

# Alzheimer's Update

## New E-FIND study uses online financial monitoring technology to examine how financial behaviors change with age

Dr. Kathy Wild has been providing neuropsychological evaluations and caregiver support at the Layton Aging and Alzheimer's Disease Center for over 30 years. Dr. Wild is the principal investigator for the E-FIND study.

Financial capacity is the ability to make and carry out meaningful and sensible financial decisions in a way that can support one's health and well-being. Research has shown that impairment in financial capacity is one of the earliest functional changes in patients with mild cognitive impairment (MCI), which can be a precursor to Alzheimer's disease and related dementias. Unfortunately, impairments in financial capacity can put older adults at risk of financial abuse or exploitation.

Identifying changes in older adults' financial capacity could provide a way to detect early signs of cognitive impairment and protect financial well-being. Recent developments using online automated monitoring of financial transactions might offer older adults and their families a new way to identify the earliest signs of cognitive decline, while providing

protection from fraud and abuse and supporting independent living.

The new E-FIND study, funded by the National Institutes of Health and conducted by the OHSU Layton Center and ORCATECH (Oregon Center for Aging and Technology), will use an established online technology to test whether real-time tracking of financially-related transactions can predict early cognitive and functional decline. The study will use secure online technology to link ongoing financial activity monitoring data, with other objective measures of daily activity and thinking, in a group of independent-living older adults.

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**Would you like to know more?**  
**We are currently enrolling**  
**volunteers, ages 65-80.**  
**Please contact Jennifer Marcoe**  
**at 503-928-7292**  
**or [marcoe@ohsu.edu](mailto:marcoe@ohsu.edu).**



Our aim is to test how well real-time tracking of financially-related transactions can predict early cognitive and functional decline.

Participants will receive free secure online financial monitoring for 12 months as part of the study. The technology is designed to detect errors or irregularities, and will issue alerts if significant changes in patterns of financial activity (such as a large cash transfer) are discovered. It is our hope that through this research project we will better understand the association between a critical - but complex - activity of independent living (financial capacity), and early changes in thinking that may be a sign of cognitive decline or dementia.

# Early Awareness of Alzheimer Disease; A Neurologist's Personal Perspective

Daniel M. Gibbs, MD, PhD

AMA Neurology; 2019;76(3):249; 10.1001/  
jamaneurol.2018.4910

[https://jamanetwork.com/journals/jamaneurology/fullarticle/2724326?  
guestAccessKey=094521dc-6239-4026-8009-29db70aa7ac3](https://jamanetwork.com/journals/jamaneurology/fullarticle/2724326?guestAccessKey=094521dc-6239-4026-8009-29db70aa7ac3)

### OADC Grants

The pilot project program of the National Institutes of Health (NIH) - National Institute on Aging (NIA) funded Oregon Alzheimer Disease Center (OADC) promotes basic and clinical biomedical, translational, epidemiological, caregiving, educational, and behavioral research on Alzheimer's disease, other dementias, and normal brain aging. The funding provides modest support for investigators to develop preliminary data that could then be used in an application for further independent research. In 2019 we awarded two grants.

This year's awards went to **Fayron Epps, PhD, RN**, and **Meysam Asgari, PhD**.



**Meysam Asgari, PhD**, Center for Spoken Language Understanding, OHSU

### Designing Faith-Based Home Activities for African American Older Adults with Dementia

#### Project Summary:

The proposed study involves developing and exploring the feasibility and effects of engaging in meaningful faith-based home activities for African American families living with dementia across the disease trajectory and from various faith backgrounds. African American adults living with dementia - and their primary caregivers who reside with them - in Oregon and Georgia will be asked to engage in three activities from the meaningful faith-based home activity toolbox each week for one month. This research project will produce a testable toolbox and



**Fayron Epps, PhD, RN**, Assistant Professor of Nursing, Georgia State University

guide for meaningful faith-based home activities for families living with dementia, which could then be used for designing similar activities in other settings. ■

### Distinguishing MCI participants from those with intact cognition using automatically extracted acoustic and linguistic features of their conversational speech

#### Project Summary:

Early detection of mild cognitive impairment (MCI) is important. It can potentially delay more severe stages of cognitive decline. Unlike conventional assessment methods that require trained specialists to assess individuals using neuropsychological tests, we propose an automatic tool that can predict an individual's cognitive state. This tool would automatically analyze speech and

language patterns from recorded social interactions (conversation sessions). Trained interviewers will have 30-minute long video-chat conversations, four days a week for 24 weeks, with participants who have MCI and who are part of a healthy control group. Using an automatically generated transcript of a video-chat, our machine-learning algorithm could potentially automatically classify subjects with MCI from healthy controls based on their speech and language features. ■

## Introducing a formal caregiver

by Allison Lindauer, Ph.D., N.P.

Assistant professor and director of outreach, recruitment and education,  
Layton Aging and Alzheimer's Disease Center



Family members often ask us for tips on how to introduce a formal caregiver to their family member who has dementia. At some point in the dementia disease process, family caregivers will find they need a little help and will hire a formal caregiver. Bringing a new caregiver into the home is important, but often met with some trepidation. Family members with dementia appreciate familiar faces and a routine; they often don't want you to leave them in the care of a "stranger." Here are some tips that you might find helpful:

**First**, keep your expectations low for the first couple of visits from a formal caregiver. You might even plan on staying in the home as your family member gets used to the idea. You could test out the system by stepping aside for a few moments: spend some time in another room, go out into the garden or go for a short neighborhood walk.

**Second**, expect that your family member with dementia won't remember the "new" caregiver and may be surprised to see him or her on the 3rd, 4th or 20th visit. Alzheimer's disease affects memory. New information, such as a new face, can be difficult to retain.

**Third**, help your new caregiver out by setting up a couple of activities you know your family member will like. This could be "Movie Day" with a Kathryn Hepburn movie and popcorn, or a baking day that involves making cookies together. Other ideas include getting a manicure, going on walks, or looking at family photo albums.

When your family member is engaged with the new caregiver, quietly leave the house. If you can, avoid explaining where you're going, when you'll be back, or why you're doing this. If it seems appropriate, take the time to thank your family member for spending time with the new caregiver. Let them know they are helping you.

**Finally**, and importantly, expect this transition to be difficult for you. After being "on" for so long, it is difficult to let go (even for a couple hours). Thus, it is important for you to plan ahead too. Make those first outings easy, so if you really want to go back, you can. For example, a cup of coffee with an understanding friend, a trip to the library, maybe just lunch in restaurant by yourself. You will get the hang of it, but it does take practice. Know that these breaks are important and that they need to be a priority for you. There will be plenty to do when you get home.

*The best way to find someone who can team up with you is to call a local organization. In Portland, the Multnomah County Family Caregiver Support Program offers help and support, 503-988-3646. The Alzheimer's Association can also be a great source of support, 800-272-3900. Oregon Care Partners offers free caregiver training (on-line and in-person), 1-800-930-6851. ■*

Follow me on Twitter @AllisonLindauer!

## Our BUILD Exito Scholars Graduate

For the past two years, the OHSU Layton Aging and Alzheimer's Disease Center has served as the research learning community for three BUILD Exito Scholars. BUILD Exito is an undergraduate research training program at Portland State University (PSU). The National Institutes of Health awarded PSU a grant to train undergraduates who are underrepresented in the field of research to become successful scientists. OHSU serves as the research intensive partner, providing crucial support, guidance, and expertise.

The Exito model aims to identify students early in their college careers and engage them in finding solutions to today's major health problems. Students must be enrolled at one of the community colleges or universities that partner with EXITO. For the past two years, **Juell Towns, Sabrina Shofner, and Mustafa Ahmed** have had hands-on experiences working with their mentors, **Allison Lindauer, Ph.D., N.P., Andre Pruitt LCSW., and Raina Croff, Ph.D.**

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For more information on BUILD Exito go to: <https://www.pdx.edu/exito/about-build-exito>



Mustafa Ahmed, Juell Towns, and Sabrina Shofner at the Alzheimer's Association International Conference in Chicago, 2018.)

Our departing 2017-2019 BUILD Exito scholars Juell Towns, Sabrina Shofner, and Mustafa Ahmed reflect about their past two years:

*"As our time at the Layton Center comes to an end, we want to share with everyone what the past two years has meant to us. Together, we have given over 15 conference presentations, attended and co-facilitated 52 community events, and contributed to one published paper. Our collective experiences have allowed us to gain a better understanding of research and our role as scientists. A particularly meaningful experience for us has been learning about the ways in which community engagement and research coexist. We have learned to balance independent work with team collaboration. We look forward to what the future has to offer; Juell will be continuing her education this fall at The University of Washington in Seattle to pursue an MPH in Global Health, Mustafa will begin studying for the MCAT in preparation for future studies, and Sabrina started her new role at the Layton Center as a Research Assistant. Thank you all for sharing this experience with us!"*

## Recruiting for new Alzheimer's prevention initiative

### What is the Generation Study 2?

The Generation Study 2 is a pioneering study examining the efficacy and safety of an investigational oral medication targeting amyloid in cognitively normal people who have increased risk of developing symptoms of Alzheimer's disease (AD) due to their age, a genetic risk factor, and elevated brain amyloid protein. The purpose of the study is to find out whether the investigational medication can prevent or postpone the onset of symptoms of AD.

This is a double-blind and placebo-controlled trial. In this type of research, one group of subjects receives the study drug — the active substance being tested. The other half receives a placebo designed to appear, as much as possible, like the study drug. Individuals in both groups don't know whether they are getting the active treatment or placebo — they are "blind". The researchers are also kept in the dark about which group is receiving which treatment, making it "double-blind." The FDA requires double-blind placebo-controlled clinical trials to reduce possible bias and errors in clinical trial conduct and to test efficacy of new treatments.

The treatment phase of the study will be testing a once-daily pill which reduces amyloid beta production. Researchers are hoping the pill delays the onset of cognitive problems. Participants will receive medical assessments, cognitive testing, mood and behavior testing, and brain imaging throughout the study.

### Where the science is at:

Studies have identified a long "pre-clinical" phase in AD, wherein amyloid-beta plaques are depositing in the brain, but prior to any symptoms of memory loss or dementia. This pre-clinical phase may last up to 20 years. Amyloid plaques can now be detected in a living patient's brain using a PET scan. Some drugs that reduce amyloid-beta production or increase clearance of it have been tested in AD, but failed. However there

has been concern that they have been tested in the wrong study population (patients who have dementia but not specifically AD with amyloid plaques present in the brain) or at the wrong time point (too late, after memory symptoms or dementia have developed).

### Who can participate in this study?

The study recruits 60 to 75-year-old people who do **not** have signs of cognitive problems (meaning their speech, thinking, and memory are fine compared to other people of the same age) and carry at least one e4 allele of the APOE gene. Researchers are seeking participants who would like to learn their genetic risk for Alzheimer's disease, and if amyloid positive, would also be willing to help test an investigational Alzheimer's prevention drug. Especially good candidates would be those who already know their APOE genotype status (perhaps tested by 23andMe) but not required or those who have a family history of Alzheimer's disease. Study participants should be generally healthy and will be required to identify a "study partner" — someone living in the same household or a close relative or friend, who will provide information on their health during the study. Once enrolled, study participation is expected to last for 5-8 years.

### Who conducts the Generation 2 Study?

OHSU is one of the lead centers helping to recruit over 2,000 people worldwide. The study sponsor is a pharmaceutical company called Novartis in collaboration with Amgen and Banner Alzheimer's Institute. The responsible investigator at OHSU is Dr. Aimee L Pierce, MD, Director of Clinical Care and Therapeutics at the Layton Aging and Alzheimer's Disease Center and an Associate Professor of Neurology within the School of Medicine.

If you are interested in learning more about the Generation Study 2 (IRB 17406) or about other aging and dementia research (including if you are a caregiver for someone with dementia and looking for caregiver research participation opportunities), please contact our team at 503-494-7647 or email us at [adresearch@ohsu.edu](mailto:adresearch@ohsu.edu)

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## Aimee Pierce, M.D.

Director of Clinical Care and Therapeutics, Layton Aging and Alzheimer's Disease Center and Associate Professor of Neurology, School of Medicine



I began my position as the Director of the Clinical Care and Therapeutics Program of the OHSU Layton Aging and Alzheimer's Disease Center in October 2018.

Though I grew up in Eugene, Oregon where my parents still reside, I hadn't lived in the state since graduating high school. After living in New York City and Southern California for more than twenty years, I missed the mountains, trees, and rain, so returning home to Oregon was a wonderful opportunity for me.

I entered medical school at Columbia University with the idea to become a rural family physician, because I wanted to become a valued member of a community, form long-term relationships with patients and their families, and be a "jack-of-all-trades." However in medical school I became fascinated by the brain and medical research, and decided to pursue neurology instead. After moving to California, I completed a neurology residency at UCLA and a geriatric neurology

fellowship at UC San Diego. Before coming to OHSU, I was the Medical Director of the Memory Assessment and Research Center at UC Irvine for seven years.

I realize now that I have attained what I was seeking in a career in family medicine, but in a different way. For example, the Layton Center is a community in and of itself, and is also part of the greater Portland community and world-wide Alzheimer's research community. The Center has welcomed me and given me opportunities to contribute and make an impact on Alzheimer's research. As a geriatric neurologist focused on dementia, I form close-knit and long-term relationships with patients and families. Generally, I need to learn a great deal about a patient's life history, occupation, daily life, and family, in order to make a diagnosis and treatment plan. Patients are often accompanied to appointments by family members, which I encourage, and we may

discuss caregiving topics, community resources for patients and families, and dementia risk factors and prevention. And finally, I do feel like a "jack-of-all-trades". My position allows me to see patients in clinic, lead research on Alzheimer's disease prevention and treatment, teach medical students, and perform community outreach.

In my free time, I enjoy spending time with my family, hiking, and yoga. I love to listen to and play music, especially classical music and opera. And I love to read, and am hoping to join a book club in the SW Portland or Lake Oswego area! ■

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## Join us! 2019 Walk to End Alzheimer's

The 2019 Walk to End Alzheimer's in Portland, organized by the Oregon Chapter of the Alzheimer's Association, will take place Saturday August 24th. Opening Ceremony at 11:00 am (Walk immediately after) at the Rose Quarter Commons. As in previous years, the OHSU Layton Aging and Alzheimer's Disease Center is rallying its team to help advance Alzheimer's support, care, and research. We welcome you to join the "OHSU Layton Center team" to support this very important cause.

Register at: [www.alz.org/walk](http://www.alz.org/walk) Questions? Contact: Michelle Martinez at the Alzheimer's Association at 503-416-0212 or [mmmartinez@alz.org](mailto:mmmartinez@alz.org)

### Our team

**Jeffrey Kaye, M.D.**  
Executive director  
Layton Aging and  
Alzheimer's Disease Center

**Allison Lindauer, Ph.D., N.P.**  
Director of Outreach, Recruitment  
and Education (ORE) Core  
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## Help us take on the impossible

The C. Rex and Ruth H. Layton Aging and Alzheimer's Disease Center is dedicated to the study and treatment of Alzheimer's disease and other dementias.

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