



New Alzheimer's Resource to Open

Gloria Grimes Community Resource Center to Help Those Touched by Dementia

South Los Angeles, Inglewood and the surrounding areas will soon have a community center to provide literature, counseling, support group meetings and seminars for those dealing with Alzheimer's disease and other forms of dementia.

The Gloria Grimes Alzheimer's/Dementia

Resource Center will open this spring to provide outreach and education to a community that has been ignored and underserved for too long. It will be at 8467 S. Van Ness Ave. in Inglewood

Studies show that African Americans and Latinos are as much as two times as likely to

suffer from dementia as Caucasians, are less likely to be diagnosed, or receive diagnoses in the later stages of the disease. Awareness offered by a resource within the community can improve quality of life for dementia sufferers and their families and caregivers. It can also ease the burden of medical costs on all levels.



Legal Tools

A guide to what steps to take first to protect your family when dealing with a diagnosis of Alzheimer's disease.

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Doctor's Corner

Explaining what dementia is, who gets it, the changes that come with it and what can be done to try to prevent it.

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Looking for Answers

Researchers are combining the results of studies on the neurological and cardiovascular systems in the hopes that it will improve understanding of age-related brain disorders.

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Real Estate Tips

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Keeping Track

Los Angeles is part of a monitoring program to keep those who are vulnerable from getting lost.



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PUBLISHER'S NOTE

More to Caregiving Than Meets the Eye

By BUTCH GRIMES

Looking back, it's almost as if one day I was happy and living the life I'd chosen and the next my brother and I were my mother's permanent care giver.

Of course, there was more to it than that, it started off with checking on her and my aunt daily through calls and visits and surprising them with dinner, a few times a week.

Then it progressed to being a nightmare after I realized what was really happening.

Yes, I was in denial!

Over time, I had gone from just being that pesky son that loved his mother and aunt to becoming a full-time caregiver, trying to protect his mother from hurting herself or anyone else.

My whole world was in a whirlwind, my aunt died and I found her body at her home on the floor, my mom was now in a memory care facility and I couldn't tell her that her sister had died.

I was dealing with great emotions and crucial decisions. Most days, I could hardly remember what day it was, there was so much going on.

Much of the time, for those who become care givers to a loved one with a disease such as Alzheimer's/dementia, it isn't something planned out or prepared for.

Each moment is eventful and changes are constant.

It all happened so quickly



“Over time, I had gone from just being that pesky son that loved his mother and aunt to becoming a full-time caregiver, trying to protect his mother from hurting herself or anyone else.”

— BUTCH GRIMES

that I never stopped to think about my own well-being or the feelings of sadness — even anger — I was experiencing from losing Momma and my aunt all at the same time.

Natural causes took my aunt and Alzheimer's/dementia was taking my mother, slowly, right before my eyes.

Some days I felt very confused but continued to run into the fire and never stopped.

My family has always been very close, I was always close to my parents, grandparents, aunt and brother. Being the oldest and working very closely with my brother, I was the point person to watch over the family.

But it never crossed my mind that Momma would begin showing early stages of dementia in her 70's and become totally incapacitated by her mid-70's.

Fortunately, being self employed has provided me the opportunity to give even more focus and attention to her needs.

Of course, we are never

ready for all of this financially and especially mentally. But good planning has definitely taken the edge off.

There were times I neglected my mental health, my golf game went out the window, no fish in the freezer from my fishing trips, my frequent flyer miles were expiring.

I realized I was neglecting myself and was dealing with the enormous amounts of stress in unhealthy ways, such as staying up late, cooking and eating more at night, getting less sleep despite all that running around to my mother's doctors' appointments. I even missed a few appointments of my own.

By the time I made it to my doctor, I had gained additional pounds that affected my boyish figure and my blood pressure was much higher than normal.

Some Statistics for You

According to the National Alliance for Caregiving and Evercare, 23 percent of people who are caregivers for loved ones for five or more years report their health is in

fair or poor condition. And 47 percent of working caregivers indicate an increase in caregiving expenses has caused them to use up all or most of their savings, which in turn leads to additional stress and possible health issues.

Further, stress induced anxiety and/or depression disorders are among the most commonly diagnosed mental illnesses found in those caring for a loved one with Alzheimer's disease or another dementia.

Things to Keep in Mind

■ Keep it positive; positive thought is the best weapon for a calm mind.

■ Take a break and make time off for yourself to exercise or read a book, play golf, fish, ride your bike, go hike. Have more sex!

■ Communicate with family and friends, or if that's not enough, try joining caregiver support groups.

■ Take care of your own physical health as well and schedule regular medical check-ups.

■ Ask for help; you can't do everything by yourself.

■ Remember to laugh, there is no medicine that could be prescribed that's better for a healthy mental well-being.

Take Care of Yourself

There's a good reason care givers of loved ones with Alzheimer's/Dementia have often been referred to as the second patient and if we don't look after ourselves then who will?

Every day, I kept asking myself, whosgonnatakecareofme.

My doctor appointments were a huge eye opener and turning point for me.

From that moment forward, I started taking breaks, making it to the golf driving range, running. Then I started spending more time with my close friends, talking and sorting through all the emotional baggage and crap that I'd stuffed away for the last few months.

It wasn't a quick process, but slowly things started to turn around as I started to feel more balanced.

I began to feel as though I had more control over my life, which eventually led to feeling like me again.

Hence, creating www.whosgonnatakecareofme.com and advocating daily in my new video studio for Alzheimer's/dementia with the goal to help others deal with this dreadful disease.

Take time for yourself, you are no good to anyone if you are down and out!

Don't forget, Alzheimer's can surprise you.

Alzheimer's Digest

Inspire. Acknowledge. Inform.

Alzheimer's Digest

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LEGAL TOOLS

Planning for This New Life Journey

By ANDREA VAN LEESTEN

Welcome and come into the place for discovering what legal tools you may need to care for your loved ones, when they can no longer care for themselves. It is a total surprise for you, I understand.

Let's start talking about how to get the assistance and advice that is needed even when your family members have not been prepared for this major life change.

Do you think you see a change in Mom, is it a slight one? How should you begin the conversation?

Do you think Dad is forgetful about things he knew so well? Is his balance off a bit?

Do you worry whether your parent can drive home alone? Do you worry whether your parent can handle daily tasks at home alone?

Are your loved ones doing unusual activities, like giving money to strangers or leaving the home at night to wander? Are your loved ones acting difficult or hostile about these changes when you discuss them?

Let's work together with get-

ting the family involved as soon as possible. Cooperation among family members regarding the care of the ill or incapacitated parent, aunt, uncle, brother is paramount.

The shock of realizing that your loved one has changed and the one you knew as that go-to family member is gone. He or she is not returning and you must step in, lean in and care for your loved one through the maze of this journey.

Agreements on where the loved one will live and who will provide care must occur. Does the loved one have money, how much money and where is it? If it's in a bank, who can access it to pay the bills and the health care providers?

Estimate how long the money will last, and then what is the plan?

Plan to enjoy the loved one until their death.

So, let's start right now to see what we need to do to plan for this new lifetime journey. In the coming articles, I will walk with you through your life. I will ask the tough and sensitive questions to elicit answers that can help us plan so it's right for all of us.

We are all impacted because of dementia and Alzheimer's. We all have relatives, friends, co-workers and members of our churches who are impacted and who impact us. We must fight together, let's evaluate everything.

I want to point and guide you to the legal tools you need. You will become the tool master with your family and friends.

I'm looking for that person or persons to become the master pruner, to cut out old ideas and grow new ones.

The person who is willing to clear away the brush, to clear the decaying branches and ideas that do not work for your loved one.

This is an ongoing change. Your knowledge will help you to care for the family.

We will start with simple planning tools, the durable power of attorney for health care (the health



Andrea Van Leesten

directive) and the power of attorney for assets.

The initial tools will assist you under ideal circumstances and as a first response. When those tools no longer work, it's time to modify and change.

The plan that worked in the beginning may not work over time. Therefore, agreements are necessary as the main

care givers change, age and burn out. Without planning and agreements, you may end up asking the courts for help in caring for your loved one.

Please email me with ideas and questions, my experience in this area of the law will benefit you and me as we grow through this life journey.

Let me walk through your life with you.

Andrea Van Leesten can be reached at avanleesten@vanleesten.attorney.

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ESSAY

There's a Killer Among Us

By **BRYAN F. GAINES**

Every cloud has a silver lining. This saying implies that even the worst situations are accompanied by rainbows.

I thought I was well equipped to navigate the trials and tribulations associated with Alzheimer's disease (AD). In my work as a geriatric social worker specializing in Alzheimer's care and training, I have trained thousands to understand Alzheimer's disease risk reduction, care, treatment and planning. However, when faced with identical chal-

luxury cars and a hefty savings. Unfortunately, it was also at 78 that my father was diagnosed with AD.

Contrary to some general risk factors, my father never drank, smoked or engaged in drug use. However, like many African-Americans, he lived with chronic health conditions, many of which are associated with AD. These include high blood pressure, high cholesterol, diabetes, and obesity.

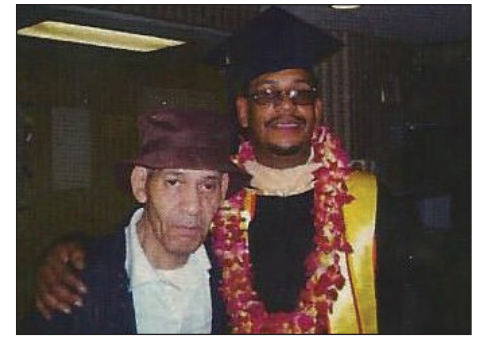
An estimated 5.7 million Americans of all ages suffer with this same disease and because of underreporting, over half of them don't even

AD treatments. Low participation rates in clinical trials make it difficult, or nearly impossible, to assess how new drugs will affect African-Americans and makes it even more difficult to resolve health disparities and inequalities.

The evidence is clear: African-Americans are not only at greater risk for AD or related dementias, they are also diagnosed at later stages and underrepresented in research and clinical trials. While bodies of work have advanced our knowledge and understanding of the impact of this disease on African-Americans, this population continues to grapple with seeking and accessing culturally appropriate programs and services to meet the needs and provide quality care for those affected by this insidious disease.

Many wealthier communities have embraced senior care by directly involving seniors in planning and developing. They have improved senior services by offering evidence-based programs that have proven to be effective and implementing better marketing strategies, resulting in greater access to programs and services; higher quality care; decreased hospitalization rates; and earlier diagnosis and treatment for dementias.

To provide culturally sensitive programs and services to the African-American community, professionals should include seniors and their families in service development and implementation. By making this paradigm shift, the African-American community can move toward the promotion of brain health education



Melvin Gaines, with the author, his son, Bryan F. Gaines.

African-Americans are at greater risk for Alzheimer's disease. They also are diagnosed at later stages and underrepresented in research and clinical trials.

lenges after my father's diagnosis, I couldn't rely on the resources that I had once referred thousands to.

For instance, as a resident of south Los Angeles, there were no services in the immediate area. In addition, services located outside of his area had long wait times or requirements (i.e. low income, five-mile radius, insurance provider within network, etc.) he did not meet.

At age 12 and with no formal education, my father departed Waco, Texas. Although he never learned to read or write, he made millions. Utilizing earnings from gambling, he purchased numerous investment properties that ultimately contributed to his success as an entrepreneur.

By 78, my father was the proud owner of a beautiful home, several

know they have AD.

African-Americans represent 12 percent of the United States population. Research suggests that environmental risk factors for AD and related dementias are different in African Americans.

Studies indicate that persons with a history of either high blood pressure or high cholesterol levels are twice as likely to develop AD or a related dementia. Those with both risk factors are four times as likely. The unique presentation of AD and related dementias in African-Americans suggests that screening and assessment tools do not address unique ethnic and cultural differences.

Additionally, African-Americans are seriously underrepresented in current clinical trials for potential

and early detection and diagnosis, reducing risks for AD and potentially decreasing its prevalence in the African-American community.

AD places tremendous burdens on families. While the physical and emotional toll of AD is devastating enough, the lack of access to culturally relevant programs and services for African-American families will result in the greatest healthcare crisis since HIV/AIDS. Aging African-Americans are at greater risk for developing AD or a related dementia than aging whites. AD is the sixth leading cause of death, and with the aging of baby boomers, a substantial economic burden on healthcare systems and the country is forecast.

Fortunately, every cloud has a silver lining. Through adequate promotion of brain health and increasing the accessibility and availability of culturally relevant programs and services for African-Americans, we too can create a rainbow in the cloud.

Dr. Bryan F. Gaines serves as assistant director of the USC Hartford Academic Center of Excellence in Geriatric Social Work at the University of Southern California (USC) and co-chair/assistant director of Advocates for African American Elders (AAAE).

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NEWS

Tool Helps Wanderers Find Their Way Home

By MARIE Y. LEMELLE

One morning, the family of 20-year-old Brandon discovered he was not in his room. It may seem normal for a young man to be out of the home; however, Brandon is an at-risk adult. He is deaf and has Autism.

Brandon was the first client on the Project Lifesaver program in Glendale, Calif. His family participated in the program because Brandon would sneak out of the house and wander away from his family when they were out in public. One of the biggest fears of families and caregivers for the vulnerable population is when wandering occurs basically without warning.

Simply, at-risk wanderers have a difficult time problem-solving and/or realizing they are missing, lost, or in danger and will not seek help. Trying to find their way back home can result in a life-threatening situation. Statistically, there are tens of thousands of vulnerable population who go missing under various circumstances.

When a loved one has a medical disorder — Alzheimer's, dementia, autism, Down's syndrome or another

memory loss disease — they are at risk for wandering away.

"When Brandon was missing for three days, luckily he was found in a park three cities away," said Glendale Police Sgt. Traci Fox.

She said it was the second time he had wandered. This time, Brandon was wearing his tracker, which is connected to the Project Lifesaver program, meant to prevent wandering — and to find wanderers faster. Project Lifesaver has more than 1,600 participating agencies throughout the world, including in all 50 states.

The program's small transmitter is worn on the wrist or ankle and emits an individualized frequency signal. If an enrolled person goes missing, the caregiver notifies the Project Lifesaver agency, and a trained emergency team responds to the wanderer's area.

"After about an hour of search on the ground, we put my partner up in the helicopter to try to get a signal from the device," Fox said. "Within seconds from lift off he got a signal that directed them to the wash area in Burbank. It took officers a little more than 30 minutes to access the wash



Glendale Police Department
Glendale Police recently found Brandon, a young, deaf man with autism, after he wandered away. His family had enrolled in Project Lifesaver, enabling his tracking.

area and locate Brandon who was only wearing boxers and a light T-shirt."

He was barefoot and standing in 12 inches of water. "It was a very cold morning and he would have been seriously injured had he not been located quickly," said Fox, who helped start Glendale's program in 2015.

She has a nephew who is autistic and her grandmother had dementia. Autism, like Alzheimer's, can impair memory and cognitive function. Wandering is a common denominator.

According to the International Association of Chiefs of Police (IACP) Alzheimer's Initiative, it is projected that more than 13.8 million people will be living with Alzheimer's by the 2050. As the disease progresses in individuals, nearly 60 percent will wander at least once. Many will wander more often. Alzheimer's is the

RESOURCES FOR CAREGIVERS

- You can call the Alzheimer's Association helpline at 800-272-3900 for 24-hour support.
- To learn more about using Project Lifesaver to track loved ones who may wander away from home, go to <https://projectlifesaver.org>.
- For an example of a voluntary registration application and questionnaire, visit www.theACP.org/alzheimers.

most common type of dementia. It was clear to the IACP, the world's largest nonprofit membership organization of police executives, that they needed volunteer registries to assist with locating missing persons. Such registrations enable law enforcement agencies to obtain critical information before an emergency.

There are a number of triggers that can cause wandering, such as confusion, old memories and anxiety. As memory loss and cognitive disorders progress, so will the likelihood of a person walking away on their own.

Fox said of Brandon: "I can honestly say we would have never found him in this wash area had it not been for this device. Watching the reaction from his family when we brought him home had all of the officers in tears."

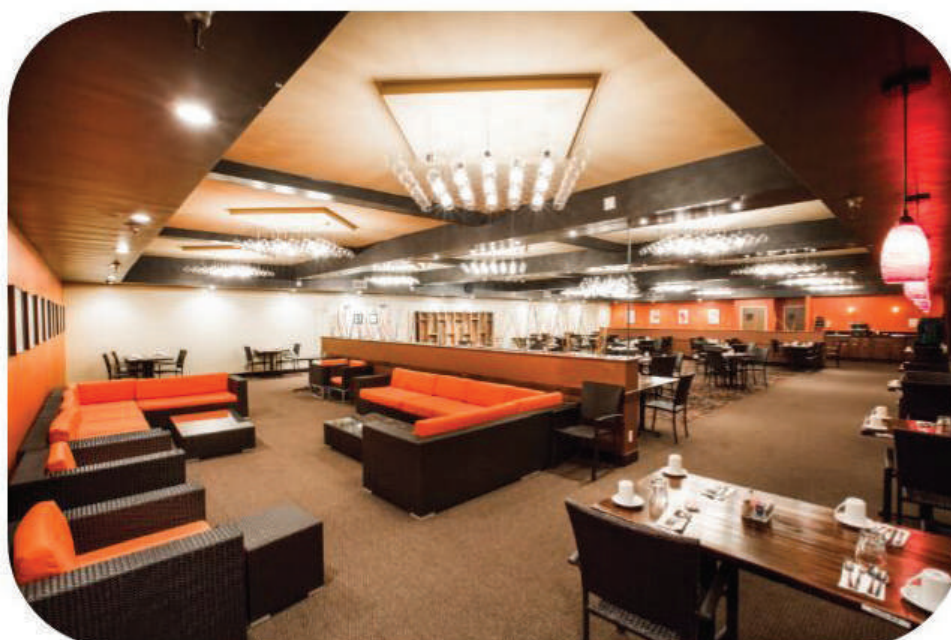
Marie Y. Lemelle, MBA, is a public relations consultant and the owner of Platinum Star PR and can be reached on Twitter @PlatinumStar or Instagram @PlatinumStarPR. Send questions or stories related Alzheimer's, dementia or any other form of memory loss to info@platinumstarpr.com.

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FEATURE



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Being a caregiver to a loved one who has Alzheimer's disease or another form of dementia is hard. But there are ways to make it a little easier.

8 Helpful Tips for Caregivers

Millions of unpaid caregivers may be putting their own long-term health and security at risk when providing support for relatives or friends who need help.

Research from the nonprofit Transamerica Institute finds that 69 percent of caregivers gave little or no consideration to their own financial situation when deciding to become a caregiver, and 55 percent say their own health takes a back seat to that of the person they are caring for.

"Caregivers play a vital role in our society," said Catherine Collinson, president of Transamerica Institute. "It is imperative that we raise awareness of the issues and risks they face and offer meaningful solutions that can help them better manage their responsibilities."

If you are among the growing number of family caregivers, these eight tips can help you maintain your own well-being while caring for your loved one.

1. Take care of your own health and wellness. Your physical health is important, too. Eating

well, getting enough sleep, exercising and taking breaks can all help increase your energy, reduce stress and improve your mood. Remember your own medical checkups and let your doctors know of any changes to your health.

2. Split your responsibilities. Share caregiving with family members and friends, or seek out community resources, such as adult day programs or transportation services. Ask for help with your own day-to-day responsibilities; it may be easier to find help with those activities than with caregiving.

3. If employed, strive to stay in the workforce. Consider all your options before reducing hours, job responsibilities or quitting. Taking time out of the workforce could make it difficult to return at the same level of pay.

4. Ask if your employer offers programs or benefits to help caregivers. Many employers offer the ability to work remotely, flexible hours and compressed workweeks, which can make it easier to juggle

work and caregiving. Ask if your employer offers an Employee Assistance Program (EAP), which may include referrals to services.

5. Learn about the Family and Medical Leave Act (FMLA). A federal law requires covered employers to provide their eligible employees with protected, unpaid work leave for qualified medical and family reasons. It can help employees balance their job with caring for a family member with a serious health condition. To learn more about FMLA and whether you are eligible, visit dol.gov/whd/fmla, and consider consulting your employer's HR department.

6. Keep your own long-term financial security top of mind. As a caregiver, it is especially important to budget, keep track of expenses and save for the future. Save for retirement either through your employer's 401(k) or similar plan, or in an IRA. Avoid taking loans or early withdrawals from those accounts.

7. Explore programs that provide financial assistance. Some

states have programs for Medicaid recipients to help pay nonprofessional caregivers, such as Cash & Counseling and In-Home Supportive Services (IHSS). Veterans may be eligible for the Veterans Directed Home and Community Based Services (VD-HCBS) program. If the care recipient has a long-term care insurance policy, find out if it enables you to receive payments and what you would need to receive payments. You may also be able to claim the care recipient as a dependent for tax purposes.

8. Stay patient. Caregiving takes patience. Relationships often change when the need for caregiving arises — from adult children reversing roles with their aging parents, to shifts in roles between spouses or partners. Patience is even more important when the care recipient has cognitive decline.

Transamerica Institute's Comprehensive Guide for Caregivers has more resources. It can be downloaded at www.transamericainstitute.org/caregivers-research. — NAPSI

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RESEARCH

Initiative Could Unlock Mysteries of Dementia

Scientists are contemplating important questions about health, mind and age: Could your blood hold the molecular secrets to a fountain of youth, preventing age-related brain disorders? Are brain aging and Alzheimer's disease caused by a failure of interconnected systems, triggering a domino-like cascade of disease? Can targeting the red blood cells and blood vessels jointly keep your brain healthy and prevent dementia?

The Problem

As people live longer, Alzheimer's and other age-related dementias are on the rise, projected to reach more than 75 million people worldwide by 2030. To date, no effective therapy has been developed for these disorders, which are not only deadly but exact a

high financial and emotional toll on society.

The Research

To find solutions, three large-scale research teams are exploring those questions as part of an initiative to merge research of the brain and the blood vessels to develop new understanding of—and, ultimately, better preventions and treatments for—age-related brain disorders such as Alzheimer's disease.

The Scientists

To help, the American Heart Association, the world's leading voluntary organization focused on heart and brain health, and the Paul G. Allen Frontiers Group, a division of the Allen Institute, launched the \$43 million research project to bridge the

science of vascular and brain health through revolutionary, out-of-the-box thinking. Additional supporters include the Oskar Fischer Project and the Henrietta B. and Frederick H. Bugher Foundation.

The three teams, headquartered at the Salk Institute for Biological Studies in La Jolla, Calif.; Stanford University School of Medicine in Stanford, Calif.; and University Hospitals Cleveland Medical Center in Cleveland, Ohio, respectively, work to develop new solutions to the urgent problem of age-related cognitive decline.

The researchers are:

- Rusty Gage, Ph.D., a neuroscience researcher and the president of Salk, who will lead an eight-year project looking into new targets for therapeutic research and biomarkers of early-stage cognitive decline.



NAPSI

■ Tony Wyss-Coray, Ph.D., a professor of neurology at Stanford, who will lead a four-year project studying how changes in the immune system affect cognitive health.

■ Mukesh K. Jain, M.D., a cardiologist at University Hospitals Cleveland Medical Center and Professor of Medicine at Case Western

Reserve University, who will lead a team of investigators on a four-year project investigating whether targeting red blood cells and blood vessels can prevent dementia.

The Hope

The research could yield transformational discoveries to better detect, treat and prevent cognitive decline.

— NAPSI



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www.whosgonnatakecareofme.org

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If you are experiencing a current emergency, call 911. This information came from the NAMI Los Angeles website.

Crisis Team Hotlines

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S.M.A.R.T. Team, Monday – Friday only, 213-996-1300
Police Officer responds with Mental Health Worker, 310-966-6500
PMRT (Pet Team) Psychiatric Mobile Response Team, 310-482-3260
MEU – Mental Health Evaluation Unit – LAPD, 213-996-1300
MET – Mental Health & Sheriff for LA County, 800-854-7771
Santa Monica Police, 310-458-8491
Local Police West L.A. Captain, 310-575-8400
TYH-hearing impaired, 562-651-2549
Suicide Prevention Hotline, 310-391-1253
West L.A. Mental Health Center – Ed Edelman, 310-966-6500
San Fernando Valley Mental Health Center, 818-832-2586
Exodus Recovery, Inc. (no insurance), 310-253-9494

Other Resources

Homeless Assistance, 310-399-6878
Family Advocate with the Department of Mental Health, 213-738-3945
Suicide Prevention Hotline, 310-391-1253

Source: <https://namila.org/crisis-hotlines-hospitals/>

DOCTOR'S CORNER

Understanding a Dementia Diagnosis

By SHERRIL RIEUX, M.D.

Dementia is the loss of cognitive function. Meaning you lose the ability to think, remember and reason. It varies from mild to severe.

Approximately half of all those 85 years and older have some level of dementia.

Dementia is the broad term of which Alzheimer and vascular dementia are subcategories.

The dementia we see in middle age adults is generally caused by frontotemporal disorders.

There are five such subcategories distinguished by radiological findings such as Lewy Bodies, strokes etc, genetic testing and neuro-psychological testing.

Physicians use several tools to

diagnose dementia.

The most important is a medical history from the patient, family or caregiver and a physical exam.

A priority of the exam is to confirm another treatable disease is not being overlooked.

In addition, there are radiological test, genetic test and pathological test. There is not one single blood test to diagnose dementia.

Dementia is a progressive disease, meaning it gets worse with time. As of today, the current medications for dementia may delay progression to a small degree.

Physicians and medical providers strive to prevent dementia. Controlling blood pressure and diabetes, physical exercise, healthy sleep, drinking water and doing brain ex-

ercises in combination do just that.

Prevention looks like this:

- Self-monitoring blood pressure and knowing your A1c, being compliant with medications and follow up with your doctors are important.

- The goal for physical exercise is 60 minutes per day. Walking, line dancing and Pilates are all beneficial. Moving throughout the day is most important.

- Seven to eight hours of sleep per night. Allow your brain to rest and help your body prepare for the next day.



Sherril Rieux

- Drinking at least eight glasses of water per day cleans out toxins and feeds your organs, including your brain.

- Brain exercises such as puzzles, word games and card games all help to stimulate neurons in the brain to work faster and better.

Dementia is not part of the normal aging process. Yet we are seeing

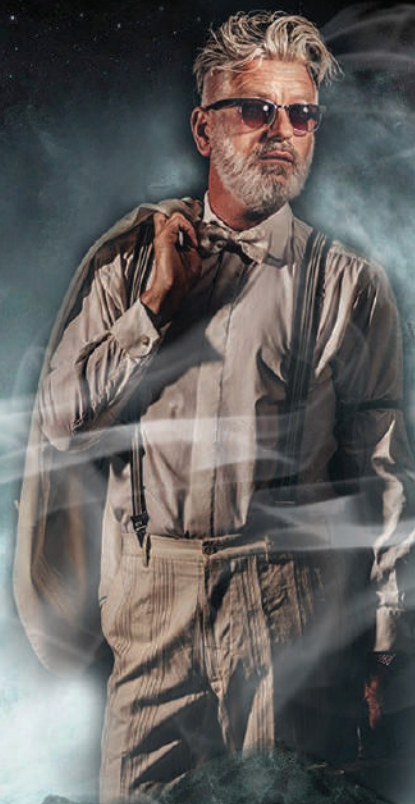
more and more of our families, friends, and communities suffering with dementia.

The more we know, the better able we are to prevent, recognize and care for those around us.

THE JOURNEY

ALZHEIMER/DEMENTIA

with Butch Grimes



*Take care of your Momma,
Daddy, Uncles & Aunts.*

*They need you **NOW** more than ever!*

www.whosgonnatakecareofme.com

REAL ESTATE TIPS

'It's Time to Talk About It'

Don't Be Afraid of Having An Important Conversation

By LISA PUERTO

As our largest demographic ages right before our eyes, it is with a solemn urgency that we make planning for the future a priority.

An estimated 10,000 Americans turn 65 every day, and factoring their health and retirement income, we have a dire need to be paying attention to what is happening to our senior citizen community.

As a millennial real estate professional with a platform founded on teaching the youth and young adults real estate literacy, I have come to realize the intergenerational conversations with our predecessors are just as important.

Any life event can trigger a real estate need: new job; job loss; relocation; divorce; marriage; new baby; college graduation; getting older and

needing to downsize.

A downsize may involve relocating to a smaller property, maybe one with no stairs. Or maybe transferring ownership to the next gen? What does it look like to pass the torch of property ownership to the next generation, whether it is X, Y or Z?

Well, that can take on many forms, depending on the needs of the family, who may decide to sell or not.

This is a conversation that can and should happen before it's too late.

As in too late, when grandma or grandpa no longer have sound mind or health to discuss their desires or plans for their personal property, or even multiple properties.

As in too late, when mama and papa no longer can take care of themselves, much less each other.

Our real estate team is a huge advocate of estate planning and transferring property into a living trust.

Certainly, I will say that I am not an attorney, so please consult a legal professional when reviewing or deciding on a trust.

With that being said, I make it a point to my interns and peers to advocate for overdue conversations with family members who own real estate.

Now is the time to sit at the dinner table to plan out what's going to happen when And being very matter-of-fact, we know the "when" is an inevitability.

As real estate professionals serving our local communities, too often we see the detrimental effects in loss of wealth transference when the conversations of estate planning never happen.

Debates and arguments over what to do with the matriarch's — or patriarch's — home are common.

To lessen the tension,

consider what to say beforehand. A meeting should include a checklist of items to be discussed, and everything most likely won't be decide in one day. In fact, there should be serious considerations about what happens

next. For example, sitting at the table with big mama and papa should include but not be limited to the following topics:

- Do they have life insurance? What type of policy is it and is it still active? Who are the beneficiaries? *Note: Proceeds from a life insurance policy can assist with paying off any existing mortgages on the property.*
- Where are the mortgage statements (if any), property tax bills, and property insurance declaration page? These should be easily



Lisa Puerto

accessible, and if not, contact a real estate professional to assist with accessing some of these documents and records:

- Is there a will or living trust in place? *Note: A will is contestable in court and subject to probate code,*

while a living trust (revocable/irrevocable) is not subject to probate and acts as its own entity.

- Is there a family accountant with whom you can discuss tax implications of property transfers and sales?

This list serves as a start. If support is needed, bringing in a team of professionals with references may be a wise decision. Professionals can advocate on your behalf and one be of your greatest assets during this sensitive time of passing on a legacy to the next generation.



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*For more information, evaluations or placement, please contact:
 James Buckman, 323.573.4554 or Lori Buckman, 562.455.8518*

SUPPORT GROUP DIRECTORY

For caregivers, finding support and meeting others who understand their struggles is important. This information comes from Alzheimer's Los Angeles, an organization dedicated to supporting families and caregivers.

According to the group's website, www.alzheimersla.org, "Our Support Groups are free, led by trained group facilitators, completely confidential and are held throughout Los Angeles County in multiple languages."

TELEPHONE SUPPORT GROUPS

All service areas YO, FT
Facilitator: Dr. Linda Ercoli
Facilitator: Yael Wyte
310-794-3914

SANTA CLARITA VALLEY Newhall

■ Santa Clarita Senior Center **CG, ***
Facilitator: Etta Martin
661-259-9444
Facilitator: Monique Castillo
818-830-4835
■ Oakmont of Santa Clarita **CG, ***
Facilitator and contact:
Mary Dembkowski
661-993-3240
Facilitator: Deborah Dicorradro
661-993-2004

SAN FERNANDO VALLEY Agoura Hills

■ Meadowbrook Senior Living **CG, ***
Tami Podell
818-357-1123

Burbank

■ Burbank Joslyn Senior Center **CG, Spanish, ***
Francisca Reynoso
818-398-1475
■ Leeza's Care Connection **AC, EP, ***
Contact: Wendy Saltzburg
818-847-3686

Calabasas

■ Silverado Senior Living Calabasas Memory Care Community **CG, ***
Jennifer Watson
818-317-3421

Canoga Park

■ Canyon Trails Assisted Living and Memory Care **CG**
Dinora Toj
323-930-6247

Encino

■ Hope Connection **B**
Jo Christner
818-788-4673

Glendale

■ Glen Park Healthy Living **CG, ***
Facilitator: Annie Cardillo
818-242-9000
Facilitator: Paula O'Sullivan
818-296-4097

Granada Hills

■ Aegis Living of Granada Hills **CG**
Facilitator: Brittany Kramer
Contact: Ron Borzcon
818-776-1183

North Hollywood

■ Private Home **CG, Spanish, ***
Nadia Cantuña
818-720-4482

Northridge

■ Brookdale Northridge **CG**
Gabriel Diaz
818-886-1616
■ Somerford Place of Northridge **CG, ***
Jennifer Watson
818-317-3421

Pacoima

■ Little Tokyo Service Center – Japanese-American Community Center **CG, English, ***



Alisa Bledsau

Alisa Bledsau, 47, wanted to be a nurse as a child. After initially becoming a preschool teacher, she decided to go back to school for her CNA license.

She has since worked at several senior living facilities in memory care units, where she often becomes very attached to residents. In 2016, Bledsau became a caregiver at Vista Del Mar Senior Living in Long Beach. She takes residents shopping, does their laundry, cooks and does other daily activities with them, even on her off days. She wants to have her own boarding care facility one day.

Bledsau says, "I love making my seniors happy, just to see the smiles on their face makes me happy."

Facilitator: Isabelle Miyata
Contact: Lois Okui
818-899-1989

Panorama City

■ Kaiser Permanente **CG**
Lisa Luna
818-788-5862

Reseda

■ Jewish Home for the Aging – Eisenberg Village **EP, ***
Jennifer Watson
818-317-3421

■ Jewish Home for the Aging – Fountainview **CG, AC, S, ***
Facilitator: Jennifer Watson
Contact: Susan Leitch
818-757-4490

Sylmar

■ LA Caregiver Resource Center Lake View Terrace Library **CG**
Lucila Torres
855-872-6060

Tujunga

■ Verdugo Hills Family YMCA **CG, ***
Facilitator: Bernice Sanders
Contact: Gaby Najera
818-583-4744

Van Nuys

■ ONEgeneration Adult Day Care **CG, ***
Denise Kee-White
818-708-6376

West Hills

■ Meridian Senior Living **CG**
Vana Pensuriya
818-264-0970
■ Sunrise Senior Living **CG**
Stephanie Bien
818-701-9550
818-991-8282

Woodland Hills

■ Woodland Hills Caregiver Group **CG, EC***
Karin Marin
818-734-9991
■ The Commons at Woodland Hills **CG, AC, ***
Jennifer Watson 818-317-3421

SAN GABRIEL VALLEY Glendora

■ La Fetra Senior Center **CG, ***
Jill Bakker
626-774-1419

Pasadena

■ Alzheimer's Los Angeles Memory Club at Huntington Hospital **EP, EC, Early Stage, ***

Kristen Tachiki
626-397-8145

■ Alzheimer's Café / Pasadena Senior Center **CG**

Facilitator: Jenny Delgado
Facilitator: Renee Concialdi
Facilitator: Amber Bolanos
626-584-8130

■ CAPS Adult Day Care Center **CG, ***
Mimi Brown
626-351-5427

■ Pasadena Senior Center **CG**
Mei-chi Kuo
213-821-6920

■ Terrace at Park Marino **CG, ***
Carolyn Wong
626-798-6753 x303

Rosemead

■ California Mission Inn **CG**
Yvonne Kuo
213-821-6919

METRO LOS ANGELES Beverly Hills

■ Nessah Synagogue **CG, Farsi, ***
Nancy (Nahid) Rafii
310-874-5110

■ Sunrise Senior Living Beverly Hills **CG**
Ann White
310-247-4479

Los Angeles

■ Silverado Senior Living Beverly Place **CG, ***
Facilitator: Thomas Baird
323-825-4304

■ Male Caregiver's Support Group – Alzheimer's Los Angeles **CG, M, ***
Dave Sitzer
213-293-9408

■ Adult Children Support Group – Alzheimer's Los Angeles **AC, YA, ***
Zina Paris
323-930-6212

■ Alzheimer's Los Angeles Memory/ Grad Club/Alumni Club **EC, EP, EO, ***
Alicia Villegas
323-930-6289

■ APHCV – Los Feliz Health Care

Center **CG, Tagalog**

Perla Santos
323-644-3880 x341
■ Little Tokyo Service Center – St. Francis Xavier Chapel **CG, Japanese & English, ***
Kiyoko Kaneda
213-473-3035

WEST LOS ANGELES

Culver City

■ Culver City Senior Center **CG, ***
Zina Paris
323-930-6212

■ Kaiser Permanente Culver Marina Medical Office **AC, ***
Ed Holly
310-915-4567

■ Meridian Culver City **CG, ***
Reggie Rodriguez
559-349-3466

■ Kaiser Permanente – West LA Medical Center **CG, ***
JB Saunders
323-857-3784

■ OPICA Adult Day Health Center **CG, S, AC, \$**

Facilitator: Anne Galbraith
Facilitator: Elizabeth Lira
310-478-0226

■ St. Sebastian Catholic Church **CG, Spanish**

Facilitator: Dr. Xavier Cagigas
Facilitator: Enrique Gracian
310-825-4304

■ West LA VA Medical Center – for Veterans or Caregivers of Veterans **CG**
Jessica Alva
310-478-3711 x41652

Santa Monica

■ UCLA Medical Center Santa Monica **CG, LB**

Facilitator: Dr. Kathleen Tingus
Facilitator: Catherine Jones
Contact: Monica Moore
310-794-3914

■ Sunrise of Santa Monica **CG, ***
Facilitator: Julie Liker
Contact: Denese Taylor
310-922-5659

■ WISE & Healthy Aging **CG**
Facilitator: Nick Eisner (a.m.)
Facilitator: Blaine McFadden (p.m.)
Contact: Phyllis Amaral
310-394-9871

■ West Los Angeles
■ Hope Connection **B**
Jo Christner
818-788-4673

Westchester

■ Westchester Senior Center **CG, ***
Loli Ramezani
310-649-3317

Westwood

■ Belmont Village of Westwood **CG**
Dena Schwimmer
323-451-9313

■ UCLA – Mary S. Easton Center / Alzheimer's and Dementia Care Program Support Group **CG, ***
Facilitator: Barbara Hament
Facilitator: Monica Moore
310-794-3914

SOUTH LOS ANGELES

Los Angeles

■ National Council of Negro Women Building **CG, FB**
Facilitator & Contact: Jeanie Harris
Facilitator: Sharon Melancon
323-296-2975

■ St. Paul's Presbyterian Church **CG, FB, ***
Facilitator: Lois Hines
Facilitator: Andrea Michelle Bracken
323-295-2062
323-637-3170

■ USC Davis School of Gerontology **CG**
Jenny Peterson Grace

SUPPORT GROUP DIRECTORY

855-872-6060
 ■ First AME Church **CG**
 Mrs. Bobbe Akalona
 855-872-6060

EAST LOS ANGELES

Cerritos
 ■ Cerritos Senior Center **CG**
 Lisa Miyahata
 562-916-8550

Downey
 ■ Remita Health **CG**
 Elisa Gaytan
 562-904-6777

Huntington Park
 ■ Alzheimer's Los Angeles –
 Huntington Park Public Library
CG, Spanish, *

Angie Moran
 323-859-8810
CG, Spanish, *
 ■ Alzheimer's Los Angeles
CG, Spanish, *

Dinora Toj
 323-881-0586
Montebello
 ■ Beverly Hospital Women's Care
 Center **CG, ***

Facilitator: Sandy Acosta
 Contact: Alice Baldwin
 800-618-6664
 323-725-5032

Santa Fe Springs
 ■ Gus Velasco Neighborhood **CG, ***
 Lucila Torres
 855-872-6060

Whittier
 ■ Oakmont of Whittier **CG**
 Vickie Pearson
 562-693-8222
 ■ Whittier Place Senior Living **CG**
 Tina Hernandez
 714-856-3909

SOUTH BAY

Gardena
 ■ Southbay Caregiver Support Group
CG, Japanese & English, *
 Akiko Takeda
 310-819-8659

Inglewood
 ■ Rogers Park **CG, ***
 Linda Peterson
 310-412-4368

Long Beach
 ■ Brittany House **CG**
 Colleen Rozatti
 562-421-4717
 ■ Faith Presbyterian Church **CG, ***
 Terri Furlow
 562-427-8048

■ Long Beach Memorial Medical
 Center **CG, ***
 Facilitator: Jim Kelly
 Contact: Dinora Toj
 323-930-6247

■ Namaste Center for Spiritual Living
 Paty Piar **CG, ***
 562-795-5762

■ Skills4Care **CG, ***
 Facilitator: Paty Piar
 Contact: Robert Skidmore
 562-413-1061

■ Grace First Presbyterian Church **CG**
 Yvonne Kuo
 855-872-6060

Manhattan Beach
 ■ American Martyrs Church
 & Homewatch Caregivers **CG**
 Facilitator: Dick Williams
 310-292-0996

Palos Verdes Peninsula
 ■ Palos Verdes Peninsula Center
 Library **CG, ***
 Lauren Spiglanin
 310-383-1877

■ Mary and Joseph Retreat Center **CG**
 Lucila Torres
 855-872-6060

Redondo Beach

MISSING PERSONS

To have a missing loved one featured in this section, call Alzheimer's Digest at 310-693-4681 or email info@alzheimersdigest.info.

■ Beach Cities Health District **CG, ***
 Facilitator: Rosalie Rapas
 Contact: Officer of the day
 310-374-3426 x138

■ Beach Cities Health District – Mem-
 ory Club **CG, EP, EC, ***
 Facilitator & Contact: David Hart
 Facilitator: Tara Guden
 310-792-8666

■ The Neurobehavioral Healthcare
 Center **CG, ***
 Dr. Lauren Keats
 310-855-3288

San Pedro
 Harbor Terraces Assisted Living **CG, ***
 Lauren Spiglanin
 310-383-1877

■ The Salvation Army Sage House
 Adult Day Care Center **CG**
 Sherrie Similton
 310-832-6031

Torrance
 ■ Always Best Care **CG, ***
 David Hart
 310-792-8666

■ Family Connect Memory Care **CG, ***
 Lauren Spiglanin
 310-383-1877

INLAND EMPIRE

Apple Valley
 ■ Valley Crest Memory Care **CG**
 Renee Savage
 760-242-3188

Big Bear Lake
 ■ Senior Citizen Center of Big Bear
 Valley **CG**
 Sokura Solario
 909-584-0323

Chino
 ■ Pacifica Senior Living Hillsborough
CG
 Facilitator: Ahley Goodley
 Facilitator: Jennifer Helboorn
 909-386-6068, 909-548-2100

Chino Hills
 ■ Pacifica Senior Living Chino Hills
CG, *
 Lloyd Mustin
 909-270-0866

■ Chino Valley Community Church
CG, *
 Facilitator & Contact: Lloyd Mustin
 Facilitator: Lisa Laufer
 909-270-0866

■ Oakmont Senior Living **CG, ***
 Lloyd Mustin
 909-270-0866

Claremont
 ■ Claremont Joslyn Senior Center
CG, *

Facilitator: Angelika Pittet
 Facilitator & Contact: Lydia
 Bouroumand
 909-621-9900 x238 or 909-399-5488

■ Claremont Place **CG, ***
 Facilitator: Angelika Pittet
 Facilitator: Lydia Bouroumand
 Contact: Tricia Elliker
 909-447-5259 or 909-399-5488

■ Claremont Club **CG, ***
 Laura Van Dran
 909-921-1033

■ Pilgrim Place Health Services **CG, ***
 Laura Van Dran
 909-921-1033

■ Sunrise of Claremont **CG, ***
 Lloyd Mustin
 909-270-0866

Corona
 ■ Brookdale Corona **CG**
 Joy Rivera
 951-898-6991

Loma Linda
 ■ Linda Valley Senior Living **CG**
 Antonia Lopez
 909-799-3117

Mentone
 ■ Rose Garden **CG**
 Justina Cardenas
 909-794-1040

■ Welbrook Senior Living **CG**
 Michelle Thompson
 951-200-3110

Rancho Cucamonga
 ■ Alzheimer's Los Angeles & Home
 Instead Senior Care **CG, ***
 Sharon Jones
 909-476-9030

■ Sunlit Gardens **CG**
 Kelli Garfield
 909-215-2142

Redlands
 ■ Blossom Grove **CG**
 Mechelle Alona
 909-335-6660

■ Plymouth Village Retirement Com-
 munity **CG, ***
 Connie Garrett
 909-793-1233 x1620

■ Somerford Place Assisted Living **CG**
 Debra Walls
 909-793-9500

Riverside
 ■ Care Pathways **CG**
 Karen Armijo
 951-867-3800

Jill Johnson-Young
 951-360-1616
 ■ Sunrise Senior Living – Canyon
 Crest **CG, ***

Facilitator: Paul Velen
 Contact: Mary-Ellen Taber
 951-686-6075

San Dimas
 ■ Brookdale Senior Living **CG, English
 & Spanish, ***
 Maria Monedero
 909-394-0304 x233

Upland
 ■ Oakmont of San Antonio Heights
CG, EO, AC, S
 Anthony Villegas
 909-981-4002

■ St. Anthony's Catholic Church **CG, ***
 Laura Van Dran
 909-921-1033

Victorville
 ■ Home Instead Senior Care **CG**
 Sharon Jones
 760-843-5655 or 909-476-9030

■ Sterling Commons **CG**
 Debra Newlin
 760-245-3300

SOUTHWEST RIVERSIDE COUNTY

Beaumont
 ■ Beaumont Senior Center (Albert
 Chatigny) **CG**
 Veronica Ramos
 909-799-3117, 909-266-2672

Hemet
 ■ Desert Hills Memory Care Center
CG, *
 Facilitator: Jane Farmer
 Contact: Chantelle Hudson
 951-652-1837

Sun City/Canyon Lake
 ■ Canyon Lake Community Church
CG
 Facilitator: JoAnn Wickerath
 Contact: Beverly Haney
 Facilitator: 951-679-7736
 951-244-1877 x200 (church)

Sun City/ Meniffee
 ■ Care Connexus Adult Day Care **CG**
 Jim Slater
 951-509-2500

Temecula
 ■ Rancho Community Church **CG**
 Facilitator: Sylvia Garcia
 Facilitator: Lyn Euzenas
 951-303-3986

KEY TO ABBREVIATIONS

AC Adult Children
B Bereavement
BS Bereavement Spanish
CG Caregivers (General)
DS Caregivers of Down Syndrome
Persons with Dementia
EC Early Stage Caregivers
EP Early Stage Persons
EO Early Onset Persons
FB Faith-Based
FT Frontal Temporal Caregivers
H Huntington's Disease
LB Lewy Body Dementia
Caregivers
LGBTQ Lesbian, Gay, Bisexual,
Transgender, Questioning
M Male Caregivers
P Parkinson's Caregivers
PWD Persons with Dementia
S Spouse
VD Stroke Survivors
YA Young Adults of PWD
YO Young On-Set (EO) Caregivers
\$ Inquire about fee/donation
*** Trained by Alzheimer's Los**
Angeles



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