

Sexual Behavior and Attitudes Among Older Adults With Dementia

According to a University of Chicago Medicine study published in the *Journal of the American Geriatrics Society*, the majority of partnered, home-dwelling individuals in the United States with dementia are sexually active. In addition, individuals with cognitive impairment and dementia often have bothersome sexual function problems they do not discuss with a physician.

Researchers found that of partnered individuals with dementia, 59% of men and 51% of women were sexually active. More than 40% of partnered men and women ages 80 to 91 also reported being sexually active. However, the likelihood of partnered sexual activity declined with lower cognitive scores for women and men in the study.

The study's authors examined data from more than 3,000 home-dwelling individuals in the United States between ages 62 and 91. The majority of individuals across all cognition groups in the study reported positive attitudes about sex and that they were having sex less often than they would like.

Furthermore, more than one in 10 partnered men and women reported feeling threatened or frightened by their partner; this rate was not higher among individuals with dementia. In addition, more than one third of men and

Most Affluent Older Adults Would Not Rely on Family Caregivers Unless They Were Able to Pay Them

A new Nationwide Retirement Institute® survey revealed that 56% of affluent older Americans would rather die than live in a nursing home, yet 47% fear becoming a burden, with women more likely than men to be worried (52% vs. 42%).

Most (71%) of the 1,007 U.S. adults ages ≥50 with a household income of \$150,000 surveyed online by Harris Poll stated that they would like to have the option of relying on a family member if they needed long-term care; however, they would not expect help from (70%) or rely on (65%) a family member unless they were able to pay him/her.

In addition, many affluent older adults are not taking advantage of long-term care insurance and planning. Only 27% currently have long-term care insurance for themselves or someone else. In addition, only 39% reported discussing long-term care costs with anyone, including a spouse, partner, child, or financial advisor.

Source. "Affluent Older Americans Want Family Caregivers, But Fear Becoming a Burden and Insist on Paying Them" (2018, September 26). Retrieved November 6, 2018, from <https://prn.to/2AQ1jLq>.



one in 10 women with dementia in the study reported bothersome sexual problems, but only 17% of men and 1% of women talked to a physician about sex life changes that result from a medical condition like dementia.

Source. "New Study First to Report Sexual Behavior Norms Among U.S. Adults with Dementia Living at Home" (2018, September 12). Retrieved November 6, 2018, from <https://bit.ly/2PeOaol>.

Behavioral Activation Treatment May Reduce Risk of Cognitive Decline in Black Individuals

A study published in *JAMA Neurology* shows that a behavioral intervention can reduce the risk of future memory loss among Black individuals by increasing social, cognitive, and/or physical activity.

Building on research that suggests that individuals who remain active and engaged in community or stimulating work are resistant to cognitive decline, researchers used a treatment called behavioral activation to test whether it was possible to help individuals set goals and engage in a more active lifestyle. Behavioral activation helps participants increase cognitive, physical, or social activity by guiding an individual through goal setting and action planning.

Over a 3-year period, researchers screened 1,390 Black individuals with self-described memory problems. Of the 1,390 screened, 221 men and women were diagnosed with mild cognitive impairment and randomized to either treatment with behavioral activation or the control group. The control group received supportive therapy comprising open-ended conversations with a community-health worker, with the same amount of sessions over a 2-year period as the behavioral activation group.

Behavioral activation reduced the risk of cognitive decline by 88% compared to supportive therapy. The control group had a 9.3% incidence of memory decline over 2 years, whereas participants who received behavioral therapy had only a 1.2% occurrence of decline in memory based on a battery of standardized cognitive tests.

Source. "Study Prevents Cognitive Decline in Older Blacks With Memory Loss" (2018, September 6). Retrieved November 6, 2018, from <https://bit.ly/2RElbXw>.

Robots May Help Identify Signs of Early Cognitive Decline

Although many think of the progression of Alzheimer's disease (AD) mostly as a cognitive process, a 3-year project at Michigan Technological University is exploring the inherent link between the body and

Excessive Daytime Sleepiness May Be An Early Indicator of Alzheimer's Disease

Data from a long-term study of aging adults show that those who report excessive sleepiness during the day were approximately three times more likely than those who did not to have brain deposits of beta amyloid, a protein that is a hallmark for Alzheimer's disease, many years later. The finding, report in the journal *Sleep*, adds to a growing body of evidence that poor quality sleep could encourage this form of dementia to develop, suggesting that getting adequate nighttime sleep could be a way to help prevent Alzheimer's disease.

The study used data from the Baltimore Longitudinal Study of Aging, a long-term study started by the National Institute on Aging in 1958 that followed the health of thousands of volunteers as they age. As part of the study's periodic examinations, volunteers were asked to answer questions about daytime sleepiness/napping.

In addition, a subgroup of volunteers began receiving neuroimaging assessments in 1994. Starting in 2005, some participants received positron emission tomography (PET) scans to identify beta-amyloid plaques in neuronal tissue. Researchers identified 123 volunteers who had answered the earlier questions and had a PET scan an average of approximately 16 years later. After adjusting for demographic factors that could influence daytime sleepiness (e.g., age, sex, education, body mass index), results showed that individuals who reported daytime sleepiness were approximately 2.75 times more likely to have beta-amyloid deposition than those who did not report daytime fatigue.

Source. "More Daytime Sleepiness, More Alzheimer's Disease?" (2018, November 6). Retrieved September 6, 2018, from <https://bit.ly/2D7Fcdi>.



mind. Differences in motor behavior and performance are indicative of cognitive decline and aging. Researchers aiming to identify these subtle differences between individuals with AD, individuals with cognitive impairment, and healthy older adults are employing the help of robots for screenings.

The robot looks like a seated voting booth with handles, and, when participants sit and hold onto its handles, displays a virtual reality scene of objects. By shifting the handles, participants can try to reach for the objects. In a test

called force field adaptation task, the robot pushes back against participants' hands and they have to learn how to change the pressure of their grip to reach the objects.

In another test, called a visuomotor rotation, a cursor representing the participant's hand moves off in a different direction than expected. When reaching to the right, the cursor might move left instead. Again, participants need to adjust and relearn how to move their hands when the visual feedback veers off. The two tests engage slightly different cognitive abili-

ties, allowing researchers to assess the early stage of how individuals approach learning a new skill and measure performance over time.

Source. "Robot Helps With Early Screening for Alzheimer's Patients" (2018, September 10). Retrieved November 6, 2018, from <https://bit.ly/2SShL4R>.

Prescriptions for Benzodiazepine Sedatives May Lead to Long-Term Use

One in four older adults who receive prescriptions for benzodiazepine sedatives may continue long-term use of the drugs, according to research published in *JAMA Internal Medicine*. Researchers studied benzodiazepine use by low-income older adults in a Pennsylvania program that helps with drug costs.

Of the 576 adults who received their first benzodiazepine prescription in 2008 to 2016, 152 had a current or recent prescription 1 year later. The study included only individuals who were prescribed benzodiazepine agents by non-psychiatrists.

White patients were four times more likely to have gone on to long-term use. Individuals whose initial prescriptions were written for the largest amounts were also more likely to continue using benzodiazepine agents. For every 10 additional days of medication prescribed, a patient's risk of long-term use approximately doubled over the next 1 year.

Source. "1 in 4 Older Adults Prescribed a Benzodiazepine Goes on to Risky Long-Term Use, Study Finds" (2018, September 7). Retrieved November 6, 2018, from <https://bit.ly/2QmCrAn>.

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Daily Low-Dose Aspirin Does Not Prolong Healthy Aging in Older Adults

Taking a low-dose aspirin daily does not prolong healthy aging in older adults, according to findings for the ASPirin in Reducing Events in the Elderly (ASPREE) trial, published in *The New England Journal of Medicine*.

The large clinical trial, which began in 2010, aimed to determine the risks and benefits of daily low-dose aspirin in healthy older adults without previous cardiovascular events, dementia, or physical disability, and who were free of medical conditions requiring aspirin use. Results showed that aspirin did not extend healthy independent living (life free of dementia or persistent physical disability).



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The international, randomized, double-blind, placebo-controlled trial enrolled 19,114 older adults (16,703 in Australia and 2,411 in the United States). Study participants were enrolled at 70 years of age or older, with 65 as the minimum age of entry for African American and Hispanic individuals in the United States because of their higher risk for dementia and cardiovascular disease. Participants were followed for an average of 4.7 years to determine outcomes.

Treatment with 100 mg of low-dose aspirin per day did not affect survival free of dementia or disability. Among individuals randomly assigned to take aspirin, 90.3% remained alive at the end of the treatment without persistent physical disability or dementia, compared with 90.5% of those taking a placebo. Rates of physical disability were similar, and rates of dementia were almost identical in both groups. Rates for major cardiovascular events were similar in the aspirin and placebo groups. In the aspirin group, 448 individuals experienced cardiovascular events, compared with 474 people in the comparably sized placebo group. In addition, clinically significant bleeding occurred in 361 (3%) individuals on aspirin and in 265 (2.7%) individuals taking the placebo.

Source. "Aspirin Found Not to Prolong Healthy Aging" (2018, September 14). Retrieved November 6, 2018, from <https://bit.ly/2RDjiKL>.