

# THE GRAPEVINE

*North Shore Caregivers Newsletter*



## FEATURED STORY

**Mild Cognitive Impairment: It's Not as Dire but Is Still Significant**  
by Catherine Bryson

# Mild Cognitive Impairment: It's Not as Dire but Is Still Significant

By Catherine Bryson

---

*Caroline was glad because she had completed her children's story about Border Collies. Suddenly, the phone rang. Who could it be? Her brother's voice came on the end of the line:*

*"Did you forget?, Remember, we had agreed I would call today."*

*Caroline felt embarrassed. Why was this happening so often? What was going on?*

Mild Cognitive Impairment (MCI) is a stage between normal cognition (thinking) and out-and-out dementia. With MCI, changes to cognition are more serious than normal cognitive decline in memory associated with aging. Remember, 'dementia' is an umbrella term, under which one possibility (the most common) is Alzheimer's Dementia (Alzheimer's Disease).

Mind you, with a diagnosis of MCI there are three possibilities:

1. You revert back to normal cognition
2. You remain in a state of cognitive decline, but do not progress to dementia
3. (Worst Case Scenario) You progress to dementia (which may or may not, mean Alzheimer's Disease) The new name for dementia by the way is ADRD (Alzheimer's Disease and Related Dementias).

*Caroline, however, continued to work part-time. She was still able to drive (though perhaps not after dark or during bad traffic).*

You see, although there was documented cognitive decline (worsening thinking abilities), there had been no impact on daily functioning (i.e., she could manage the ADLs: Activities of Daily Living: bathing, eating, paying bills, etc.)

It is only when daily functioning is seriously impacted that Caroline will move on to a diagnosis of dementia. In dementia, the cognitive deficits (decline in thinking abilities), are more severe and interfere with individual functioning in daily life.

It is absolutely crucial to understand that even if one is given the diagnosis of MCI, the person's

---

ability to manage the daily tasks of living is not compromised. You can have memory issues yet still be able to function normally (as Caroline was.)

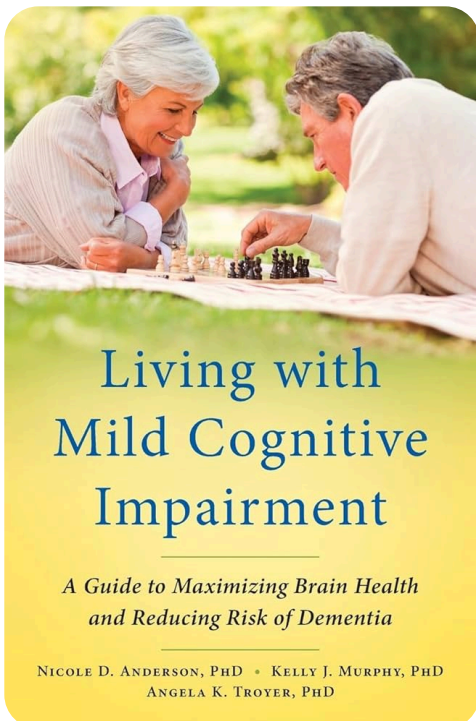
In MCI, some or all of these signs may occur:

- Missing appointments
- Losing train of thought or not following plot
- Hard to make decisions or finish task
- Getting lost in familiar places
- Poor judgement
- People notice changes

It's just that certain adjustments must be made: i.e. reminder notes on the fridge, perhaps using one's cell phone to set alarms for such things as medication, or put reminders in the 'notes' app, such as to remember to pick up milk on the way home.

It is equally important to note that there are things you can do: such as diet, exercise, and social engagement, that can minimize the risk of going on to dementia.

*So, for Caroline, it was important for her to continue to attend her bridge club. Indeed, games like bridge or hobbies like creative writing are excellent ways to strengthen cognition, and develop this thing called 'cognitive reserve' (which is the equivalent of money in the bank.)*



Here are the most important things to be aware of if you or someone you love is diagnosed with MCI:

1. Keep up your leisure activities as being active can reduce the chances of progressing to dementia
2. If you notice hearing loss, be sure to treat it because the occurrence of hearing loss and a diagnosis of dementia has been proven by research
3. Equally important to treat issues with depression as this has also been correlated with dementia

A few more tips:

*Caroline has a reminder on her phone to sit down in the afternoons and listen to relaxing piano music (her favourite).*

*You see, music bodes well in terms of dementia for you musically-gifted types (as does being bilingual.)*

*And her bridge club is an excellent idea: keep up your social network and participate in social activities: Studies have shown that individuals with an active social life have lower mortality rates, since being socially isolated weakens the immune system, sadly.*

*Normal life went on for Caroline. She didn't have to give anything up. It's just that she and her partner had to put 'systems in place', sort of like 'cognitive scaffolding' for a building under construction.*

So...the long and the short of it is, do not panic if you get a diagnosis of MCI. But the important thing is, if you notice a decline in thinking, see your doctor for an evaluation because early detection of MCI is crucial.

I list a few resources below for your information. However, it should be noted that this article is only meant to be an introduction and is not meant as a substitute for formal evaluation or medical care. If you have concerns, see your physician.

And as the saying goes:

***Keep Calm and Carry On.***



### Resources

'Living with Mild Cognitive Impairment: A Guide to Maximizing Brain Health and Reducing Risk of Dementia' by Nicole D. Anderson, Kelly J. Murphy, Angela K. Troyer. Oxford University Press 2012 (Available at Public Libraries, Newer Edition also Available for Purchase, e.g. Amazon.)

The Mayo Clinic on Mild Cognitive Impairment

<https://www.mayoclinic.org/diseases-conditions/mild-cognitive-impairment>



# POWERFUL TOOLS FOR CAREGIVERS WORKSHOP

FREE Workshop this April on Zoom!

Tuesdays | April 8 - May 6 | 3:00 PM - 4:30 PM

Powerful Tools for Caregivers classes help caregivers take better care of themselves while caring for a friend or relative. Whether you provide care for a spouse, partner, parent, friend, or child with special needs; at home or in a care facility; whether down the block or miles away, yours is an important role. **This course is for family caregivers like you!** The classes give you tools to help:

- Reduce stress
- Better communicate your feelings
- Improve self-confidence
- Make tough decisions
- Locate helpful resources
- Manage time, set goals, and solve problems

This six-week class series gives you the confidence and support to better care for your loved one – and yourself. In the class, caregivers receive The Caregiver Helpbook, which follows the curriculum and provides additional tools to address specific caregiver issues.

*"After taking this class I am a more confident caregiver! Having tools to resolve problems is a definite advantage in becoming a better caregiver and a happier, wiser, healthier me...and a healthier 'us!'" - PTC Class Participant*

Please email [vic.gailunas@nsr.ca](mailto:vic.gailunas@nsr.ca) or phone 604-982-3320 to register.



# Events Calendar

---

## MARCH

Tues  
04

**Caregiver Support Group Meeting** (In Person & Zoom) **6:30 PM - 8:30 PM**  
w/ guest speaker Chantal Bourke (Registered Clinical Counsellor)

Thurs  
06

**Men's Support Group Meeting** (In Person) **10:30 AM - 12:30 AM**

Wed  
12

**Korean Group Meeting** (In Person) **2:00 PM - 4:00 PM**

Mon  
17

**Persian Group Meeting - Nowruz Celebration!** **6:00 PM - 8:00 PM**  
(In Person)

Tues  
25

**Bereavement Support Group Meeting** **6:00 PM - 8:00 PM**  
(In Person and Zoom)

## APRIL

Tues  
01

**Caregiver Support Group Meeting** (Zoom) **6:30 PM - 8:30 PM**

Thurs  
03

**Men's Support Group Meeting** (In Person) **10:30 AM - 12:30 PM**

Tues  
08, 15, 22,  
29

**FREE Powerful Tools for Caregivers Workshop!** **3:00 PM - 4:30 PM**  
(Zoom)

Wed  
09

**Korean Group Meeting** (In Person) **2:00 PM - 4:00 PM**

Mon  
28

**Persian Group Meeting** (In Person) **6:00 PM - 8:00 PM**

# 'Can't Sleep, Can't Stay Awake': What We Now Know About Caregivers and Sleep (& What To Do About It)

By Catherine Bryson

Insomnia and caregiving is not at all an uncommon combination. In a 2009 study reported in the Sleep Medicine journal (see Resources below, for details) two-thirds of dementia caregivers report that they have trouble sleeping. Furthermore, "Little attention has been paid to treatments to improve sleep in caregivers." I sometimes think society's caregivers are not a very high priority of government resources. We are more invisible, we are 'behind the scenes.' But we are also, unfortunately, very much in the trenches.

I include a questionnaire you can fill out and take to your doctor if you have had difficulty sleeping lately. I hope it helps you. Sleep is very, very important. The Dalai Lama once called it a form of meditation. We all know that sleep 'knits the raveled sleeve of care.' Poor caregiver sleep has been linked to lowered immune function, elevated stress hormones, increased risk for cardiovascular disease, and risk for premature mortality. Sobering thoughts indeed. I would add the propensity to weight gain and an increased frequency of accidents and falls.



When I was caring for my father at home, I would frequently be awoken by him in the middle of the night, and then, find it almost impossible to go back to sleep after. Thus, I was faced with a full day of caregiving the next day on next to no sleep. This is not good. Fortunately, I am having success with a new treatment, but my sleep still isn't optimal. Even so, I feel incredibly grateful to my doctor.

Note, however, that I am not necessarily advocating medication as the only route

to follow. It is very much up to the individual. Also, to my way of thinking, we need not just pills, but skills in order to overcome chronic insomnia. Skills could take the form of increased physical exercise, meditation, or psychotherapy such as CBT (Cognitive Behavioural Therapy.) I include two excellent books on sleep in the resources below, but if you don't have time for books there are also some excellent resources online. I also recommend, if you have access to it, a session of audio adult storytelling (such as on the app Headspace) prior to sleep. Taking a shower before bed also helps me a lot. In addition, I have had very good results with the Progressive Muscle Relaxation technique (PMR).

If you would like your own PMR recording, I recommend you install the (free) app Insight Timer, then search for the 5-minute PMR practice.

Indeed, I remember reading descriptions of the caregiver plight in *The Globe and Mail*. How often caregivers might live on only 2 or 3 hours of sleep per night for long stretches of time. This degree of stress is simply unsustainable, and, unfortunately can lead to burnout.

Just so you know, symptoms of burnout are:

- Feeling tired often
- Getting too much sleep or not enough sleep (Fun fact: Albert Einstein got lots of sleep. About 10 hours a night. He said he needed it to do deep thinking.)
- Gaining or losing weight
- Becoming easily irritated or angry

Personally, I don't blame caregivers (who are mostly female) if they are occasionally grouchy or even rude. I don't think placing blame on anyone helps. What we need are evidence-based treatments.

Here's something else that works: play music by the French composer Chopin. His work is meditative, dreamy, and induces calm in the listener. I recently played Chopin to my father (who is in care), and within about 20 minutes, he fell asleep.

There are some supplements I would recommend but I would rather not give out advice as I am not a health professional.

Therefore, here are two books for you to read. If you are lying in bed awake, what could be better than a good book? Besides, studies show that even after only 15 minutes of reading (better if an actual 'old school' book), the body begins to relax and unwind.

If you tend to worry a lot at night, you are in good company. My father once wrote in his first novel, *T*, "Man is a computer his brain unceasingly whirring, sorting. Tossing out punch-card when least expected." Here is another quote that might help you:

'Who of you by worrying can add a single hour to his life? Since you cannot do this very little thing, then why do you worry about the rest.'

Luke 12: 25-26

(Note: My inclusion of a quote from *The Bible* is purely ecumenical.)

Finally, I would like to mention that if you (like me) suffer from heat sensitivity in the hot weather,

---



you might try a bucket hat by Zauo company. I purchased one recently and I must say it made walking around outside much more pleasant. (Note: This is not intended as an 'ad' for Zauo, I am merely passing on what I think might help, if you so choose.)

## Caregiver Sleep Questionnaire (CSQ)

Problem Frequency  
(items # 1–7)

Sleep Quality  
(Item #8)

Sleep Quantity  
(Item #9)

0 = Never

0 = Very good

0 = Enough

1 = Rarely

1 = Satisfactory

1 = Too much sleep

2 = 2–4x/month or weekly

2 = Troubled

2 = Too little sleep

3 = > once a week or daily  
(reverse code items #4, 6)

3 = Poor/Very bad

1. Does the care-recipient become more confused or disoriented at night?
2. Is the care-recipient's behavior at night a problem to you or others?
3. Does worrying about your caretaking role ever keep you awake?
4. When you awaken at night, can you fall back to sleep within 10–15 minutes?
5. How often do you usually nap during the day?
6. How often do you fall asleep when you want to stay awake?
7. How often do you use sleeping medication?
8. Overall, how would you rate your sleep at night?
9. Do you feel you get too much sleep, about enough sleep, or too little sleep?

Care-recipient Sleep Disturbances (PSD)

## Resources

'Insomnia in Caregivers of Persons with Dementia: Who Is At Risk and What Can Be Done About It?'

Sleep Med Clin December 2009

The Sleep Thieves by Stanley Coren (also a dog expert)

Can't Sleep, Can't Stay Awake by Meir Kryger

# CAREGIVER SUPPORT GUEST SPEAKER



## Emotion-Focused Therapy

With Chantal Bourke, Registered Clinical Counsellor

On Zoom and In Person at the NSCR Community Room

March 4th | 6:30 PM | [Click for Zoom link](#)

Learn about the complex emotional needs that arise in the context of loving and connected relationships, such as shame and emotional blocks.

In order to increase the resiliency, emotional agility and overall well-being of caregivers, their emotional needs require support and psycho education.

**Chantal Bourke** is a Registered Clinical Counsellor who sees clients in person and virtually all over BC. She has worked with a variety of mental health diagnoses such as, but not limited to: Anxiety, Depression, ADHD, Attachment Styles and Parenting



**For more info:**  
604-982-3320  
[vic.gailunas@nscr.ca](mailto:vic.gailunas@nscr.ca)

# Persian Wellness and Education Group

NSCR's wellness group aims to bring together members of the community to meet, share, and talk about topics brought forth by the group.

We welcome program participants to join us for a 2 hour session, held entirely in Farsi, with guest speakers, resources, group interaction, and music.

## Monthly Meetings

We are currently meeting in person at the NSCR Community Room and on Zoom. Our meetings run on the third Monday of every month from 6:00 PM - 8:00 PM.

## Next 2 Meetings

March 17 - In person Nowruz celebration

April 8 - In person

To join the NEW NSCR Persian Telegram Group, to receive information, meeting reminders, and to connect with others in our North Shore Persian community, scan the QR code or email [vic.gailiunas@nscr.ca](mailto:vic.gailiunas@nscr.ca)!



Scan or  
click to  
connect





# CAREGIVER BEREAVEMENT SUPPORT GROUP

North Shore Community Resources (NSCR) offers a support group specifically for people experiencing grief in the loss of a loved one. The group is designed to create community and offer a time of sharing stories and resources, listening, and connecting with others with similar experiences.

**Tuesday, March 25, 2025 Group Meeting In Person at our NSCR Community Room AND on Zoom, 6:00pm-8:00pm**



As we move into Spring, things can seem more pronounced for those experiencing loss. It is a good time to consider our well-being, how to find meaning in grief, but also in hope, rejuvenation and renewal of spirit.

For more information, to register, and for details, please contact:

Vic Gailiunas  
Caregiver Support Program Coordinator  
604.982.3320  
[vic.gailiunas@nscr.ca](mailto:vic.gailiunas@nscr.ca)



# MEN'S CAREGIVER SUPPORT GROUP

North Shore Community Resources (NSCR) offers a support group specifically for male caregivers who support their spouses/partners, either living together or apart. The group was designed to create community and offer a time of sharing, listening, and connecting for men with the unique experience of caregiving for their partners.

Program participants are welcome to encourage other men they feel might benefit from joining the group to join us.

## Monthly Meetings

We currently meet in-person at the NSCR Community Room on the first Thursday of each month, from 10:30am-12:30pm.

### Next 2 meetings:

**March 6**

**April 3**



(photo credit – Paul McGrath)

### Contact:

For more information and details, contact:

Vic Gailiunas (Caregiver Support Program Coordinator) ~ [Vic.Gailiunas@nscr.ca](mailto:Vic.Gailiunas@nscr.ca)



# KOREAN WELLNESS AND EDUCATION GROUP

North Shore Community Resources (NSCR) offers a wellness and education group specifically for the Korean community on the North Shore.

The group was designed to create community and offer a time of sharing, learning, and connecting for our Korean community.

Program participants are welcome to join us for a 2-hour session, held entirely in Korean, with guest speakers, resources, group interaction, and creative arts.

## Monthly Meetings

We meet In Person in our NSCR Community Room. Our meetings run on the second Wednesday of each month, from 2:00-4:00pm.

### Next 2 Meetings:

**March 12**

**April 9**



(photo credit – Paul McGrath)

## Contact

For more information and details, contact:

Yoonwon Lee (Group Leader) ~ [infocwtc@gmail.com](mailto:infocwtc@gmail.com)

Vic Gailiunas (NSCR Caregiver Support Program Coordinator) ~ [Vic.Gailiunas@nscr.ca](mailto:Vic.Gailiunas@nscr.ca)

# THE GRAPEVINE

*North Shore Caregivers Newsletter*



North Shore  
Community  
Resources

If you'd like to help support NSCR and the work we do you can follow the link below to donate

[\*\*DONATE NOW\*\*](#)

We are thankful for all the support we get and couldn't help others without the generous help of patrons like you