Newsletter

Contents

Director's Letter———2
Staff Spotlight——3
Senior Scholars Club Event——4
Interview Series — 5
Research studies 7
Conference8
Latest Research News———9
Cognitive Reserve10
New Board Member11

Caregiver Stress

strategy for self-preservation among caregivers. They usually endure the burdens of caregiving without much complaint, but at high cost to their mental and physical health and at a cost to the care recipient. According to studies on caregivers of dementia patients, caregivers are at a higher risk for cardiac problems, auto-immune diseases, depression and even death. For the dementia patient, caregiver burden results in earlier nursing home placement.

But caregivers can break the silence of their suffering and reduce the stress they feel. The first step is for the caregiver to recognize the stress and admit that help is needed. For caregivers of patients with dementia, organizations such as the Alzheimer's Association can provide education about signs of caregiver stress, including insomnia, depression, anger, exhaustion, resentment, and denial or minimization of the care recipient's problems. Another way to break the silence is to reach out for help. Research has shown that support groups are excellent ways to gain knowledge and reduce caregiver stress. For those who can't leave the house, there are telephone support groups and support groups via the internet.

Reaching out to enlist the help of others who can share the caregiving burden is essential. Many caregivers ask, "How do I know when it's time to bring in help?" The answer is often, "If you are thinking about it, it's time." For patients with

Self-Care for Caregivers: Breaking Your Silence

By Linda Ercoli, Ph.D.

dementia or those with severe medical problems, outside skilled professional caregivers are often needed. If someone can't afford paid caregivers, other options are family members, friends, community organizations, the VA for veterans, local houses of worship, and community programs, such as adult day care. It is also important to find ways to get respite or short breaks every day, such as taking time out to read, meditate, exercise, or talk to a friend on the phone. Keeping in mind the purpose and positive aspects of caregiving is also helpful—for some, this means feeling good about providing care and savoring the positive feelings when spending with the care recipient. For caregivers who are under stress that is not alleviated by reaching out or taking breaks, it may be time to talk to the doctor or a professional about psychotherapy or possibly medication if indicated.

In conclusion, being a caregiver can be a lonely job, but it doesn't have to be. If you are a caregiver struggling with exhaustion, sadness, anger or low quality of life—don't keep it to yourself. Break the silence and reach out.

Linda Ercoli, Ph.D. is an Associate Clinical Professor and the Director of Geriatric Psychology in the Department of Psychiatry and Biobehavioral Sciences at the UCLA Semel Institute. She has expertise in the neuropsychology of aging and dementia. Her current research interests include early detection and prediction of dementia.



UCLA Longevity Center

Many of our UCLA Longevity Center programs help middleaged and older adults live a healthier lifestyle to protect their brains and bodies as they age. Compelling scientific

evidence indicates that each of us has a certain amount of control that helps us to live better and longer. Our memory training and memory fitness classes are now available in more than a dozen states throughout the U.S., and beginning this year, the classes will be taught in Canada as well. Our UCLA Alzheimer's Prevention Project, a research study made possible by a generous gift from Carol and Jim Collins, was launched this spring and will test whether a cost-effective lifestyle intervention will improve cognitive abilities after several months and save health care dollars over the years. This program is designed for adoption by other health care systems as a way to motivate greater numbers of individuals to engage in healthy lifestyles to protect their brain health and potentially delay the onset of Alzheimer's symptoms. While we're waiting for the results of these and other studies, the following are some reminders of what all of us can do right now to keep our brains healthy, young and in top form.

Reduce Stress. It's not possible to completely eliminate stress from our lives but we often can manage it more effectively to limit its negative health impact. Meditation, deep breathing, or getting a good night's sleep have been shown to improve our response to stress, as well as mood, memory and brain function. Stress levels during middleage predict the degree of brain shrinkage and blood vessel scarring measured later in life, and people prone to stress are twice as likely to develop Alzheimer's compared with people who have better coping skills. Dr. Helen Lavretsky has shown that a daily ten-minute meditation session has been shown to yield significant brain benefits.

Play Brain Games. Although too much smartphone and computer use can be distracting and thus worsen cognitive abilities, new research is showing that some brain games can actually improve cognitive abilities. Dr. Karen Miller has found that computerized games such as Dakim Brain Fitness can teach memory methods that help compensate for senior moments. Another program that is similar to the old game of Concentration has been shown to improve working memory, a form of short-term memory that holds information in mind just long enough for us to use it. The results indicate that playing this kind of game improves fluid intelligence, which helps us to solve complex problems.

Feed Your Brain Well. The current epidemic of obesity and overweight, is increasing the world-wide rates of Alzheimer's disease, but recent studies indicate that that when people lose weight, their memory abilities improve within months, and those benefits can be sustained for years. A brain healthy diet also emphasize omega-3 fats from fish, which protects the brain from excess inflammation. Green leafy vegetables and colorful fruits protect the brain from oxidative stress that causes wear and tear on neurons as they age. A brain healthy diet also minimizes consumption of refined sugars and processed foods that increase the risk for type 2 diabetes.

Get Physical. Whether it's brisk walking, swimming, cycling, or anything that gets your heart pumping oxygen and nutrients to your brain cells, engage in these activities to improve your brain health and protect against age-related cognitive decline. Cardiovascular conditioning produces brain derived neurotrophic factor or BDNF, which stimulates growth of neuronal branches. A brisk 20 minute walk each day has been shown to lower an individual's risk for developing Alzheimer's disease, and strength training provides an additional brain benefit.

Director, UCLA Longevity Center

Welcome new staff, Michelle Moreno

he Longevity Center is pleased to welcome Michelle Moreno as the new Administrative Assistant. Michelle comes to us after working in the Department of Medicine at UCLA and in the Division of Dermatology at the David Geffen School of Medicine.

Michelle's role is to help coordinate and schedule the administration of neuropsychological testing within the Longevity Center and the Division of Geriatric Psychiatry. These assessments involve the examination of mental or cognitive abilities. Michelle also assists with the Longevity Center memory education programs, including Memory Care. We are fortunate to have such an outstanding individual as part of the team and look forward to working with her. You can reach Michelle at 310-794-3614 or via email at mmoreno@mednet.ucla.edu



"Working with our volunteers and patients is rewarding. I enjoy meeting so many new people from different walks of life and learning from them."



Memory Education Trainer, Donna Mason

Donna Mason is a licensee of the UCLA Longevity Center memory education programs, including Memory

Training, Memory Fitness, and Brain Boot Camp. She is a recent retiree, but is still hard at work on a part-time basis. Based in Maryland, she currently teaches memory education courses at senior centers, community organizations, and places of worship. She also continues to provide management consulting and training.

Donna's impressive career has been committed to leading organizations that provide exceptional health and human services in the nonprofit and government sectors. For eight years, Donna was the Executive Director of Riderwood, the largest continuing care retirement community in the United States and home to more than 2,600 seniors. She provided leadership for the community and achieved company-wide objectives for quality care and services. Prior to that, Donna spent over 20 years in public service in Prince George's county government, where she had the opportunity to lead various departments in the development and implementation of programs and policies that enhanced

the quality of life of county residents. During her last four years, she served as Deputy Chief Administrative Officer for Health and Human Services to County Executive Wayne Curry. In this position, she was responsible for health and human service policies and provided leadership of several departments.

Donna has held a number of executive leadership roles within the non-profit world. Her educational background includes a Bachelor's Degree in Sociology and a Master's degree in Administrative Management with a concentration in Public Administration. She has continued post graduate studies and executive training through the Terry Sanford Institute of Public Policy at Duke University; the Senior Executive Institute: Weldon Cooper Center for Public Service at the University of Virginia; and the Erickson School of Aging Studies at University of Maryland Baltimore County. She will also complete a Master of Arts degree at Wesley Theological Seminary later this year. She is certified to administer and interpret the Myers-Briggs Type Indicator (MBTI®) and has additional certifications in Conflict Mediation and Coaching. She is an active member of Delta Sigma Theta, Sorority, Inc.

Senior Scholars Event at the Hammer Museum

Coffee and Conversation

"Coffee and Conversation" event was held at the Hammer Museum on February 18th, 2016 to provide current and prospective Senior Scholars an opportunity to meet one another. Close to one hundred attendees came to mingle over coffee in the museum's courtyard cafe. Those interested in the upcoming quarter's classes were able to speak with staff about the course offered and were provided course catalogs. Current Scholars exchanged

information about classes they had taken and provided feedback. Following the social hour, attendees had the opportunity to take a guided tour of the museum, or to sit-in on the Hammer's free weekly mindfulness session. We appreciate the continued interest and passion that Senior Scholars have for the program and lifelong learning. We would also like to extend a warm thank you to Board Member and Senior Scholar, Joel Saltzburg, for sponsoring the event.



Interview Series: Marvelyne Bailer

Interview conducted by Michelle Moreno



n speaking with Marvelyne Bailer, you would not know that she is 99 years old. Born in Los Angeles, CA in 1916, her mother and father moved to California from Kentucky and Florida, respectively. Marvelyne was an only child, reared by her mother who worked as a seamstress. After high school graduation, Marvelyne went to typing school and worked with the Los Angeles Police Department as a stenographer. Marvelyne describes herself as "outgoing, happy and very easy to get along with." When we spoke in November 2015, she told me about her life and how she has managed to live so well for so long.

What was it like growing up in L.A.?

Everything is so different now than what it was when I was coming along. Life was really great in those days, I thought. Everything was delivered to your door; your milk was delivered every day; they had a vegetable cart-wagon that would come along with your fresh vegetables and then another truck for bakeries. Everything was so exciting. They had little ice cream carts that would go around with different sherbets. You'd walk out to the curb and order whatever you wanted. I mean, life was so simple.

Was there anything about your diet that was unusual or may have contributed to your longevity?

I don't eat anything with feathers on it. I know that's different. When I was younger, I saw my father kill a duck in front of me. My mother then cooked it, and we were going to eat it. When I saw the duck on the table, I decided not to eat duck or anything with feathers again.

Throughout your many years of life, you must have experienced stress. How have you dealt with that?

My whole attitude. I've lost three children in the past seven years. It's just being able to live with yourself and accept things when they happen.

What is your earliest memory?

I had an aunt who lived in Carmel, California. I used to go visit her every summer, and I remember the surroundings there. There were redwood trees, and police would ride around on their horses. They had a beautiful beach with all kinds of sea lions and other animals out there in the ocean, and cypress trees. The whole surroundings were beautiful in my mind. I had wonderful summers there, and every year, they would show Ramona in the theater. At that time, Charlie Chaplin lived there with his wife. I think that is one of my favorite memories.



Artwork by Marvelyne Bailer



Artwork by Marvelyne Bailer

Do you have any hobbies?

I do like to draw. I figured since I'm almost 100 I should pick up drawing again. I used to read, but because of my sight, I don't read much anymore.

What in your life has given you pride?

Having six children--I'm very proud of having them and being able to raise them and educate them. All of them are very bright. All of them are very smart. They all turned our great.

How did you meet your husband?

He was coming out here to Los Angeles from the East, and there was a dance. He was with a couple of friends and he wanted to go to the dance, but didn't have a date. So, his friends suggested me, and I went! We spent the next eleven days together. Four years later, my mother thought I should take a trip, so I went to Washington, DC. He was teaching there at the time, and we spent ten days together. He asked if I was the marrying type, and I thought he was asking me to marry him. When I think about it now, it seems so silly, but I gave him a date when he could consider asking me again, and told him I'd accept. True enough, it happened. I was just lucky all the way around.

What would you say is your happiest moment of your life?

Most of my life has been happy. Most of my life. I think one of the happiest moments was when he [my husband] got his dissertation. I had done all the typing for him, and helped him out. It was such a thrill to know he had accomplished what he'd wanted, and it made me feel pretty happy.

Is there anything else you would like to accomplish?

At this age no (laughs). All I'm doing now is just trying to stay here. I get up every morning. I try to look good. I feel good about myself, and I love it here. I'm a happy person.

Research Studies

Do you or a loved one have Mild Cognitive Impairment (MCI)? Would you like to participate in a research study at UCLA testing

transcranial direct current stimulation (tDCS) and cognitive training (CT) for MCI?

MCI causes a slight but noticeable decline in mental abilities, including memory and thinking skills. These changes are serious enough to be noticed, but are not severe enough to interfere with daily life.

tDCS is a form of neurostimulation. It uses a constant, low current delivered to the brain using electrodes that are placed on the scalp. Research shows that it may be able to increase cognitive performance on certain tasks.

CT focuses on improving memory, attention, perception, reasoning, planning, judgment, general learning, and overall mental functioning. Research shows that it may lead to improved self-esteem, self-confidence, and emotional stability.



Call or email us for more information. You must be between 55-80; an English speaker; in good physical health with no chronic medical conditions; and have MCI but not dementia, Alzheimer's, or any other form of neurocognitive impairment or major psychiatric disorder. Other inclusion/exclusion conditions apply. If you are enrolled as a participant in the study, you will make 15 separate visits to UCLA that will take approximately 18 hours total (not including travel time). You will receive \$200 upon completion of the entire protocol. You may be randomly assigned to a control group, which means you will not receive active tDCS. In that event, you will qualify for free treatment on conclusion of the study, if it is successful, subject to other terms and conditions.



ALZHEIMER'S PREVENTION **PROJECT**



Would you like to participate in a study on exercise and memory?

This study is for people 60-78 who have diabetes, hypertension, or who are mildly to moderately overweight.

VOLUNTEERS MUST BE:

Committed to participating in a memory training and exercise program twice a week for 3 months taking place at the Santa Monica YWCA



UCLA Longevity Center

This Study Involves:

- **Clinical Evaluation**
- **Blood Draws**
- **Memory Assessments**
- **Nutritional Advice**
- **Memory Training**
- **Activity Monitoring**
- **Motivational Coaching**



HAVE NO HISTORY OF:

- Substance or Alcohol Abuse
- Psychiatric Conditions: ADHD, Schizophrenia, Bipolar Disorder, or Untreated Depression
- Heart Attack or Stroke
- Neurodegenerative Disease or Dementia
- Epilepsy or Multiple Sclerosis

Parking will be covered throughout study duration. For more information call: 310-206-1319

Research study conducted by Gary Small, M.D. from the UCLA Department of Psychiatry

Protocol ID:IRB#15-000907 UCLA IRB Approved Approval Date: 1/29/2016 Through: 6/24/2016 Committee: Medical IRB 3

Psychiatry and Biobehavioral Sciences



TAI CHI CHIH OR HEALTH EDUCATION AND WELLNESS FOR **OLDER ADULTS**



ARE YOU SUFFERING FROM DEPRESSION?

ARE YOU OVER THE AGE OF 60?

The UCLA Late-Life Mood, Stress and Wellness Program in the Geriatric Psychiatry Division is conducting a 6-month research study involving 12 weekly 60 minute session of either a health and education wellness class or a Tai Chi class. Participants will undergo two functional magnetic resonance imaging (fMRI) scans. A complete psychiatric evaluation will be provided. Subjects will not be charged for participation and will be compensated.

You must be at least 60 years old. If you or anyone you know is interested in participating, call for an appointment to see if you qualify or for more information at: (310) 794-9523.

The study will be conducted by Helen Lavretsky, M.D.

Protocol ID:IRB#15-000184 UCLA IRB Approved Approval Date: 1/22/2016 Through: 1/21/2017 Committee: Medical IRB 3

UCLA Integrative Mental Health Conference

• April 3, 2016

Expert Prescribes a Healthier Lifestyle as Good Medicine for the Brain Dr. Gary Small offered tips on keeping brains healthy and minds sharp in an article in AARP's Staying Sharp web column.

• February 16, 2016

Meditating Might Help Older People Sleep Research by Dr. Michael Irwin, a psychiatry professor and director of the Cousins Center for Psychoneuroimmunology at the Semel Institute, into the potential role of meditation in improving sleep among the elderly was reported by the Los Angeles Times.

• February 5, 2016

OK, Google, Where Did I Put My Thinking Cap? Dr. Gary Small commented in an NPR "All Tech Considered" piece on conflicting research and the effect that surfing the web has on critical thinking skills.

• January 19, 2016

Type A to ZZZ: The Agony of Industry Insomnia
Dr. Gary Small commented in a The Hollywood Reporter article about the prevalence and perils of sleep deprivation in Hollywood.

• December 2, 2015

Being a Couch Potato is Linked to Having a Smaller, Less Intelligent Brain Later in Life Dr. Gary Small commented in a Dr. Oz "The Good Life" article about evidence linking physical activity and cognitive health, especially going into middle age.

1st UCLA CONFERENCE ON INTEGRATIVE MEDICINE AND MENTAL HEALTH

Information

This inaugural two day conference will review scientific advances in Complementary and Integrative medicine. All lectures and experiential workshops will be presented by UCLA faculty and invited experts and focused on the use of integrative medicine for treatment and prevention of physical and mental disorders.

Featured Speakers

Sat Bir Khalsa, Ph.D. Ka Kit Hui, M.D. Patricia Gerbarg, M.D. Richard Brown, M.D. David Mischoulon, M.D. Donna Ames, M.D.

Conference Chair: Helen Lavretsky, M.D., M.S.

When and Where

Saturday, April 30, 2016 & Sunday, May 1, 2016

9:00AM ~ 5:00PM UCLA Carnesale Commons 251 Charles E. Young Dr., West Los Angeles, CA 90024



UCLA

To register, please go to:

http://www.semel.ucla.edu/integrativementalhealth For questions, E-mail: Latelifewellness@mednet.ucla.edu



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Latest on Research



Regular Exercise May Be Best Prevention for Low Back Pain

s we age, the chances are that we will suffer one or more bouts of low back pain. In fact, approximately four out of five people suffer such bouts at some point in their lifetime. Low back pain can be disabling and lead to weakness, loss of time from work, and mood changes, so most of us are keen on learning about what we can do to minimize agerelated back issues and try to prevent them. Although the best remedy has been a matter of controversy, a recent JAMA Internal Medicine review suggests that physical exercise, with or without additional education on back hygiene and lifestyle, is the only regimen that consistently works. The authors found that shoe orthotics, back support belts, or education alone had no benefit in preventing future bouts of pain. This review did not indicate whether a particular form of exercise was most effective, so it might be a good idea to vary such strategies as core and back strengthening, aerobics, and general strength and balance training.

Anti-Alzheimer's Tau Vaccine Passes Safety Test

lzheimer's disease is clearly one of the most dreaded age-related illnesses. The disease is defined by the accumulation of tiny

abnormal proteins - known as tau and amyloid that collect in the thinking and memory centers of the brain. Until now, scientists have emphasized their drug development on clearing the amyloid protein from the brain, but without success. More recently, there has been a greater emphasis on anti-tau drugs and vaccines, which is an important advance since tau protein is more closely associated with the cognitive symptoms of the disease than is amyloid. Dr. Matej Ondrus of Axon Neuroscience recently reported at the Clinical Trials in Alzheimer's Disease Conference about the latest human safety findings of a new anti-tau vaccine known as AADvac-1. By inducing antibodies against brain neurofibrillary tangles, the vaccine clears out this abnormal tau deposit in Alzheimer's disease. Some side effects did occur, but they were mild so that further testing can move forward in order to determine if the vaccine can delay the disease's steady cognitive decline.

Common Drugs for Heartburn Increase Risk for Dementia

ore than 50 percent of adults suffer from gastric discomfort known as heartburn, and nearly one-third of older adults take a proton pump inhibitor, one of the popular drugs prescribed by doctors and available over-the-counter for heartburn, such as Prilosec, Aciphex, and Nexium. In a recent JAMA Neurology report, investigators noted that the use of these medicines is linked to an increased risk for dementia, which is defined as a cognitive decline that interferes with daily life. The study followed more than 70,000 participants aged 75 years and above for an average of five years and showed that routine use of these drugs elevated the risk for dementia by 42 percent in women and 52 percent in men. The scientists emphasized that their finding was an association between taking the medicine and being more likely to develop dementia – they did not prove that these medicines caused dementia. The link between using the drugs and dementia rates may be related to another undetermined factor.

Cognitive Reserve, what's all the Buzz?

By Stella Panos, Ph.D.

ver the last couple of decades, increased attention has been given to what is now commonly referred to as the "cognitive reserve" hypothesis. Cognitive reserve is a measure of resilience against some of the cognitive and/or behavioral manifestations (e.g., such as memory, orientation,

confusion) that are typically associated with brain pathology (e.g., plaques and tangles) in dementia. The concept has its roots in very early studies assessing brain pathology in Alzheimer's disease. More focused study began in 1988 when Katzman and his colleagues used the word "reserve" to explain an unexpected mismatch they found between cognitive status (assessed while alive) and brain pathology (assessed after death). Among their sample, a subset of individuals showed brain pathology consistent with dementia and yet had little or none of the symptoms that are commonly associated

with dementia. This group also had greater brain weight and number of brain cells. Therefore, one of the proposed hypotheses was that greater brain volume and more neurons allowed for greater reserve. It was around this time period that several studies began to

emerge suggesting that external factors, such as better early-life linguistic abilities and higher education, were associated with a reduced risk for developing dementia. These factors, often now used as proxies for cognitive reserve, have been repeatedly shown to account for a mismatch between brain pathology and the expression

> of clinical and behavioral manifestations of a variety of neurocognitive illnesses.

> To date, several "reserve" theories have been set forth and continue to be developed to explain the exact mechanisms of this phenomenon. Brain imaging studies suggest that individuals with higher educational attainment are able to shoulder greater pathological markers in the brain before symptoms cognitive emerge. Overall, the extent to which some of these external factors influence cognitive abilities is arguably large. For example, in a large study evaluating other research, Meng and D'Arcy found

that lower education was associated with both increased prevalence and incidence of a dementia diagnosis. Some of this work holds promise for the development of behavioral interventions that may be useful from a preventive standpoint.



Stella Panos, Ph.D., is a voluntary faculty member in the Department of Psychiatry and Biobehavioral Sciences at the UCLA Semel Institute. Dr. Panos currently works as a clinical neuropsychologist at the West Los Angeles VA Medical Center.

Donors & Tributes September 2015 - February 2016

Donations

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In Memory of Michael Fredlender Betty Lou Miller

In Memory of Michael Fredlender Shelly Kaye

In Memory of Michael Fredlender Sandra & Bud Brown

In Memory of M. Joseph Dunn Patricia Dunn Grey & Richard Grey

Happy Birthday to Bernie Shapiro Betty & Bob Miller

Happy Birthday to Bernie Shapiro

Bob & Sue Rosenfield

In Honor of Dr. Gary Small Dorothy Leeb

Welcome New Board Member, Joel Saltzburg

Joel Saltzburg received his undergraduate degree from UCLA and his law degree from University of San Fernando Valley College (now University of West LA). He is also a Certified Public Accountant and a Real Estate Broker. Mr. Saltzburg is a current Senior Scholar, regularly participating in the Longevity Center's program for adults who wish to attend undergraduate UCLA classes. All of us at the UCLA Longevity Center are pleased to welcome Mr. Saltzburg to the Board of Directors and look forward to working with him.

Remembering James E. Birren

r. James E. "Jim" Birren was the Associate Director of the UCLA Center on Aging (now the UCLA Longevity Center) from 1989 until he retired in 2003. He also was the founding dean of the USC Davis School of Gerontology and a research pioneer in the field of aging, considered by many to be the father of modern gerontology. He passed away on January 15, 2016 at 97 years of age.

Born April 4, 1918 in Chicago, Dr. Birren received his bachelor's degree in education from Chicago Teachers College (now Chicago State University). He completed his master's degree and received a Ph.D. in psychology at Northwestern University in 1947, following his service in the U.S. Navy. He worked at the U.S. Public Health Service as well as the National Institute of Mental Health, where he founded its Section on Aging. In 1965, Dr. Birren joined the USC faculty and established the university's program in gerontology. He served as the school's inaugural dean until he came to UCLA in 1989.

Dr. Birren held numerous professional leadership roles, including serving as the cofounder of the California Council on Gerontology and Geriatrics, and received several distinguished honors, such as induction into the American Society on Aging Hall of Fame.



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Brain Boot Camp

An intensive, three-hour course that includes individualized healthy lifestyle programs, tips for a healthy heart and brain diet, and advanced memory techniques for learning and recalling names and faces.

Cost: \$300.

To register, call (310) 794-4055

Memory Care

A weekly program for patients experiencing memory loss and their caregivers. Memory Care teaches evidence-based memory exercises and methods, as well as strategies to lower stress.

Contact (310) 794-0680 to reserve your spot and for pricing details.

Memory Training

A course for people with mild memory concerns. Memory Training presents effective memory-enhancing techniques and is taught by certified volunteer trainers.

For more information, contact (310) 794-0680.

Senior Scholars

A program for adults age 50 and older who wish to attend UCLA undergraduate courses on campus.

Cost: \$150 per class.

Summer Session A quarter begins June 20, 2016. The registration deadline is May 23, 2015.

Summer Session C quarter begins August 1, 2016. The registration deadline is July 5, 2016.

For more information, contact (310) 794-0679.

Please follow us on Facebook (www.facebook.com/ UclaLongevityCenter) or Twitter @LongevityCtr.

The UCLA Longevity Center Newsletter

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