Your Relationships

Communicating Through Alzheimer's Disease

Trying to communicate with a person who has Alzheimer's Disease (AD) can be a challenge. Understanding him or her and being understood yourself may be difficult. Here are some tips:

• Choose simple words and short sentences and use a gentle, calm tone of voice.
• Avoid talking to the person with AD like a baby or talking about the person as if he or she weren’t there.
• Minimize distractions and noise, such as the television or radio, to help the person focus on what you are saying.
• Call the person by name, making sure you have his or her attention before speaking.
• Allow enough time for a response. Be careful not to interrupt.
• If the person with AD is struggling to find a word or to communicate a thought, gently try to provide the word he or she is looking for.
• Try to frame questions and instructions in a positive way.

Visitors are important to people with AD. They may not always remember who the visitors are, but just the human connection has value. Here are some ideas to share with someone who is planning to visit a person with AD:

• Plan the visit at the time of the day when the person with AD is at his or her best. Consider bringing along some kind of activity, such as
Research has shown that caregivers themselves often are at increased risk for depression and illness, especially if they do not receive adequate support from family, friends, and the community.

Finding out that a loved one has Alzheimer’s Disease can be stressful, frightening, and overwhelming. As you begin to take stock of the situation, here are some tips that may help:

- Ask the doctor any questions you have about AD. Find out what treatments might work best to alleviate symptoms or address behavior problems.
- Contact organizations such as the Alzheimer’s Association and the Alzheimer’s Disease Education and Referral (ADEAR) Center for more information about the disease, treatment options, and caregiving resources. Some community groups may offer classes to teach caregiving, problem-solving, and management skills.
- Study your day to see if you can develop a routine that makes things go more smoothly. If there are times of day when the person with AD is less confused or more cooperative, plan your routine to make the most of those moments. Keep in mind that the way the person functions may change from day to day, so try to be flexible and adapt your routine as needed.


something familiar to read or photo albums to look at, but be prepared to skip it if necessary.

- Be calm and quiet. Avoid using a loud tone of voice or talking to the person as if he or she were a child. Respect the person’s personal space and don’t get too close.
- Try to establish eye contact and call the person by name to get his or her attention. Remind the person who you are if he or she doesn’t seem to recognize you.
- If the person is confused, don’t argue. Respond to the feelings you hear being communicated, and distract the person to a different topic if necessary.
- If the person doesn’t recognize you, is unkind, or responds angrily, remember not to take it personally. He or she is reacting out of confusion.

Caring for a person with Alzheimer’s Disease at home is a difficult task and can become overwhelming at times. Each day brings new challenges as the caregiver copes with changing levels of ability and new patterns of behavior. Research has shown that caregivers themselves often are at increased risk for depression and illness, especially if they do not receive adequate support from family, friends, and the community.
Your Health

Have You Been Screened for Pre-diabetes?

No, a new disease has not been discovered. Pre-diabetes is a new term used to identify people with blood glucose levels higher than normal but not high enough to diagnose diabetes. Why should you be concerned? First of all, people with pre-diabetes are at higher risk of heart disease and other complications associated with diabetes. And, most of them will go on to develop type 2 diabetes within 10 years. Finding out if you have pre-diabetes will allow you the opportunity to make the necessary lifestyle changes to help prevent both diabetes and heart disease.

People with pre-diabetes, also known as impaired glucose tolerance or impaired fasting glucose, were often neglected until they were actually diagnosed with diabetes. There is now growing evidence that blood glucose levels higher than normal, but lower than those for diabetes, cause a major increase in the risk of cardiovascular disease. We also know from several studies that people in the category of pre-diabetes can make lifestyle changes that can help reduce their risk of developing diabetes.

One particular study, the Diabetes Prevention Program, showed that people with pre-diabetes who were physically active (usually walking or biking) for at least 30 minutes daily and lost a modest amount of weight (average of 15 lbs) could prevent or delay the development of type 2 diabetes. In some cases they were able to return their blood glucose levels back to the normal range. People over the age of 60 derived the most benefit from these lifestyle changes in reducing their risk of diabetes.

People most likely to benefit from testing are those with the highest risk of developing diabetes. This includes anyone over the age of 45, and especially those who are also overweight. People who are overweight but under the age of 45 should be screened if they also have additional risk factors for diabetes.

Your doctor can use either a fasting plasma glucose (FPG) test or the oral glucose tolerance test (OGTT) to screen for pre-diabetes. In the FPG test, your blood glucose is measured first thing in the morning before eating. Normal fasting blood glucose is below 110 mg/dl. If your glucose is between 110-125 mg/dl, you have pre-diabetes. Diabetes is diagnosed at or above 126 mg/dl.

In the OGTT, your blood glucose is tested after fasting and again 2 hours after drinking a glucose drink. A normal blood glucose is below 130 mg/dl 2 hours after the drink. You have pre-diabetes if the 2-hour value is 140-199 mg/dl.

If you’re over the age of 45 or at high
risk of diabetes, check with your doctor about getting tested for pre-diabetes. If you have it, work on making lifestyle changes that can help prevent diabetes and reduce your risk of heart disease. Do some form of moderately-intense physical activity, such as walking, for at least 30 minutes most days of the week and lose a modest amount of weight if you’re overweight - even 10-15 lbs can make a big difference. These may seem like small changes, but over the long run they can be very effective.

**Apricot Oat Squares**

1 cup all-purpose flour  
1 cup uncooked quick oats  
3/4 cup packed light brown sugar  
½ teaspoon baking soda  
1/4 teaspoon ground cinnamon  
1/3 cup margarine, melted  
3/4 cup apricot preserves

1. Preheat oven to 350° F. Spray 9-inch square baking pan with nonstick cooking spray; set aside.
2. Combine flour, oats, brown sugar, baking soda, salt and cinnamon in medium bowl; mix well. Add margarine; stir with fork until mixture is crumbly. Reserve 3/4 cup crumb mixture for topping. Press remaining crumb mixture evenly onto bottom of prepared pan. Bake 5 to 7 minutes or until lightly browned. Spread preserves onto crust; sprinkle with reserved crumb mixture.

Exchanges: 2 starch, ½ fat  
Nutrition Information:  
- Calories: 161  
- Carbohydrate: 30 grams  
- Protein: 2 grams  
- Fat: 4 grams  
- Cholesterol: 0 mg  
- Sodium: 126 mg  
- Fiber: <1 gram

Recipe used with permission from *Diabetic Cooking*, September/October 2001.

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**Your Resources**

**Unhealthy Indoor Air Can Be Caused By Cooking**

The California Environmental Protection Agency's Air Resources Board has just completed the first comprehensive study of indoor air pollutant exposures due to different cooking activities. With the help of ARCADIS, Geraghty, and Miller, Inc. of North Carolina, a $300,000 study of pollution emitted while cooking was conducted using both gas and electric appliances.

The study found that the levels of indoor airborne particles were elevated...
during cooking activities, ranging from 60 to 1400 micrograms per cubic meter. The levels found while using the oven's self-cleaner were measured up to 3600 micrograms per cubic meter.

Thirty-two different cooking activities were tested to gauge their impact on the levels of airborne particles emitted. Also noted by the study are higher levels of nitrogen dioxide present due to activities such as frying, broiling, baking and using the oven's self-cleaner. The levels of nitrogen dioxide were measured up to 400 parts per billion, which is well above the Air Resources Board indoor air quality guidelines and health-based standards.

In order to reduce exposure to contaminants generated by cooking activities, the Air Resources Board recommends the following:

C Use an exhaust shield over your cooktop that is vented to the outdoors.

C Use the oven's self-cleaning mechanism only when the house is unoccupied and well ventilated. This is especially important when cleaning a gas stove. As noted by researchers, the level of particulate matter emitted during the cleaning of an intentionally dirtied oven ranked the highest of all activities.

C Consider a microwave oven for some tasks. Microwave ovens produce lower particle levels than conventional ovens.

C Keep stoves clean, and have gas stoves professionally adjusted every year.

For more information, contact the Air Resources Board at: http://www.arb.ca.gov

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Dear Friend:

SENIOR SENSE is a quarterly publication provided by your local county Extension Service office. It is prepared by Extension Family & Consumer Sciences specialists at The University of Georgia specifically for the educational needs of older Georgians.

Please contact your local Extension Service office for more information on these and related topics.

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