FOSTER CITY, CA
1221 Chess Dr, 94404. (650) 570-5700

APTOS, CA
SEASCAPE GOLF CLUB
610 Clubhouse Dr, 95003. (831) 688-3213

FRESNO, CA
PICCADILLY INN SHAW
2305 W Shaw Ave, 93711. (559) 348-5520

SEASIDE, CA
EMBASSY SUITES MONTEREY BAY – SEASIDE
1441 Canyon Del Rey Blvd, 93955. (831) 393-1115

CAMPBELL, CA
VILLA RAGUSA
35 S 2nd St, 95008. (408) 364-1900

Tuesday, September 11
Wednesday, September 12
Friday, September 14
Monday, October 29
Wednesday, October 31

Remembering, Forgetting and Protecting the Aging Brain

Institute for Brain Potential
PO Box 2238, Los Banos, CA 93635

PLEASE POST
Remembering, Forgetting and Protecting the Aging Brain

Institute for Brain Potential
PO Box 2238, Los Banos, CA 93635

A New 6-Hour Program, Fall, 2018: $79

Topics Include:
• Short-Term Memory
• Working Memory
• Long-Term Memory

Unable To Attend?
Purchase Recordings with Home Study CE Credit ( one)
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This new 6-hour program presents advances in identifying who develops memory loss and advances in protecting the aging brain decades before the onset of cognitive decline.

Participants completing this program should be able to identify:
1. Distinguish between impairment of short-term, working, and long-term memory.
2. Outline an evidence-based strategy to protect short-term, working, or long-term memory.
3. Describe how the habit brain plays a role in either major depression, addictive disorders, obsessive-compulsive disorders or posttraumatic stress disorder.
5. List several advances in protecting the aging brain.

Short-Term Memory: remembering what happened recently

•Brains At Risk: alcohol blackout, seizure, concussion, benzoin cognitive impairment
•Caffeine and Glucose: caffeine can aid retrieval but go light on sugar due to adverse effects on brain glucose.
•Physical Activity: moderately intense physical activity protects the brain’s vascular system, improves glucose regulation, and stimulates nerve growth factors.
•Restorative Sleep: a key function of slow wave sleep is the removal of toxins such as amyloid; REM sleep aids long-term memory.
•Neurocognitive training: most brain-training activities are of no benefit, but a few are beneficial.

Long-Term Memory: the memories of our lives

•Brains At Risk: damage to association cortex due to brain injury, stroke, or dementia (Alzheimer’s disease, multi-infarct and frontotemporal dementia).
•Caffeine and Glucose: can improve memory performance.
•Physical Activity: physically active individuals are more likely to maintain their cognitive function as they age.
•Restorative Sleep: sleep loss leads to memory impairment.
•Neurocognitive Training: the benefits of training are maintained over time.

Habit-Based Memories: habits are critical for brain health

•Brains At Risk: adverse childhood experiences, depression, posttraumatic stress, obsessive compulsive disorder, and addictive disorders create maladaptive habits involving the habit brain, the basal ganglia.
•Reprogramming the Habit Brain: major depression, automatic habitual thoughts trigger mood changes; how cognitive behavioral therapy retracts cortical and subcortical habit circuits.

Additive Habits: reducing the need for immediate gratification for food and substances via prefrontal cortex control over the dopamine striatum.

Obsessive-Compulsive Habits: desensitization training can modify the habit brain by extinguishing and retraining a subcortical circuit.

Posttraumatic Habits: activities that inhibit the fear-based amygdala through the slower, proactive prefrontal cortex.

 Advances In Prevention: most dementias take decades to develop

Cognitive Domains: memory impairment must also accompany impairment in reasoning, spatial ability, abstraction, language, or impulse control to diagnose dementia.

Understanding Alzheimer’s Disease: in most cases, onset occurs decades before disabling symptoms arise, thus risk, reduction strategies are critical; the risk factors are the same for most dementias.

Early Detection: the 5-minute neuropsychological test that is 93% accurate in predicting who will develop Alzheimer’s disease.

Reducing Inflammation and Protecting the Aging Brain: extracellular amyloid and intracellular tangles are inflammatory and endanger the aging brain; an anti-inflammatory lifestyle is attainable and sustainable.

Neuroprotective Nutrients: curcumin (curcuminoids), cocoa (epicatechin) and resveratrol (stilbenoids), long-chain omega 3 fatty acids, low glycemic starches and fibers, vitamins A, B12, C, D3, and E, copper, iron and zinc; the Dietary Inflammatory Index.

Neuroprotective Exercise: a review of 35 studies regarding intensity, type, and frequency of exercise.

Neuroprotective Sleep: a review of 52 trials linking cognitive impairment to sleep duration; too little can impair amyloid clearance; too much sleep increases risk of metabolic disorders.

Neuroprotective Food: the nutritional needs of the brain are not only nutritional; the neural network is enhanced by the mental activity identified with a person’s daily life; what cognitive challenges are most beneficial?

ABOUT THE INSTRUCTOR
Stuart Zola, Ph.D. is an internationally recognized expert in the neural foundation of memory, memory impairments and Alzheimer’s Disease. Dr. Zola Co-Directed the Alzheimer’s Disease Research Center at Emory University and currently serves on the Board of Directors of the Alzheimer’s Association to provide early detection of cognitive decline associated with Alzheimer’s Disease. Dr. Zola is also developing a program to train health-related habits as a means of protecting the aging brain.

An outstanding and highly sought-after speaker, he artfully combines his knowledge of brain science with his natural charm, humor, and deep understanding of scientific research. His down to earth and approachable manner makes him an engaging and memorable presenter.

In addition to Q & A sessions in class, Dr. Zola will answer your questions during the second half of the lunch break and by email after the program concludes.