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# Caring for Those Who Cared for Us: Part 1: Myths and Realities About Aging

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What are the demographics that help us understand the reality of an increasing older population here in the United States? Consider the following:

- Since 1900, the percentage of Americans age 65 and older has tripled
- By 2030, those age 65 and older will be 20% of the US population
- The oldest group (age 85 and older), is the fastest growing
- Minority persons are projected to represent up to 25% of older adults by 2030
- Life expectancy for men is 73 years; for women, 80 years

There are many myths and realities about aging that warrant discussion and review as we consider the growing elderly population:

1. Everyone becomes confused or forgetful if he or she lives long enough.

*False*. Neither confusion nor significant memory loss is normal at any age. A new study released by a team at Princeton University in the fall of 1999 found that adults continue to grow new brain cells throughout life. Those late-generated cells, may allow older people to bolster their learning and memory capabilities, or even to stave off declines. If someone is experiencing forgetfulness and confusion, they might want to see a healthcare professional.

2. Most older people are often cognitively impaired.

False. For most older adults, if there is a decline in some intellectual abilities, it is not severe enough to cause problems in daily living. The more common age-associated cognitive declines include: slower reaction times, taking longer to learn new material, a decline in ability to do two simultaneous tasks, visual-spatial decline (e.g., climbing stairs and thinking there is one more step than there actually is), and a decline in mental flexibility.

3. Older people barely cope with the inevitable declines associated with aging.

*False.* Most older people successfully adjust to the challenges of aging and live independently. Think of the number of heads of states in the world. Ronald Reagan was 70 years old when he became our 40<sup>th</sup> President. He led the country for eight years and left office at age 78! Mother Teresa was awarded the Nobel Peace prize when she was 69 years old and worked till her death at age 87. Mao Tse-Tung ruled communist China until he died at age 83. Rev. Billy Graham is still actively serving the Lord at age 82.

4. Older people become more difficult and rigid with advancing years.

False. Personality remains relatively consistent throughout one's lifespan. Unless someone suffers from a neuro-

logical disorder, aging does not affect the parts of the brain responsible for personality. If a loved one begins to act out of character, it may be appropriate to seek an evaluation.

### 5. Most older people are depressed.

False. Most older people are not depressed, and depression is no more a "normal" side-effect of aging than is heart disease or cancer. Depression recognizes no age barriers. The most common age group for depression is ages 20-44. Relatively healthy, independent men and women over 65 years of age experience slightly less depression, on average, than younger adults.

6. Older people can't take medication for depression because they take too many other drugs.

*False*. While it is true that older people often suffer from a number of conditions requiring medications, including heart disease, diabetes and hypertension, doctors can usually find safe and effective anti-depressants for them.

7. If one of your parents had Alzheimer's Disease, you're doomed to get it too.

False. The overwhelming majority of people with Alzheimer's disease do not have family histories of the disease. We do not know for certain whether Alzheimer's is inherited. In a family that has two consecutive generations with affected members, the children have a 50% chance of having the disease if they live to be age 85. About 40% of cases of Alzheimer's are related to a gene ApoE4 only 15% of us carry. This gene increases one's risk of Alzheimer's, but it is not considered a cause. At least 50% of Alzheimer's cases have no known genetic cause. Furthermore, even if Alzheimer's runs in your family, do not assume that memory problems or confusion automatically means dementia. In fact, confusion and forgetfulness are often the first signs of depression in older people.

#### 8. You can be too old to exercise.

False. Exercise at any age can help strengthen the heart and lungs, lower blood pressure, and elevate mood. Endorphins, brain chemicals known to dull pain and invoke mild euphoria, are released during vigorous exercise. Dr. Robert Kahn of the University of Michigan, co-author of "Successful Aging (Pantheon, 1998), says that most older people, even the very old and weak, "have the capacity to increase their muscle strength, balance, walking ability and overall aerobic power." A recent study (2000) reported in *Psychosomatic Medicine* finds that adults may experience more long-term benefits from exercise therapy than from anti-depressants. Furthermore, findings suggest that exercise is associated with mood improvements for depressed middle -aged and older adults.

## 9. Suicide is mainly a problem for teenagers.

*False*. The highest suicide rate of any age group is found in older adults, primarily older Caucasian men who live alone, for whom suicide increases dramatically from age 65 to 85 and older. An older person's preoccupation with suicide should be taken seriously, and professional help should be sought quickly.

## 10. You cannot teach an old dog new tricks.

False. At any age, people can learn new information and skills. Dr. Peter Martin, professor of Human Development at Iowa State University, puts it succinctly: "No matter what your age, the memory is still trainable." According to Pablo Casals, the world-class cellist who performed concerts well into his 80's, "Age is a relative matter. If you continue to work and absorb the beauty of the world around you, you find that age doesn't necessarily mean getting old."

This article was part one of the presentation co-sponsored with Palos Verdes Baptist Church on Caring for the Elderly by Dr. Kay Ho, former AACCS Psychologist.