

Regional Offices located in:

**Bloomington/Normal**  
405 Pine Street, Suite B  
Normal, Illinois 61761  
(309) 451-8333  
(800) 272-3900 Helpline

**Carbondale**  
630 E. Walnut Street  
Carbondale, Illinois 62901  
(618) 529-2107  
(800) 272-3900 Helpline

**Champaign**  
307 W. University  
Champaign, Illinois 61820  
(217) 351-1726  
(800) 272-3900 Helpline

**Chicago**  
4709 Golf Road, Suite 1015  
Skokie, Illinois 60076  
(847) 933-2413  
(800) 272-3900 Helpline

**Chicago South**  
10 W. 35<sup>th</sup> Street, 9<sup>th</sup> Floor  
Chicago, Illinois 60616  
(312) 881-5050  
(800) 272-3900 Helpline

**Joliet**  
300 Caterpillar Drive  
PO Box 3506  
Joliet, Illinois 60434  
(815) 744-0804  
(800) 272-3900 Helpline

**Kankakee**  
401 N. Wall, Suite LL08  
Kankakee, Illinois 60901  
(815) 936-0464  
(800) 272-3900 Helpline

**Rockford**  
4777 E. State Street  
Rockford, Illinois 61108  
(815) 484-1300  
(800) 272-3900 Helpline

**Springfield**  
6 Drawbridge Road, Suite 4  
Springfield, Illinois 62704  
(217) 726-5184  
(800) 272-3900 Helpline

## “Step Up” for Memory Walk 2002

Since its inception in 1989, Memory Walk, the Alzheimer's Association's largest national fundraising event, has raised more than \$100 million for programs and services for individuals with Alzheimer's, their families, and caregivers.

Our Families Need Friends Like You

Each year, thousands of people—like you—lace up their walking shoes and participate in Memory Walks in over 400 communities coast-to-coast. Every dollar raised in your community stays in your community for care



and support services for individuals and families touched by Alzheimer's.

The Facts About Alzheimer's Disease

An “equal opportunity disease,” Alzheimer's doesn't discriminate on the basis of race, gender, or culture. Everyone knows someone whose

life has been changed irrevocably by this devastating disease.

Did You Know...

Alzheimer's disease is an irreversible brain disorder that occurs gradually and results in memory

*(Continued on Page 3)*

## Alzheimer's a Serious Problem, Poll Says

An overwhelming number of Americans, 95 percent, say Alzheimer's disease is a serious problem facing our nation. A majority indicate they are personally concerned about getting the disease, according to a new poll. One startling finding was the 65 percent of Americans age 35 to 49 who are concerned about getting the disease, a prospect that is in all probability several decades away.

The Peter D. Hart Research Associates nationwide poll of likely voters shows Americans express strongly support for increasing the

amount of government funding dedicated to medical research for Alzheimer's disease. Seven in 10 likely voters, 68 percent, say it is important for there to be a major increase in the amount of funding allocated to finding an effective treatment or a way to prevent Alzheimer's. When asked about specific proposals, nearly three-quarters (74 percent) of likely voters agree that Congress should increase federal funding for Alzheimer's research to \$1 billion a year, up from the current \$598.9

*(Continued on Page 2)*

# Donors Not Only Support Us, but Inspire Us As Well!


Meet Bob Anhalt, a special friend of the Alzheimer's Association—Greater Illinois Chapter. Bob grew up on the North Shore, and attended New Trier High School. When World War II erupted, Bob served his country as a pilot in Europe. After he returned from the war, he went to work for Illinois Bell. At a company bowling league function, he met his future wife, Milberna, who worked for Illinois Bell as a switch-board operator. They married in 1947.

Bob and Milberna raised two daughters, both of whom are now grown and working in the education field. After years passed, Milberna began to show signs of Alzheimer's disease. Bob says his wife's illness followed the typical pattern, with mild symptoms at first, progressing to increased confusion and eventual physical decline. Bob cared for her at home for seven years, until his own health problems slowed him down. He made the difficult but necessary decision to place her in a facility where she could receive 24 hour a day care. She

passed away in February of 2000.

While he was caring for his wife, Bob became skilled at finding help wherever he could. He called our Helpline, as well as other neighborhood organizations to obtain information, supplies, etc. Bob knows firsthand the many struggles faced by families who have a loved one with Alzheimer's disease.

In order to help others facing a similar plight, Bob has chosen a unique way to help support the Alzheimer's Association. Several years ago he made a pledge to send a monthly donation, which he has done faithfully. In fact, Bob is so motivated to help others, he has decided to double the size of his monthly gift.

We salute Bob for his compassion towards all those who are dealing with the devastating effects of Alzheimer's disease. While he acknowledges the importance of research into the causes and prevention of Alzheimer's disease, he wants other families in our area to know that help is available—now—when they need it. His gifts make possible our helpline, our support groups, education programs and much more. Thank you, Bob. 

Call the Chapter's Helpline 24 hours a day, 7 days a week for:

- A listening ear
- Chapter support services
- Placement information



- Respite options
- Community support services
- Information and referral
- Caregiving tips
- Educational programs

(800) 272-3900

## Alzheimer's Benefit Cruise

March 29 to April 5, 2003

Sail through the beautiful Western Caribbean aboard Celebrity's magnificent ship the "Century." Karner travel will donate \$100 to the Alzheimer's Association, Greater




Illinois Chapter, for every passenger who purchases this cruise though them. For more information, contact your local Alzheimer's Association Office or Karner Travel at (888) 783-9460.

## Alzheimer's a Serious Problem

*(Continued from Page 1)*

million annual allocation.

The survey finds likely voters saying that medical research (41 percent) is one of the most important areas for federal spending, ranking second only to education spending (66 percent), and placing ahead of spending on the military (37 percent).

Their support for funding increases may be driven by personal concern about developing Alzheimer's disease, especially acute among some segments of the population. Sixty-five percent of African Americans are concerned, as are 65 percent of women. Likely voters with family members who have or have had the disease are among those most concerned about getting the disease themselves, with 70 percent expressing this worry. Nearly one-third of those touched by Alzheimer's say they are very concerned about their own prospects for the disease. 

# “Step Up” for Memory Walk 2002 (Continued from Page 1)

loss, behavior and personality changes, and a decline in thinking abilities.

More than 4 million Americans have Alzheimer’s disease. Unless we find a way to stop it, up to 14 million baby boomers will have the disease within 50 years.

Alzheimer’s disease places an immense financial and emotional strain on families. It costs our country at least \$100 billion a year. Neither Medicare nor most private health insurance covers the long-term care most patients need. The Facts About the Alzheimer’s Association  
We are the nation’s leading volun-



**Make  
Memory Walk  
a family affair.**


tary health organization dedicated to conquering Alzheimer’s. We

also provide a variety of support for families and caregivers.

We are the largest private funder of Alzheimer research, having committed nearly \$120 million to date. We provide vital programs, services and support in local communities nationwide.

**Why You Should Walk**

Memory Walk is not just “another walk.” It is the nation’s premier fundraiser to help those battling Alzheimer’s.

All money raised goes to support the Greater Illinois Chapter’s programs and services. So sign up today so we can provide more help tomorrow. Without you, it will not happen! 

## Memory Walks Around Illinois: Come Join the Fun

For immediate information go to [www.alzheimers-illinois.org](http://www.alzheimers-illinois.org).



### **Bloomington/Normal**

(309) 451-8333

**September 28, 2002**

Meadows Mennonite Retirement Center – Chenoa

**October 5, 2002**

Constitution Trail – Normal

### **Carbondale**

(618) 529-2107, (800) 532-0177

**September 21, 2002**

Community Park - Effingham

**September 28, 2002**

SIU Campus Lake – Carbondale

### **Champaign**

(217) 351-1726

**September 14, 2002**

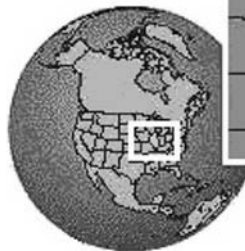
Westside Park – Champaign

**September 21, 2002**

Peterson Park – Mattoon

**September 28, 2002**

Danville Crow Fest Parade



### **Chicago**

(847) 933-2413

**September 22, 2002**

Randolph at the Lake – Chicago

### **Joliet**

(815) 744-0804

**October 5, 2002**

Herald News Building – Joliet

### **Kankakee**

(815) 936-0464

**September 14, 2002**

Perry Farm – Bourbonnais

### **Rockford**

(815) 484-1300

**September 14, 2002**

Moraine Hills – McHenry

**September 28, 2002**

YMCA Log Lodge - Rockford

**October 12, 2002**

Krape Park – Freeport

### **Springfield**

(217) 726-5184

**October 5, 2002**

Illinois Department of Transportation Grounds - Springfield



# The Driving Dilemma

The decision about whether a person in the early stages of Alzheimer's disease should be allowed to drive is a difficult one. Driving is a complex activity that requires quick thinking and reactions, good perception, and split-second decision-making. For the person with Alzheimer's disease, driving becomes a safety issue.

Behind the wheel, the person with Alzheimer's may forget directions and landmarks and become lost, disoriented, and—worst yet—a danger to himself and others. With grandchildren in the car's backseat and wife beside him, R. Swisher, who has Alzheimer's, accelerated into the street, narrowly avoiding being hit broadside by two other cars going 40 miles per hour. Another time, he changed lanes into a car's path.

Despite his wife's insistence that her husband not drive, her fervent pleas were ignored. She writes: "Our primary care physician wrote a 'Do Not Drive' prescription. He refuses to go back to that doctor." Readers who shared their experiences for this "Dialogue" column said the decision to sell the car or hide the car keys was painful. "This was the first big life change for Mom as a result of Alzheimer's. It made the disease real to us—the point of no return," writes Jane Gaboury, of Alpharetta, Georgia, whose 71-year-old mother Cecile regularly drove through stop signs before ceasing to drive.

"The question of whether or not driving restrictions should be enforced for people with Alzheimer's is simple in theory and

difficult in reality," notes Gaboury.

"In theory, people who are impaired must not be allowed to drive, whether that impairment is the temporary result of alcohol or of a more permanent condition such as Alzheimer's." Yet caregivers question how family members can determine when the impairment is sufficient to warrant driving restrictions.

The Alzheimer's Association does not believe a diagnosis of Alzheimer's automatically means a person is incapable of driving. Family members must regularly monitor each person's driving ability, says L. Jaime Fitten, MD, who is completing work on a written screening test at the UCLA School of Medicine. The tool is an adaptation of road tests conducted with 100 individuals, including those with Alzheimer's and dementia, other health problems, and healthy senior citizens.

"Not surprisingly, we found that the more complex the driving situation is, the more difficult it was for the person with dementia," says Fitten, professor of psychiatry and biobehavioral sciences, UCLA.

"Yet Alzheimer's does not affect all areas of the brain in exactly the same way. Aging—and how we age—is complex.

"It's not so much the age of the individual, but their overall health—whether they have Alzheimer's, arthritis, visual, or hearing problems—that can lead to unsafe driving. More legislation looking at driving and the elderly is needed."

Julie Rankila, of Farm-

ington, Minnesota, agrees. "Saying people with Alzheimer's should not drive is too broad of a statement.

It's like saying, 'All people over 60 should not drive.' My grandfather, 91, still drives, and he can barely see or hear. The elderly can be just as dangerous on the road as those with Alzheimer's."

Creative Solutions to Not Driving Julie's father was diagnosed with Alzheimer's at age 53, and not being able to drive was torture for him. Proving the resiliency of caregivers coping with Alzheimer's, the Rankila family purchased a four-wheeler for Dad to drive on familiar off-road trails. "He now has some semblance of independence and can journey to the store or friends' houses. We know eventually he will be unable to operate this safely, but this has helped ease the transition."

Ross Ward was a traveling artist who drove over 30,000 miles a year for 20 years. "He stared getting lost regularly, and when he returned, the car had many mysterious minor dents," writes his wife Carla, who learned of her husband's dementia in February 1998. Ross, then 57, discovered a creative solution for not driving his beloved Jeep Cherokee. The New Mexico resident turned it into an "art car," gluing over 700 pieces of kitschy toys, including Buddha, Barbie, the Power Rangers, and Snow White. He also affixed hundreds of pennies onto the hood to turn his Jeep into a "Lincoln."

Solicit the Support of Others  
Ask your physician to advise the person with dementia not to drive



## When Should a Person with Alzheimer's Relinquish the Car Keys?

and have him or her write a letter or issue a "Do Not Drive" prescription. Learn how to disable a car, or enlist the help of a local mechanic so it will no longer start.

You can always have your insurance agent provide documentation that the person with Alzheimer's no longer has insurance coverage.

But remember that the person with the disease is not necessarily going to understand or abide by the "law" or the decision.


After Violet was diagnosed with Alzheimer's, her physician recommended not driving and her family promptly notified the Arizona department of motor vehicles, which sent a notice of disqualification to the former nurse. Violet threw it away and loaded her cat and belongings into the car and disappeared for three days.

A statewide search by police located Violet 120 miles away. "We were lucky it was December and not July," write Don and Joanne Lipinski. "The law differs considerably when a child is trying to care for a parent."

Fitten recommends learning about your state's driving regulations. In six states—California, Delaware, Nevada, New Jersey, Oregon, and Pennsylvania—physicians are legally required to report various medical conditions that may affect driving ability.

The department of motor vehicles may then revoke the per-

son's license.

"Driving today is hazardous enough with all of our faculties on the alert," notes Florida's Herbert I. Johnson. "We cannot rely on laws and today's health care restrictions to prevent accidents. . . . Common sense must prevail." 

### For More Information

Driving and Alzheimer's Fact Sheet (ED247ZG), first copy, free (800) 272-3900, [www.alz.org](http://www.alz.org)  
Safe Return (800) 272-3900

## Be An Advocate: 2002 Elections

**A**lthough the 2002 elections are still months away, the flurry of activity around candidates and issues continues to build. We sometimes overlook or take for granted that we can vote, but voting is one of the most fundamental responsibilities of active citizens.

The election creates unique opportunities for advocates to shape candidate thinking around the issues important to people with Alzheimer's disease and their caregivers.

Remember the 2000 Presidential race and Florida? Votes count!

There are many things you can do to make your voices heard on Alzheimer's issues.


Alzheimer advocates can:

- Turn out at candidate events and ask questions about research, care, and family caregiver support.
- Write or e-mail candidates about the importance of these issues.
- Write letters to the editor of

local newspapers, telling their personal stories about the need for quality long-term care.

- Stay informed on senior issues centered around campaigns for elected officials.
- Register, vote, and encourage others to vote.
- Sign-up to become part of the Advocacy Team for the Greater Illinois Chapter and let your voice be heard during this election year.



If you, or someone you know, is planning on attending party conventions, or if you are an active party activist in any political party, please let us know. There are many ways we can impact the issues in these capacities to benefit people with Alzheimer's and their families. We have information and other resources available for advocates involved in this critical process. Call your local Chapter office for more information. 

# Religion Plays Central Role in Lives Affected by Alzheimer's

Given the cognitive and behavioral changes that people with Alzheimer's experience, can religion and spirituality still be a critical part of their lives?

Yes, say experts.

Religious and spiritual beliefs can still be maintained and benefit not only people with the disease but also their caregivers, says one researcher who studies

religion and spirituality in the elderly and people with Alzheimer's.

Research and anecdotal reports indicate that people with Alzheimer's often respond to familiar hymns, prayers, and liturgies as well as to visual cues such as clerical collars and crucifixes well into the disease, says Stephen Sapp, PhD, chair of the Department of Religious Studies at the University of Miami.

"I feel strongly that we simply do not know what is really going on in the Alzheimer's person's mind, and we don't know what is being received and processed," he says. "So I advocate continuing to offer input that is meaningful to the person before the disease process leads to what appears to be a significant lack of comprehension."

The terms religion and spirituality mean different things. Sapp says spirituality gives individuals a sense of connectedness to themselves, others, the natural world, and that which transcends all these categories—a divine force, or God. Spirituality often confronts the question of the meaning of

life, he notes.

On the other hand, he says, religion offers specific concepts, symbols, norms, rituals, and the like with which to conceptualize, reflect upon, express, and understand connectedness.

"In short, religion tends toward the institutionalization or regularization of the spiritual, which we associate with church, synagogue, or mosque."

Many religious congregations can and do offer individual group support to people with Alzheimer's and their family and caregivers, he says. By contrast, some forms of contemporary spirituality are more individualistic and thus may be of less help to people with the disease or their caregivers, he adds.

Sapp says religious congregations have important roles to play in the lives of people with Alzheimer's and their caregivers, from providing emotional and spiritual support to taking over the caregiver's role for a few hours.

People of faith take comfort in believing in a God who loves and cares about them, he says. "One benefit of faith in the face of Alzheimer's is that it offers hope in what appears to be a hopeless situation." The Abrahamic faiths all hold out a promise that a better life awaits, he notes. "In the case of Alzheimer's disease, I have seen many people find great solace in it."

However, Sapp says most congregations and clergy in the United States fail to reach out to people with Alzheimer's and their

family caregivers. "Clergy attitudes are crucial because in most congregations the recognized leader sets the tone."

He says he has been frustrated in trying to get clergy and congregations involved in Alzheimer programs, which would benefit both groups in ministering to their own members and in serving the broader community. After all, he notes, religious people have an obligation to help others.

Caregivers may be reluctant to bring someone with Alzheimer's to church because they are embarrassed or because the person may disrupt the service by yelling or engaging in other inappropriate behavior. This doesn't have to be a problem, he says.

Some churches have special facilities where parents can take noisy children and still participate in worship through audio or video feeds, he says. "Perhaps these could find a new use."

Recent research has found a correlation between spiritual well-being and wellness. Last fall,

*Alternative Therapies in Health and Medicine* published a study that suggested that regular meditation and diet contributed to reduced heart disease.

One of the most striking phenomena to hit religious gerontology since Sapp became involved in the field, and one welcomed by most people who work in the area, is the burgeoning research that is seen to demonstrate "scientifically" the effectiveness of religious beliefs and behaviors for health in general and healthy aging in particular, Sapp says.



# Alzheimer's Disease Study

## A Clinical Trial Sponsored by the National Institute of Mental Health

*One of the Clinical Antipsychotic Trials of Intervention Effectiveness (CATIE) projects*

Many people with Alzheimer's disease develop symptoms including delusions, agitation, aggressive behavior, or hallucinations. These symptoms add to the many difficulties of living with Alzheimer's disease. The **Alzheimer's Disease Study** aims to find out the most effective medication treatments for these symptoms, and to improve the quality of life of people with Alzheimer's disease, their families, and caregivers.

Individuals with Alzheimer's disease may be eligible to participate if they experience one or more of the following:

- delusions, or irrational beliefs (such as believing someone is out to get them, or that caregivers aren't who they say they are)
- agitation (being restless, or easily upset)
- aggressive behavior (being verbally or physically aggressive)
- hallucinations (see or hearing things that are not actually there)

The Alzheimer's Disease Study is comparing the effectiveness of four FDA-approved medications for these symptoms: olanzapine (Zyprexa®), quetiapine (Seroquel®), risperidone (Risperdal®), and citalopram (Celexa®). At the beginning of the study, some participants may receive placebo (inactive pills) before they receive one of the study medications, but they will not remain on placebo if they do not improve.


A specially trained physi-

cian and treatment team will carefully monitor each participant throughout the study and will coordinate with the participant's regular health care provider.

Participants may continue taking medications for Alzheimer's and other health conditions (with some exceptions) and will continue to see their current physicians for routine medical care.

Participants who improve on a study medication may stay on it, and those who do not benefit will be offered another active treatment. In this way, participants may try each study medication to find which one is most helpful for them.

Medications and medical care that are part of the study

are provided at no cost. Participants will be followed for 9 months, with approximately 12 outpatient clinic visits during this time. A family member or caregiver who has regular contact with the patient must be available to participate in the study. Educational materials on Alzheimer's disease and advice on managing difficult behavior will be provided. 

### For more information, contact your local CATIE Study Location

**Southern Illinois University School of Medicine**  
Springfield, Illinois 62702  
Dennis McManus, MD, Principal Investigator

Contact: Merri Ellen King  
(217) 545-4485  
mking2@siumed.edu

**Northwestern University Medical School**  
Chicago, Illinois 60611  
Lesley Blake, MD, Principal Investigator

Contact: Susan Genell  
(312) 695-2065  
sagenell@northwestern.edu

zapine (Zyprexa®), quetiapine (Seroquel®), risperidone (Risperdal®), and citalopram (Celexa®). At the beginning of the study, some participants may receive placebo (inactive pills) before they receive one of the study medications, but they will not remain on placebo if they do not improve.

## The Alzheimer's Association is Looking for Volunteers


We have many opportunities available for those interested in sharing their time with us in the following categories:

• **Receptionist**

- **Light Clerical Work**
- **Helpline Packets**
- **Data Entry**
- **Special Events**
- **Staffing informa-**



**tion booths at health fairs**

If you are interested in volunteer opportunities at the association, please contact Catherine Prusko at (847) 933-2413 or [catherine.prusko@alz.org](mailto:catherine.prusko@alz.org). 

## Help us help each other

The Alzheimer's Association Greater Illinois Chapter depends on your financial support for programs such as: The Support Group Network, Helpline, Speaker's Bureau, Educational Workshops, Public Policy, and the *Newsletter*. More importantly, your tax-deductible contribution stays in your community.

Donation amount: \_\_\_\_\_

My Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

- Please send me information on the Alois Alzheimer Society
- Please send me the brochure "Charitable Giving After the 2001 Tax Act"
- Please send me information on preparing a Will
- I'm interested in finding out more about volunteer opportunities

**Mail your donation to:** Alzheimer's Association  
Greater Illinois Chapter  
4709 Golf Road, Suite 1015  
Skokie, IL 60076

## Greater Illinois Chapter

### Board of Directors

**Tom Sluby** *Chair*  
**Greg Kyrouac** *Vice Chair / Realignment*  
**Jim Lee** *Vice Chair / Internal Affairs*  
**Steve Mack** *Vice Chair / Fund Development*  
**Jill Stetson** *Vice Chair / External Affairs*

### **Directors**

Gene Breslow  
Judy Buchanan  
Tana Durnbaugh  
Cathy Edge  
Stuart Gaines  
Mark Hilliard  
Chet June  
John Linehan  
Hal Loebach  
Carlene Motto  
Arnie Radtke  
Jesse Smart  
Ed Walsh  
Candy Watt  
Sandy Weintraub  
Mike Wolf

**President and CEO**  
G. Kent Barnheiser

**(800) 272-3900 Helpline**  
**[www.alzheimers-illinois.org](http://www.alzheimers-illinois.org)**



Non-Profit Organization  
U.S. Postage Paid  
Permit No. 367  
Skokie, IL

**Greater Illinois Chapter**  
4709 Golf Road, Suite 1015  
Skokie, Illinois 60076

**CHANGE SERVICE REQUESTED**