The Longevity Center will be partnering with the Lifespan Learning Institute for the first time in hosting the Institute’s annual interpersonal neurobiology conference. Lifespan Learning Institute has provided continuing education for social workers, marriage family therapists, psychotherapists, counselors, nurses, and physicians for over 30 years. This year the conference titled “Mind, Consciousness, and the Cultivation of Well-Being: Transformation Through the Lifespan” will focus on mind health and how to cultivate a healthy mind throughout life.

A unique gathering of speakers will offer an overview of current neuroscience research supporting the efficacy of mind-body integrative techniques shown to be effective in clinical settings. Speakers include the world-renowned pioneer in mind-body medicine and personal transformation, Deepak Chopra, MD; Vice-Chair of Neurology, Director of the Genetics and Aging Research Unit at Massachusetts General Hospital Rudolph Tanzi, PhD; Founding co-director of the UCLA Mindful Awareness Research Center (MARC), Executive Director of the Mindsight Institute, and Medical Director of Lifespan Learning Institute, Daniel Siegel, MD; Director of the UCLA Longevity Center and Division of Geriatric Psychiatry, Gary Small, MD; and many more experts in the field. We hope you will join us for this unique and enlightening 3-day educational program. For more information, please visit www.lifespanlearn.org or call 310-474-2505 to register for the event.
As we age, the likelihood of developing a chronic medical illness increases. One of the most common illnesses afflicting older adults is diabetes, which affects approximately 29 million Americans, and nearly 12 million of them are age 65 or older. The illness involves problems with the hormone insulin and blood sugar regulation. Remarkably, an estimated one third of people who have diabetes don’t know it.

Diabetes not only affects a person’s physical health but their mind health as well. The American Diabetic Association recommends that physicians screen their patients with diabetes for mental health problems, but very few doctors actually do that.

Having diabetes doubles an individual’s risk for depression. Diabetics also have an elevated risk for anxiety and eating disorders. Epidemiological studies have indicated that patients with diabetes have a two-fold increased risk for Alzheimer’s disease.

Diabetes can affect the brain in several ways. Sharp rises and falls in blood sugar levels that diabetics experience can lead to mental symptoms. Diabetes can also increase brain-damaging inflammation, which compromises neurons and blood vessels. It’s not surprising the diabetics also have an increased risk for vascular dementia. The cognitive deficits sometimes observed in some diabetic patients are associated with atrophy of brain regions controlling language and memory.

Despite the physical and mental health challenges that diabetics must face, it is possible to live well and long with the illness. Many studies have shown that it is possible to prevent and control the symptoms of diabetes through regular exercise and a healthy diet, and the most successful healthy lifestyle plans are those that are easy to follow. If the diet program is too extreme, patients will feel deprived and will be more likely to cheat on their diet. Becoming a triathlete to control blood sugar levels also is not necessary. Taking a brisk 20 minute walk each day may be enough to control symptoms and lower an individual’s risk.

Symptoms of diabetes may be not be recognized. Heightened thirst, hunger, dry mouth, unexplained weight loss, fatigue, or blurred vision may be discounted as transient problems unrelated to a serious illness. At times there may be few or no symptoms, or the symptoms may emerge very gradually.

Scientists have identified modifiable factors that influence diabetes risk. For example, overweight and obesity can increase risk, so finding a sensible diet to shed those extra pounds can make a big difference. Control of vascular risk factors, such as elevated blood cholesterol or hypertension also is important.

Even though diabetes has no cure, many patients are able to control their symptoms by maintaining blood sugar levels in a normal range through diet, exercise and medication. However, when in doubt about any symptoms, it is always best to consult with the doctor sooner rather than later. A variety of symptoms, ranging from weight gain to numbness or tingling in the hands and feet may be a signal that blood sugar levels are out of control. Those who wait too long to see their doctor have a greater risk for a serious complication.

Research shows that psychological or physical stress can elevate blood sugar levels. Meditation, tai chi, relaxation techniques, psychotherapy, and physical exercise can all be effective in reducing stress, which in turn will help stabilize blood sugar levels. Because diabetes can be prevented through exercise and diet, some patients feel guilty and blame themselves for developing the illness. Although lifestyle habits are important for controlling the disease, genetic factors do play a role and self-blame is not an effective coping strategy.

Patients experiencing depression, anxiety, memory changes, or any psychological symptom should seek help from a mental health professional. Many medical doctors prescribe medications for depression, anxiety, and dementia, but a mental health specialist can often be helpful in complicated cases or when talking therapies are indicated. Diabetes may be contributing to mental symptoms, but effective treatments are available that can reverse mood changes and slow the progression of symptoms.
Memory Education Trainer

Dave Clark Mora is a licensee of the UCLA Longevity Center Memory Training Program. Based in the San Francisco Bay Area, Dave is bringing Dr. Small's Memory Training Program to Bay Area community parks and recreation departments, senior centers, businesses, and professional organizations.

Dave’s impressive career and background includes being a writer, journalist, and editor. After earning a bachelor’s degree in writing at San Jose State University, Dave continued his graduate studies at the UCLA School of Theater, Film, and Television. Dave’s writing career at Oracle and Symantec, where he was editorial director, took him all over the world interviewing Fortune 500 executives, such as the CEOs of Boeing Airplanes, Barclays Capital, UPS, Playboy Enterprises, and NASDAQ. As editor-in-chief for San Jose Magazine, he landed exclusive cover story interviews with superstars Celine Dion and Kenny Loggins, as well as California Governor Gray Davis. As a travel writer for Robb Report and other magazines, he journeyed to the Ritz Paris for a week-long cooking-school adventure; to the “Millionaires Pond” in British Columbia to fly fish in style; and to Antwerp, Belgium to learn how to shop for diamonds and taste amazing chocolates. His novel, Keeping Hannah Waiting, is one of a handful of novels for sale at the U.S. Holocaust Memorial Museum in Washington, DC.

Dave’s association with the UC Health System dates back to 1983 when his daughter was diagnosed with agenesis of the corpus callosum. The counseling provided by the professionals at UCLA and UCSF over the next 20 years, in a field where knowledge was only just emerging, changed the course of his family’s life for the better beyond anything imaginable. The Longevity Center is excited to partner with Dave in his efforts to increase accessibility to our Memory Training Program in Northern California.

Spotlight on Memory Education Program

Memory Training

BACKGROUND
Many research studies, including those conducted by Gary Small, M.D. and his colleagues at UCLA, have shown that the strategies taught to participants in the Memory Training course are effective in improving memory in older adults with normal, age-related memory challenges. The benefits of memory training can last well beyond the actual course—studies show that the benefits can last from six months to five years. The course is not intended for people with Alzheimer’s disease or other forms of dementia.

Memory Fitness

BACKGROUND
Memory Fitness teaches lifestyle strategies and memory enhancement methods based on the clinical research of Gary Small, M.D. and his colleagues from the Semel Institute for Neuroscience and Human Behavior at UCLA. The program is intended for people with mild memory concerns and mild cognitive impairment, although it can be modified for use with dementia patients.

Brain Boot Camp

BACKGROUND
Brain Boot Camp is a three-hour intensive course that teaches brain healthy lifestyles and enhances memory ability in just one day. It is designed for people who wish to improve or maintain their memory ability and can be beneficial for people of all ages. The program can be delivered to groups or as individual courses, tailored to those with cognitive impairment. This program is not intended for people with Alzheimer’s disease or other forms of dementia.

We offer licensing opportunities for individuals and organizations. Package deals are available.

In addition to the curriculum and materials, the licensee obtains use of the UCLA Longevity Center's logo for marketing purposes and is able to list their organization and trained associates as “UCLA Longevity Center Certified Memory Educator”.

Please contact Christina Domer at 310-206-1675 or CDomer@mednet.ucla.edu for any questions regarding licensing and pricing.
On August 17th, the Longevity Center held a Senior Scholars Program Open House at the UCLA Semel Institute auditorium. To prepare for the upcoming academic year, prospective Senior Scholars were invited to learn about the Center’s popular lifelong learning program. Of the approximately seventy individuals attending, the vast majority had never before participated in the Senior Scholars program. Dr. Gary Small, Director of the Longevity Center, kicked off the event with a presentation on the brain health benefits of lifelong learning. Senior Scholars Coordinator, Erin Der-McLeod, spoke about the process of finding and applying for courses, as well as the deadline dates for the upcoming Fall Quarter. Several longtime Senior Scholars in attendance stayed after the formal presentations to speak with potential Scholars, answer their questions, and offer first-hand insights on the program. We are grateful to all who took time out of their day to attend, and we plan to hold these open house meetings each year.

The Longevity Center would like to extend a special thanks to the Senior Scholars Committee members: Andy Galef, Maxine Kardell, Bob Ross, Beverly Tiffany, Joel Saltzburg, and Mark Windisch.
There are a multitude of surprises when it comes to retired teacher May DuBois. When she was teaching, her students were always shocked when they found out that she is a marathon runner. At seventy-one years of age, she has run over 150 marathons since her first L.A. Marathon in 1985. In fact, she has run the L.A. Marathon every year since its inception, making her one of 137 “Legacy Runners,” of which only 22 are women. Running has taken her to almost every state in the country and throughout the globe. This past summer, she traveled to Africa for the first time to run the Kilimanjaro Marathon.

Born and raised in Hong Kong, May’s first passion was playing the piano. She began at age two, and cited her prestigious Russian piano teacher as the person who most influenced her as a child. Though an excellent student at an academically rigorous Catholic school in Hong Kong, she did not enjoy studying because it took time away from practicing the piano. Her family moved to Pittsburgh, Pennsylvania when she was twelve years old. Living in Pennsylvania, she enjoyed being in the same region as great conservatories like Julliard and Carnegie Hall. As a teenager, she enrolled in the Duquesne University Conservatory in Pittsburgh. When she was seventeen, her family moved to Los Angeles, and she earned a full scholarship to study classical piano at USC.

Though she always wanted to be a pianist, fate intervened when a friend got sick and asked her to substitute teach for her elementary school class. She began a career in teaching, and taught music at Los Angeles City College and West L.A. College until her retirement in 2013. At West L.A. College, she started an honors program to help motivated students transfer to prestigious universities, such as UCLA. With her many talents, May explains that her proudest accomplishment has been being a mother to her two sons, a computer scientist and a doctor.

Aside from inspiring her students, running, and music, May also has a passion for French culture, art and architecture. She goes to Paris every year, and has previously studied at the Sorbonne. The Senior Scholars Program has been an opportunity for her to further explore her passions and curiosities. Not surprisingly, she exercises not only her mind, but also her body, by taking public transit and walking to the UCLA campus. A true embodiment of quality longevity, we asked May DuBois about her experience as a Senior Scholar.
How did you hear about the senior scholars program?
When I retired in 2013, a colleague involved with UCLA provided me with information on Senior Scholars.

What motivated you to become a senior scholar?
I have seen colleagues who retire and don't know what to do. I tried a class in Fall of 2013 after retiring, and have been taking classes ever since.

What has the experience been like for you?
Senior Scholars helps me stay sharp because it provides the unique opportunity to learn from the best professors. I have recommended this program to friends. I am very grateful and appreciative of the program and the professors who have had me in their classes.

How do you find the interaction with the students?
Interaction with the younger students has been nice. I sit next to them and speak to them. They have some great ideas and they help me with using technology.

Going back to school must give you a different take on learning. How does senior scholars differ from your experience in education earlier in your life?
The difference from being an undergraduate studies is that with Senior Scholars, you are studying something you love, out of your own desire and passion and not to achieve some future goal. You are not studying to get a job or to get good grades. When getting a degree, there were certain required courses that you had to take. This experience is unique and invaluable.

What course(s) have you taken?
I have taken 17 courses, mostly in French philosophy and literature.

What has been your favorite course?
I don't have a favorite course because each professor is unique, but I have really enjoyed learning about French philosophy and literature.

What does longevity mean to you?
Longevity means living a fruitful and long life and still being able to contribute to society. Helping other people is the best contribution you can make. It doesn't take much – just smiling or saying a nice word to someone.
Do you or a loved one have Mild Cognitive Impairment (MCI)? Would you like to participate in a research study at UCLA testing transcranial direct current stimulation (tDCS) and cognitive training (CT) for MCI?

**MCI** causes a slight but noticeable decline in mental abilities, including memory and thinking skills. These changes are serious enough to be noticed, but are not severe enough to interfere with daily life.

**tDCS** is a form of neurostimulation. It uses a constant, low current delivered to the brain using electrodes that are placed on the scalp. Research shows that it may be able to increase cognitive performance on certain tasks.

**CT** focuses on improving memory, attention, perception, reasoning, planning, judgment, general learning, and overall mental functioning. Research shows that it may lead to improved self-esteem, self-confidence, and emotional stability.

Call or email us for more information. You must be between 55-80; an English speaker; in good physical health with no chronic medical conditions; and have MCI but not dementia, Alzheimer’s, or any other form of neurocognitive impairment or major psychiatric disorder. Other inclusion/exclusion conditions apply. If you are enrolled as a participant in the study, you will make 15 separate visits to UCLA that will take approximately 18 hours total (not including travel time). You will receive $200 upon completion of the entire protocol. You may be randomly assigned to a control group, which means you will not receive active tDCS. In that event, you will qualify for free treatment on conclusion of the study, if it is successful, subject to other terms and conditions.

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### Research Studies

**Would you like to participate in a study on exercise and memory?**

This study is for people 60-85 who have diabetes, hypertension, or who are mildly to moderately overweight.

**VOLUNTEERS MUST BE:**
- Committed to participating in a memory training and exercise program twice a week for 3 months taking place at your choice of the Motion Picture Television Fund campus in Woodland Hills or St. Monica’s Church in Santa Monica.

**This Study Involves:**
- Clinical Evaluation
- Blood Draws
- Memory Assessments
- Nutritional Advice
- Memory Training
- Activity Monitoring
- Motivational Coaching

**Parking will be covered throughout study duration.**

For more information call: 310-206-1319

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### Media Highlights

- **August 22, 2016**
  *Why Latinos Age More Slowly, Live Longer*
  A UCLA study showing that Latinos age more slowly on a molecular level, enabling them to live longer despite facing greater health challenges was covered by more than 200 news outlets, including *U.S. News & World Report*, *Los Angeles Times*, and *The Washington Post*.

- **August 17, 2016**
  *Diet, Exercise May Cut Alzheimer’s Risk*
  A study by Dr. David Merril, assistant clinical professor of psychiatry, finding that diet and exercise reduces the buildup of proteins linked to the onset of Alzheimer’s was covered by *HealthDay News*, *U.S. News & World Report*, and many others.

- **August 2, 2016**
  *UCLA Longevity Center Director Says Alzheimer’s is Undertreated*
  KCBS-TV, *Los Angeles* reported on conclusions by Dr. Gary Small on the importance of early diagnosis and treatment of Alzheimer’s disease and dementia in a story featuring an Alzheimer’s patient treated at UCLA.

- **July 17, 2016**
  *Fighting Poor Nutrition Among California’s Elderly Population*
  A basic-needs study from the UCLA Center for Health Policy Research at the UCLA Fielding School of Public Health was featured in *The Sacramento Bee*. The study found that about 20 percent of California adults age 65 and older cannot afford basic needs such as food, housing, and healthcare.

- **June 6, 2016**
  *Yoga May Be Good for the Brain*
  *The Washington Post* reported on the results of a study that found yoga can help with the cognitive decline that precedes Alzheimer’s disease. The study was led by Dr. Helen Lavretsky, a professor of residence in the UCLA Department of Psychiatry and a researcher at the Semel Institute.

- **May 12, 2016**
  *The Immune System and Alzheimer’s Disease*
  Dr. Gary Small commented in *USA Today* on new findings that implicate the immune system in Alzheimer’s disease.
Many caregivers of a loved one with a memory disorder, such as Alzheimer’s disease, long for the days when they could travel with that person and enjoy special time together, visit friends or see the sights. Just because you are caregiving for a loved one with a memory disorder, it doesn’t mean travel is off limits.

The first step is to decide whether you should travel with or without your loved one. If your loved has problems at home consistently with wandering, hallucinations, aggression, confusion, anxiety, and falls, then those problems will only get worse away from home. If your loved one doesn’t have those kinds problems on a regular basis, and you are in good health and can care for a loved one and yourself, then traveling can still be an option. If you decide that travel can be safe, then the next step is to figure out the logistics.

- **Carefully plan your trip.** Short stays are better than lengthy trips. Arrange for your lodging, destination, airlines, and other details in advance if you anticipate needing special assistance, such as escorts or disabled services. Let them know you are traveling with someone with a memory disorder. Choose your seats and accommodations carefully, focusing on practicality. If you travel by car, plan your route to include rest stops.

- **Put yourself in their shoes.** Traveling can be scary. Just imagine how your loved one may react to waiting in-lines, enduring security checks and the mad rush for seats, so stay close together at all times. Prevent separation and never leave your loved one alone.

- **Prepare for potential mishaps.** Before you travel, invest in an identification bracelet or other form of tracking, just in case you become separated. Keep an emergency kit with you at all times that includes emergency contact information, the hotel where you are staying, spare medication, and copies of ID, passports, insurance information, as well as snacks, water and a change of comfortable clothes.

- **Don’t go it alone.** Travel with a family member or someone who can help. This will give you some time for yourself to relax and enjoy your vacation too.

- **Take it easy.** Maintain a comfortable slow pace, including naps as needed, alternating activity days with rest days, and attempt to keep a travel schedule that is similar to your daily home schedule. If possible, schedule your outings during off-peak times of the day.

- **Take a trial run.** Take a mini-vacation close to home to see how things work out. If all goes well, then you can try a longer trip.

For those of you who cannot travel with a loved one, don’t eliminate the option of a vacation for you. Caregivers need a break. Don’t feel guilty – you are not abandoning your loved one. In fact, rested caregivers are healthier and better caregivers. Options include having helpers come into the patient’s home and stay there while you are away, or your loved one can have their own vacation at a care facility until you return. In any event, having a loved one with a memory disorder does not automatically eliminate travel for you or for them. Taking a vacation is a wonderful opportunity to share time together and make new memories, or travelling alone can be the break that you need.

Linda Ercoli, Ph.D., is a Clinical Professor and the Director of Geriatric Psychology in the Department of Psychiatry and Biobehavioral Sciences at the UCLA Semel Institute. She has expertise in the neuropsychology of aging and dementia. Her current research interests include early detection and prediction of dementia.
Cold Sores Linked to Alzheimer’s Disease

The herpes simplex virus causes common cold sores, and recent research now suggests that this virus could be associated with Alzheimer’s disease. In this latest study, researchers from Umea University in Sweden followed a sample of more than 3,400 volunteers for an average of 11 years. Those subjects who had been infected by the herpes simplex 1 virus and experienced recurrent cold sores had twice the risk for Alzheimer’s disease compared to those who had not. A large proportion of the population has been infected by the virus, which often remains dormant after the initial infection. Cold sores occur when the herpes virus becomes activated. The reason for the link between the virus and Alzheimer’s is not clear but may have to do with a compromised immune system.

Sex and Cognitive Functioning

Although research on the relationship between sexual activity and cognitive functioning is limited, scientists from Coventry University in the United Kingdom reported on new findings derived from 7,000 participant’s ages 50 to 89 in the English Longitudinal Study of Ageing. Their findings indicate positive links between sexual activity and cognition. Specifically, mental attention measured by a number sequencing task and memory abilities in men were associated with greater sexual activity. For women, the association held true for memory but not for attention tasks. Whether better cognitive abilities results in improved sex or more frequent sexual activity improves cognition was not clarified by the study, but the results are consistent with the possibility that sexual counselling could help many older adults continue to enjoy their sex life and potentially improve their cognitive function and well-being.

Acupuncture Boosts Memory

The ancient Chinese practice of acupuncture, which involves inserting thin needles in the skin at specific pressure points, was shown in a recent study to support memory abilities. Investigators from Wuhan University in China reported in the August 4, 2016 issue of the journal Acupuncture in Medicine about these positive results from a review of approximately 600 study subjects with mild cognitive impairment, a condition that increases an individual’s risk for developing dementia. The research volunteers received acupuncture treatments three to five times each week for eight to 12 weeks. The bottom line was that people who received acupuncture scored significant better on tests of memory performance compared with those who did not receive acupuncture.

Asthma and Heart Medicine Have Potential Benefits for Alzheimer’s

One important drug-discovery strategy involves repurposing medicines approved for one disease for use in treating another disease, and recent research suggests promise that an asthma and a heart medication may be useful for treating Alzheimer’s disease. Cromolyn sodium is a drug used to treat symptoms in asthma, and recent testing of small animals genetically engineered to develop Alzheimer’s disease shows that the medicine interrupts the assembly of the abnormal brain protein known as amyloid that accumulates in Alzheimer’s disease. In another study, scientists found that propafenone, a medicine for treating cardiac arrhythmias, may offer benefits for the brain. In this study, scientists were searching for drugs with structures similar to the spice curcumin because of its anti-amyloid effects. The results of this chemical structure search landed on propafenone, which was shown to have potent anti-amyloid effects.
While researchers continue to work towards developing potential treatments for dementia, research aimed at identifying preventive or modifiable factors, such as those related to basic lifestyle habits, remains a crucial area of intervention and research. To date, numerous lifestyle factors have been associated with improved cognition and/or reduced risk for dementia, such as maintaining a healthy diet, exercising, remaining mentally active, and reducing or eliminating certain substances that can have a deleterious impact on the brain (e.g., tobacco smoke, illicit substances, excess alcohol consumption). Although many of these associations have been well-known for years, the research continues to evolve and provide insights into some of the underlying mechanisms associated with dementia.

Based on recent findings, it appears that oral hygiene should be added to the basic lifestyle list above. Gum disease, also known as periodontal disease, is one of the most common chronic inflammatory conditions, with prevalence rates of approximately 47% in the general population and 70% in adults aged 65 or older in one study. While it has previously been associated with other illnesses that can impact the brain (such as heart disease and diabetes), some of the latest research suggests that gum disease may potentially contribute to risk of developing Alzheimer’s disease.

In 2012, Stein and colleagues published findings of a retrospective longitudinal study. They assessed serum antibody levels to bacteria of periodontal disease in participants who eventually developed Alzheimer’s disease and compared them to the antibody levels in control subjects. At baseline, and years prior to cognitive impairment, participants who later developed Alzheimer’s disease had higher serum antibody levels to bacteria of periodontal disease compared to controls.

This year, Ide and colleagues published a six-month study of 60 community dwelling participants with mild to moderate Alzheimer’s disease. Periodontitis at baseline was associated with a six-fold increase in the rate of cognitive decline at six months.
Donors & Tributes  February 2016—September 2016

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June Kim

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ARE YOU ALSO SUFFERING FROM:

- SADNESS?
- HOPELESSNESS?
- PROBLEMS WITH MEMORY AND CONCENTRATION?
- A LACK OF ENERGY AND LOW APPETITE?

YOU MAY BE ELIGIBLE FOR OUR RESEARCH STUDY

The UCLA Geriatric Psychiatry Program is conducting a 12-month research study on the experimental drug combination for the treatment of depression. All participants will be given the study drug Lexapro® (escitalopram) and Namenda® (memantine) together or will be given Lexapro® with a placebo (an inactive substance). A complete psychiatric evaluation, a PET scan, and two MRI scans will be provided. Subjects will not be charged for participation and will be paid. You must be at least 60 years old. If you or anyone you know is interested in participating, call for an appointment to see if you qualify or for more information at: (310) 983-3375 or (310) 794-4619.

The study will be conducted by Helen Lavretsky, M.D.
Brain Boot Camp
An intensive, three-hour course that includes individualized healthy lifestyle programs, tips for a healthy heart and brain diet, and advanced memory techniques for learning and recalling names and faces.
Cost: $300.
To register, call (310) 794-4055

Memory Care
A weekly program for patients experiencing mild dementia and their caregivers. Memory Care teaches evidence-based memory exercises and methods, as well as strategies to lower stress.
Contact (310) 794-0680 to reserve your spot and for pricing details.

Memory Training
A course for people with mild memory concerns. Memory Training presents effective memory-enhancing techniques and is taught by certified volunteer trainers.
For more information, contact (310) 794-0680.

Senior Scholars
A program for adults age 50 and older who wish to attend UCLA undergraduate courses on campus.
Cost: $150 per class.
Winter Quarter classes begin on January 9, 2017.
We will begin taking application for winter in mid-November.
For more information, contact (310) 794-0679.

Please follow us on Facebook (www.facebook.com/UCLALongevityCenter) or Twitter @LongevityCtr.