"WHERE DID I PARK MY CAR?"  
HOW DO OLDER ADULTS COPE WITH A DIAGNOSIS OF MILD COGNITIVE IMPAIRMENT

Alison R. McKinlay, Janet M. Leatham, Paul L. Merrick  |  A.R.McKinlay@Massey.ac.nz  |  Massey University, Auckland, New Zealand

INTRODUCTION

Mild Cognitive Impairment (MCI) represents a transitional phase between normal age-related cognitive decline and early 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 (Lescz, 2011). As yet there is considerable debate in the literature about whether MCI is a construct and the conversational status of MCI to dementia (Anderson, 2010).

The research literature is also divided on how people react to learning of their diagnosis with MCI or dementia. Reaction has been either minimal (Mclavine et al. 2008; Carpenter et al. 2008), a negative psychological response (Bannister, Venugopal, Dassen, Eikmeier, & Teunisse, 2010), or a mixed reaction (Lingler et al. 2006).

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.

EVER-INCREASING NUMBER OF OLDER ADULTS

In the coming years, the population is set to grow at 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). Some predict that the number of adults aged 65 and over will double in New Zealand, and those over 85 years will grow from 55,000 to over 300,000 by 2084 (Boston & Davey, 2006).

There are multiple factors driving this “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 the Western world, and wider availability of birth control.

As a person enters older adulthood, their chances of developing a certain set of age-related diseases, including MCI, dementia, Parkinson’s (Hughes & Heycock, 2010). Therefore, it is likely that the prevalence of diseases such as shown in 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 is firmly entrenched with models and frameworks of understanding, particularly those coined by Lazarus and Folkman (1984) as shown in Figure 2.

Although stress and coping models have often been associated with chronic illness, reaction in illnesses such as cancer (Thompson, Rydahl-Hansen & Wagner, 2010), chronic pain, osteoarthritis, and dying (Kroess, Gomppmann & Friesmer, 2008), multiple sclerosis and Parkinson’s disease (Montiel & Dunninger, 2008, 2010), it’s not yet clear whether an individual’s appraisal of MCI is similar, or 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. However, some researches have touched the surface of qualitative empirical (Carpenter et al. 2008; Lingler et al. 2006) in explaining reaction to a diagnosis of dementia. Although dementia and a recent diagnosis of MCI paint very different pictures clinically, it could be that the cognitive appraisal model can explain why some individuals react negatively to a diagnosis of MCI and 2 October 2014.

RESEARCH AIM

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 then their coping strategies will be noted:

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

• To determine the extent to which the empirical appraisal model and other psychological models react in different ways to diagnoses of MCI and dementia.

• To provide a guideline to clinicians who provide a diagnosis of MCI and dementia.

• To inform intervention techniques for people and their families who have experienced or their traumatic response to their memory conditions.

REFERENCES


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