M y memory was terrible for a very long time after the ECT. I had to retrain my brain to remember things.”

“Since I started walking every day, and eating better, I think my mind’s clearer and my memory’s better.”

Losing keys or forgetting where you left your glasses are usual lapses everyone experiences. But more serious memory loss can be distressing and frightening. This booklet looks at the causes and suggests some coping strategies that may help sufferers, relatives and friends.

What is memory?

Memory is a complex business - a combination of different skills all working together. For example, remembering what someone has said involves a different type of memory skill from trying to recall someone’s face.

It’s widely accepted that our memory behaves as if it were organised into three kinds of ‘stores’:

- Sensory stores register information from the sense organs, for about five seconds.
- Short-term memory can hold information for 15 to 20 seconds. So, if you were to look up an unfamiliar telephone number, this would be kept in your short-term memory until you dialled it. Afterwards, you would probably forget it.
- Long-term memory is a more permanent store of knowledge. We usually remember things that happened many years ago more easily than what happened yesterday. This is partly because we have gone through these older memories over and over again, and also because they may be especially important to us.
Am I bound to lose my memory, as I get older?

Memory loss isn’t an inevitable part of ageing. But many people do gradually find it hard to memorise things, as they get older. Around 40 per cent of people over 65 have some kind of memory difficulty. In most cases, it doesn’t have much effect on everyday life.

Serious memory loss is much more common among older people, but younger people can also experience the problem. Only about 10 per cent of people aged over 65 have a persistent memory problem that is severe enough to interfere with normal daily routines. And only about 15 per cent of them will develop dementia each year.

What is dementia?

Dementia isn’t a disease in itself. It’s the general name used to describe a group of symptoms, including forgetfulness, which are connected to certain problems. Symptoms can be caused by strokes, depression and head injury. Some of the better-known diseases that produce dementia include Alzheimer's disease, Pick's disease and Parkinson's disease. (For more information about dementia, see Mind’s booklet, Understanding dementia, details under Further reading, on p. 14.)

Somebody who has mild dementia may forget arrangements, names and telephone numbers more often. They will tend to repeat the same stories over and over again, and find it hard to remember details about a TV programme they've just finished watching or a conversation they've just had. But they won’t have difficulty washing, dressing and shopping, although they may have some problems managing their money.
Over time, the dementia tends to get worse (though the rate of progress varies) affecting thinking, remembering and reasoning and interfering more and more with everyday life. The person can be increasingly confused and unable to concentrate for more than brief periods, and have difficulty speaking or understanding what is said to them. Eventually, they will be unable to look after themselves.

What are the common problems affecting memory?

Memory can be affected by various mental health problems. Periods of unconsciousness, caused, for example, by head injury or electroconvulsive therapy (ECT), can also lead to memory loss and being unable to recall events.

Mental health problems
These include, depression and anxiety, as well as more severe problems. When someone becomes very depressed, they may find thinking and concentrating difficult. Many severely depressed patients withdraw into themselves and may not notice what is going on around them. So, they may not remember things, because they didn’t notice them in the first place. Memory can improve as depression lifts.

Stress
Stress can make you more forgetful (and this may include being worried about having memory problems). Being under severe stress over a long period of time can cause memory loss that may be permanent. Sleep problems, which can be a cause or a symptom of mental distress, will contribute to the problem.
The menopause
Hormones may play a part. Women going through the menopause are known to face memory problems, as well as mood swings, lack of concentration and irritability. All have been linked to the effects of changes in levels of oestrogen on other brain chemicals.

Head injury
If you have a head injury, it may damage areas of the brain involved in memory. Although it’s sometimes said that people with memory impairment don’t remember because of the emotional shock, it’s usually a physical cause in the majority of cases. The injuries often recover over a long period of time and memory may also improve as a result.

Electroconvulsive therapy
Electroconvulsive therapy is a controversial treatment for depression that is usually offered only when other methods have failed. It involves passing an electrical current through the brain. People who have had ECT are fairly evenly divided between those who found it helpful and those who found it harmful. The side effects may last for weeks, months or even years. (For further information, see Mind's booklet, Making sense of electroconvulsive therapy (ECT), details on p. 14.)

Medical reasons
Other physical problems that can affect memory include high blood pressure, high cholesterol, viral infections, vitamin deficiency, liver disease, thyroid problems and blood disorders, such as anaemia.

Alzheimer's disease
The most common form of dementia is Alzheimer's disease, which gradually attacks and damages the brain. Most people with Alzheimer's retain some long-term memory, to a surprising degree.
How to... cope with memory loss

Drugs and alcohol
Alcohol in small quantities may actually have some beneficial effects, but drinking too much leads to memory problems. Heavy drinking can result in a specific form of dementia known as Korsakoff’s syndrome. Certain sorts of drugs (prescription or street drugs) can also affect your memory.

How can I preserve my memory?
Studies show that environment and lifestyle are important factors. Eating a balanced diet, low in saturated fats, and with plenty of fresh fruit, vegetables and fish is important, as is taking regular exercise and getting enough sleep and rest. Avoid smoking (which reduces the brain’s oxygen supply) and too much alcohol.

Have regular health checks. These can help you to sort out any problems with your health that may be affecting your memory (such as high blood pressure, cholesterol levels or blood sugar) and it can also help to diagnose more serious complaints early.

You may find that when you become more relaxed, this in itself may improve your memory. It may be a good idea to explore ways of relieving stress, including massage, yoga and aromatherapy. There is some evidence that aromatherapy using lemon balm may have a particularly beneficial effect on dementia. (See Mind's booklets The Mind guide to managing stress, The Mind guide to massage and The Mind guide to relaxation, as well as other booklets detailed under Further reading, on p. 14.)

Exercise your mind as much as possible. Hobbies such as quizzes, crosswords, reading and learning passages or poems may help to delay the on-set of memory loss.
How can I improve my memory?

There's no magic way to get memory back or retrain damaged memory. Memory techniques can help your memory, although they can't upgrade your mind, as if it were a computer. The benefit comes through learning new strategies that make the best use of your mind as it is.

Try to organise routines whenever possible. Get into the habit of doing something before or after some daily event, such as a television programme or a meal. Create a routine place for your possessions. Put a hook on the wall for door keys, for instance. Put things away or file things carefully in their own place. Don’t let clutter build up.

Change the way you approach tasks. A poor memory is sometimes the result of trying to do too many things at once. Try to concentrate on one thing at a time and don't let your mind wander. You will also learn best in a place that is relatively free from distractions. If you are interrupted while doing something, try to return to it as soon as possible. To help yourself focus, repeat things out loud. Say the name of the person you’ve just met or say aloud where you are putting something.

Adopt any tricks that can help you memorise a particular thing, such as the familiar rhymes used to remember the days in the month (‘30 days hath September’). You can make up your own, by linking the thing you want to remember to a mental picture. For example, if you want to remember the name Nightingale, you could look at the person and think of the bird, or you could put together an image of a knight being blown about in a gale. (For more information about this, and about other techniques, including mind mapping, see Useful organisations, on p. 12.)
How to... cope with memory loss

To help retain the material you want to remember, work out, first, what you need to remember for your purposes. Then, decide how much has to be in your head and what can usefully be stored in an external memory, such as a diary. Writing information down, in the right place, is better than having to scour your memory.

• Use a diary, note pad or wall chart for appointments and forward planning. Give yourself warning of events, well in advance, as well as on the day. Make sure you have any instructions ready.
• Ask a relative or friend to remind you about things.
• Use alarm systems on your watch, clock, radio or mobile phone to remind you to do something.
• Pills are often packaged to help you check if you have taken them. You could also get a pill-organiser.
• Keep track of the days by getting a newspaper delivered.
• Buy a clock with the day and date.
• Stick lists and notes in prominent places. 'Dry-wipe' message boards placed at key points around the house are helpful.
• Leave reminders, or anything you need to take with you, in a place where you are bound to see them, by the door (but out of sight of anyone looking in).
• Write down instructions for yourself when you first learn, or re-learn, a task, and keep the instructions in an obvious place.
• Keep a journal, so you remember what you have been doing and who you have seen.
• Carry a tape recorder or Dictaphone around with you.
• Get a memory phone to help you dial frequently used numbers.
• Stick your name on your possessions, in case you mislay them. Use a remote-control sonic detector or alarm devices to help you locate your keys.
Are there any medicines I can take?

There are drugs available that may help the symptoms or slow down the memory loss for some people in the early stages of Alzheimer’s disease, although they can’t cure the problem.

Aricept, Exelon and Reminyl are currently licensed for use in treating Alzheimer’s disease. They work by stopping the breakdown of a helpful chemical in the brain, called acetylcholine, which nerve cells need to communicate. A newer drug, Ebixa, blocks glutamate. This can slow the progress of the symptoms, and may possibly slow down the disease, itself. Research is continuing to see if they may be helpful in treating other forms of dementia. These drugs may have side effects. Doctors vary in their willingness to prescribe them, and this has been a cause for concern.

Non-Steroidal Anti-inflammatory Drugs (NSAIDS)
There is some evidence that these may reduce the risk of developing Alzheimer’s disease. But, as they have serious side effects their use is not recommended.

Statins
Statins are used to lower levels of cholesterol and other fats in the blood, and may reduce the risk of dementia, although there haven’t yet been any trials that directly test this.

Hormone Replacement Therapy (HRT)
HRT may help prevent Alzheimer’s disease and other dementias, but so far the evidence is contradictory, with some studies claiming benefits and others saying it may make memory worse.
Complementary and alternative medicine
Many people take gingko biloba because they believe it helps their memory and concentration. The results of a number of studies are promising, but not conclusive. Other herbal remedies that have been reported to have some positive impact include choto-san, kami-umtan-to and yizhi. It's important to be aware that even complementary and alternative remedies may have side effects and can interact with other drugs. Ask your doctor or a pharmacist about this.

Antioxidants, such as Vitamins E and C, may help protect brain cells from damage that causes memory loss. Some studies have shown that it slows down Alzheimer's disease, but there may be a danger that too much Vitamin E can lead to strokes.

There is also some evidence in favour of acupuncture and bright light treatment, which suppresses melatonin, a hormone that may be implicated in dementia. (For more information, contact the organisations listed on p. 12.)

Is there anything else that can be done?
You may be worried about what might happen and, once other people know about your problem, how this will affect your future. Fears about the future can easily get blown out of proportion. Talking to someone about them can help to put things back into perspective.

Your family may understand your situation best, or friends may know you well enough to give you honest advice. They can help you to get any information you need and to deal with any problems you are facing. And they can help you plan for the future, if necessary.
You may also find talking to a counsellor who specialises in this sort of problem very helpful. Your GP may be able to refer you, or you could contact one of the organisations listed on p. 12.

Your GP can examine you and run some tests. Depending on the problem, they can refer you to a neurologist, to a psychiatrist specialising in older people, to a physician in geriatric medicine or to a psychologist. Many areas have special memory clinics. Even if any physical treatment they can offer is limited, much can be done to help you feel better. GPs can also link patients up with the social services departments and community psychiatric nurses (CPNs) who can offer help to people with dementia and their relative and friends.

Support groups
Support groups can be an important source of strength and information. Other people in your situation not only understand how you feel, but will know other ways of dealing with problems and are familiar with the area's resources. Being with others experiencing similar difficulties can be a great relief and bring a sense of peace. (See Useful organisations, on p. 12.)

Reminiscence therapy
Helping someone recall his or her past can improve understanding and establish better communication with that person.

Day centers and day hospitals
These provide various forms of therapy, including occupational therapy and reminiscence therapy. They may also use techniques, such as reality orientation. This is a means of helping people to remember where they are, by constantly reminding them of the day, date, time and what is happening, and getting them to repeat it back.
How to...
ceope with memory loss

It might be worth investigating whether a period in a special unit or rehabilitation centre can help with memory problems and the changes in behaviour that it sometimes brings.

How can family and friends help?

It can be very hard for friends and relatives to grasp the full implications of a problem of this kind. Because the person may look quite fit and well, it may be difficult to grasp that they are not unwilling to remember, but actually unable to do so. A great deal of advice and practical help is available from charities and voluntary organisations (see below).

Looking after someone with dementia can be far more demanding than many physical illnesses. Talking to a counsellor who specialises in these problems can be very helpful. (See Useful organisations, on p. 12, for more information.) At some point, friends and helpers will play an important part in examining the true needs of someone suffering from irreversible memory loss, and getting more help, if necessary.

Useful organisations

Mind
Mind is the leading mental health organisation in England and Wales, providing a unique range of services through its local associations, to enable people with experience of mental distress to have a better quality of life. For more information about any mental health issues, including details of your nearest local Mind association, contact the Mind website: www.mind.org.uk or Mindinfo hotline on 0845 766 0163.
Age Concern England
Astral House, 1268 London Road, London SW16 4ER
information line: 0800 009 966, web: www.ageconcern.org.uk
Information on residential care, money, housing and health

Alzheimer’s Society
Gordon House, 10 Greencoat Place, London SW1P 1PH
helpline: 0845 300 0336, web: www.alzheimers.org.uk
For people with dementia, their carers and professionals

British Association for Counselling and Psychotherapy
35-37 Albert Street, Rugby CV21 2SG
tel. 0870 443 5252, web: www.bacp.co.uk

CANDID
The National Hospital for Neurology and Neurosurgery
Queen Square, London WC1N 3BG
tel. 020 7829 8773, web: www.candid.ion.ucl.ac.uk
Researches dementia and trials new drugs. Offers factsheets

Carers UK
20–25 Glasshouse Yard, London EC1A 4JT
helpline: 0808 808 7777, web: www.carersonline.org.uk
Information and advice for carers through local branches

Help the Aged
207–221 Pentonville Road, London N1 9UZ
seniorline: 0808 800 6565, web: www.helptheaged.org.uk
Provides practical support to help older people live independently

Kingshill Research Centre
Victoria Hospital, Okus Road, Swindon SN1 5HZ
tel. 01793 481 182, web: www.kingshill-research.org
Provides information and strategies for coping with memory loss
Further reading

- Anxiety and tension: symptoms, causes, orthodox treatment and how herbal medicine will help J. Wright (How To books 2002) £6.99
- The BMA family doctor guide to stress (Dorling Kindersley 1999) £4.99
- The complete guide to mental health E. Farrell (Mind/Vermilion 1997) £9.99
- Coping with anxiety and depression S. Trickett (Sheldon Press 1997) £6.99
- The food and mood handbook A. Geary (Thorsons 2001) £12.99
- The forgetting: understanding Alzheimer’s D. Shenk (Flamingo 2002) £8.99
- Good mood food M. Van Straten (Cassell 2002) £10.99
- Healing minds J. Wallcraft (Mental Health Foundation 1998) £12
- How to cope as a carer (Mind 2003) £1
- How to cope with sleep problems (Mind 2003) £1
- How to improve your mental wellbeing (Mind 2004) £1
- How to stop worrying (Mind 2004) £1
- Making sense of herbal remedies (Mind 2000) £3.50
- Making sense of homeopathy (Mind 2001) £3.50
- Making sense of sleeping pills (Mind 2000) £3.50
- Making sense of traditional Chinese medicine (Mind 2001) £3.50
- The Mind guide to food and mood (Mind 2000) £1
- The Mind guide to managing stress (Mind 2003) £1
- The Mind guide to massage (Mind 2004) £1
- The Mind guide to physical activity (Mind 2001) £1
- The Mind guide to relaxation (Mind 2004) £1
- The Mind guide to yoga (Mind 2001) £1
- Overcoming anxiety H. Kennerley (Robinson 1997) £7.99
- Understanding anxiety (Mind 2003) £1
- Understanding dementia (Mind 2004) £1
- Understanding talking treatments (Mind 2002) £1
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Mind works for a better life for everyone with experience of mental distress

Mind does this by:
• advancing the views, needs and ambitions of people with experience of mental distress
• promoting inclusion through challenging discrimination
• influencing policy through campaigning and education
• inspiring the development of quality services which reflect expressed need and diversity
• achieving equal civil and legal rights through campaigning and education.

The values and principles which underpin Mind’s work are: autonomy, equality, knowledge, participation and respect.

For details of your nearest Mind association and of local services contact Mind’s helpline, MindinfoLine: 0845 766 0163 Monday to Friday 9.15am to 5.15pm. Speech-impaired or Deaf enquirers can contact us on the same number (if you are using BT Textdirect, add the prefix 18001). For interpretation, MindinfoLine has access to 100 languages via Language Line.

Scottish Association for Mental Health tel. 0141 568 7000
Northern Ireland Association for Mental Health tel. 028 9032 8474

This booklet was written by Carole Reid-Galloway

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Mind (National Association for Mental Health)
15-19 Broadway
London E15 4BQ
tel: 020 8519 2122
tax: 020 8522 1725
web: www.mind.org.uk