



Managing Cognitive Decline

Our recent newsletter on **Stages in Longevity** gives you a framework in which you might build your own action plan. It was derived from research supported and summarised by the Australian Institute of Health and Welfare.

There is a growing amount of quality research targeting the causes and consequences of the steady increase in community longevity. One such consequence is cognitive decline.

When a person experiences cognitive decline – or thinks they are – they may withdraw from some regular and enjoyable activities. Their withdrawal may exacerbate their concerns.

Researchers from Flinders University and University of Western Australia are examining cognitive decline and its impact on decision making. The project has the support of National Seniors Australia and from our over 20,000 strong membership base. We will let you know the outcome.

While much attention has been focused on the use of drugs to address cognitive decline, results remain inconclusive. However there is growing evidence that cognitive decline may be prevented or delayed through changes in behaviour and managing vascular risk factors.

Until a few years ago, the best evidence came from 'association' studies. These uncovered actions that could help manage cognitive decline but stopped short of a reasonable level of proof.

Randomised control studies are the 'gold standard' for establishing cause and effect. The results of such a study are valuable.

The FINGER study¹ from Finland showed that, over a two year period, addressing **nutrition, exercise, cognitive training** and **health monitoring and management** resulted in much improved cognitive performance in participants between age 60 and 77 who were chosen for their elevated risk of cognitive decline.

The **nutritional guidance** aimed at a healthy balance of protein, fat, dietary fibre, carbohydrates and salt with restrictions on trans-fats, refined sugars and alcohol.

The **exercise** was solid – two to three gym sessions of one hour per week and aerobic training averaging four sessions per week.

Computer programs provided **cognitive training** on planning and coordinating, memory improvement and mental speed.

Health monitoring and management included regular discussions and checkups.

A much longer study is needed to conclude dementia can be 'prevented' because it seems to have a long development period prior to its impact becoming measurable.

What can we take out of this?

This was a tough regime but it worked. Not everyone would want to take it on.

The good news is that the same elements keep coming up as a focus for a healthy later life. Attending to them as well as we can seems to have no obvious downside and should enhance our longevity.

David Williams

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¹Lancet, Vol 385, pages 2255-2263; June 6, 2015