WHERE DID I PARK MY CAR?

HOW DO OLDER ADULTS COPE WITH A DIAGNOSIS OF MILD COGNITIVE IMPAIRMENT

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INTRODUCTION

Mild Cognitive Impairment (MCI) represents a transitional phase between normal ageing and dementia when deficits in cognition are found on formal assessment. Impairment is typically found in areas such as attention, mood, memory, language and visuospatial skills (Nelson & O’Connor, 2008), although everyday functioning is preserved (Leszczyk, 2011). As yet there is considerable debate in the literature about MCI as a construct and the conversion rate of MCI to dementia (Andersson, 2018).

The research literature is also divided on how people react to learning of their diagnosis with MCI or dementia. Reaction has been either minimal stress (McEvoy et al. 2008; Carpenter et al. 2008), a negative psychological response (Bamberg, von Kries, Dassen, Kleinert, & Teunisse, 2002) or a mixed reaction (Lingler et al. 2008).

Knowing more about the reactions of individuals facing memory impairment and ways that people cope with such a life changing diagnosis will be important for tailoring support services and targeting resources for people who will be likely to need help in the future.

EVEN-INCREASING NUMBER OF OLDER ADULTS

In the coming years, the population is set to grow and rates never seen before now. New Zealand’s population is made up of more people in the over 65 age category than ever before (Statistics New Zealand, 2009). This suggests the number of adults aged 65 and over will double in New Zealand, and those over 85 years will grow by 55,000 to over 300,000 by 2045 (Bovee & Daven, 2008).

There are multiple factors driving the ‘greying’ of the world’s population. These include: advances in medical technology, lower mortality rates, increases in life expectancy through healthy living and higher standards of living, higher education levels, increased access to healthcare, health promotion initiatives. At the same time the number of younger people is decreasing due to lower birth rates in some parts of the world, and wide availability of birth control.

As a person enters older adulthood, their chances of developing a certain age related disease, including Alzheimer’s, MCI, or dementia dramatically (Hughes & Heycyn, 2010). Therefore, it is likely that the prevalence of diseases as shown on Figure 1, associated with conditions such as dementia and MCI will continue to rise in the community.

Given the increasing number of people predicted to experience this condition, it will be useful to know what means of support will be beneficial so that adequate support systems can be put into place. This might be achieved if research is carried out in this area now and changes are initiated before numbers of cases of memory impairment explode in the coming years.

COPING: HOW DOES THIS CONCEPT RELATE TO MCI

The literature on coping and illness goes back many decades and a firmly entrenched with models and frameworks of understanding, particularly those coined by Lazarus and Folkman (1984) as shown on figure 2.

Through stress and coping models have often been associated with the illness reaction in illnesses such as cancer (Thomais, Rydahl-Hansen & Wagner, 2010), illness (Koehler, Goepfmann & Frommer, 2003), multiple sclerosis and Parkinson’s disease (Montel & Dungener, 2011) it is not yet clear whether an individual’s appraisal of MCI is similar or at another model is of better fit that can assist the reactions to this condition.

The literature around MCI diagnosis and coping does not currently reveal any model or framework of explanation, although some research has touched the surface of utilitarian appraisal (Carpenter et al. 2008; Lingler et al., 2006) in explaining reaction to a diagnosis of dementia. Although dementia and a recent diagnosis of MCI pain very different picture clinically, it could be that the cognitive appraisal model can explain why some individuals react negatively to a diagnosis of MCI and not the rig.

RESEARCH AIMS

This research aims to present an in-depth view of the experiences of older adults with memory impairment, in particular their reactions to memory difficulties over time.

In order to achieve this aim, a number of interviews will be held with people who have been diagnosed with MCI and their families. The findings will be:

• To make more conclusive statements about the reactions people have after developing mild cognitive impairment.

• To determine the extent to which the cognitive appraisal model can assist people react in different ways to diagnosis of MCI and dementia.

• To provide a guideline to clinicians who provide support to people with MCI and dementia.

1. To inter-react intervention for people and their families who have experienced cognitive or traumatic reaction to their memory condition/diagnosis.

REFERENCES


"Where did I park my car?" How do older adults cope with a diagnosis of mild cognitive impairment

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