Case History - Dementia Delayed With Nutritional Intervention

Gender, Age, Occupation, Nationality, height and weight. Mr. D.S. is a 67 yr old Englishman who is a husband and father. He is 5ft 10 tall and weighs 13 stone 2 (178 cm, 82 kg).

Presenting complaint – list and duration

Mr. D.S. first presented with symptoms of mental decline in the last year of his working life when he was 63. However, shortly after he retired his loss of memory in particular declined rapidly, apparent to anyone who knew him. At 64 he was diagnosed with senile dementia and this required his wife to reduce her work and look after him more. D.S. could remember his and the family history very well, but his short term memory was very poor. He still managed to play golf 2 to 3 times a week, however, driving himself there and back safely.

At that time, D.S. had never acknowledged to his wife that he had any problems at all and it appeared that he believed that his bluff was working, which was heartwrenching, his wife confessed to me. The only way to encourage him to come and visit me was on the basis that he and she both needed to lose weight and they were to come and see a nutritionist who was going to give them both a "healthy eating diet" to lose weight. This was the ostensible focus of the appointment.

D.S.'s wife told me she had not had an intimate or true conversation of any kind with her husband for over a year, and she felt she had "lost him" forever. It was extremely stressful for her, and their two adult children.

Any Investigations

There has been no other investigation of Mr D.S. other than a visit to the G.P. and two visits to his Neurologist who prescribed Aricept on the basis of his assessment of D.S's symptoms. Aricept is a centrally-acting reversible acetylcholinesterase inhibitor, which makes acetylcholine available for longer. Acetylcholine is vital in the creation of memories. Mr. D.S. had been taking this daily for approximately 3 years prior to his first nutrition consultation, at which he was accompanied by his wife, but there was no real noticeable change in D.S.'s cognitive function of memory from taking Aricept, and he had declined further by the time we met.

There was no family history of cognitive decline or other degenerative disease state. Both parents had lived into their 80's.

The prognosis was that D.S. would deteriorate in time and eventually need full time care, which his wife would provide, if possible, or he would need to go into a home.

Strategy

The nutritional therapy approach was twofold: to optimise D.S's diet for blood sugar balance and essentially ensure a healthy, wholesome, refined-food-free diet with regular meals, and adequate water intake and to provide key nutrients that have been shown or used historically to improve memory and cognitive function and circulation to the brain. Learn More

D.S. would often forget to eat at the right time, and unless his wife sat with him whilst he drank, it was unknown how much <u>water</u> he drank, if any. D.S. was very much in

denial of his memory loss and would sadly, rather desperately give very vague answers to specific questions. For example, when asked what he had eaten for lunch two hours previously he would bluff a reply "well, what I normally eat, you know the sort of thing". He could only converse in the "now" and had almost no recollection of anything that happened sometimes just minutes beforehand. However, when speaking in the "now" he came across as a very intelligent and lucid man and he would not appear to have any issues cognitively unless reference were made of the recent or very recent past.

Diet & Supplements: name and dose

I recommended, in writing (D.S. could follow things that were written down) that he eat very specific meals at very specific times. Alarms were to be set and a new electronic beeper alarm was to be purchased to facilitate the process, along with his wife being present when she could. His water intake was also to be very carefully engineered and regimented so as to ensure at least 1.75 litres per day.

The specific supplements recommended were as follows:

Allergy Research – BrainWave Plus – 2 at each meal. See info.

Allergy Research – Natural Gamma E – 1 at breakfast & dinner

- BrainWave Plus is designed for the older person with reduced cognitive function. It contains a number of nutrients and plant extracts including acetyl-l-carnitine shown to positively support cognitive and memory function.
- Natural Gamma-E contains alpha-tocopherol balanced with gamma-tocopherol. Both decrease arterial peroxidation and LDL oxidation, and both enhance SOD activity but gamma-tocopherol also scavenges peroxynitrite.

Duration

D.S. followed the recommendations for 4 weeks, with much help from his wife. He managed to implement the dietary recommendations about 80% of the time, and with help, took the supplements every day. The key thing was that he was now totally avoiding all processed and refined food, including trans fats which had been in his pre-prepared meals.

At 4 weeks, a brief review with his wife was held by telephone. We then planned to meet 4 weeks after that, recognising that for any change to occur it may well take time. We also then all met again 2 months after that, with at least one telephone contact with his wife in between appointments.

Outcome

After 4 weeks of dietary change and the supplements, there was no discernible change other than the fact that D.S. remembered a news item one day from the previous night, and talked all about it as if he were clinging to the one memory he did have.

D.S. continued with the same approach and we all met again 4 weeks later, 2 months after the first appointment. There had been some subtle yet important moments of memory, and they were occurring more often than before. D.S. was still very much the same, but he had one conversation with his wife about their children and discussed how they were, something he had not done in a whole year. She told me she wept afterwards.

Another 6 weeks went by and this time I met his wife only, who described a recent appointment with the Neurologist who exclaimed that D.S. had responded more

favourably to Aricept than any other patient, because there were definite signs of improvement and at worst on other days a plateau rather than deterioration which is what was anticipated. D.S. was able to recall events from the night before and within each day as well, and although this was the extent of the improvements, this made a huge difference to their lives, Mrs S told me.

Mrs S. told the Neurologist that he had also been taking 2 supplements and he was most interested and asked for the list of ingredients, which we provided.

As the months went by D.S. made no further improvements and more than once neglected to take the supplements, since he said he had lost the stone of weight which was the reason for taking them. However, within 2 days of not taking the supplements he deteriorated back to the stage he had been at. When he resumed the supplements he did return to the improved "living one day at a time" mode.

To date, over 18 months after the first appointment as I write this, there has been a marginal worsening in D.S.'s memory and day to day cognitive function but still markedly better than otherwise might have been predicted.

Comments

The course of Dementia may take as long as 20 years prior to any manifestation. Therefore, the damage, as it were, had been done, and there was no real hope of ever making a significant change to D.S. However, what was achieved was a much more manageable and less stressful existence for his wife (and carer), and for his children and their families when they visited, since D.S. could recall most details of what happened in those days. The BrainWave Plus and Vitamin E, perhaps in combination with the Aricept, provided palliative improvements which altered the quality of life of D.S.'s family at least and perhaps him. (However, he still never spoke about his cognitive function).

The science of how specific nutrients impact cognitive function is much better understood now. For any practitioner interested in this area of health whether it is for one's parents or patients, the Nutri-Link International Seminar held at the RSM on Saturday 10th April 2010 by Dr Jay Lombard is a must view. Click here for more info.

In addition to the therapeutic supplements and improved food intake and regularity, please do not underestimate the importance on cognitive function and mental health of drinking adequate water, which D.S. did (under supervision).

Lastly, we are left to ponder the potential impact of potentially intervening much earlier to protect against cognitive decline rather than trying, heroically, to restore cognitive function. To protect our brains, we can choose to eat a diet that abounds in natural anti-inflammatory foods and omit empty nutrition calories and take out insurance in the form of appropriate nutritional supplements. Learn More>>

Practitioner

Antony Haynes, BA(Hons), Dip ION, mBANT, NTCC is a Nutritional Therapist working in W1, London.