

Notes on Treatment with Drugs for Alzheimers

My husband has been through a cycle of treatments over the past four years. He was assessed by a neurologist after MRI and various other brain scans. No exact definition of the type of dementia was mentioned. His memory loss had begun while he was in his low sixties although it was difficult to identify.

- For three years he was treated with Aricept for what was classified as classic dementia. The diagnosis was by a neurologist. The drug appeared to have some effect although measurement is difficult. The usual MMSE test involves only direct recall of facts and does not address background ability to function in society and social skills and therefore reflects a numerical computation of jumping hurdles rather than an understanding of the operation of the person.
- In May 2011 a visiting Geriatrician (in the absence of an available Neurologist) did another MMSE test and said that the deterioration that had occurred meant that he was entitled to be moved from Aricept to Ebixa because his number score had dropped.
- We changed drugs and after three months he was assessed by a Registrar because the Geriatrician was called away. This gentleman, although very competent and kind and considerate had a very pronounced Indian accent which meant that his questions in the MMSE test were very difficult to understand. Because I had seen this test administered probably ten times by this time I knew all the questions and answers. I did step in to do some interpretation. At the end of the test special permission was obtained to continue the treatment.
- At the beginning of November we returned for further testing. The official Geriatrician carried out the test and as I knew would happen the results were below those recorded three months earlier. He was a bit bewildered until I explained that I believed the earlier ones were inflated by the previous language situation. John was then taken off all medication.
- Shortly before this appointment John had taken extensive memory testing at the Memory Clinic at James Cook University and had also been part of a research study relating to early onset dementia. These results were not available at the time of the above consultation.
- In the ensuing month John's cognitive abilities and concentration decreased markedly. One had to accept that this was an inevitable progression. However when the Geriatrician received the Memory Clinic results he contacted me and said that there were anomalies and he would like to talk to me further.
- His proposal that he would put John on a trial of the use of dual treatment with both Aricept and Ebixa as there were studies that suggested some positives of the dual use. The downside was that we would be required to pay some \$110 per month for the second drug as only one was allowed on the PBS.

- Since mid December John has been on the dual treatment and over this time he has regained the losses sustained during November with no drug treatment. His memory has not improved. At our March consultation the Geriatrician did numbers of spatial and numerical tests outside the MMSE test and concluded he would leave him on the dual treatment. We see the Geriatrician again in July and while there has been no obvious improvement in cognitive ability the ability to function in society has been maintained. I know he will not perform any better on his next MMSE test but I do know that his concentration is being maintained and that his ability to function socially and physically is also being maintained.
- During 2011 there was a considerable loss of vocabulary, particularly nouns occurred and the Geriatrician feels there is also an element of acute progressive aphasia involved

I am unsure what the study is trying to achieve but I put this forward as a possible case study for consideration as evidence. I am very sure that the testing that is being the definitive decision about the availability for use of drugs in treatment is a tick off check list which does not allow the provision of a true picture in a disease which affects people very individually. My husband was a professional Mathematician who could and can still read music. He was fluent in Japanese and is still so fit that at 73 he still lays squash. These are all the indications being given about how people can avoid Alzheimers.