Dementia Through A Spiritual Lens

1. Dementia Through a Medical Lens
2. Dementia: Mind, Memory, and God
Primary Reference

Kenneth Carder

- Served as a pastor of United Methodist local congregations in Virginia and Tennessee for 35 years.
- **1992 to 2004:** Bishop in the United Methodist Church.
- **2004 to 2009:** Served on the faculty of Duke Divinity School.
- **Nov 2009:** His wife was diagnosed with frontotemporal dementia.
- He became his wife’s primary caregiver.
- As her disease progressed over the next 10 years, she eventually required institutional care at a memory care facility.
- He served as a chaplain at the memory care facility where his wife lived for 18 months.
Questions

- Where is God on this treacherous and uncertain journey with dementia?
- What is the essence of personhood? Is the one you have loved still there when personality and cognitive changes seem to create a different person?
- What if the person forgets God?
- Can one be a Christian disciple when she/he has forgotten Jesus?
Questions

- What does it mean to be part of the church when one can no longer participate?
- What is the church’s role for those affected by dementia?
- What finally endures when cognitive capacities are lost?
- What does salvation/wholeness really mean?
- How can one hope when loss is a constant companion?
Outline

- **November 29:**
  - 1. Dementia Through a Medical Lens
  - 2. Dementia: Mind, Memory, and God

- **December 6:**
  - 3. Dementia and God’s Nature and Action
  - 4. Dementia and the God Who Is Incarnate

- **December 13:**
  - 5. Dementia and the Meaning of Personhood
  - 6. Dementia and the Meaning and Source of Salvation

- **December 20:**
  - 7. Dementia and Christian Discipleship
  - 8. Dementia, Grieving, and Death
PowerPoint presentations from the series can be downloaded from:

Dementia Through a Medical Lens
Dementia Through a Medical Lens

- **Dementia** is an umbrella term covering a constellation of symptoms (= syndrome) that may be due to several underlying diseases.
- World Health Organization’s ICD-10: **Dementia** is a syndrome due to disease of the brain, usually of a chronic or progressive nature, in which there is disturbance of multiple higher cortical functions, including:
  - memory,
  - thinking,
  - orientation,
  - comprehension,
  - calculation,
  - learning capacity,
  - language,
  - judgement.
Dementia Through a Medical Lens

- Consciousness is *not* clouded.
- The impairments of *cognitive* function are commonly accompanied, and occasionally preceded, by deterioration in:
  - emotional control,
  - social behavior, and/or
  - motivation.
Types of Dementia

- The most common neurodegenerative conditions causing dementia are:
  - **Alzheimer disease** (60 to 80% of cases),
  - Dementia with Lewy bodies,
  - Frontotemporal dementia,
  - Parkinson disease dementia.
5.8 million people have Alzheimer’s or another form of dementia.

1 in 10 people age 65 and older has Alzheimer’s disease. The percentage of people increases with age:
- 3% of people age 65 to 74,
- 17% age 75 to 84,
- 32% age 85 and older.

Every 65 seconds someone in the US develops the disease.

Almost two-thirds of Americans with Alzheimer’s disease are women.
Prevalence of Dementia

- Neurocognitive diseases are the sixth leading cause of death, more than breast cancer and prostate cancer combined.
- Between 2000 and 2015:
  - deaths by heart disease decreased by 11 percent,
  - deaths from Alzheimer’s disease increased by 123 percent.
- Between 2018 and 2025, the number of people with Alzheimer’s disease is expected to increase by at least 13 percent.
- By the year 2050, the number of people with Alzheimer’s disease is projected to rise to nearly 14 million, more than double the current number of 5.8 million.
Prevalence of Dementia

- More than 18.5 billion hours of informal, unpaid care were provided by dementia caregivers in 2018,
  - a contribution to the nation valued at nearly $234 billion.

- In 2019, Dementia cost Americans an estimated $290 billion in health care, long-term care, and hospice.
  - By 2050 the amount could increase to $1.1 trillion.
The future will judge our current understanding of the brain as primitive.

Jeff W. Lichtman, MD and PhD, Professor of Molecular and Cellular Biology at Harvard, often asks his students: “If understanding everything we need to know about the brain equals one mile, how far do you think we have walked?”

His usual student answers are: “three quarters,” “one half,” or “one quarter.”

Professor Lichtman’s answer: “I think about three inches.”
Causes of Dementia

- There are 100 billion neurons or nerve cells in the brain.
- Each neuron connects to thousands of other neurons through chemical messengers called neurotransmitters.
- At any one moment, millions of signals are passing from neuron to neuron.
- In order to stay healthy, neurons need:
  - to communicate with one another,
  - receive adequate nutrition (oxygen and glucose) through their blood supply,
  - be able to repair themselves.
Causes of Dementia

The disorders that cause dementia disrupt these functions.

Dementia results because:

- connections between neurons are interrupted or lost,
- neurons cannot metabolize nutrients and/or their blood supply is interrupted,
- neurons cannot repair themselves,
- neurons die.
Video: How Alzheimer’s Changes the Brain - National Institute on Aging
Treatment of Dementia

- No curative treatment exists for Alzheimer’s and other dementias.
- Some medications can decrease symptoms or enhance functioning for a time:
  - Aricept (donepezil),
  - Namenda (memantine).
- Other medications may be used to control behavioral and mood symptoms (agitation, anxiety, aggression, depression).
Treatment of Dementia

- The most promising current efforts are directed toward prevention and delaying the onset of dementia.
- Factors in maintaining brain health include:
  - maintaining good cardiovascular health through exercise and a healthful diet,
  - engaging in lifelong learning,
  - staying active and socially involved with others.
- However, genetics and other factors may result in the disease despite our best efforts at prevention.
The diseases causing **dementia** are **progressive**, the severity of the symptoms **increasing** as cells die.

- Life expectancy after diagnosis: 2 to 20 years.
- Death often occurs as the **indirect** consequence of the underlying pathology, such as:
  - a fall,
  - pneumonia or other infection,
  - inability to swallow.
Each person with **dementia** is unique.

The particular symptoms, and the degree of progression of each symptom, will vary from person to person.

Even persons in the severe stage of **dementia** may mysteriously have short lucid moments:

- “**Kissing the joy as it flies by**” is the challenge of caregivers and family members as they journey with the person with **dementia**.
Dementia: Mind, Memory, and God
The Autobiographical Self

The Autobiographical Self:

- “You are who you are as long as you can remember who you are. If you can no longer remember your own story, your autobiography, then you are not the person you used to be.”

- “…we are who we remember ourselves to be.”
The Importance of Memory

- We each think of ourselves as a single person, a single person existing through time, a single person whose story is continuing to unfold.

- At any moment, the continuity of our personhood is powered and maintained by our continued:
  - living in our past through our memory,
  - living in our present through agency: acting, doing what we decide and wish to do,
  - living in our future through our hopes, dreams, and plans for our future.
The Importance of Memory

- What then happens to our continuity as a *single person* with a story, a *person* with a *past, present* and *future*, if the engines powering the continuity of our *personhood* break:
  - if we cannot remember our *past* – if we lose our *Autobiographical Self*,
  - if we cannot act with “agency” in the *present*,
  - if we cannot hope, dream, or plan for our *future*. ■
The Importance of Memory

- David Keck (author of *Forgetting Whose We Are: Alzheimer’s Disease and the Love of God*) who cared for his mother with Alzheimer’s suggests: “It is impossible to distinguish between ourselves and our memories. . . . We are our memories, and without them we have but a physical resemblance to that person we each suppose ourselves to be. . . . The apparent dissolution of the mnemonic capacities . . . raises most serious and profound questions about human existence.”
The Importance of Memory

- If the **memory** of our **past** is *lost*, if that sole link with our **past** is *severed*, how can we claim to be the **person** of our **past**?
- How can we claim to be a **person** who has a **story**?
Communal Memory

- In considering these issues, consider the following:
- *Our memories* of our *past* are *not* the *only* memories of our *past*.
- *Memory* is *more than* a skill held within the individual.
- Most people remember only a *small fraction* of the details of their past, and must depend upon *others* to fill in the gaps of their flawed recollection:
  - We have few, if any, memories of the first few years of our lives – our parents hold those memories for us.
  - Our family members, friends, associates, neighbors, teachers, even casual acquaintances hold impressions and memories of us that are outside our own recollection.
Communal Memory

- We all hold memories for one another.
- This communal memory is an important part of each of our life stories, a part we often do not appreciate as much as we should.
Theology of Memory

- But even if we could pool:
  - all the memories we’ve ever formed of our past (even those we subsequently forgot), and
  - all the memories and impressions of ourselves in every acquaintance and friend,
- they would still form:
  - but a fragmented picture of our past,
  - a story with more gaps than narrative.
- Our true identity and past, our true stories ultimately lie only in God’s memory.
- Who am I? What is my story? Only God knows!
Theology of Memory

Isaiah 49:15-16 (NRSV): “Can a woman forget her nursing child, or show no compassion for the child of her womb? Even these may forget, yet I will not forget you. See, I have inscribed you on the palms of my hands ...”

God’s memory of us, God’s holding within God’s mind our story, is part of the way:
- God knows us,
- God sustains us,
- God loves us.
Theology of Memory

- God also has a story.
- God’s creation and sustaining of the universe, God’s work of salvation of God’s people is God’s project, and each and every one of us is part of this project of God, and:
  - Our stories are also part of God’s story.
  - Our memories are also part of God’s memory.
- John Swinton: “Human memory is nothing more (and nothing less) than one mode of participation in the memory of God, which is our true memory and our only real source of identity and hope.”
Theology of Memory & the Church

- The **Church** is a community of remembrance and a steward of memories.
- It is the community that keeps alive **God’s story**:
  - In Deuteronomy 6:12, the people are cautioned, “**take care that you do not forget the LORD, who brought you out of the land of Egypt, out of the house of slavery**”
  - The psalmist declares, “**Remember the wonderful works he has done**” (Psalm 105:5).
  - At the center of our faith is the act of remembrance in the Eucharist: Jesus asked us: “**Do this in remembrance of me,**”
- What might be the role of the **church community** in being stewards of the stories of those with **dementia** – stories that are also part of the **God’s story**?
Memory, the Mind and the Brain

- **Memory** is a facet of the **Mind**.
- But what exactly is the **Mind** and how does it relate to the **Brain**?
- This is the core question of an entire branch of philosophy, **Philosophy of Mind**.
Mind versus Brain

- In Philosophy of Mind, there are 2 primary views of the relationship between the Mind and the Brain:
  - 1. Dualism: the mind and brain are fundamentally different things:
    - 1.1. two completely different entities or “substances”, one non-physical/non-material, and one made of physical matter = Substance Dualism.
    - 1.2. two different “properties” of a single substance, a substance that can take on both non-physical/non-material and physical/material properties = Property Dualism.
    - 1.3. the mind is the non-physical/non-material “form” or “information content” of the physical brain = Hylomorphic or Thomistic dualism.
  - 2. Materialism: the mind and the brain are the same, the mind simply a manifestation, a product of the brain.

Mind versus Brain

- If the **mind** and **brain** are two *different* things, then:
- Perhaps **dementia** (a disease of the brain) could be viewed as a disruption of the *connection* between **mind** and **brain**:
  - The **mind** itself remains undamaged and intact within its non-physical (non-material) realm, but can no longer connect properly to the **brain**;
  - Only the **brain** is diseased and damaged.
However, if the mind and brain are the same thing, then damage to the brain is the same as damage to the mind:

- Loss of brain cells = Loss of the mind.
Mind versus Brain

- These are two completely different scenarios:
  - intact mind, damaged brain
  - versus
  - damaged mind, damaged brain.

- Whichever is true, we must keep in mind:
  - God sustains in existence and holds within God’s mind (= remembers) all things,
  - God sustains in existence and holds within God’s mind that which we call our mind / soul,
  - God sustains in existence and hold within God’s mind that which we call the brain,

- So nothing is ever lost.
Next Week:

3. Dementia and God’s Nature and Action
4. Dementia and the God Who Is Incarnate