## **The Boulder Times**



### March 2025

#### Hello everyone,

- **1.** Thanks to all who helped us out and found pictures of your loved ones as babies or when they were younger.
- 2. There is lots of crud going around. Please use lots of good handwashing and try not to share. Many of our sister facilities have had outbreaks of one sort or another.
- **3**. Staff SafeCare training is underway. We will be starting week 4 and working on make-up sessions during the month of March. Staff that has attended seems to be really getting a lot out of each of the modules.
- **4**. Surveyors still have not arrived. I feel like a broken record but, we are expecting them at any time.
- Please be advised Jan will be out of the office watching grandkids the 12<sup>th</sup>-17<sup>th</sup> of March. She can be contacted by phone in case of an emergency.
- 6. If you have a new care plan to sign, please stop by Jan's office so we can take care of it.
- 7. Tai Ji Quan will go into April because Jan missed a few weeks due to her surgery and complications afterwards.
- 8. Our March 30 Healthy Challenge is to have 8 8 oz glasses of water a day. Plus walk or run 10,000 steps or more a day. This exercise can be supplemented with another form of low impact exercise such as swimming, cycling, Tai Ji, Yoga, etc...If family complete this challenge and turn in a completed calendar showing steps and water intake at the end of the month or by week if it's easier you will be put in for a drawing for a subway gift card. You are not competing against each other. You are only challenging yourself to

keep moving and hydrating. Movement is like lotion to the joints.

- 9. Next Family Council/Support Group will be Mar 13<sup>th</sup> at 11:30am. Mary will be facilitating, as Jan will be off watching grandkids... Our focus will be introducing the March healthy challenge and starting our series on "Family Dynamics".
- 10.**Our April speaker on Family Dynamics will be Jane Nelson-Como** from A.C.E. having just lived through her own pretty traumatic events and how family dynamics played into it.
- 11. Please check out the "BC Lending Library".
- 12.Emma Fuhrmann has been hired as a part-time activities asst. She will be here Monday/Wed/Fri. & every other Saturday. Sydney Brandt (HHA) will be home from college and helping in activities every other Saturday. Diane our Tuesday/Fri & Sunday Activities Asst will be shortening her hours on Sunday from 10-6 to 10-4 for health issues.
- **13. Marshall City-Wide Garage Sale-Boulder Creek** will be taking part in the garage sale. If you have any donation please hold onto until week of sale. All proceeds will be going to the activities dept. More information will be coming soon. So, I now have the dates May 1-May 3<sup>rd</sup>. We need to decide how many days we want to do it. How long? Who would like to volunteer? Where are we going to store this stuff as it comes in? etc...All proceeds for this will stay with Boulder Creek and goes toward the activities dept. Let's think about something cool we could bring in for our residents.
- 14. As always, my door is open. Please feel free to contact me with any questions or concerns.



# Happy St. Patty's Day

May the road rise to meet you, May the wind be always at your back. May the sun shine warm upon your face, The rains fall soft upon your fields. And until we meet again, May God hold you in the palm of his hand.





#### **Family Council Agenda**

March 2025

Open the meeting with New Business

- 1. Current Census is 14 on North 2 men and 12 women with one pending move in, and 13 on South 12 women and 1 man.
- 2. Jan will be gone on the 12<sup>th</sup> to the 17<sup>th</sup> of March watching grandkids.
- 3. Thanks to all who took the time out to look for pictures of their loved ones for our activities coming up.
- 4. Surveyors still have not arrived. I feel like a broken record but, we are expecting them at any time.
- 5. If you have not picked up you caregiver survivor kit please do so. There are a few left in the lobby. **It was a little something for "Caregiver Appreciation Day".**
- 6. If you have a new care plan to sign, please stop by Jan's office so we can take care of it.
- We are looking at August for our Family Fun Day event on a Saturday Morning. Tentatively looking at Aug 9 or 16<sup>th</sup>. We will be looking for volunteers. 11-1pm. (11-12 games, 12-1 eating/music/raffle.)
- 8. What are your thoughts of us have Virtual Dementia Tours throughout Madan Week? (Mid -June)
- 9. We will be starting another "Healthy Challenge" in March. This will include staff, residents, and we are inviting family members to take part. April will also have opportunities to continue on a healthier path for the year.
- 10.**Next Family Council/Support Group will be Mar 13<sup>th</sup> at 11:30am**. Mary will be facilitating, as Jan will be off at a training in the cities. Our focus will be introducing the healthy challenge and starting our series on "Family Dynamics".
- 11.**Our April speaker on Family Dynamics will be Jane Nelson-Como** from A.C.E. having just lived through her own pretty traumatic events and how family dynamics played into it.

- 12. Please check out the "BC Lending Library".
- 13. **Marshall City-Wide Garage Sale-Boulder Creek** will be taking part in the garage sale. If you have any donation please hold onto until week of sale. All proceeds will be going to the activities dept. It will be May 1- May 3<sup>rd</sup>. We need to decide how many day we will be putting this on? Who will run it? Where we will store items? Etc.
- 14.Ask for any questions, new business Close the Meeting

#### Welcome to Mary 's Corner

#### **BC's Nurse Supervisor/Case Manager**

In the past months, my articles have been focusing on some of the different types of dementia. So far, I have covered information regarding vascular dementia and Alzheimer's dementia. This month, I am going to conclude the series with Lewy Body dementia. It is important to remember that any individual with a dementia diagnosis requires supportive care regardless of the type of dementia. Providers and clinicians utilize cognitive testing, mental examinations as a screening tool to suggest dementia. Reports of behavioral, cognitive and functional changes from loved ones are also used as collateral information to support the diagnosis. Definitive diagnosis can only happen post-mortem at autopsy.

Lewy Body dementia (LBD) is the second most common type of dementia after Alzheimer's disease. Unlike Alzheimer's disease, which tends to progress gradually, this disease often starts rapidly, with a fast decline in the first few months. Later, there may be some leveling off but Lewy body dementia typically progresses faster than Alzheimer's. A patient can survive from five to seven years with the disease. LBD is a complex disease that can present with a range of physical, cognitive, and behavioral symptoms. Many caregivers find that behavioral symptoms (e.g., hallucinations, delusions, aggression, agitation, apathy, depression and anxiety) are the most distressing and difficult-to-treat aspects of LBD.

Lewy body can have a significant impact on a person's behavior. Some changes are so common that they are recognized as part of the diagnostic criteria, while others are rare. The management and treatment of these neuropsychiatric symptoms is complex and requires thorough assessment. People with Lewy body disease can have severe adverse reactions to antipsychotic medications. Wellformed, persistent and vivid visual hallucinations are a feature of Lewy body disease, particularly dementia with Lewy bodies. Hallucinations can be benign and non-threatening, but responses can range from indifference to concern and, in extreme cases, sheer terror. Often the hallucinations are of family members. They can also be of other people or animals including spiders and snakes. After the event, those having hallucinations are often able to rationally interpret and discuss their experience. Apathy and depression Apathy is a common presentation. The person loses interest in their world and the people around them although they can 'rise to the occasion' and be engaged for short periods of time. Depression can also occur. It is a more complex illness which requires specialist assessment and management.

Dementia, regardless of the type, is progressive. Some medications can slow progression for a short time, but there is no cure. This is not encouraging news to hear, but it is important to be educated so we can best support our loved ones. Effective caregivers model their approach and support to the individual's specific needs. Take cues from them. Anticipate their needs. Know them. Meet them where they are and have the grace to accept it. It takes practice, patience and self-care. We are with you to support you on this journey.

If you are interested in learning more about Lewy Body dementia, there are great online resources: Lewy Body Dementia Association <u>www.lbda.org</u>. Mayo clinic: https://www.mayoclinic.org/diseases-conditions/lewy-bodydementia/symptoms-causes/syc-20352025 As always, it is a joy and privilege to serve and care for your loved ones. Thank you for entrusting them to us!

Please feel free to contact me with any ideas, suggestions, questions or concerns. As a reminder, typically my schedule is Monday-Thursday from 7:30am-5:00pm.

Mary Mitzner, RN Nurse Supervisor/Case Manager Boulder Creek Assisted Living Phone: (507) 337-9536



#### March Education-

Alzheimer's disease is a type of dementia that affects memory, thinking and behavior. Symptoms eventually grow severe enough to interfere with daily tasks.



Alzheimer's is a brain disease that causes problems with memory, thinking and behavior. Understanding Alzheimer's and dementia Alzheimer's is the most common cause of dementia, a general term for memory loss and other cognitive abilities serious enough to interfere with daily life. Alzheimer's disease accounts for 60-80% of dementia cases.

Learn more: <u>What is the Difference Between Dementia and Alzheimer's?</u>, <u>What is</u> <u>Dementia</u>, <u>Research and Progress</u>

**Alzheimer's is not a normal part of aging.** The greatest known risk factor is increasing age, and the majority of people with Alzheimer's are 65 and older. Alzheimer's disease is considered to be younger-onset Alzheimer's if it affects a person under 65. Younger-onset can also be referred to as early-onset Alzheimer's. People with younger-onset Alzheimer's can be in the early, middle or late stage of the disease.

Learn more: Younger/Early-Onset Alzheimer's, Causes and Risk Factors

**Alzheimer's worsens over time.** Alzheimer's is a progressive disease, where dementia symptoms gradually worsen over a number of years. In its early stages, memory loss is mild, but with late-stage Alzheimer's, individuals lose the ability to carry on a conversation and respond to their environment. On average, a person with Alzheimer's lives four to eight years after diagnosis but can live as long as 20 years, depending on other factors.

10 Warning Signs, Stages of Alzheimer's Disease

#### Alzheimer's as a continuum

Alzheimer's disease progresses in stages, with the severity of symptoms increasing over time.

Select a stage to learn more.

Asymptomatic

Mild Cognitive Impairment (MCI) due to Alzheimer's Disease

Mild Dementia

Moderate Dementia

Severe Dementia

Alzheimer's has no cure, but two treatments — donanemab (Kisunla<sup>TM</sup>) and lecanemab (Leqembi®) — demonstrate that removing beta-amyloid, one of the hallmarks of Alzheimer's disease, from the brain reduces cognitive and functional decline in people living with early Alzheimer's. Other treatments can temporarily slow the worsening of dementia symptoms and improve quality of life for those with living Alzheimer's and their caregivers. Today, there is a worldwide effort underway to find better ways to treat the disease, delay its onset and prevent it from developing.

Learn more: Treatments, Treatment Horizon, Prevention, Clinical Trials

#### Symptoms of Alzheimer's

The most common <u>early symptom of Alzheimer's</u> is difficulty remembering newly learned information.

Just like the rest of our bodies, our brains change as we age. Most of us eventually notice some slowed thinking and occasional problems with remembering certain things. However, serious memory loss, confusion and other major changes in the way our minds work may be a sign that brain cells are failing.

Alzheimer's changes typically begin in the part of the brain that affects learning. As Alzheimer's advances through the brain it leads to increasingly severe symptoms, including disorientation, mood and behavior changes; deepening confusion about events, time and place; unfounded suspicions about family, friends and professional caregivers; more serious memory loss and behavior changes; and difficulty speaking, swallowing and walking.

People with memory loss or other possible signs of Alzheimer's may find it hard to recognize they have a problem. Signs of dementia may be more obvious to family members or friends. Anyone experiencing dementia-like symptoms should see a doctor as soon as possible. If you need assistance finding a doctor with experience evaluating memory problems, <u>your local Alzheimer's Association</u> can help. <u>Earlier diagnosis</u> and intervention methods are improving dramatically, and treatment options and sources of support can improve quality of life. Two helpful support resources you can tap into are <u>ALZConnected</u>, our message boards and online social networking community, and <u>ALZNavigator<sup>TM</sup></u>, a web tool that creates customized action plans, based on answers you provide through short, online surveys.

Take our free, online education courses: <u>Understanding Alzheimer's and Dementia</u> and <u>Know the</u> <u>10 Signs: Early Detection Matters</u>

#### Help is available

If you or someone you know has been diagnosed with Alzheimer's or another dementia, you are not alone. The Alzheimer's Association is the trusted resource for reliable information, education, referral and support to millions of people affected by the disease.

• Call our 24/7 Helpline: 800.272.3900.

- Locate your local Alzheimer's Association.
- Go to <u>ALZNavigator</u> to create customized action plans and connect with local support services.

#### Alzheimer's is not the only cause of memory loss

Many people have trouble with memory — this does NOT mean they have Alzheimer's. There are many different causes of memory loss. If you or someone you know is experiencing symptoms of dementia, it is best to visit a doctor so the cause can be determined.

#### Alzheimer's and the brain

Microscopic changes in the brain begin long before the first signs of memory loss. The brain has 100 billion nerve cells (neurons). Each nerve cell connects with many others to form communication networks. Groups of nerve cells have special jobs. Some are involved in thinking, learning and remembering. Others help us see, hear and smell.

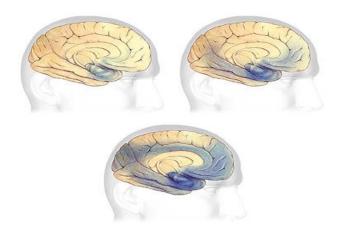
To do their work, brain cells operate like tiny factories. They receive supplies, generate energy, construct equipment and get rid of waste. Cells also process and store information and communicate with other cells. Keeping everything running requires coordination as well as large amounts of fuel and oxygen.

Scientists believe Alzheimer's disease prevents parts of a cell's factory from running well. They are not sure where the trouble starts. But just like a real factory, backups and breakdowns in one system cause problems in other areas. As damage spreads, cells lose their ability to do their jobs and, eventually die, causing irreversible changes in the brain.

#### The role of plaques and tangles

Two abnormal structures called plaques and tangles are prime suspects in damaging and killing nerve cells.

- 1. Plaques are deposits of a protein fragment called beta-amyloid (BAY-tuh AM-uh-loyd) that build up in the spaces between nerve cells.
- 2. Tangles are twisted fibers of another protein called tau (rhymes with "wow") that build up inside cells.



Though autopsy studies show that most people develop some plaques and tangles as they age, those with Alzheimer's tend to develop far more and in a predictable pattern, beginning in the areas important for memory before spreading to other regions.

Scientists do not know exactly what role plaques and tangles play in Alzheimer's disease. Most experts believe they somehow play a critical role in blocking communication among nerve cells and disrupting processes that cells need to survive.

It's the destruction and death of nerve cells that causes memory failure, personality changes, problems carrying out daily activities and other symptoms of Alzheimer's disease.

Learn More: Take the Brain Tour

#### **Research and progress**

In 1906, German physician Dr. Alois Alzheimer first described "a peculiar disease" — one of profound memory loss and microscopic brain changes — a disease we now know as Alzheimer's.

Today, Alzheimer's is at the forefront of biomedical research. Researchers are working to uncover as many aspects of Alzheimer's and <u>other dementias</u> as possible. Some of the most remarkable progress has shed light on how Alzheimer's affects the brain. The hope is this better understanding will lead to new treatments. Many potential approaches are currently under investigation worldwide. <u>Sign up for our weekly E-News</u> to receive updates about Alzheimer's and dementia care and research.

Learn more: Research and Progress



## 10 Early Signs and Symptoms of Alzheimer's and Dementia

Your memory often changes as you grow older. But memory loss that disrupts daily life is not a typical part of aging.



### How is Alzheimer's Disease Diagnosed?

Learn what to expect when visiting a doctor for symptoms of Alzheimer's disease.



#### **Research and Progress**

This is a time of unprecedented promise in the race to end Alzheimer's disease.



# Check out Boulder Creek's Facebook page to see some wonderful pictures of all of our residents.

### Facebook.com/BoulderCreekMemoryCare