

What if Grandpa doesn't really have Alzheimer's?

[Editor's Note: The following article first appeared at Parade.com. Both that article and the article following were submitted by Teri Key. The second article was written by Teri's mother.]

There's a condition that often masquerades as dementia, with one difference—it's treatable.

Jimmy Nowell of Clifton, Tex., had always been a top-notch salesman. Locals in search of auto parts knew he could get them exactly what they needed. But in 2000, when he was 59, Nowell's speech, along with his walking, started slowing. Sometimes he needed a cane. Later, he became disorganized, losing his train of thought or turning on the computer and freezing, not knowing what to do. In 2005, he lost his job as a result of his behavior. Still, Nowell and his wife, Ann, just chalked up the symptoms to old age.

Then in 2007, Nowell started blanking on Ann's name. In a panic, she dragged her husband to doctor after doctor, but no one could agree on a diagnosis. One specialist thought Nowell had Parkinson's disease; another said it was Alzheimer's. Finally, in 2009, Nowell's condition was correctly identified when a neurologist took an MRI and compared it to a baseline image taken a few years earlier: Nowell had normal pressure hydrocephalus (NPH), a condition that occurs when the clear fluid surrounding the brain fails to be reabsorbed, eventually leading to problems with memory, as well as bladder control and walking (one of the distinguishing signs is a disturbed gait). The symptoms creep up slowly at first—and when the condition is brought to a doctor's attention, it's often misdiagnosed.

"About 30 percent of my [NPH] patients were told they had Alzheimer's or Parkinson's," says Mark Luciano, M.D., neurosurgery director at Cleveland Clinic. "Sometimes they were told they were just getting old." As a result, it's tough to know how prevalent NPH truly is, but the

Hydrocephalus Association estimates that at least 350,000 Americans—and 5 percent of people with dementia—have the condition. A 2005 Virginia Commonwealth University paper estimated that 9 percent of patients in assisted-living facilities may have NPH.

The good news is that unlike the vast majority of conditions that cause dementia, NPH can be treated by surgery to reduce pressure in the brain. The procedure is successful in 85 to 90 percent of NPH patients, as long as they have no complicating factors, like a spinal condition, says Michael Williams, M.D., director of Sinai Hospital's Adult Hydrocephalus Center in Baltimore.

For Nowell, news of a cure was welcome, but also frightening: A dime-size hole would be drilled into his skull and a shunt implanted to drain the excess fluid. Nevertheless, the Nowells decided to go forward with the surgery. Upon waking, Jimmy was able to walk without a cane for the first time in years. When his wife stepped off the elevator, he called out her name without hesitation, and she cried with joy. Jimmy was back.

To learn more about Normal Pressure Hydrocephalus, visit lifeph.com.

"You Have the Beginning of Alzheimer's..."

"You have the beginning of Alzheimer's," I heard my primary care doctor say to me. I don't think it really sank in. Looking back on it now, I really don't think I believed her. I know I didn't want to.

This visit to the doctor in January of 2009 came at the urging of our three daughters and oldest granddaughter after we were all together for Christmas in 2008. Noticing my inability to function in normal daily menial tasks as well as slurring in my speech, there was great concern.

Sending me home with free samples of Aricept and Namenda, my doctor told me to go and surround myself with good memories. Driving back to the house, Buzz, my husband of 54

years, and I looked at each other and agreed: We will take this one day at a time and trust the Lord. Our lives up to that point had been lived that way and we would continue to do the same through this.

Rummaging through pictures of our family – all the way back through my great grandparents – as well as those of close friends and the old family home, I began a mural in the dining room and my bedroom, turning the walls into what resembled a picture studio. A project that had been set aside was once again picked up – my family genealogy. These were daily reminders of the life God had blessed me with and of His care over me throughout all those years.

I had no intention of giving up. However, shortly after the diagnosis, my ability to walk unassisted was lost. Dear friends bought me a bright red walker that we fondly named the "chariot". With it I was able to move from one place to the other, albeit slowly. It became harder and harder to leave the house and my memory became non-existent.

In June of 2009, my primary care doctor called, said she would like to do some further testing, and referred me to a neurosurgeon in Odessa, TX. After being hospitalized and going through a battery of tests including a CT scan, lumbar puncture, and checking for atherosclerosis, a different diagnosis was given: Normal-Pressure Hydrocephalus (NPH). Occurring mostly in adults over the age of 60, NPH develops slowly over time causing cerebrospinal fluid to build up. Because the fluid cannot drain, pressure is

applied to the brain. The parts of the brain that control the legs, bladder, and cognitive mental processes (memory, reasoning, problem solving, and speaking) are affected, as well as the bladder and walking.

After the testing was done and a video was viewed with the doctor, we learned that NPH patients, unlike Alzheimer's patients, do have hope. Surgery could be done, and if successful, there was a possibility I could walk again with the use of a cane. Of course, with any surgery, risk is involved, and at this time I had just celebrated my 80th birthday.

Buzz and I discussed surgery with the doctor, our children, my siblings, and dear friends, and made it a matter of prayer. We were all in agreement and the decision was made – I would undergo the surgery.

On August 20, 2009, I was admitted to the hospital, had my head shaved, and went into surgery. The doctor went in through the top of my head, through my scalp, down the right side behind my ear, and placed a shunt. If the surgery was a success, then the excess fluid from my brain would drain into my stomach. It would be

several weeks before we would know if it worked, but we had to try!

After two days in the hospital and 16 days in rehab, I was released to go home. Although I had been carried in, I walked out with the aid of my chariot! Buzz and I went home and I began working with my physical therapist. It felt as if I had been given a new lease on life!

On September 23, 2009, another brain scan was done. An appointment with the neurosurgeon was made for September 25th. While the neurosurgeon is a man of few words, his PA is not! His excitement was heard all over the office when I walked in unassisted – no walker, no cane! Thrilled with my progress and giving me a good report, I did not need to return to his office until December 18, 2009!

It is now March 2010. Ask anyone who knows this story and I believe you will hear the word "miracle". My children say I've gained 20 years of my life back. There are so many I am grateful to: First, God; second, my husband (now of 55 years!) Buzz; third, my family; and also to the health professionals, my pastor and church family, and my many praying friends! To God be the Glory!



Russell Davis
Agent

611 Austin Street
PO Box 1079
Robert Lee, Texas 76945
(325) 453-4505 office
(325) 453-4524 fax
(325) 650-1904 mobile
TXFB-INS.COM



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