Michael J. Fox:

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The Michael J. Fox Foundation:

Welcome to a recap of our latest Ask The MD video. Tune-in as a movement disorder specialist at the Michael J. Fox Foundation answers your questions about Parkinson's research and care. Learn more about living well with Parkinson's disease. Free resources like this podcast are always available at michaeljfox.org.

Rachel Dolhun:

People and families with Parkinson's often ask about thinking and memory changes, which are also called cognitive changes. Today, I'll talk about what you can do to boost brain health and manage cognitive symptoms. But before we dive in, let's talk about cognition.

Rachel Dolhun:

In the broadest sense, this is thinking in memory, how we understand, remember and share information. But what does that actually mean? It's things like paying attention, making decisions, and talking to other people. Cognition allows you to chat with your friends, watch a movie, or make dinner. It's pretty much anything and everything you do on a daily basis.

Rachel Dolhun:

As we get older, thinking and memory naturally change. You may notice it's harder to remember names or learn new things, like how to use a smartphone. And some diseases like Parkinson's also can affect thinking and memory. Not everyone with Parkinson's experiences these symptoms. But when they do happen in Parkinson's, unlike in Alzheimer's, they tend to affect thinking more than memory.

Rachel Dolhun:

People with Parkinson's most often have trouble with what's called executive function. This is things like making plans, or making decisions or multitasking doing two things at the same time, like listening to a podcast while walking. Some people also have trouble paying attention to a conversation, finding the right word or remembering things like who called or when they have a lunch date.

Rachel Dolhun:

Not everyone with Parkinson's experiences cognitive changes. Like all Parkinson's symptoms, if, when and how these changes happen is unique to each person. They can happen at any time in the course of disease, but they happen to different degrees. At their mildest, they might be noticeable and more than what's expected with normal aging, but they don't get in the way of your daily life or work. You might lose your train of thought or misplace your keys, but you can work around these changes. This is called mild cognitive impairment.

Rachel Dolhun:

Mild cognitive impairment can stay the same, get better or gradually worsen. In some people it can eventually develop into dementia, which is a change significant enough that it does interfere with daily activities, but it also ranges in severity. Some people need help only with specific activities like paying

bills or planning their day. Others might need more around the clock assistance. If these more significant changes do occur, it's typically after years or decades of living with Parkinson's.

Rachel Dolhun:

If you, like many people, worry about or notice thinking or memory changes, there are many steps you can take right now. Talk with your doctor. Together, you can understand what might be causing your symptoms and how to treat them. There are several things that can cause thinking and memory changes. Non-movement symptoms like depression or sleep changes, certain Parkinson's or over the counter medications and other medical conditions, like infection, low thyroid or vitamin deficiencies. To check, your doctor may do blood tests, brain scans, or detailed memory and thinking tests called neuropsychological testing. And you also can talk about treatment options. There are medications for some thinking and memory changes and researchers are working to develop more effective treatments.

Rachel Dolhun:

Live a healthy lifestyle. Research shows that exercising regularly, eating a Mediterranean diet, which is high in fruits, vegetables, fish, and whole grains, limiting alcohol and avoiding tobacco are good not only for your body, but also for your brain. Keep an eye on the things you do every day, like cooking or paying bills. If you notice you're leaving the burners on or missing payments, ask your friends both with and without Parkinson's, if they're having similar experiences. This can give you a sense of what's normal aging and what might be Parkinson's.

Rachel Dolhun:

Build your support team. There are many strategies and many different experts who can help. Some doctors even specialize in memory and cognition and some families seek out these experts as part of their Parkinson's care team, but there are other professionals who can help too. A social worker can help you navigate insurance and care discussions. And a speech therapist can help you build memory skills and create strategies around your challenges, like keeping notes on your phone to help you remember things or making to-do lists to help you prioritize tasks.

Rachel Dolhun:

Take action. This could be participating in a clinical trial, connecting with others in the community through a support group, or taking the opportunity to plan ahead for the future; something all of us, Parkinson's or not can do.

Rachel Dolhun:

And for family members and care partners, try to communicate openly and honestly with your loved one and their doctor about any changes you see. Be patient and flexible in finding new ways to do things and take care of yourself. Exercise, keep your social connections and take breaks when you need them.

Rachel Dolhun:

For more, download our guide on Navigating Cognitive Changes in Parkinson's, which we created with patients, their families, and expert clinicians. In it, you'll learn how thinking and memory can change in Parkinson's, tips to promote brain health, how to talk with loved ones and doctors about these changes and the latest research on thinking and memory in Parkinson's. You can download the free guide and learn more about thinking and memory changes by visiting our website.

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