

# **After Alzheimer**

**The strange history of “ Alzheimer’s Disease” and advice on maintaining cognitive skills**

# What I'm going to talk about

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**A brief history of the changing meaning  
of “Alzheimer’s Disease”**

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**How the “ disease and doom “ narrative  
arose and how it became dominant**

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**The ageing paradigm**

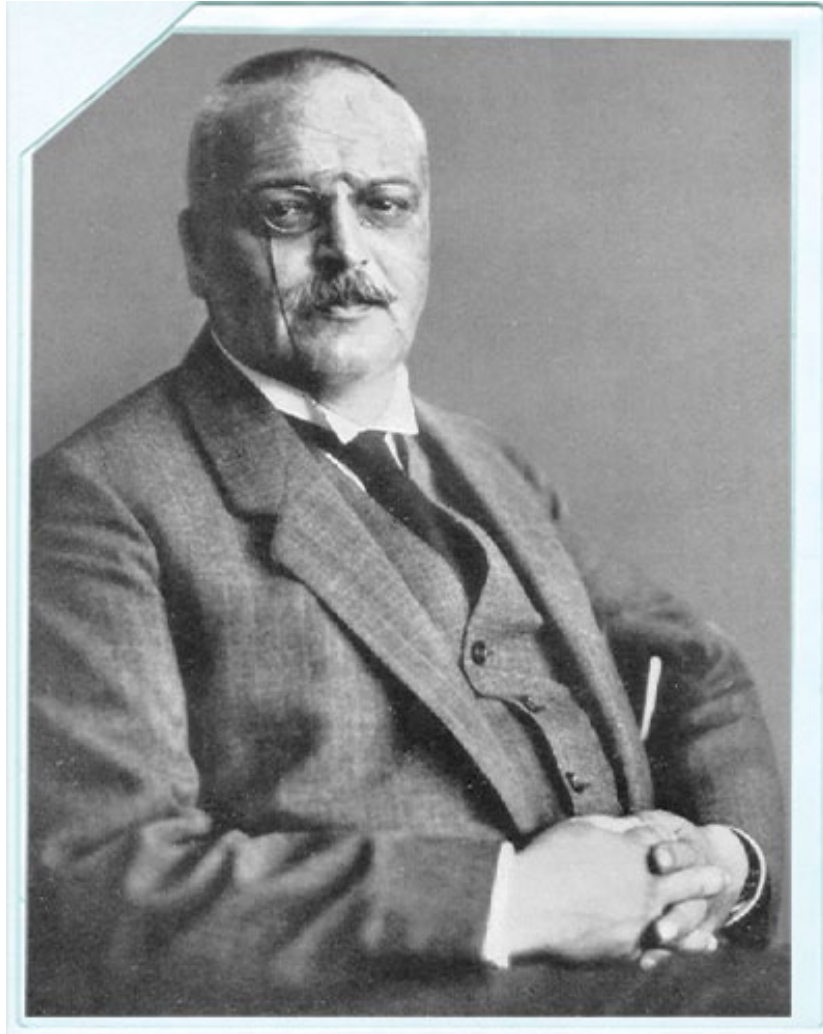
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**How to slow down your ageing and  
handle cognitive problems**

# South Germany 1900

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**Dr Alois  
Alzheimer  
1864-1915**





**Frankfurt Asylum**

Dr Alzheimer  
and his family

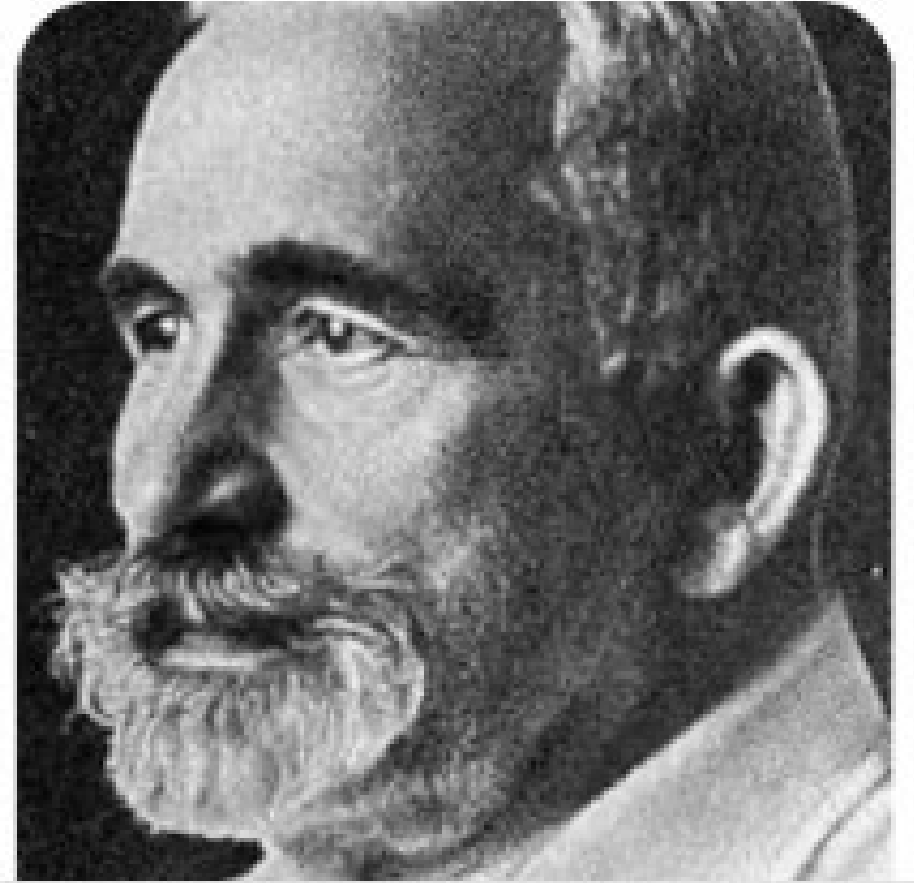
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# Frau D



**Emil Kraepelin**  
**(1856-1926)**



# The three central beliefs of organic psychiatry

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1. There are a number of clearly defined mental illnesses which have no overlap with normality

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2. These illnesses are caused by brain dysfunctions, not by biography or environment

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3. Each mental illness has a definite course

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**Alzheimer with his  
colleagues ( including  
Friedrich Heinrich Lewy  
on front row, far left).**



# Alzheimer's drawings of neurofibrillary tangles ( plaques and fibrils ), based on Frau D.'s material



America in the 1970s: the  
creation of the dominant  
“disease” narrative

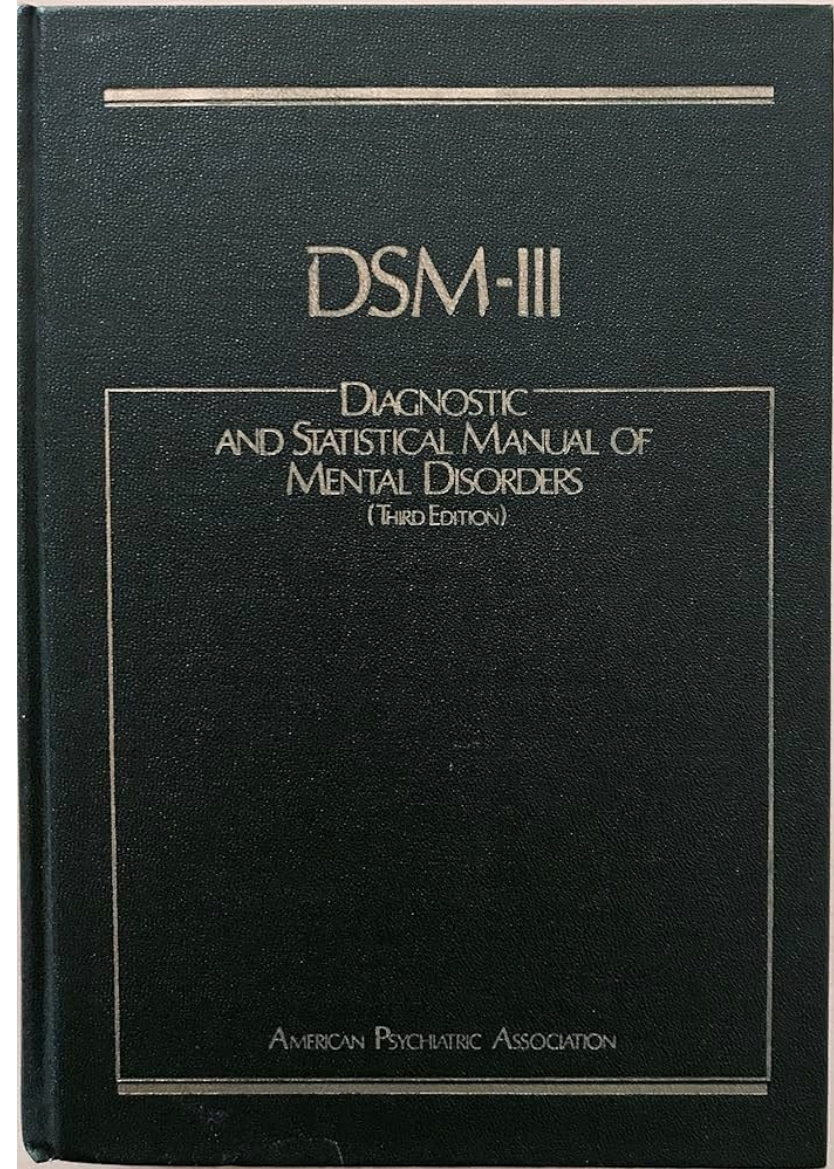
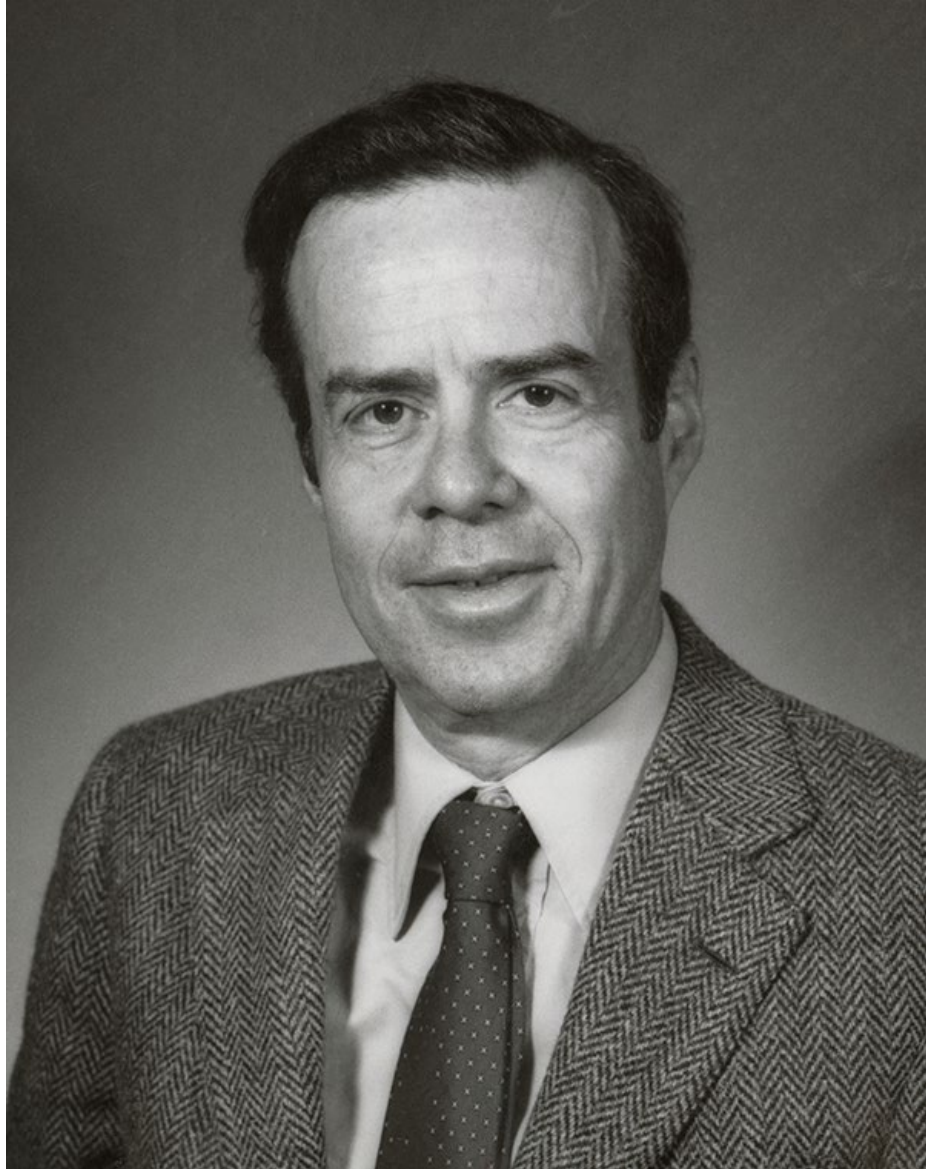
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**Robert Katzman**

**‘The prevalence and malignancy of  
Alzheimer’s disease. A major killer.’**

***Archives of Neurology, 1976; 33: 217-8.***



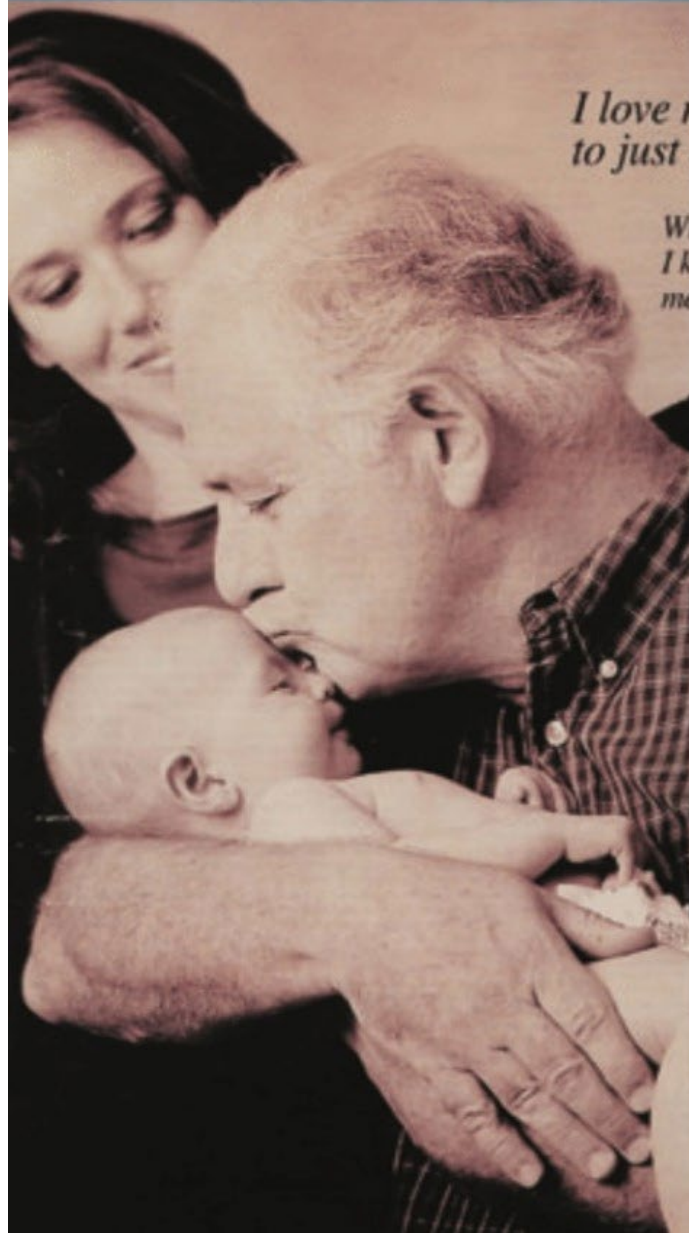
# Defining characteristics of “Alzheimer’s” or “Primary Degenerative Dementia”

- **A significant loss of intellectual abilities** (such as memory, judgment, and abstract thinking) which interferes with social or occupational functioning.
- **Insidious Onset:** A slow, creeping beginning of symptoms rather than a sudden event
- **Progressive Deteriorating Course:** A steady and continuous decline in cognitive function over time.
- **Exclusion of Other Causes:** The diagnosis required the clinical exclusion of all other specific causes of dementia, such as cerebrovascular disease (stroke), metabolic disorders, or brain tumours, through history-taking, physical examination, and laboratory tests.

# Model of mental illness post-DSM III

<b>Illness</b>	<b>Brain dysfunction</b>	<b>Pill</b>
Schizophrenia	Neurotransmitters (Dopamine)	Antipsychotics
Depression	Serotonin Imbalance	Serial Serotonin Reuptake Inhibitors
Alzheimer's	Plaques and Fibrils (amyloid accumulation)	Cholinesterase Inhibitors; amyloid removers

# Fighting Back with Aricept®



*I love my life way too much  
to just hand it over to Alzheimer's.*

*When my memory started failing,  
I knew I had to see my doctor. He put  
me on ARICEPT®. Now I'm doing better.\**

If a person forgets names, places or facts – and has trouble with everyday things like reading or shopping – it may not be normal aging. It could be Alzheimer's disease. So it's important to see a doctor as soon as you can.

There is no cure for Alzheimer's. But a prescription drug called ARICEPT® has been used by millions of people to help their symptoms.

In studies, ARICEPT® has been proven to work for mild to moderate Alzheimer's. It has helped people improve their memory over time. It has also helped them to keep doing everyday things on their own, longer.


**Ask your doctor** if ARICEPT® is right for you or your loved one. It is the #1 prescribed drug for Alzheimer's in the world. The sooner you know it's Alzheimer's, the sooner ARICEPT® can help.

ONCE-A-DAY  
**ARICEPT®**  
(donepezil HCl)  
15-MG AND 10-MG TABLETS

**Strength in the face of Alzheimer's™**

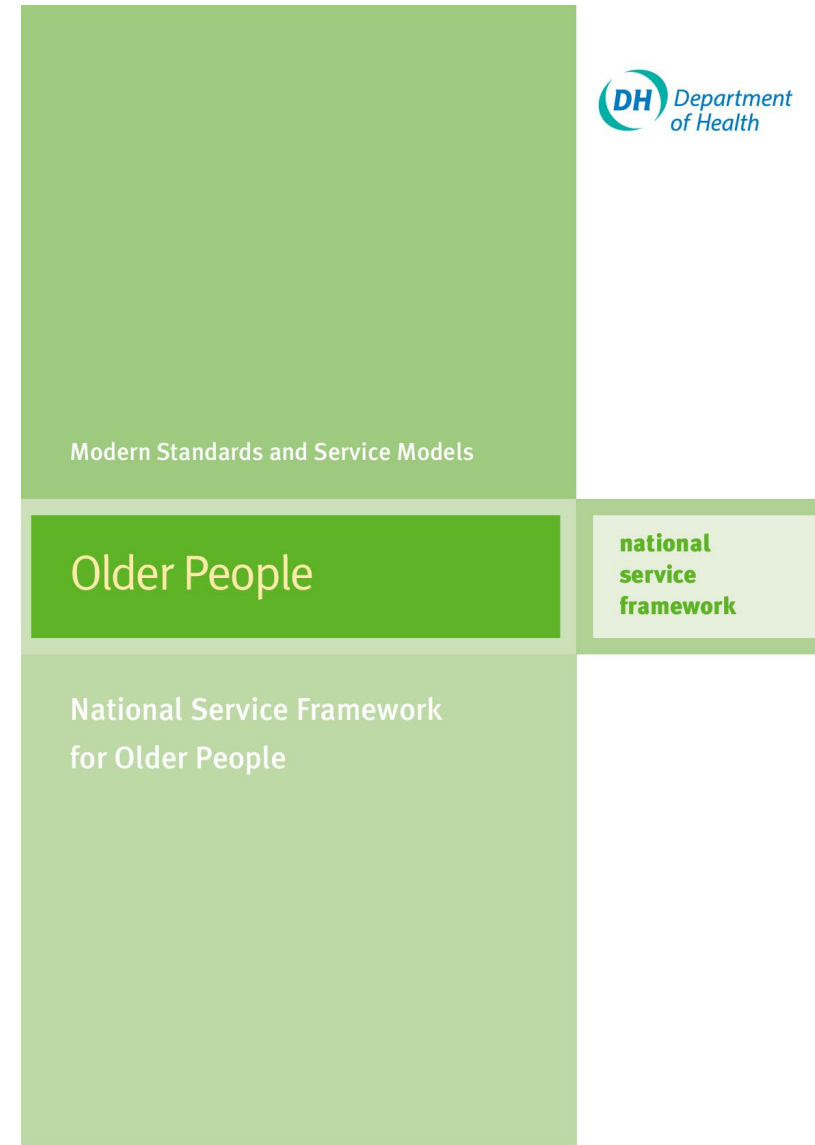
## Why didn't the model work?

- Crucially, at post-mortem, half the people diagnosed with dementia *don't* have plaques and fibrils; and half the people with *no* evidence of dementia *do*. (The Newcastle studies in the late 1960s)
- By the 1970s, it was known that most people over the age of 40 have plaques and fibrils
- So, in no way were plaques and fibrils specific to cognitive loss in old age
- Removing amyloid causes brain bleeds. Rather than being causal, it looks as if plaques and fibrils are protective.



# Memory clinics are recommended in the National Service Framework for Older People 2001

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## **Regulatory Capture**

**Leading firms in a given field work to gain control of:**

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**Relevant legal decisions**

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**Relevant political decisions**

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**Funding bodies**

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**Thereby controlling direction of academic work**

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**And their “message”**

# Narrative capture

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To provide the explanation of a disease

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To keep the need for their product  
(curative pills) in the public's  
consciousness

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To control the mediums of dissemination  
(TV, radio, social media)

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To prevent or dismiss alternative  
explanations

# Doctored

Fraud, Arrogance, and  
Tragedy in the Quest  
to **Cure Alzheimer's**



Charles Piller

# The new paradigm of the ageing process

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# Differences between the Ageing and Alzheimer paradigms

## Ageing

- Memory related difficulties very frequent among the elderly
- Gradual, slow loss of brain processes due to reproductive failure
- 100s of different cellular processes

## Alzheimer's

- A killer disease extremely common among the elderly
- A quite rapid malignant disease process
- One cascading cause

# Loss of skills in old age

## **Ageing**

- Your skill changes are individual to you
- The rate at which skills decline is individual
- At any age you can learn and re-learn

## **Alzheimer's**

- Everyone has the same disease
- You can do nothing to slow the rate
- Brain plasticity ignored



**A NEW UNDERSTANDING OF "DEMENTIA"**

**A Guide**

**Dr Michael Bender**

# **What slows cognitive decline?**

- 1. Accepting ageing**
- 2. A good physical workup**
- 3. A good mental health workup**
- 4. Seeking calm**
- 5. Maximising cardio-vascular health**
  - Restorative sleep**
  - Exercise**
  - Nourishing diet**
- 6. The Social Cure**
- 7. Problem analysis and problem solving**

# Seeking calm - hints

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Work out how *you* can get to *calm*

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No twin-tracking

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Use lists to reduce memory load

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Put gaps between events, even enjoyable ones

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Experiment lightly – don't beat yourself up when it doesn't work

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# **Problem analysis and problem solving**

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# Problem record

- The problem I want to tackle is:
- Problem analysis:
- Possible problem solution:
- Frequency of tackling problem:
- Progress review date:
- Dates tackled and outcome:



**You don't need to be alone  
– working with others**




# Birthplace of Alois Alzheimer in Marktbreit, Bavaria

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Grave of Alois Alzheimer  
and his wife,  
Hauptfriedhof  
(central cemetery)  
Frankfurt am Main



**Thank you  
and age well!**