

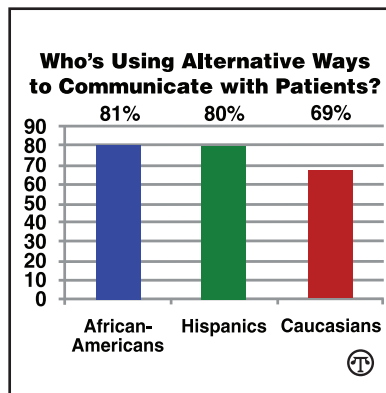
## National Family Caregivers Association (NFCA) Announces a New Survey Revealing Common Fears, Struggles of Family Alzheimer's Disease Caregivers

### New Tip Sheet Released by NFCA to Help Alzheimer's Caregivers Better Communicate with Loved Ones

(NAPSA)—A recent survey released by the National Family Caregivers Association (NFCA) and Forest Laboratories, Inc. reveals that communication with Alzheimer's patients is a considerable source of stress for caregivers and, aside from the patient's general health and physical decline, the loss of their loved one's ability to communicate their day-to-day needs and concerns ranked second among what caregivers fear the most.

Nearly half of caregivers surveyed said communication breakdowns between themselves and the patient greatly impact their overall stress level, and the majority said they are decreasing attempts to engage in conversations with their loved ones. Conversations about emotions are particularly stressful, as is engaging in a simple conversation.

"Being a family caregiver is always hard, but it is much harder when the care recipient has dementia or other conditions that affect cognition. The lack of effective communication can take a huge toll on caregivers," said Suzanne Mintz, president and chief executive officer of NFCA. "We want to help family caregivers reduce their stress and find ways to adjust their communication methods to connect with their loved ones—whether it's



on an emotional level or about physical needs."

Despite the difficulty in communication, 71 percent of caregivers surveyed reported they have adapted new ways of communicating with their loved ones, and 76 percent of caregivers said they have become better communicators since becoming caregivers.

#### Most Common Alternative Ways Caregivers are Communicating:

- Observe facial expressions (84 percent)
- Observe body language (79 percent)
- Use photos/pictures (66 percent)

It is estimated that 5.4 million Americans currently have Alzheimer's disease, and nearly 15

million others are providing care. Often the equivalent of a full time job, 80 percent of at-home care for people with Alzheimer's or another dementia is provided by unpaid family caregivers. With the rise in the older population, these numbers are only expected to increase.

"A diagnosis of Alzheimer's disease is devastating for a family. But as a caregiver, you should know that you can talk to your loved one's doctor about available medications for all stages of the disease that may help slow symptom progression," said Gustavo Alva MD, DFAPA, Medical Director of ATP Clinical Research in Costa Mesa, CA. "When patients are diagnosed with Alzheimer's disease, they may be prescribed an acetylcholinesterase inhibitor. In the moderate or severe stages, doctors can prescribe a combination of memantine, which is known as Namenda, and an acetylcholinesterase inhibitor called donepezil 5/10 mg, two types of medications that work differently in the brain to help slow the progression of Alzheimer's disease symptoms. Namenda and donepezil have risks, so patients and caregivers should talk to their doctor about all treatment options regarding their benefit and potential side effects."

As a result of caring for a loved one with Alzheimer's, caregivers

surveyed seemed to be more aware of the disease and more proactive about their own health. Approximately 9 out of 10 caregivers said they will immediately see their doctor if they notice symptoms of the disease in themselves and approximately three-fourths worry about developing the disease themselves.

"The experiences of today's family caregivers and the tools they are using to adapt are very important for all Americans to learn about," said Mintz. "With Alzheimer's disease on the rise, many people could be a caregiver starting tomorrow."

#### Caregiving Tips from NFCA:

- Seek support from other caregivers in your area or online
- Educate yourself about the progression of Alzheimer's disease symptoms
- Talk with your doctor about treatment options
- Take care of yourself with respite breaks

For more information, including a new tip sheet and for support, visit [www.thefamilycaregiver.org](http://www.thefamilycaregiver.org). The survey was conducted by GfK Roper Public Affairs & Corporate Communications, on behalf of the National Family Caregivers Association and Forest Laboratories, Inc.

**NAMENDA®** (memantine hydrochloride) is indicated for the treatment of moderate to severe Alzheimer's disease. NAMENDA is available by prescription only. **Important Risk Information About NAMENDA**

**Who should NOT take NAMENDA?** NAMENDA should not be taken by anyone who is allergic to NAMENDA or has had a bad reaction to NAMENDA or any of its components.

**What should be discussed with the healthcare provider before taking NAMENDA?**

Before starting NAMENDA, talk to the healthcare provider about:

- The recommended dosing and administration of NAMENDA
- All of the patient's medical conditions, including liver and kidney problems or seizures disorders.
- NAMENDA has not been studied in patients with seizures.
- NAMENDA should be used with caution in patients with severe liver problems.
- In patients with severe kidney problems, the dose of NAMENDA may need to be reduced.
- All prescription or over-the-counter medications the patient is taking or planning to take
- The combined use of NAMENDA with drugs such as amantadine, ketamine, or dextromethorphan has not been studied and such use should be approached with caution.
- Certain medications, changes in diet, or medical conditions may affect the amount of Namenda in the body and possibly increase side effects.

**What are the possible side effects of NAMENDA?** The most common side effects associated with NAMENDA treatment are dizziness, confusion, headache, and constipation. This is not a complete list of side effects. Please see full prescribing information.

Please visit [www.frx.com/pi/namenda\\_pi.pdf](http://www.frx.com/pi/namenda_pi.pdf) for full Prescribing Information.