

gerontology

A. Jolayne Farrell

At 79, what to do about memory?

Dear Jo:

Years ago, when I asked my doctor how to keep up with all the happenings on the subject of aging, he said to read your column. Since I always follow doctor's orders, I read it regularly. Needless to say, I have learned a lot.

I have been meaning to write you with my problem for months now, so here it is:

Except for a bit of a heart problem, angina, I am in good health for a 79-year-old woman. My memory is another story. I forget things like people's names (although I recognize their faces), appointments and when I read a passage from the Bible, I forget what I read.

What can I do to remember things? Is this a natural part of aging or can I do something about it? I'll look forward to your reply in my paper.

Mrs. H.L. Owen Sound Reader

Dear Mrs. L.:

I am pleased that you are a regular reader. I too have learned much from you (the readers) from the many letters I receive.

The experts refer to the type of forgetfulness you are experiencing as "short term" memory loss.

While most people your age have this problem, it is usually accompanied by a better than average recall of events that happened years ago in childhood ("long-term" memory).

Please be encouraged by your good health. So often memory loss is associated with certain chronic diseases along with the medications taken (prescribed) for them.

Volunteers are needed

Some 75 to 100 volunteers are being sought by Oakland Family Services to help families with neglected children.

Volunteers will be trained and supervised as they develop one-to-one relationships with a parent. Goals are support, education and role modeling for parents in the program, according to Nancy McHugh, volunteer coordinator at Oakland Family Services. She can be reached at 858-7768 in Pontiac.

Although short-term memory loss is considered to be part of the natural aging, it can be improved.

A COMMON temptation (with memory loss), when recounting some current event, is to zero in on what you are forgetting rather than what you are remembering.

Try and develop the habit of completing a thought regardless of the details. For example, when you are blocking on a person's name, describe what you can remember and say, "I'll think of the name in a minute," and go on.

A help to remembering appointments is to get a calendar with a large box for each day and write in whatever you have planned for the month. Place it in a spot that you pass frequently during the day, i.e., taped to the counter top or on the fridge.

There are many tricks that you can use to remind yourself to do something else. Here's an easy one: When you run out of a grocery item, think (as you are discarding the used empty package) of where the item is located in your local store and (usually) when shopping you won't forget it.

Most communities offer memory improvement courses through their local high schools and community colleges. Check with the board of education etc. to see what is being offered in Owen Sound.

Mrs. L., I hope these few suggestions will be of some help to you. Good luck!

Readers can write to Jolayne Farrell at 11 Cynthia Crescent, Richmond Hill, Ontario L4E 2P8

An all-day visit to nursing home

VISITS TO nursing and convalescent home visits have been a regular part of my life for more than three decades.

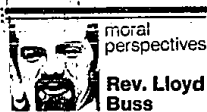
During college and seminary years, the visits were more group activities, with singing, games, general conversation and worship.

My visits as a parish pastor have been with specific members and friends of the parish. Holiday visits in past years with uncles and aunts, family friends, et al, have added another dimension to my experiences with nursing and convalescent homes.

THREE WEEKS ago, my wife's father was transferred from the hospital to a nursing-convalescent home.

The art of medical diagnosis had failed to identify the cause of his deteriorating condition, and the hospital would no longer care for him. In less than four weeks, Grandpa V had changed from a healthy and very active 88-year-old to a man unable to care for himself.

Nursing and convalescent homes come in all different sizes and shapes. Grandpa V's home is one level and less than three years old. Owned and operated by a religious institution, it presents the kind of



Rev. Lloyd Buss

care facility we consider representative of our regard and esteem for life.

'MOST OF my nursing-convalescent home visits have been relatively brief. Seldom have they been more than an hour, and more frequently they are a half-hour or less. Rarely did they include visits during the noon evening meals, and never at times when patients were being put to bed.

My visits had basic agendas . . . to visit, read Scripture, pray, share moments of memory, laughter, sadness, insight, delight, hope and mercy. Almost always, I would come and leave according to my schedule for that day!

We live more than 400 miles from my wife's parents. Our holiday visit this year was spent in the convalescent home.

We joined Grandpa V in her day-long visits with Grandpa V. It un-

folded features of care I had previously taken for granted.

Good nursing-convalescent home care is good, basic care for flesh and bone. It has to do with the way people are helped in going to bed at night and getting up in the morning. It has to do with the number of times they are taken to the bathroom.

It has to do with the way they are fed at breakfast, lunch and dinner. It has to do with the way the call-light is answered and how the people are dressed and bathed.

Good nursing-convalescent home care will also take seriously the primary care provider and coordinator. For all that the nursing/convalescent home is doing for Grandpa V, and for all that his medical doctor is expected to do, it is still Grandpa V who is the primary care provider and coordinator for Grandpa V. A good staff will work carefully and

deliberately with the primary care provider and coordinator.

CURRENT statistics suggest an increasing number of nursing and convalescent homes in the years ahead.

Hopefully, there will also be an increasing number of people visiting them. Visits of brief duration do bring moments of joy and delight to those who live and work in nursing and convalescent homes, but for every moment that one visits to unfold a personal agenda, there should be another moment that one spends to allow the one being visited that opportunity to unfold their personal agenda. It will take a lot more time, but it will be time that unfolds the love you wanted to bring in the love place.

The Rev. Lloyd Buss is pastor at Abiding Presence Lutheran Church in Rochester Hills.

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