyed. Help me find a way to exercise, read, and visit with friends.
- If I get dementia, ask me to tell you a story from my past.
- If I get dementia, and I become agitated, take the time to figure out what is bothering me.
- If I get dementia, treat me the way that you would want to be treated.
- If I get dementia, make sure that there are plenty of snacks for me in the house. Even now if I don't eat, I get angry, and if I have dementia, I may have trouble explaining what I need.
- If I get dementia, don't talk about me as if I'm not in the room.
- If I get dementia, don't feel guilty if you cannot care for me 24 hours a day, 7 days a week. It's not your fault, and you've done your best. Find someone who can help you or choose a great new place for me to live.
- If I get dementia, and I live in a dementia care community, please visit me often.
- If I get dementia, don't act frustrated if I mix up names, events, or places. Take a deep breath. It's not my fault.
- If I get dementia, make sure I always have my favorite music playing within earshot.
- If I get dementia, and I like to pick up items and carry them around, help me return those items to their original places.
- If I get dementia, don't exclude me from parties and family gatherings.
- If I get dementia, know that I still like receiving hugs or handshakes.
- If I get dementia, remember that I am still the person you know and love.

THE UNCONVENTIONAL PATH TO PEACE OF MIND
FOR FAMILIES FACING ALZHEIMER'S AND DEMENTIA

A close-up photograph of a person's face, focusing on the right eye which is a vibrant, almost iridescent blue. The skin is fair with some freckles. The background is dark, making the face and eye stand out.

TRUTH, LIES & ALZHEIMER'S ITS SECRET FACES

FOREWORD BY
DR. ANAND SRIVASTAVA

LISA SKINNER AND
DOUGLAS W. COLLINS