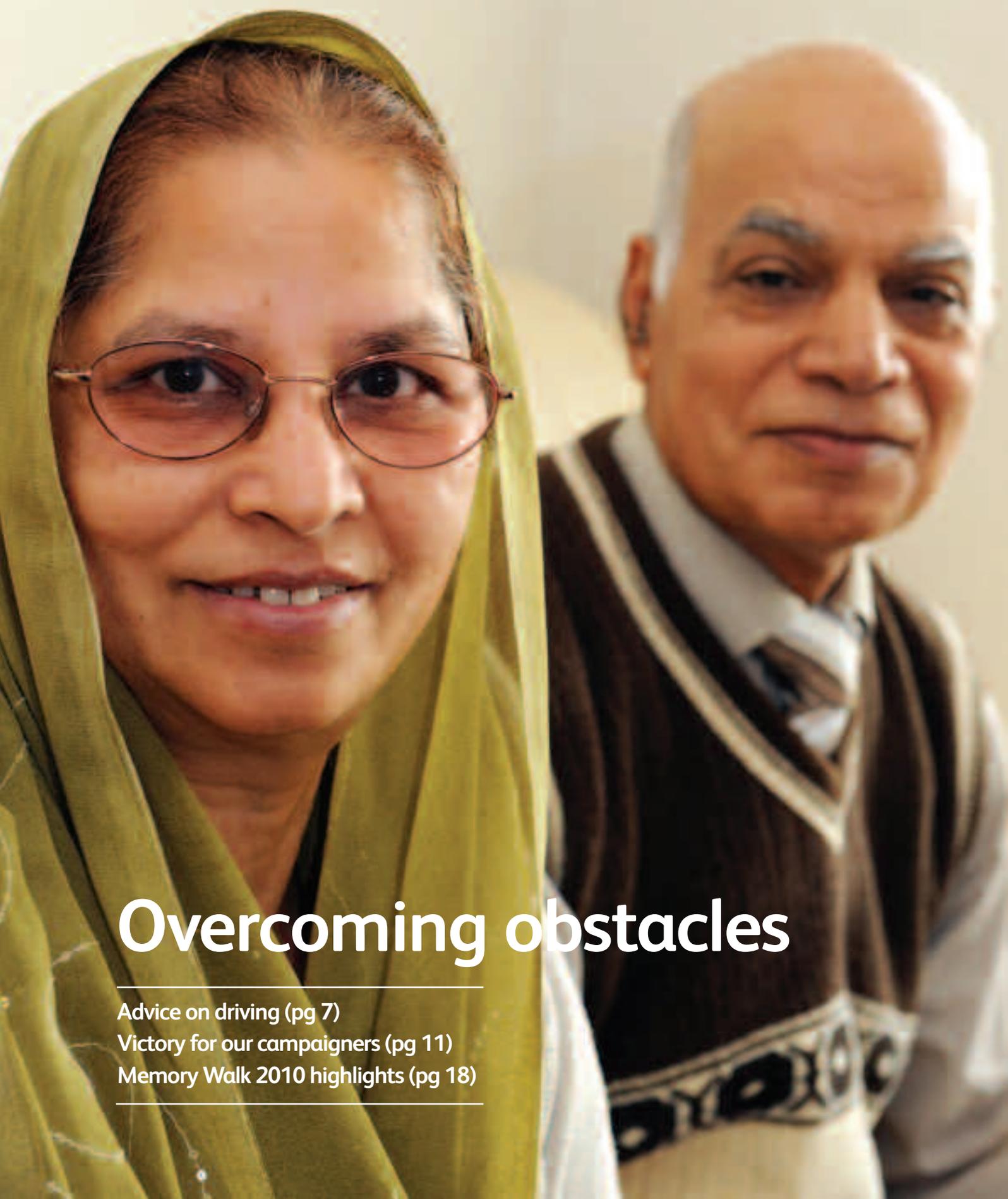


NOVEMBER 2010 £2 (free to members)

# Livingwithdementia

The magazine of Alzheimer's Society



## Overcoming obstacles

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Advice on driving (pg 7)

Victory for our campaigners (pg 11)

Memory Walk 2010 highlights (pg 18)

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## Directions

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Hundreds of thousands of people with Alzheimer's disease who have been denied

medical treatment could soon be given access to life-changing drugs on the NHS. In October, the National Institute for Health and Clinical Excellence (NICE) ruled that the medications, which cost just £2.80 per person per day, are cost effective and should be available on prescription.

This draft decision is a momentous step forward for people with Alzheimer's disease and their carers and is a real testament to the hard work and determination of the Society and its supporters.

Many of our members joined us in

our relentless campaigning with other organisations for full access to the drug treatments since they were controversially restricted in 2007. My thanks to all of you who have contributed to deliver this exceptional result.

While these drugs don't work for everyone, they can make a huge difference to the quality of life of people with dementia and their families. They can enable people to remain independent for longer, recognise their loved ones for longer, and make plans for the future. We wholeheartedly welcome the draft decision and will now do all we can to ensure it is upheld. For more information, see page 11.

**Ruth Sutherland,**  
**Interim Chief Executive**

## Contributors

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**Caroline Bradley**  
Freelance science writer Caroline Bradley has been keeping readers informed about

dementia research for the last six years. Originally a radio journalist, Caroline has worked for several national charities and is currently working with local community organisations to improve their communications. She is passionate about removing barriers to understanding. She lives in Yorkshire.



**Caroline Graty**  
Caroline worked at Alzheimer's Society until 2006, when she left to complete

an MA course and embark on a new career as a freelance writer. As well as being a regular contributor to the magazine, she writes for a number of not-for-profit and public sector organisations, with a particular focus on health and the arts. Caroline lives and works in London.



**Sandra Hillier**  
Sandra has worked as an Alzheimer's Society Helpline Adviser at central

office in London for four years. She also works for a charity that supports people with addictions. Before finding her niche working in the charity sector, Sandra trained as a journalist, and is now interested in moving into the field of counselling and psychotherapy.



Overcoming obstacles could be an apt heading for the entire issue this month. I'm sure that all members are overjoyed to hear the NICE news about dementia drugs – a result that our campaigners played no small part in achieving. Page 11 will bring you up to date on the significance of this decision.

We hear from a carer who overcame feelings of helplessness by turning her attentions to fundraising, a research fellow who is changing attitudes towards dementia in GP surgeries, and staff in Bradford who are breaking down barriers to encourage people in the Asian community to access support.

On page 15, we consider the impact of the spending review and explain how we plan to respond to the cuts to public services that will affect our members. Last but not least, we are delighted to announce the launch of an alliance of over 40 national organisations committed to taking action to improve quality of life for people with dementia. Onwards and upwards!

Rachael Doeg, Editor



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Design: people-co.com  
Cover photograph: Paula Solloway

# News and notices

## Recognition for This is me



Members of the Northumberland Acute Care and Dementia Working Group with their award

**A** project which aims to improve hospital care for people with dementia has scooped a prestigious healthcare award in the North East of England. Alzheimer's Society's This is me leaflet won the partnership working category of the north east Health and Social Care Awards in October.

The leaflet enables patients to provide key information about their individual needs, such as dietary restrictions and behaviour and sleep patterns, so that hospital staff without specialist dementia training can provide the best possible care.

This is me was developed by the Northumberland Acute Care and Dementia Group in partnership with the local Alzheimer's Society, carers and family members, and is supported by the Royal College of Nursing.

Aileen Beatty is a Modern Matron at the Northumbria NHS Foundation Trust. She says, 'This is Me is a way that people can convey information about the person with dementia so that when they come through the hospital doors it is immediately available for staff.'

'It makes the care far more personalised, especially when you're not always able to ask the person themselves how we might make things better for them.'

You can order a This is me leaflet (code 1553) from Xcalibre on 01628 529249, or download it from [alzheimers.org.uk/thisisme](http://alzheimers.org.uk/thisisme)

## Good news for nurses

Dedicated policy work by the Society means that nurses will be required to have training in cognitive impairment such as dementia before they start practising.

The Nursing and Midwifery Council launched its new education standards in September. The Society played a key part in consulting with the organisation to make sure that the needs of people living with dementia and their carers were met.

Louise Lakey, the Society's Policy Manager, said, 'Although the standards are not able to refer to specific conditions, we were able to ensure that cognitive impairment was included. This addition is great news.'

'Currently, only 12 per cent of those working on a general ward have enough pre-registration training in dementia, yet nurses tell us that they want to be equipped with the right tools and support to do the job well. It is now up to programme providers to ensure dementia is given the attention it deserves.'



Living with dementia has a new part-time reporter, Luke Bishop. Luke was previously a reporter at East Surrey and Sussex News and Media and is now dividing his time working for the Society and studying for an MA in history.

If you have a story to share about dementia, please email Luke at [luke.bishop@alzheimers.org.uk](mailto:luke.bishop@alzheimers.org.uk) or call 020 7423 3676. Luke can be contacted on Monday, Thursday and Friday.



Keith Turner pictured with his wife Lillian

## Keith Turner

A former Alzheimer's Society Ambassador who made great strides in raising awareness and understanding of dementia nationally and locally, has died.

Keith Turner, who had Alzheimer's disease, died peacefully at St Michael's Hospice in St Leonards-on-Sea, East Sussex, on 6 October. Keith was an active member of the Hastings branch and one of the first members of the Society's Living with dementia programme, which involves people with dementia in the work of the organisation.

Keith and his wife, Lillian, were tireless campaigners and travelled extensively to give presentations about their experiences of dementia. They were frequently interviewed in the media speaking out on behalf of people with dementia on the issues that affected their lives.

Andrew Ketteringham, Director of External Affairs, said, 'Keith was a powerful advocate for people living with dementia and there is no doubt that his contributions led to a greater understanding in society at large of the needs of people with this illness.'

Keith's funeral was held on 14 October at the Church of Jesus Christ Of Latter-day Saints in Hastings.

## Brain tour

The causes of Alzheimer's disease and other forms of dementia can be explored with a new virtual video tour of the brain. Narrated by Dr Anne Corbett, the Society's Acting Communications Manager, the interactive tour also features an introduction to the brain and information on how brain cells function.



Dr Corbett says, 'To help us fight this devastating condition we need to understand it. The Society funds research to improve our knowledge of dementia and its many causes and we hope these brain tour videos will show how important research is in the fight against dementia.'

To access the video visit [alzheimers.org.uk/braintour](http://alzheimers.org.uk/braintour)

## In brief

### Refunds

Members of the Society and staff who will be attending the 5th UK Dementia Congress in Bournemouth between 9 and 11 November are entitled to a special rate of £75 per day (excluding VAT).

If you have registered for the Congress and paid a higher rate, a refund will be issued from the organisers, Hawker Events, as soon as possible after the event.

If you think you qualify for a refund, please send your details to Clive Evers at the Society at [cevers@alzheimers.org.uk](mailto:cevers@alzheimers.org.uk) and he will pass them to Hawker. Alternatively, call Clive on 020 742 3586. Please include your address if you are a member of the Society and your position in the Society if you are a member of staff. Thank you.

### Research roadshows

Unfortunately, we had to postpone the London roadshow about genetics and dementia due to the London Underground strike on 3 November. The same event will now be held on Wednesday, 6 April at 11.30am in Dragon Hall near Holborn.

The next roadshow will be on 25 November in Newcastle upon Tyne and will be about early and accurate diagnosis of Alzheimer's disease. The next is on 9 December in Wrexham, where there will be a talk on cognitive rehabilitation in early-stage Alzheimer's disease. To find out more about attending these events, please call Matt Murray on 0207 423 3603.

### Improved website

Visitors to our website should now be able to find what they are looking for more easily. Improvements have been made following consultations with our website users, who told us they want access to specific information about dementia at different stages of the dementia journey. Categories are now more visible on the home page to make navigation easier. See [alzheimers.org.uk](http://alzheimers.org.uk)

# In the press

## Claire Bennett reports on a victorious month for our award-winning press team

Our biggest achievement in October was the vast amount of well-earned coverage on NICE's draft decision on Alzheimer's drugs. This decision represented a huge victory for the Society and the hundreds of thousands of people with Alzheimer's disease, their carers and relatives.

## Gold!

Alzheimer's Society's communications team was awarded the prestigious Gold Award in the Non-Profit Department of the Year category by leading industry publication PR Week. The accolade is the equivalent to the Oscars in the media field.



The team was chosen for its influential campaigning work ahead of the general election. Achievements highlighted as part of the awards citation included the publication of the Counting the Cost report, the success of the This is Me leaflet, our work with celebrity supporters such as Sir Terry Pratchett and our partnerships with Bupa and This Morning.

Senior Press Officer Hannah Clack said, 'I am hugely grateful to all of the campaigners, fundraisers and spokespeople who have responded to our requests and helped us to build such a strong profile for people living with dementia.'

## NICE draft guidance on Alzheimer's drugs

On 7 October, the National Institute for Health and Clinical Excellence (NICE) ruled that drugs for people with Alzheimer's disease, which cost just £2.80 per person per day, are cost effective and should be available on prescription. This U-turn was a momentous occasion for all our staff and volunteers who have campaigned over the last few years for access to these drugs.

Quotes from Society spokespeople, celebrities and media volunteers appeared in national newspapers including The Guardian and Daily Telegraph. The news was also reported on the BBC News website and on broadcast channels from ITV's Daybreak and BBC Breakfast to BBC Radio Foyle and BBC Radio Cymru.



## Exercise and brain size

Walking more than six miles a week could reduce your risk of developing memory problems, according to research published in the online issue of Neurology. Scientists at the University of Pittsburgh found people who walked between six and nine miles each week had greater brain volume than those who walked less.

Maintaining volume in certain parts of the brain was found to help reduce the risk of mild cognitive impairment.

Dr Susanne Sorensen, the Society's Head of Research, said, 'Although a link has been found between lack of exercise and brain shrinkage, we need more research to find out why physical activity may affect the brain. The best way to reduce your risk is to take regular exercise, eat healthily, don't smoke and get your blood pressure and cholesterol checked.'

# Your questions

Advice



Our National Dementia Helpline handled nearly 20,000 enquiries last year. Every month, we publish frequently asked questions and situations our callers need help with, along with advice from trained members of the team

Our father is in the process of being assessed for dementia. The problem is that he is continuing to drive. We've tried talking to our mother about this but she seems very reluctant to stop him from driving as she's so reliant on him. I believe this situation is putting pressure on my dad and I want to know what to do about it because it seems mum is in denial.

The issue of driving, either with a diagnosis or a suspected diagnosis of dementia, has practical implications. The overriding concern here is whether your father is safe to drive, both for his own welfare and the welfare of other road users.

Our helpline advisers regularly hear from people who fear that driving is one of the first liberties that will be taken away from someone when a diagnosis of dementia is made.

Having dementia does not necessarily lead to an abrupt lifestyle change. Many people can still hold down a job and indeed continue to drive. However, there are channels to go through in order to determine whether a person with dementia is safe to drive.

Firstly, the driver has a legal responsibility to contact the DVLA

– failing to do so could lead to a fine of up to £1,000. They will be asked to complete a questionnaire, which must include their GP's or consultant's details. The DVLA will then make contact with the driver's doctor and, based on the information received, make a decision as to whether the person can continue to drive. The person

## Having dementia does not necessarily lead to an abrupt lifestyle change.

may be asked to take a driving assessment.

If they are deemed safe to continue driving, a new driving licence will be issued which will be valid for a limited period. The person's condition will then be reviewed regularly.

Any changes in circumstances may also affect insurance cover, so ensure that you read the small print on your insurance policy and, if in doubt, contact the insurer to clarify the policy cover.

Many people with dementia fear they will automatically lose their licence, or are in denial about struggling to drive safely, so do not always contact the DVLA. In these

situations, a third party such as a concerned family member or friend may contact the DVLA and will be sent forms to fill out on the person's behalf. This may pose a moral dilemma due to feelings of guilt and betrayal.

I would say that although taking this step isn't always an easy one, the DVLA's final decision will take into account the best interests of everyone concerned. In time, people tend to adjust to using alternative forms of transport, and often find it less stressful.

For more information about driving, you can write to the DVLA at Drivers Medical Section, Swansea SA99 1TU or call 0300 790 6806.

The Society's free factsheet, Driving and dementia (439), has more advice on this topic. For a printed copy, call Xcalibre on 01628 529249 or read it online at [alzheimers.org.uk/factsheets](http://alzheimers.org.uk/factsheets)

A short booklet, Dementia and driving (1504), is also available for people with dementia and is also available from Xcalibre or online.

Advice on the emotional issues linked to giving up driving will be included in a future issue.

**By Sandra Hillier, Alzheimer's Society National Dementia Helpline Adviser**

# Overcoming obstacles

By bringing dementia out into the open and making services more accessible, the Society is starting to meet the needs of people with dementia in South Asian communities in Bradford by **Caroline Graty**

**D**ementia Support Worker Rani Shukla and Dementia Adviser Atiq Hassan work for Alzheimer's Society in Bradford. They are making great strides in increasing awareness of dementia and supporting families in the city's South Asian communities.

People from South Asian backgrounds make up over half the population in some parts of Bradford. Until now, the Society has had little contact with the city's Asian people.

Language is one barrier that can prevent people seeking help, as well as the perception that services are not for them. Atiq says, 'Services have traditionally focused on the white community, so people from other communities are less likely to walk through the door.'

In addition, dementia is often not recognised as an illness among South Asian communities. Rani says, 'The main South Asian languages have no word to describe dementia. It can be seen as 'madness' within a family and affect sons' or daughters' marriage chances.' This stigma means that memory problems are rarely spoken about.

## Reaching out

Rani and Atiq are striving to break down these barriers and bring dementia out into the open so that people can access the help they need. They work closely with Meri Yaadain, a service for South Asian people with dementia run by Bradford social services.

A large part of their work involves visiting day centres, community groups and religious centres to talk about memory loss and tackle the stigma that surrounds dementia. By speaking to people in their own languages and offering culturally appropriate information in different formats, they are able to build up trust and understanding.

Slowly but surely, their approach is paying off. Rani says, 'When I started in this role two years ago the Society was in contact with around 15 South Asian families in Bradford – now I have over 300 on my books.'

Worried about her memory, Vidya Devi approached Rani after hearing her give a talk at a Meri Yaadain support group. With Rani's help and support Vidya received a diagnosis of Alzheimer's disease and is now taking Aricept.

Vidya, who comes from India, explains the importance of being able to speak with Rani in Punjabi, her first language. Vidya says, 'It's

about trust – you can hire a translator, but you still think, "Are they saying exactly what I'm saying?" It makes a huge difference to be able to speak in our own language and share stories about home, especially because of my memory problems.'

## Reminiscing through landscape

Devising appropriate activities for South Asian people with dementia is another element of the work in Bradford. One example is an innovative trip which used the rugged Yorkshire landscape as a tool for reminiscence.

Atiq says, 'Many of the people with dementia we work with grew up in rural parts of Punjab and Kashmir. There are similarities between those landscapes and the Yorkshire Dales countryside.' Atiq wondered if the scenery would trigger memories for people with dementia, and this led to an organised visit by a group of people with dementia to the Dales.

Atiq says, 'The scenery of the Dales, with its open countryside, mountains and farms, evoked happy memories. People saw the similarities with the landscape of their youth, which stimulated their minds and encouraged conversations about their childhoods.'

## Quick read

Traditionally, people from South Asian communities affected by dementia have been reluctant to approach the Society for help. Some of the reasons for this are stigma, a lack of understanding about the disease, and a perception that the Society's services are not relevant to them.

In Bradford, which has a large South Asian population, Society workers Rani Shukla and Atiq Hassan have been visiting community groups to talk about dementia.

Speaking in their languages and providing culturally appropriate information has helped them build up trust and understanding, so that people feel more comfortable about seeking help.

They support people such as Vidya Devi, who has Alzheimer's disease. Vidya says, 'It makes a huge difference to be able to speak in our own language, especially because of my memory problems.'

Vidya Devi Ram and her husband, Atmar Ram, are pictured on the cover.



A group of people with dementia enjoying a reminiscence session in the Yorkshire Dales

Rangers from the national park gave a guided walk and spoke to the group about the park's geology, plants and wildlife. A shared lunch was an opportunity for the group to socialise, share memories and support one another.

Atiq says, 'We wanted the trip to benefit people on a variety of levels, by promoting exercise and healthy eating and including an educational aspect to stimulate and engage people.'

Feedback from participants showed they gained a sense of well-being from being in the countryside together and sharing memories. One member of the group, Mr Khan, commented, 'It was a special and momentous occasion. It will always be treasured and remembered.'

The work in Bradford is just one aspect of the Society's

activities with black and minority ethnic communities in Yorkshire and other parts of the country.

If you have a story about working with different communities please call Rachael on 020 7423 3518 or email [rdoeg@alzheimers.org.uk](mailto:rdoeg@alzheimers.org.uk)

### Translated materials

The Society's *Worried about your memory?* booklet has been translated into 12 languages and Braille. The booklets are designed to help people understand more about memory loss so that if they are concerned they can seek advice and, if necessary, get treatment and support. The booklets can be downloaded at [alzheimers.org.uk/memorybooklet](http://alzheimers.org.uk/memorybooklet) or you can call Xcalibre on 01628 529249 to order printed copies.

**Carer Carol Smith hopes her idea of raising money through book sales will take off elsewhere, and explains how fundraising is her way of fighting feelings of helplessness**

**O**ne of my favourite holiday occupations used to be browsing in second-hand bookshops. Several years ago while on holiday in Beer, Devon, we followed handmade signs to second-hand books. They led us to a garage where the walls were completely lined with books and a cash box was fixed to the wall.

Newspaper articles on the doors told how the owners had, over several years, raised £30,000 for their local church restoration. I was impressed.

I wanted to find a way to raise money on a regular basis for the Society. They were a great support to me when my mum was diagnosed with Alzheimer's disease 12 years ago.

## Fighting back

Over the years, I have had to make some very difficult decisions about mum's care. Being an only child I found this particularly painful, especially when I had to make decisions against mum's wishes for her own safety. I have often felt helpless as a carer because you can't make things right for your loved one.

I first started to raise money for the Society by opening my garden as a way of fighting back. After



visiting the garage sale in Devon, I then decided to hold a book sale of my own. I started out with a trestle table and about 200 books. I have now accumulated about 2000 books and hold a sale most months.

## Drawing in the crowds

Along the way I have learned a lot about how to collect books and, more importantly, attract customers. Many customers are now regulars and tell their friends about the sales. I find that the more people understand about dementia, the more likely they are to come along and donate in a friendly atmosphere where people can share their favourite books or recommend authors.

I would like to encourage others to give it a try. Sheffield is big enough to have a second sale in another part of the city, and I would love the idea to spread to cities, towns and villages throughout the country. Since starting the sales, we have raised more than £6,000 (£1,000 was raised through opening my garden).

If anyone is interested in holding a book sale, I would be happy to share advice. Please get in touch through the Society's Sheffield office on 0114 276 8414.

**Aly England, the Society's National Community Fundraising Manager, says, 'As the numbers of people with dementia increase we need more volunteers like Carol to join our dynamic volunteer fundraising team. If you would like to get involved with a local fundraising group or find out how we can support your fundraising idea, please email us at [community@alzheimers.org.uk](mailto:community@alzheimers.org.uk) or contact your local Society office.**

**To find out the location of your nearest office, call our national switchboard on 020 7423 3500 or visit our website at [alzheimers.org.uk](http://alzheimers.org.uk)**

# Victory for our campaigners



**7 October was a momentous day for people with Alzheimer's disease and their carers as drugs watchdog NICE overturned its controversial guidance on drug treatments** by Chris Kirby

**Years of campaigning for full access to drug treatments for people with Alzheimer's disease paid off in October as the National Institute for Health and Clinical Excellence (NICE) issued new draft guidance on their availability.**

NICE ruled that the medications, which cost just £2.80 per person per day, are cost-effective and should be available on prescription. If the draft decision is upheld, it means that three of the drug treatments, Aricept, Exelon and Reminyl, will be available from the NHS for people in the early to moderate stages. A fourth, Ebixa, will be available for people in the moderate to late stages.

Current guidance restricts their availability to people in the moderate stages of the illness.



Professor Clive Ballard, pictured, the Society's Director of Research and a leading old age psychiatrist,

says, 'If this guidance is issued, doctors will no longer have to watch people deteriorate without being able to treat them. Being able to prescribe in the best interest of their patient will also be a strong incentive for GPs to diagnose Alzheimer's disease

earlier and for people to go to their doctor if they are worried about their memory.'

## What's the history?

Back in March 2005 NICE published draft guidance recommending that Aricept, Exelon and Reminyl should no longer be available to patients on the NHS as they were not cost-effective. It also recommended that Ebixa should not be prescribed, except within clinical trials.

The reaction to this decision has been phenomenal. In the biggest response NICE has ever received from a consultation, thousands of people spelled out why all four drugs are important.

Interim Chief Executive Ruth Sutherland said, 'The support from our campaigners and supporters was amazing. MPs told us they had been inundated with demands that the original NICE decision be reversed. When you have that level of support, it really does add weight to the arguments that you are making. So I want to thank all of our campaigners for standing up and making a difference.'

## How do these drugs help?

No drug treatments can provide a

cure for Alzheimer's disease.

However, drug treatments have been developed that can improve symptoms, or temporarily slow down their progression, in some people.

Aricept, Exelon and Reminyl, which are licensed for the early to moderate stages of Alzheimer's disease, work by preventing the breakdown of a chemical messenger in the brain.

The fourth drug, Ebixa, is licensed for the moderate to severe stages of dementia.

This works by blocking another messenger chemical called glutamate. Too much glutamate is produced when brain cells are damaged by Alzheimer's disease and this causes the cells to be damaged further.

## What happens now?

The Society has responded to the consultation on the new draft guidance and awaits a decision later in the year.

In the meantime, we need to continue campaigning on this and other key issues on behalf of people with dementia. This decision shows just what can be achieved when our campaigners stand up for people with dementia.

# ‘The magic pills’

Carers and people with dementia talk about the difference dementia drugs have

Shropshire star



Mick and Shirley Ives

## Mick and Shirley Ives, Shropshire

Shirley, who cares for Mick, says, ‘Like many people who would have been elated when they heard the decision, we were very emotional because the implications of it are so immense.

‘I was thinking about how all those people must feel who haven’t been able to access the drugs. To watch your partner go downhill day by day, knowing there’s something out there that might help, is heartbreaking

‘When Mick was diagnosed with Alzheimer’s the GP said he wouldn’t be able to have Aricept because he was in the early stages. We asked around to find out where we could get it from

privately, and ended up buying it from Turkey. This carried on for about a year but as we were under financial pressure, in 2008 we changed our GP and ended up getting it prescribed.

‘The difference in Mick was amazing. He said it was like a fog had been lifted. He could remember more, he became less depressed and wasn’t so agitated. He wanted to go out more and was willing to chat to people – he actually started enjoying life.

‘We call them the magic pills because they’ve made such a huge difference to our lives. Mick’s more like his old self and he helps me in turn now as I have asthma and rheumatoid arthritis.’

## Heather Roberts

Heather Roberts, from Derby, has Alzheimer’s disease and says that taking Aricept has allowed her to retain her independence.

She says, ‘NICE should be ashamed of themselves for restricting access to these drugs in the first place because they are the only lifeline that people with dementia have.

‘I am delighted they are thinking of reversing the decision. I say power to the people who have fought so hard and made them reconsider.

‘Aricept has made such a difference to my life and

**‘Aricept has made such a difference to my life and I want it to have the same effect for other people.’**

## made to their lives and share their reactions to the NICE decision

I want it to have the same effect for other people.

'When I first started the drugs I was still having memory tests. In just six months my memory had improved to how it had been two years previously. That is a measure of the difference it has made to me.

'I have still got my driving licence and I am still driving, which enables me to go out on my own. I go shopping on my own and things like that. I would never want to risk coming off Aricept at all.

'Thank heavens NICE is changing its guidelines.'



Heather Roberts



Grace and Ken Richardson

### Grace and Ken Richardson, Beverley

Grace, who has Alzheimer's disease, says, 'I think I was lucky because I worked in the health service. I went straight to the GP and was put onto treatment. This was at a time when NICE was saying the drugs were too expensive but my GP felt it was the right time to prescribe it at the beginning.

'It's difficult to say how I would have been without Aricept but I don't think I've deteriorated while I've been taking it. The psychiatrist is very pleased that I'm as good as I am.'

Ken, Grace's husband, says, 'The GP seems to think it's holding things in check as

**'I think I was lucky because I worked in the health service. I went straight to the GP and was put onto treatment.'**

much as possible and I think that's right. We live in the country and Grace is still able to drive as long as we stick to familiar roads. She still cooks and likes gardening. We go away a lot and lead as normal a life as we possibly can.'

# Debating dementia

Vicki Combe and Nicola O'Brien, from the Society's public affairs team, report on our presence at the party political conferences

**T**he 2010 party conference season was one of the most eagerly anticipated for years due to the new Conservatives power-sharing deal with the Liberal Democrats and the Labour leadership contest.

For the Society's public affairs team our aim in attending was clear – to raise the profile of dementia among ministers, MPs and councillors and identify opportunities to better understand and influence the government's and opposition Party's policy agenda.

The conferences also provide a chance to meet and strengthen relationships with other organisations with an interest in the needs of people with dementia, such as the Royal College of GPs and Royal College of Nursing. Through networking, we seek to put dementia more firmly on the agenda of influential organisations and create opportunities for partnership working.

## Focus

This year, we joined forces with the Royal National Institute for Deaf People (RNID) and the Eye Health Alliance, which campaigns for better eye health, to host events on the importance of early diagnosis.

In this difficult financial climate when public services are facing cuts, it is crucial to highlight the value of early diagnosis and intervention, such as better information provision or peer support networks, in both improving dementia care and saving the NHS and local authorities money.

## Our events

At the Labour conference, Alzheimer's Society volunteer Peter Dunlop, who has Alzheimer's disease, gave a powerful insight into his life with dementia.

A retired hospital consultant, Peter spoke of his relief in getting a formal diagnosis and of the importance of the support he has from his family and work colleagues.

Barbara Keeley MP, Shadow Labour Minister for Local Government and Communities, acknowledged that dementia was a complex condition and spoke about the Labour party policy for a National Care Service. This would provide social care free at the point of need for older and disabled people, funded by a 10 per cent 'care levy' on people's estates.

Speakers at the Conservative conference included Professor Steve Field, Chair of the Royal College of GPs and Chris Skidmore,

MP for Kingswood and a member of the influential House of Commons Health Select Committee. Professor Field acknowledged that GPs' training in dementia is woefully inadequate and there is an urgent need for greater understanding. He also spoke of the need for health and social care services to work together in order to respond effectively to the challenges of dementia.

At the Liberal Democrat conference John Pugh, MP for Southport and an influential campaigner on health issues, acknowledged the financial imperative for early diagnosis. As well as hosting the debates, Ruth Sutherland, our Interim Chief Executive, met the Minister for Care Services Paul Burstow MP and the public affairs team met new MPs from each of the parties.

Looking back at this year's party conference season, it was clear that Alzheimer's Society succeeded in raising the profile of dementia among key political audiences and stakeholder organisations. We will continue our work to publicise the value of early diagnosis and interventions through our submissions to government consultations, briefings to MPs and through our work with other organisations.

# Public service cuts

**Steve Crabb, Interim Head of External Communications, explains how the Society plans to respond to service cuts that will affect our members**

**I**t won't come as a surprise to our members to read that we are facing up to some of the biggest cuts in public services in decades. But it's not all bad news. Chancellor George Osborne may be planning to save billions of pounds in public spending, but he has pledged to provide an extra £2 billion a year for social care by 2014.

On the other hand, he has also announced a 7.1 per cent cut in local authority budgets, which comes to a whopping £33.6 billion, and that's bound to be bad news for some services that people living with dementia depend on. So, what are we to make of the Comprehensive Spending Review, and what is Alzheimer's Society going to do about service cuts if and when they strike?

Interim Chief Executive Ruth Sutherland says, 'We welcome the fact that the Chancellor has identified dementia as a priority within health research as this area is desperately under-funded. We are also pleased that the importance of social care has been acknowledged, with additional money being pledged.'

However, she added that the cuts in local authority budgets mean there will still not be enough money, as both the number of people with dementia and the



**'We will track service cuts as they happen.'**

cost of supporting them continue to grow. This is likely to have a negative impact on the services that people with dementia and their carers receive. She stressed that the concern is not so much the amount of money that's spent, but the way in which it's spent. At the moment too much of it isn't going to the right places.

That's the thinking behind our approach to service cuts. Unlike some charities, we aren't going to take a King Canute position and try to turn back every cut. Some cuts may actually result in services being reorganised, and result in better outcomes for people living

with dementia.

For instance, the spending review states there will be more services which support people when they leave hospital – this has real potential to help people with dementia and carers retain their independence. So we are going to take a good look at every service cut that's reported to us, and when we find one that's genuinely going to hurt people, we are going to campaign hard to reverse it.

That's where you come in. We will soon be launching a new service called DementiaWatch, which will track service cuts as they happen and allow us to spot the ones we need to campaign against. Alzheimer's Society supporters will be able to log details of cuts through our website, and we'll draw out trends and get campaigning where it's needed.

We are already hearing about cuts in services all around the country, from care homes under threat in one county to services being withdrawn in many others. With your help, we can do something positive and help to protect those people who need services the most.

DementiaWatch will be launching soon – watch this space for more information.

# Action on dementia

by Andrew Chidgey, Head of Policy and Public Affairs

**O**ctober saw the launch of an ambitious initiative to improve quality of life for people with dementia and their carers in England. On 26 October, 43 national organisations came together at a Department of Health conference in London to announce the formation of the Dementia Action Alliance and to launch The National Dementia Declaration for England.

Since May, Alzheimer's Society has been working hard to form an alliance of different organisations with an interest in dementia care.

The National Dementia Declaration for England is a document outlining the challenges of dementia and seven outcomes that all organisations are committed to achieving for people with dementia and their carers.

In addition, the 43 organisations published individual action plans explaining their role in delivering better quality of life for people living with dementia and what they will do in the next four years to help deliver it.

Among the organisations who have signed up are the Department of Health, the National Council for Palliative Care, Bupa, the Royal College of Nursing, the Royal College of



Andrew Chidgey

General Practitioners, the Care Quality Commission, the National Institute for Health and Clinical Excellence (NICE), the English Community Care Association, The Stroke Association and, of course, Alzheimer's Society.

Paul Burstow, the Minister for Care Services and Ruth Sutherland, the Society's Interim Chief Executive, both stressed the importance of joint action in dealing with the challenges of dementia at the launch event.

## What is the Society's plan?

Alzheimer's Society has published its own plan explaining some of the major pieces of work it will undertake. These are:

- We will work with people with dementia, their carers and families to campaign for a fairer deal on the issues that matter to them – early diagnosis, access to the right care and treatment and

investment in dementia research – and ensure their needs are recognised by decision makers at national and local level.

- We will champion public understanding of dementia through national and local awareness campaigns and by supporting people with dementia to speak out and tell their own stories.
- We will continue to develop and disseminate good quality information and support services for people with dementia, their carers and families based on evidence sought through local information and support services, our website and helplines.
- We will use evidence from the Dementia Adviser and peer support services to develop more and better services for people with dementia and their carers.
- We will improve the skills of the dementia care workforce by developing and delivering high quality education programmes to staff across a range of dementia care settings and through the use of our approved trainer scheme.
- We will fund a programme of research into prevention, cause,



## Quick read

**Under Alzheimer's Society's leadership, 43 national organisations in England have formed an alliance dedicated to improving care for people with dementia and carers.**

The Dementia Action Alliance was launched at a Department of Health conference on 26 October. Organisations that have signed up include the Department of Health, the Royal College of Nurses and Bupa.

Each member of the Alliance has also signed The National Dementia Declaration for England. This sets out the challenges of dementia and seven outcomes the Alliance has agreed to achieve.

The 43 organisations have also published individual action plans setting out the improvements they intend to make for people with dementia by 2014. The Society's plan includes increased investment in research and training the dementia care workforce.

care and cure of dementia. We will increase the amount of money we spend on dementia research by at least 20 per cent per year.

- We will develop 150 local community dementia forums which will bring together people with dementia, carers, health and social care professionals and others to understand the local experience of people with dementia and work out solutions.
- We will work with a range of partners to develop evidence about cost-effective interventions for people with dementia and their carers.
- We will work with partners to develop and publish evidence about dementia supportive communities.
- We will provide the secretariat for the Dementia Action Alliance and work with the Alliance to publish an annual report on progress.

### **What are other organisations doing?**

The Department of Health will appoint three National Dementia Champions for the NHS, the independent sector and social care, who will provide local leadership, encourage service

delivery, and support local accountability.

- The Royal College of Nurses will campaign for specialist nurse roles, including those who specialise in dementia care.
- The National Council for Palliative Care will lobby for greater integration of palliative and end of life care for people with dementia.
- The Care Quality Commission will ensure that regulated services for older people living with dementia meet essential standards of safety and quality.

The Royal College of GPs will focus on good quality diagnosis and intervention, living well in care homes, and the reduction of antipsychotic drugs in dementia.

### **How do I find out more?**

For more information about the Dementia Action Alliance or to see the National Dementia Declaration Action Plans please visit

[www.dementiaaction.org.uk](http://www.dementiaaction.org.uk)

For a paper copy of the National Dementia Declaration please write to Dementia Action Alliance, care of Alzheimer's Society at the address on page 23.

# Memory walk 2010

Memory Walk 2010 once again attracted nationwide support for Alzheimer's Society events. Our biggest annual fundraiser was made extra special this year with the first of our supporters who strode out in support of the Society



Despite the drenching rain there were smiles all round as Society Ambassador and children's TV presenter Richard McCourt, from BBC award-winning duo Dick and Dom, led walkers around Roundhay Park in Leeds

Leeds



Birmingham

BBC broadcaster and sports presenter Mary Rhodes, pictured centre, showed her support for the Society when she joined 120 walkers in Cannon Hill Park for the Birmingham Memory Walk

with thousands taking part in 12 flagship walks and more than 100 local ever Memory Walk Marathon, which raised £80,000 alone. Here are some of



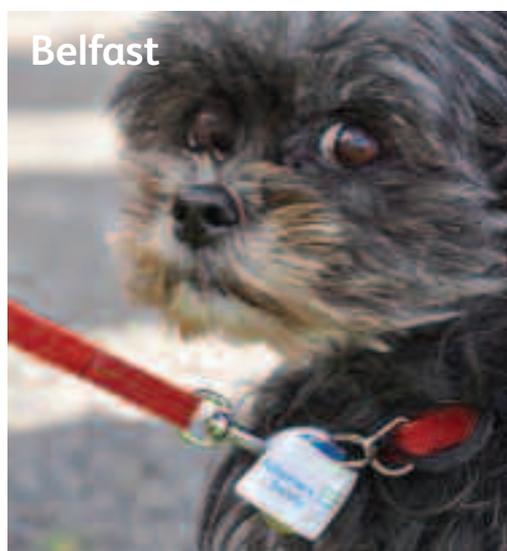
**London**

A surprise was in store for one walker who got a little help from his friends at the London Memory Walk. Natasha Cook and her boyfriend Mike Romain signed up for the walk as Mike's mother has early onset dementia. To his surprise, Natasha had also invited 26 of his friends. Thanks to the team effort, almost £2,000 was raised for the Society



**Central Lancashire**

Despite decidedly wet weather, 110 walkers set off from the Withnell Fold Sports and Social Club on Sunday, 12 September, including the Wesolowski family, pictured



**Belfast**

At the Northern Ireland Memory Walk in Belfast, even the Society's four-legged friends put in an appearance. Some 313 walkers, more than double last year's turnout, took part in the event, which has so far raised more than £5,000



**Wiltshire**

History was made this year with the Society's first ever Memory Walk Marathon. Walkers challenged themselves to a 26-mile trek in Wiltshire, which took them from the Avebury stone circles to Stonehenge

# Changing practice

## People with dementia and carers have contributed to an educational training programme and earlier diagnosis in GP surgeries by Caroline Bradley

**A**fter three years of hard work, Dr Sarah Voss has developed a training programme that can help to change the attitudes of GPs, practice nurses and reception staff to dealing with dementia.

Funded by an Alzheimer's Society fellowship grant, Dr Voss has worked with people with dementia, carers and health professionals to design, develop and test a structured training session focusing on the issues that affect people with dementia when they use primary care services.

### Reluctance to diagnose

Dr Voss says, 'Research shows that GPs can be reluctant to diagnose dementia. This can be due to a lack of appropriate skills or knowledge or a concern that making a diagnosis will bring little real benefit to that person.'

'Our aim in delivering the training was to ensure GPs are better equipped to diagnose the early stages of dementia and that they treat and refer patients more appropriately.'

Dementia can be difficult to identify. Even people who have the condition can easily overlook its early signs and symptoms, and may even ignore or deny the changes they are experiencing.



The team at Hawthorn Medical Centre in Swindon say they benefited from the dementia awareness training

**'Even people with dementia can easily overlook the early signs and symptoms...'**

### Being proactive

The dementia awareness training promotes the idea of person-centred care. It focuses on the experiences of the person with dementia rather than just the biology of the illness.

Dr Voss says, 'This training reduces the barriers to diagnosis that exist in primary care. It helps staff to understand patient behaviour. For example, someone with developing dementia might make repeated

appointments at the surgery and miss them, or attend but not say clearly what they are anxious about.'

The training helps staff to understand the need to be proactive in raising the possibility of dementia.

Primary care staff who have received the training say they feel more confident in knowing that dementia is not just limited to memory loss, but can also affect someone's state of mind and consequently their behaviour.

### Input from people with dementia

The hour-long training sessions are delivered using a printed training manual as well as slides and videos that can be shown on a computer.

Dr Voss spent many months collecting the experiences and opinions from people with dementia and those who care for them. She incorporated these into the training sessions so they include first hand accounts of what it is like to develop dementia and how a GP or others can help.

Dr Voss says, 'The video clips include people's feelings about why early diagnosis is important. They help the staff to think about dementia from an individual's point of view.' This includes the

## programme aimed at boosting person-centred

needs of carers, who are represented as patients in their own right.

Case examples also form part of the training to help the team consider the type of decisions they might make. Dr Voss says, 'This always gets people talking and sharing ideas about people they've seen.'

The final section includes information on making referrals to memory services and what happens for patients and carers at that stage.

### Tackling dementia together

Angela Brunning is the practice manager at a medical centre in Swindon, where a team of 30 staff including GPs, practice nurses, reception and administrative staff, received the dementia awareness training.

Angela says, 'It's unusual for the whole practice to attend training together. Sometimes the reception staff and doctors can feel very separate and it's good for the whole team to play a role in patient care. It's not just the doctor's job. Often we see things that they won't.'

The researchers asked the team questions before and after the training to assess its impact on their attitudes to dementia.

Since receiving the training, Angela says that reception staff have voiced concerns about particular patients to GPs. The training has also helped to raise awareness about the Society's Worried about your memory? campaign and clarified the differences between dementia and Alzheimer's disease.

### Impact of training

So far, training sessions have been run in six primary care practices. Analysis shows that team members who received training have a more positive attitude to the benefits of early diagnosis and greater confidence in understanding the symptoms of dementia.

They also said they feel better equipped in identifying and managing dementia. Analysis also highlighted that staff are more likely to raise the subject of dementia with patients who are reluctant to seek a diagnosis.

Dr Voss's grant focused on developing the style and content of this training. The next stage will be to test whether it can lead to better care and earlier diagnosis by systematically measuring the difference the training makes in a randomised controlled trial.

She is now waiting to hear from the Department of Health about possible funding for the trial.

**Early diagnosis is crucial to enable people with dementia to access information, support and treatment. However, dementia can be difficult to identify.**

Society-funded researcher Dr Sarah Voss has developed an educational training programme for staff in GP surgeries. Its aims are to enable primary care staff to diagnose dementia early and treat patients more appropriately.

As part of her research, Dr Voss worked with people with dementia, carers and health professionals to hear their experiences and opinions. These have been incorporated into the training sessions.

So far, six GP surgeries have tried out the training. All of the staff, including doctors, receptionists and nurses, took part. Analysis shows that the training has had a positive effect in changing people's attitudes.

Dr Voss would now like to test the training properly in a full-scale trial.

# Letters

Tell us your views

## Letter of the month

### Elder abuse – one of its guises

I wonder how many people have been in the same situation as us, when a trusted helper decides to ‘relieve’ the family home of its petty cash? This happened to us fairly recently and had, apparently, gone on for a fair length of time before being discovered (by then a significant amount had disappeared).

I was more shocked at the effect it had on me personally as the family carer. My initial fury turned to distress as it emphasised our sheer vulnerability and reliance on relatively unknown people trusted to enter our family home, be they home sitters, agency staff or personal care assistants.

I have been shocked to hear of others experiencing similar situations, and am concerned to hear that these individuals are rarely brought to account. Many carers like myself choose not to prosecute for various reasons, so people often ‘get away with it’ and retain their jobs working with incredibly vulnerable people due to lack of evidence.

I also believe carers are scared to speak out openly due to the retribution they might face by an organisation or agency supplying essential and much needed help.

It would be interesting to know just how common this is. I feel saddened to think that this may be being accepted as part-and-parcel of caring for the vulnerable, be it at home or in care.

Perhaps this is another aspect of care of people with dementia living in their own home that the Society should consider during the next phase of the Putting Care Right campaign?  
Anon, email

**We will be addressing the issue of abuse in a future issue.**

**Congratulations to our letter of the month writer, who will receive a bouquet of flowers courtesy of Healthspan, which raised £200,000 for the Society earlier this year. Healthspan is the UK’s leading home shopping supplier of vitamins, minerals and health supplements.**

### Transferable skills?

I read Chris Stones’s letter, Learning to adjust (October issue), about planning for the future. This is so important. However, when caring, there seemed to be no room for other thoughts in my head.

I gave up nursery nursing to care for my husband John, who had early onset dementia and who died aged 61. I was fortunate to care for someone I loved. The sudden void that hits you after years of intensive care is like hitting a brick wall. I still attended monthly meetings to keep in touch with friends I had made.

Then, out of the blue, came help! I was asked if I would help look after a little boy with Asperger’s syndrome. I found the skills I had developed while caring for John were transferable – above all, patience and empathy. This is what I needed. Seeing this little boy gain confidence gave me confidence, too. Perhaps Chris could move his skills on and start living again.  
Win Harris, Birmingham

### Take a break

I do not think Anon (Full admiration, August issue) should feel guilty because she doesn’t wish to be tied to her husband full time for the rest of his life. The care of vulnerable people is the moral responsibility of society.

‘...I have totally accepted dementia but occasionally feel upset about the stigma or label that I must wear for the rest of my life...’

Peter Jones, Blackwood, Gwent

Some relatives may choose to do it out of love. Others not. Anon says she has good support in her area. If so, she could ask for a live-in carer for a week. If her local authority doesn't provide this service, there are always agencies. I find that the charge works out much the same as respite in a care home.

**Nina Jennings, Cumbria**

## Dealing with dementia?

I thought I would write in and give an account from the 'other side'. I am 57 and was diagnosed with dementia four years ago. I was aware before then that something was amiss, both at work and socially, but I tried to compensate whenever I was aware something was wrong. But, following a CT scan, MRI scan and EEG, I was given an appointment with a consultant psychiatrist and frontal lobe dementia was diagnosed. Really, this was a blessing. I felt like shouting 'Hooray!' for I finally had a diagnosis for what was wrong.

Dementia is a very grey area in people's minds and it seems something people know little

about. It seems to scare them and put them on their guard. I have had friends and neighbours avoid me, even crossing the road rather than pass next to me. Others totally ignore me when it would be easy to say 'hello,' but then again, I wonder whether they were really friends.

I have totally accepted dementia but occasionally feel upset about the stigma or label that I must wear for the rest of my life. Then again, I feel sorry for the people who have decided to ignore me. I now realise that my friends are fellow people with dementia, carers, family and people who accept me for who I am. The one thing I still have is my feelings.

I accept that my condition is not going to go away and hope that one day a cure will be found. Until then, there are many people like me, young and old, who have to deal with this horrible condition.

I am grateful to the remarkable staff at my local Alzheimer's Society office in Blackwood for the help and support they give. Life would be more difficult without the contact of the

befrienders and staff who help people like me.

**Peter Jones, Blackwood, Gwent**

## A different story

I read the letter from Keith Dewhurst, I want to move on, in the September magazine. My experience has been entirely the opposite.

My wife has vascular dementia, COPD (chronic obstructive pulmonary disease) and a damaged spine. Reading about NHS continuing care in Living with dementia, I decided to apply on 20 March this year. I received information from the community healthcare team on 1 April, completed the forms and returned them on 9 April. The care team kept updating me on the progress of the application.

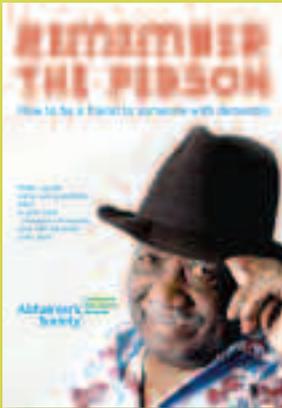
On 4 August I received a letter, which contained details of the information to be put before the NHS panel. The panel agreed that my wife's needs met the criteria for NHS funded continuing care. A care plan was quickly agreed. I had full input, and this has been a tremendous uplift to me.

**C J Beale, Dorchester**

## We welcome your letters

Please write to Magazine Editor, Alzheimer's Society, Devon House, 58 St Katharine's Way, London E1W 1LB or email [rdoeg@alzheimers.org.uk](mailto:rdoeg@alzheimers.org.uk)

Letters may be edited. We regret we are unable to forward letters on to correspondents without their prior consent. Letters for the December issue to arrive by 22 November. The views expressed in this magazine are personal and not necessarily those of Alzheimer's Society. Editor: Rachael Doeg



## Can you help us to raise awareness of dementia?

As part of this year's Dementia Awareness Week, three people living with dementia shared their stories to encourage members of the public to think differently about dementia and support our Remember the person campaign.

Following the success of the campaign, we are now on the lookout for a person with dementia to feature as the face of Dementia Awareness Week in 2011. The person will have the opportunity to take part in a professional photoshoot and appear in adverts, leaflets and websites to promote Dementia Awareness Week.

If you can help us change the way people think about dementia, please send us a photograph and no more than 50 words about who you are to [jane.carlson@alzheimers.org.uk](mailto:jane.carlson@alzheimers.org.uk)  
You can also visit [alzheimers.org.uk/newface](http://alzheimers.org.uk/newface) for more information or call Jane on 020 7423 3673.

Alzheimer's Society website [alzheimers.org.uk](http://alzheimers.org.uk) Access all our factsheets [alzheimers.org.uk/factsheets](http://alzheimers.org.uk/factsheets)

## Useful contacts

**Alzheimer's Society National  
Dementia Helpline**  
England and Wales 0845 3000 336  
Open 8.30am – 6.30pm  
Monday to Friday  
Northern Ireland  
028 9066 4100  
Open 9.30am – 4.30pm  
Monday to Friday

**Alzheimer's Society**  
Devon House,  
58 St Katharine's Way  
London E1W 1LB  
Telephone: 020 7423 3500

**Living with Dementia  
programme**  
If you have dementia and  
would like to volunteer for  
the Society, call Davina Greeves  
on 020 7264 5990 or email  
[davina.greeves@alzheimers.org.uk](mailto:davina.greeves@alzheimers.org.uk)

Alzheimer's Society aims to publish clear, accurate and independent information for people with dementia and their families and carers. The Society is pleased to receive funding through sponsorship but does not endorse any products those sponsors produce.

## Changing your details

If you need to update your address details or inform us of any other changes, please contact membership enquiries on 0845 306 0868 or email [membership@alzheimers.org.uk](mailto:membership@alzheimers.org.uk)

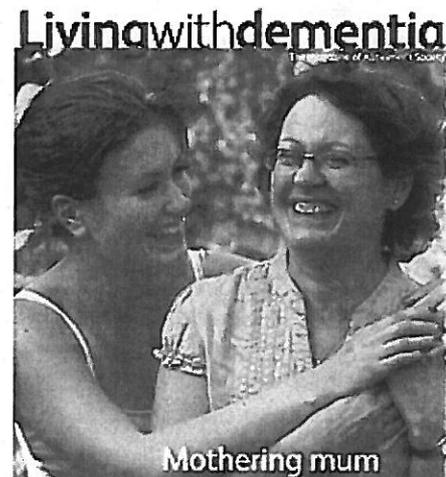
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# Living with dementia magazine 2010 archive

## October 2010

[Download Living with dementia magazine October 2010 issue](#) or read on for highlights of this month's issue.



### Mothering mum

An early diagnosis of dementia led to new opportunities at work for Christine Grace, thanks to input from her local Society office.

[Read the full article](#)

### I'm going home

New emergency packs have been created by Leicester police for families of people with dementia.

[Read the full article](#)

### Alleviating agitation

Researchers comparing models of care in nursing homes in different countries found that certain approaches can improve quality of life for residents.

[Read the full article](#)

## September 2010

[Download Living with dementia magazine September 2010 issue](#) or read on for highlights of this month's issue.

### Where there's a will

For one hospital ward manager in St Helens, Merseyside, there is no excuse for poor quality dementia care. Read on for the secrets of Joan O'Hanlon's success.

[Read the full article](#)

### Staying on top

A former Royal Marine who also spent 17 years caring for people with physical and learning disabilities, says the challenges of caring for his wife, who has dementia, have at times beaten him.

[Read the full article](#)



**GPs prescribed earlier diagnosis**

Researchers are handing out 'education prescriptions' to GP practices to test whether a more tailored approach to assessing dementia will lead to earlier diagnosis.

[Read the full article](#)

**August 2010**

[Download Living with dementia magazine August 2010 issue](#) or read on for highlights of this month's issue.

**Learning to adjust**

Elizabeth Ashton writes about her mother's vascular dementia, and its impact on their relationship.

[Read the full article](#)

**Mixed greetings from Hawaii**

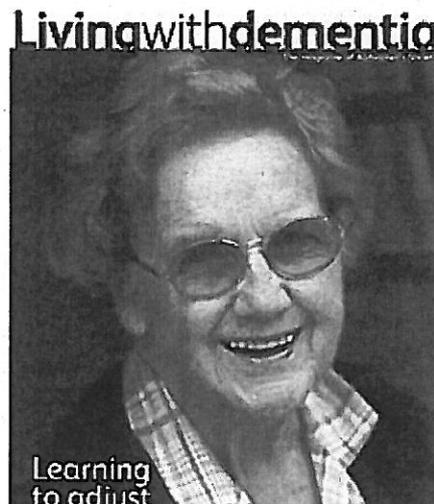
In the first of two reports from the 2010 International Conference on Alzheimer's Disease (ICAD), Research Communications Officer Anne Corbett writes about a mixed bag of findings.

[Read the full article](#)

**An eye on ICAD**

Our Head of Research, Dr Susanne Sorensen, introduces the Society-funded researchers who presented their findings at ICAD - and shares a little insight into the world's biggest international conference on dementia.

[Read the full article](#)

**July 2010**

[Download the new look magazine](#) or read on for highlights of this month's issue.

**Remember the person**

A former drag queen, an ex pole-vaulting champion of Grenada and a dedicated follower of fashion all speak about life with dementia, and how they make the most of it.

[Read the full article](#)

**Time to smile**

Gateshead-based artist Sarah-Jane Szikora is one of the many valued individuals supporting the charity through her work. Here, she talks about being inspired by the funny side of life, and her mother's dementia.

[Read the full article](#)

**To Spain and back**

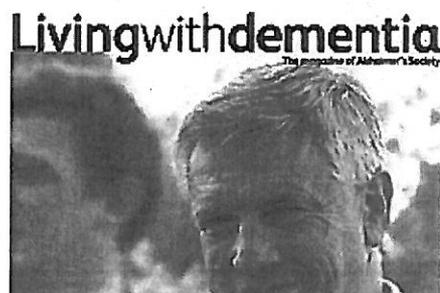
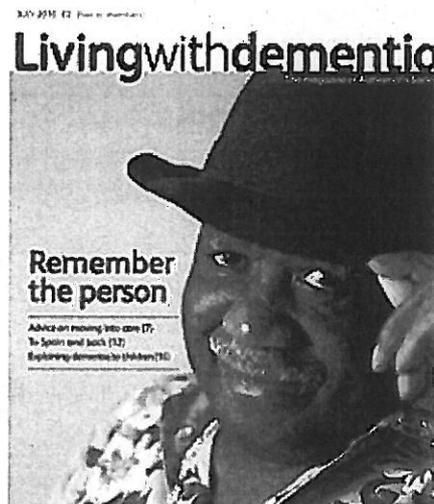
Peter and Ann Oldacre's plans for a long, happy retirement in sunny Spain went out of the window when Ann developed dementia. Read Peter's account of the impact dementia has had on their lives.

[Read the full article](#)

**June 2010**

Welcome to the new look Living with dementia magazine. As you'll see content remains largely the same it just looks a whole lot better.

[Download the new look magazine](#) or read on for highlights of this month's issue.

**'Our unsung hero'**

In May, 46-year-old Michael Tuton was crowned Dementia Carer of the Year in the Daily Mail's National Carer of the Year Awards. Here, he talks about caring for his mum, Molly

[Read the full article](#)

### **Pulling together**

When Ian Brady was diagnosed with vascular dementia aged 56, his sons and other family members didn't know which way to turn. Support was hard to come by so, like thousands of other families, they had no choice but to muddle through

[Read the full article](#)

### **Making inroads**

Alzheimer's Society in Hackney is working with local organisations to develop peer support networks for the boroughs minority ethnic communities. So far, they are making good progress

[Read the full article](#)

## **May 2010**

Please read on for highlights or [download the PDF version of the magazine](#)

### **A sense of self**

Former Cambridge scholar Nick Jones has primary progressive aphasia. Loss of speech and understanding of language, and lack of motivation are among the symptoms. Thanks to the intervention of friends and family, Nick is supported to continue enjoying his many interests

[Read the full article](#)

### **Learning to cope**

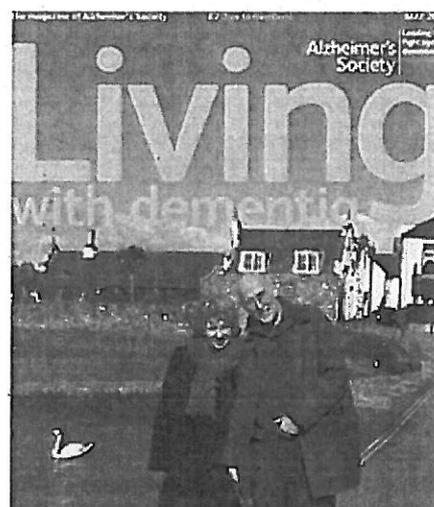
For carer Victoria Jones, admitting she needed help in coping with her husband's dementia was devastating. Here, she writes about the need to adjust and regain some of her independence.

[Read the full article](#)

### **Dementia at the opera**

A new opera that explores the emotional impact of dementia on the lives of those involved in one man's care is now on tour.

[Read the full article](#)



## **April 2010**

Please read on for highlights or [download the PDF version of the magazine](#)

### **A day at the Limes**

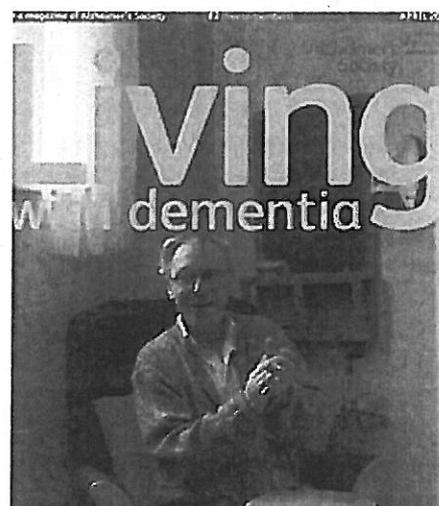
Good company, good fun and good grub are all on offer at the Limes, a day support service for younger people with dementia in Bristol.

[Read the full article](#)

### **'It's seen me through'**

Many carers can feel isolated while caring for people with dementia. For one carer, meeting friends in the comfort of her own home through the Society's online forum, Talking Point, was a huge help.

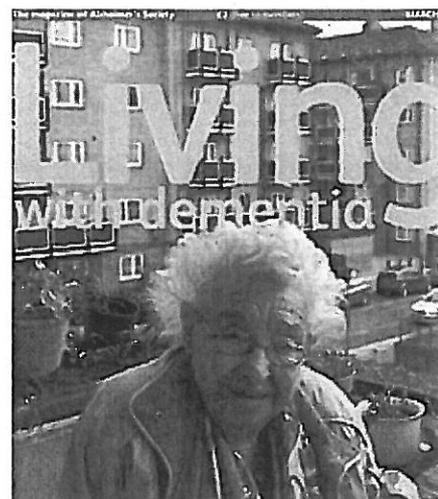
[Read the full article](#)



### **Tip-top tips**

From preventing flooding to blowing the cobwebs of that old record player - read on for handy tips from

carers for carers.  
[Read the full article](#)



## March 2010

Please read on for highlights or [download the PDF version of the magazine](#)

### **Managing alright**

Living alone at 92 is an achievement in itself, but Rose Gowler manages to do so with dementia, thanks to good support and a determined mind.

[Read the full article](#)

### **It can be done**

Specialist services for younger people with dementia are few and far between, but one hospital in London has managed to set one up despite having no new budget.

[Read the full article](#)

### **A wonderful life**

Ada and Albie Lovell celebrated 70 years of married life in February. Although Albie now has dementia, their love and resilience is seeing them through.

[Read the full article](#)

## February 2010

Please read on for highlights or [download the PDF version of the magazine](#)

### **There's only one**

Former carer Robert Breckman, whose beloved wife Julie died with Alzheimer's disease seven years ago, talks about how he gets by without her.

[Read the full story](#)

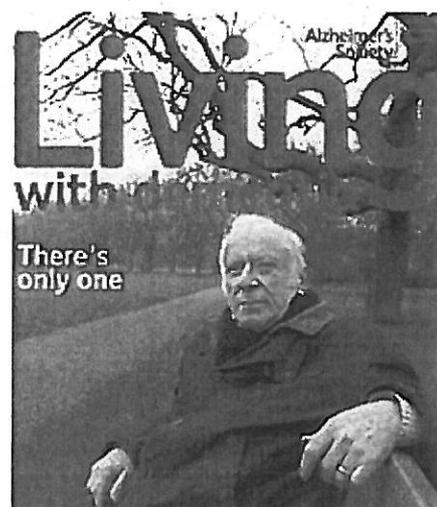
### **The big day**

Wedding gifts - who needs them? Caroline and Steve Hartridge invited their guests to donate to Alzheimer's Society instead of buying them presents. Here, Caroline explains why.

[Read the full story](#)

### **Are you connected?**

Social networking site Facebook recently announced a 900 per cent increase in users aged 55 plus. With the majority of users aged between 35 and 54, the Society is using sites such as Facebook, YouTube and Twitter to raise



awareness of dementia among new audiences.

[Read the full story](#)

### **Read all about it!**

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## **Contact the Society**

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