**What is Alzheimer's Disease?**

Alzheimer's disease (AD), also known in medical literature as Alzheimer disease, is the most common form of dementia. There is no cure for the disease, which worsens as it progresses, and eventually leads to death. It was first described by German psychiatrist and neuropathologist Alois Alzheimer in 1906 and was named after him. Most often, AD is diagnosed in people over 65 years of age, although the less-prevalent early-onset Alzheimer’s can occur much earlier. In 2006, there were 26.6 million sufferers worldwide. Alzheimer’s is predicted to affect 1 in 85 people globally by 2050.

Although Alzheimer’s disease develops differently for every individual, there are many common symptoms. Early symptoms are often mistakenly thought to be ‘age-related’ concerns, or manifestations of stress. In the early stages, the most common symptom is difficulty in remembering recent events. When AD is suspected, the diagnosis is usually confirmed with tests that evaluate behaviour and thinking abilities, often followed by a brain scan if available. As the disease advances, symptoms can include confusion, irritability and aggression, mood swings, trouble with language, and long-term memory loss. As the sufferer declines they often withdraw from family and society. Gradually, bodily functions are lost, ultimately leading to death. Since the disease is different for each individual, predicting how it will affect the person is difficult. AD develops for an unknown and variable amount of time before becoming fully apparent, and it can progress undiagnosed for years. On average, the life expectancy following diagnosis is approximately seven years. Fewer than three percent of individuals live more than fourteen years after diagnosis.

The cause and progression of Alzheimer’s disease are not well understood. Research indicates that the disease is associated with plaques and tangles in the brain. Current treatments only help with the symptoms of the disease. There are no available treatments that stop or reverse the progression of the disease. As of 2012, more than 1,000 clinical trials have been or are being conducted to test various compounds in ALS. Mental stimulation, exercise, and a balanced diet have been suggested as ways to delay cognitive symptoms (though not brain pathology) in healthy older individuals, but there is no conclusive evidence supporting an effect.


**Research**

**Acupressure points for Alzheimers**

Researchers at Taiwan’s National Yang-Ming University conducted a study that tested acupressure on dementia patients who displayed agitated behaviour, ranging from mild (pacing) to extreme (verbal and physical abuse).

**Easing the restless**

More than 30 subjects were recruited. All had dementia and were living in an assisted care facility.
only 20 subjects completed the study — 11 subjects were discharged or hospitalized). Each of the subjects had moments of agitated behaviour, and in more than two-thirds of the group this behaviour was considered severe.

Over a four-week intervention period, each subject received acupressure treatments that lasted 15 minutes, two times each day, five days per week. Subjects were evaluated before treatment began, re-evaluated at the end of the intervention period, and again one week after treatment was discontinued.

Results:

* An average agitated behaviour score of nearly 80, recorded before the trial began, dropped more than 20 points over the four-week treatment period
* A score that measured verbal attacks dropped from 2.8 to 0.2
* In the week after treatment was discontinued, this score rose again to 1.3
* A score that measured physical attacks (such as beating and scratching) dropped from 5.5 to 0.5
* In the week after treatment was discontinued, this score rose again to 2.1
* Aimless wandering (measured with pedometers) dropped from more than 5,300 steps per day to about 2,600 steps per day
* In the week after treatment was discontinued, aimless wandering steps rose again to nearly 3,375

Five important points

Professor Li-Chan Lin, one of the authors of the Yang-Ming study, pointed out that the real benefit is that the acupressure used in the study can be taught to caregivers and practiced at home or in assisted care facilities.

Researchers used these five acu-points in the study:

* Fengchi (GB 20)
* Baihui (Du 20)
* Shenmen (He 7)
* Niguan (Pe 6)
* Sanyinjiao (Sp 6)

LETTERS

Shiatsu Practitioner Jean Robertson-Molloy, MRSS

Years ago, when I was a social worker and Shiatsu student, I did some voluntary work, about once a month, at a very good residential unit for semi-independent Alzheimer’s sufferers, in Glasgow. I went there about once a month. The residents never remembered my name, or even my face, but the moment I made physical contact with them, e.g.- put a hand on their shoulder--their faces would light up with recognition and pleasure, anticipating a pleasant experience. They used to enjoy talking to me about past experiences, while I gave them about half an hour of head and shoulders Shiatsu, sometimes knees and feet too. So it was as if their bodies remembered the feeling of Shiatsu. We’re all about connecting.
More recently, I enjoyed working for three years in a (highly subsidised--unusual) complementary health clinic for older people, all of whom were very mentally alert but coping with a variety of chronic and other ailments. They all enjoyed and valued Shiatsu tremendously. I think that older people of all states of mind are often desperately missing loving human touch and that this is in an area which has as yet scarcely been explored to anything like its full potential by Shiatsu practitioners. Of course, we are a young therapy, and apt to work most often with the young and relatively fit, and of course financially fit, clients. That's why we really need to make more impact on the health and social services--there's such a vast group of people out there who could benefit from our services, if only they could afford us!

PS. I used to give the staff at that home Shiatsu too -for their sore backs, shoulders etc, and they were pretty ecstatic about it too!

**Letter received by the Shiatsu Society (UK), the Alzheimer's Society & Midland School - Shiatsu Success Story**

**STOP PRESS** Morris Robinson saw his specialist recently who normally saw him several times a year. He cannot explain why Morris continues to maintain this level of improvement, why his speech is so much improved but HE HAS SIGNED HIM OFF FOR A YEAR!

I would like the Shiatsu Society and Alzheimer’s Society to have this story as it could help other Alzheimer’s sufferers to have the chance to improve, just as my husband has. Alzheimer’s is a terrible condition, not only for the person concerned but also for the families and carers of those people, who watch them steadily go down hill. It is devastating.

My husband has suffered with Alzheimer’s for some years now. In July 05, our local newspaper printed a story about a group of 2nd year students from the Nottingham School of Shiatsu-do, who gave free Shiatsu at a Mind Body Spirit Fayre, so that people could try it. We had tried everything to help my husband, but nothing worked and I watched him become more and more depressed about his condition. For years he would not speak to people, as he stumbled over his words and felt embarrassed. His eyes looked dead; he withdrew into a little world of his own and was understandably very depressed. He also had difficulty moving and controlling his limbs.

I wondered if Shiatsu would help him and contacted one of the 2nd year students from the school, as she lives in Nottinghamshire and quite near to us. She was very honest and told me that she could not claim that Shiatsu could help Alzheimer’s but was willing to see him. My husband had a 45 minute session and the effect was instant! I sat with him during the proceedings and was amazed, as I watched him relax for the first time in years. His eyes looked alive afterwards and he was smiling. She also recommended omega 3 pure Norwegian salmon oil and we now buy this via mail order. On the sheet from the specialist it said that amongst other things it is also good for kidneys, age related conditions and degenerative brain conditions – since Alzheimer’s mostly affects the brain, I now understand why it helped. So 6 months ago Morris started taking the salmon oil. I feel that the two things together are without a shadow of a doubt what brought about this improvement.

Over the months of having regular Shiatsu his speech also started to improve and now he speaks to total strangers - a thing he would never have done before - he is so much better that he has been cracking jokes with the family and laughing – it’s so good to see it! Carers suffer as much as those with Alzheimer’s so I decided at Christmas that I would have some treatments too. I cannot describe how it has helped me, other than to say that I now feel wonderful, relaxed, far more positive and able to cope with anything.

He is now able to move his limbs with far more control, he has started gardening again and a few months ago he got up and danced with me! Not only that, but because he is so much better, we went on a holiday, on our own, for the first time in years. This is something that was not possible before.
It has now been over a year since Morris started having Shiatsu. At first I was told me not to get my hopes up, as it may be that he was just having a good spell, but after a year the improvement cannot be considered anything short of a real success story for this amazing therapy.

We have written to the Alzheimer’s Society in London, Derby and Nottingham and hope they will contact us and pass this message on to other sufferer’s. Morris and I contacted Radio Nottingham to see if they would help us to spread the word about Shiatsu. We appeared live on Radio Nottingham in September along with the Shiatsu Practitioner who treated Morris, and Jeanne Heppell - Principle of the Midlands School.

By the end of 2006 Morris and I enjoyed 4 holidays, we are doing lots of gardening and home improvements together and Morris went on an 8 mile walk – before he sat in a chair – before Shiatsu!!!

I have no idea if Shiatsu would work on everyone, but I understand that Shiatsu practitioners in the UK are also having good results with Alzheimer’s sufferers so I really do urge people to try it. We were contacted by the Alzheimer’s Society to ask if we were willing to take part in Media work to discuss the improvement Morris has achieved through Shiatsu and immediately agreed as we want to help other sufferers. We want to make their carer’s aware that there is help for them too!

“Shiatsu gave me my husband back, not cured of course, but more like his old self that I could never have imagined was possible.”

**Practitioners Specialising in this area, or having extensive experience**

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