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去年的科学成就得益于我们患者、亲属和朋友的积极参与。共同努力，我们推动临床科学新疗法的发展。

**A CONVERSATION BETWEEN DR. NAIR AND DR. DASTOOR**

Dr. Vasavan Nair，Douglas Research Centre的创始人之一，推动了对FRQS的认可，成为FRQS支持的研究中心。他的职业生涯跨越了70年，其中5年在Douglas度过，他对临床护理、教育和研究的众多贡献在社区留下了不可磨灭的印记。

Dr. Nair在1971年在萨斯喀彻温省的一家医院工作。他在温尼伯参加了一个CPA会议，遇到了Heinz Lehmann博士。他们开始交谈，他问我在这里做什么。我告诉他，他回答说，“你为什么浪费时间在萨斯喀彻温？来麦吉尔吧，我们有一个好地方给你。”我开车5天从萨斯喀彻温省到蒙特利尔，于1972年1月15日加入Douglas Hospital。

在Lehmann博士退休后，Douglas Hospital的Director General Gaston Harnois问我，“我们怎么做研究？”我制定了一个发展研究中心的计划，包括临床、心理社会和神经科学部门的负责人和研究负责人。当时，魁北克政府提议建立医院研究中心。我们申请了，并在1979年在3年内成功建立了3个中心：Douglas Hospital、Louis-Hippolyte Lafontaine Centre和Centre Hospitalier Robert-Giffard in Quebec City。
Dr. Dastoor: You trained as a Psychiatrist, correct? How did you suddenly change into research, or you practiced psychiatry at the same time?

Dr. Nair: I was always interested in research and at Guys Hospital we did some research on unilateral ECT and published a paper. However, in Saskatchewan, by the time I came, the professor who had invited me had already left, so I was left with the lab but no staff. There, I did more or less psychosocial research following up all the mental patients discharged in Saskatchewan from 1968 to 71. We found that patients who were discharged to farms in the province, functioned well. People who were sent to cities, returned to the hospital sooner because the city could not tolerate them. Moral of the story was that the community really needs to accept patients for them to thrive.

Towards the end of that project, I met Dr. Lehmann. He didn’t explain what I would be doing at the Douglas, but I was given the title of Coordinator Research Services. However, there was no research infrastructure and he retired in 1976, we were then left with the option of closing the centre or to develop it.

Dr. Dastoor: Are you satisfied with the way it has developed?

Dr. Nair: I had support from many people along my journey. We recruited Dr. Paul Wood, Dr. Remi Quirion and Dr. Michael Meaney, on the neurosciences side, and Dr. Ellen Corin on the psychosocial side. Aging was one of their concerns, and it coincided with my own interests. And of course, I should mention the name of Dr. David Bloom, who even though was a full-time clinician, put in a lot of time helping us set up the clinical psych-social program and actively participated.

Dr. Dastoor: Did you at that time also get the project from the World Health Organization for the Longitudinal study in aging?

Dr. Nair: We were designated as the World Health Collaborative Centre. There were trainees from all parts of the world, the WHO fellows, mainly coming to train in psychopharmacology and once we had that program going, collaboration came from all the famous psychiatrists in Europe, mainly from Switzerland, Belgium and France. By the time I left in 1995 and Dr. Remi Quirion took over as Director of the Research Centre, we had an annual budget of about $6 million.

Dr. Dastoor: While you were the Director of Research, were you still teaching medical students?
Dr. Nair: Yes, I continued teaching medical students, writing grants, and published over the years 240 publications and produced about the equal number of presentations. I didn’t even have a secretary for the first 3 years! The Center developed into one of the most prominent Centres, not just in Canada but worldwide.

Dr. Dastoor: Looking at your profile you received many research and teaching awards?

Dr. Nair: All the awards I received were for research. Within this period, we did get into an organization called Canadian College of Neuropsychopharmacology. I was one of the founding members and functioned as a treasurer. The first award I received was a Medal of Honour (CCNP medal) from the Canadian College of Neuropsychopharmacology. Subsequently, I got the Lifetime Achievement Award from the Canadian Academy of Geriatric Psychiatry; Heinz Lehmann Award of the AMPQ (D’association des medecins psychiatre du Quebec); Best Clinical Researcher Award in 2014 from the Canadian Psychiatric Association, and The Best Supervisor Award early on from the McGill Department of Psychiatry.

Dr. Dastoor: Your wall must be full of awards! How do you see the future of research especially in dementia and aging?

Dr. Nair: One of the issues in psychiatry, aging, neuroscience, is that neurosciences consider the mind as a product of the brain. Whereas the recent developments with the gamma, frequency, measurements, meditation, everything indicates otherwise. I don’t know when the outlook will be changed officially but that is one of the bottlenecks. I did speak to Dr. Pedro Rosa-Neto during one of the meetings about changing the outlook, there are not many takers, not surprisingly.

Dr. Dastoor: You do a lot of yoga and meditation; how do you integrate this together?

Dr. Nair: That’s why I’m saying in my experience in going deeper into the human mind, you realize that mind is the more powerful tool than the brain. Certain parts of the mind function through the brain but there are parts of the brain which do not operate through the mind and there are certain parts of the mind which do not normally operate through the brain, that is why I mentioned the gamma frequency. If you measure the energy directly by electroencephalography or magnetoencephalography you will find the energy content of the mind during meditation is much, much higher than the energy content during non-meditative states. So, there is some energy one can bring into the brain from the mental processes which you cannot do from the brain directly. I would strongly recommend that measuring energy directly of the brain is very important for the development of the therapeutic and clinical understanding of Alzheimer Disease. Alzheimer’s as we deal with it now, cannot be cured because of the lack of understanding of the role of energy. Nikola Tesla said long ago that in order to understand the universe, you have to think in terms of frequency, vibrations and amplitude rather than structure. See, the basis of medicine was based in chemistry ever since Heisenberg wrote a book called “What is Life” published in 1943. The discovery of DNA/RNA was based on that, and medicine is still focused on DNA and RNA which is the chemistry of the brain.
Recently there is a book called “Physics of Life” which talks about the energy spectrum. Medicine must take up that challenge. How to understand the human being as a psycho physical rather than a purely physical entity.

**Dr. Dastoor:** Do you think meditation and Yoga would be able to help people with Alzheimer’s? Cure it or prevent it?

**Dr. Nair:** It would prevent it. There is much evidence for that. The program at Harvard which has been going on for the last 15 years, discovered that if you are able to induce gamma frequency in the brain, you can maintain the function of the brain. But they have not worked in the prevention aspect of it. They also have a machine to induce gamma frequency. Their clinical trial was stopped after 9 months, because of Covid. I have heard they'll be restarting it using induced gamma waves for maintaining the function. They did publish one paper saying that during these 9 months no one deteriorated. You know these are all kinds of patients, but they have not published other things as far as I can see. This is very important work, that you can use gamma frequency from the outside, by natural means you can maintain the function. It is also known that meditation induces gamma frequency much more than any other activity. Therefore, there’s a whole lot of things coming together indicating gamma waves as one of the markers of brain function - deeper brain function, not the brain tissue as such, but the interface between the mind and the brain. And the gamma deficit is one of the early findings in Alzheimer’s Disease. Meditation should be promoted. I am told there is new research on Gamma frequency coming out. I’m going to look it up and share my thoughts periodically with Dr. Pedro Rosa-Neto and a few others.

**Dr. Dastoor:** But meditation with a guru, somebody who knows how to meditate.

**Dr. Nair:** The meditation to transform one’s inner system must be learned from a master who has done it himself or herself and experienced it. The mind that we know is only familiar with the external things. So, the way out is to go within, and that needs a master who is called a Guru. Fortunately, there are such gurus who are and have always been available to teach if people are interested.

I'm very grateful to everybody at the Douglas Hospital, and at the McGill University Research Centre for Studies in for helping me and listening to me and periodically disagreeing with me.

**Dr Dastoor:** Let us end on this positive note and I thank you for sharing your life experiences, your vision and hope for the future. Wishing you very productive retirement years with your family, friends, and academically.
The McGill University Research Centre for Studies in Aging (MCSA), research members including Drs. Pedro Rosa-Neto, Paolo Vitali and Maiya Geddes took part in the prestigious conference: The Alzheimer’s Association International Conference (AAIC) July 2023 at Amsterdam RAI, Noord Holland, Netherlands. This conference is the world’s largest meeting dedicated to advancing dementia science, from basic science to dementia care, every aspect of the field’s growing knowledge of dementia is incorporated into this world-class conference. Each year, AAIC convenes researchers, clinicians, and dementia professionals from all career stages to share breaking research discoveries that will lead to methods of prevention, treatment, and improvements in diagnosis for Alzheimer’s Disease. AAIC serves as a catalyst for generating new knowledge about dementia and fostering a vital, collegial research community. The Alzheimer’s Association is a worldwide voluntary health organization dedicated to Alzheimer’s care, support, and research. Next year’s event will be held in Philadelphia, USA at the Pennsylvania Convention Centre. Find below research staff that took part in this conference by having a presentation and/or having their posters published in the AAIC website.

Yi Ting Wang, (Tina) PhD Student

**Title:** “Amyloid-dependent tau phosphorylation accelerated tau tangle accumulation in females.”

**Summary:** Females have higher prevalence of dementia due to Alzheimer disease than males. In this study we showed that Aβ-dependent tau phosphorylation plays a key role in initiating tau pathology in females, and lead to faster tau tangle formation. The findings suggested that females may benefit from earlier intervention in clinical trials targeting Aβ plaques. In addition, drugs reducing p-tau concentrations can also be promising therapeutic strategies for female patients to prevent further spreading of tau aggregates and cognitive decline.
**Title:** “Plasma biomarkers as stand-alone tests in the diagnosis of Alzheimer's disease.”

**Summary:** My presentation focused on new high-performance blood biomarkers for Alzheimer's Disease, which we hope one day can be used instead of more invasive lumbar punctures or expensive PET scans. The presentation showed how we can interpret these new blood tests for individual people.

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**Arthur Macedo, MSc**

**Title:** “The impact of young controls in the detection of tau load in cognitively impaired and asymptomatic elderly.”

**Summary:** My study concludes that researchers should be careful when selecting individuals to be the reference group in studies of Alzheimer's Disease. In some cases, young individuals could be a better reference group to detect the levels of one of the proteins causing Alzheimer's Disease: tau neurofibrillary tangles.

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**Dr. Stijn Servaes, PhD**

**Title:** “Fast accumulators of tau have higher levels of plasma ptau and stronger associations with amyloid in later Braak regions at baseline.”

**Summary:** Tau deposition in later Braak regions is associated with both higher levels of plasma ptau and a higher amyloid load in individuals in earlier Braak stages that accumulate tau at a more rapid rate. This research highlights the potential importance of targeting amyloid in the early stages of the disease in order to slow the progression of tau pathology.

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**Nesrine Rahmouni, MSc**

**Title:** “Associations and interactions of synaptic and inflammatory biomarkers in Alzheimer's Disease.”

**Summary:** My study suggests that synaptic dysfunction is more associated to tau than amyloid pathology in Alzheimer's disease. SNAP25 seems to be the biomarker to be more closely associated to AD pathophysiology. Our results also support the important role of inflammation on synaptic dysfunction.
**Title:** “Independent associations of plasma GFAP with amyloid-β and tau-PET in Alzheimer’s disease.”

**Summary:** Plasma GFAP, an astrogliosis marker, is independently associated with both Aβ and tau pathologies in Alzheimer's disease. Aβ-PET showed associations throughout the entire cortex, suggesting its effectiveness as a reliable marker of Aβ pathology across the Alzheimer's disease spectrum. On the other hand, tau-PET correlations were observed in specific regions associated with memory and behavioural impairments that exhibit early deposition of tau.

**Maiya Geddes, MD, FRCPC**

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**Title:** “Independent associations of plasma GFAP with amyloid-β and tau-PET in Alzheimer’s disease.”

**Summary:** Plasma GFAP, an astrogliosis marker, is independently associated with both Aβ and tau pathologies in Alzheimer's disease. Aβ-PET showed associations throughout the entire cortex, suggesting its effectiveness as a reliable marker of Aβ pathology across the Alzheimer's disease spectrum. On the other hand, tau-PET correlations were observed in specific regions associated with memory and behavioural impairments that exhibit early deposition of tau.

**Maiya Geddes, MD, FRCPC**

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**Session:** The interface of behavior and cognition for dementia risk

**Title:** “Using remote assessments for dementia prognostication”

**Summary:** Behavior and cognition are inextricably linked in Alzheimer's disease detection, tracking, risk assessment and prevention. This perspectives session provided a guiding framework and future directions in applying remote assessment of behavior and cognition in prediction of disease progression and treatment response.

**Caitlin Walker, PhD Candidate, Geddes Lab**

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**Title:** “The neurobehavioural mechanisms of generativity and purpose in life in older adults”

**Summary:** Generativity, the desire to contribute to the well-being of future generations, is known to enhance purpose in life in older adults, but the specific neurobehavioral factors supporting this relationship were previously unknown. This study revealed that generativity is associated with resting-state connectivity of prefrontal brain regions and that it increases purpose in life through heightened social support among older adults at risk of Alzheimer's disease. These findings highlight the potential for future circuit-based therapies and underscore the importance of social relationships in promoting resilience and well-being during aging.

**Caitlin Walker, PhD Candidate, Geddes Lab**
Adrian Noriega de la Colina, CIHR Postdoctoral Researcher, Geddes Lab

Title: “The temporal relationship between physical activity, mood, and sleep in older adults via a lead-lag analysis”

Summary: Physical inactivity, and poor sleep are part of what we know as modifiable lifestyle behaviours. Together with low mood they are individually associated with cognitive decline in older age. In this study we examine the interaction between changes in physical activity, sleep time, and mood in sedentary older adults.

Larissa Chiu, MSc candidate, Geddes Lab.

Title: The Influence of Prior Head Injury on Late-Life Cognition and White Matter Microstructure in Older Adults At-Risk of Alzheimer’s disease

Summary: My mission is to understand how mild head injuries might affect our cognitive abilities and brain structure as we get older. In this study of older adults with a family history of Alzheimer’s Disease, individuals with prior head injuries had poorer processing speed and executive functions; however, regardless of one’s history of prior head injuries, there was no clear evidence of underlying pathophysiological differences. This work highlights the importance of understanding the impact of modifiable risk factors of Alzheimer’s Disease to protect our brain health as we get older.

Nagashree Thovinakere, PhD candidate, Geddes Lab

Title: Functional Brain Connectivity Predicts Successful Physical Activity Engagement in Older Adults with Vascular Disease

Summary: Physical activity is crucial modifiable risk factor for preventing cognitive decline and dementia. This study investigated the role of functional brain features in predicting successful behavior change and long-term maintenance of physical activity engagement among older adults newly diagnosed with cardiovascular risk factors. Using the functional gradient approach and a rigorous machine learning pipeline, our prediction model achieved an average accuracy of 0.740 and identified the unimodal-transmodal functional gradient as a critical predictor, associated with higher order cognitive functions. These findings offer valuable insights for personalized therapeutic strategies to enhance physical activity and reduce Alzheimer’s disease risk in at-risk aging individuals.
AAIC 2023 CONFERENCE HIGHLIGHTS

- **Update on the definition and staging of Alzheimer's Disease (AD)?**
At AAIC 2023, a team of scientists and doctors proposed an update to how Alzheimer's Disease (AD) is diagnosed. The diagnosis of AD is now a biological diagnosis and not a clinical diagnosis. Therefore, the symptoms that we traditionally associate with AD are not enough to know if someone has AD for sure; doctors also need to run biological tests (brain scans, lumbar punctures, or even blood tests - more on this later). Another important part of the new definition is that Alzheimer’s can now be staged biologically (based on numerous extant research conducted by our team at McGill). This brings us closer to personalized care for AD, like other areas of medicine (e.g., cancer staging). We can now detect AD pathophysiology at the very early onset of the disease, and we can stage the disease by using validated biomarkers in terms of amyloid, phosphoTau and inflammation markers.

- **New medication for Alzheimer’s Disease called Donanemab. Results were released.**
A new medication called Donanemab was shown to be effective in slowing the clinical symptoms of AD. In fact, on the same day, the results of the clinical trial were published in the Journal of the American Medical Association. This is the second clear-cut positive clinical trial that shows removing amyloid-beta plaques from the brain is an effective way of slowing AD. Our field still has a long way to go, but this is a very encouraging win! The paper has been published in Jama on July 17, 2023 [https://jamanetwork.com/journals/jama/fullarticle/2807533](https://jamanetwork.com/journals/jama/fullarticle/2807533)

Listen to the interview with Dr. Paolo Vitali, neurologist on the Alexandre Moranville - Ouellet via QUB radio show: [Tout ce que vous devez savoir à propos du donanemab: le nouveau médicament qui ralentit la maladie d'Alzheimer | JDQ (journaldequebec.com)](https://journaldequebec.com)

- **Shift towards Plasma Biomarker?**
Diagnosis of AD will soon require biological tests. In fact, to determine one’s eligibility for an anti-amyloid therapy, we must first determine whether that person possesses amyloid in their brain. Blood tests for AD have improved substantially in recent years, and many groups (including ours at McGill) are studying how these tests can be implemented in real-world settings. This is going to change the way we diagnose AD, with the aim of imminently offering new effective drugs able of slowing down the progression of the disease.
Dr. Tharick Pascoal, MD, PhD is an Associate Professor of Psychiatry & Neurology at the University of Pittsburgh in Pennsylvania. Dr. Pascoal received his MD from Federal University of Pelotas in Brazil and completed his residency training in neurology at Pontifical Catholic University of Rio Grande do Sul. He then attended at McGill University for a fellowship in neurodegenerative diseases and aging. Upon completion of his clinical training, he undertook a neuroscience PhD at McGill, where he remained for postgraduate research training in neuroimaging at the McGill University Research Centre for Studies in Aging, McGill University. Dr. Pascoal joined the University of Pittsburgh's Department of Psychiatry in 2020.

Dr. Pascoal’s research focuses on the imaging and fluid biomarkers of Alzheimer’s Disease and related dementias. He is widely recognized in the field for his methodological work on the validation of the second-generation tau positron emission tomography (PET) tracer MK-6240, in addition to having been the first to show that microglial activation is a key element associated with the progression of tau pathology in Alzheimer’s Disease. He is currently principal investigator (PI) of a multi-site longitudinal National Institute on Aging (NIA) R01 funded study focused on comparing cross-sectional and longitudinal tau measures obtained with the two most widely used tau PET tracers to elucidate the advantages and caveats of their use in research, clinical trials, and clinical practice. In addition, he leads a second R01 award focused on comparing three high-performance plasma p-tau epitopes for the detection of Alzheimer’s disease to elucidate their performance in research and clinical settings. Dr. Pascoal additionally leads an Alzheimer’s Association grant and co-leads the fluid biomarker core for an NIA Program Project Grant.

Dr. Pascoal has received multiple awards and honors, including the Dr. Albert and Pauline Spatz Family Distinction Award, and the Barrett Family Foundation Distinction Award, both from the Alzheimer Society of Canada, as well as the IPN Montreal Neurological Institute Star Award, and the Dale Schenk Alzheimer’s Association Roundtable Award.

An excellent research mentor, trainees in Dr. Pascoal’s laboratory work on crucial questions that will further our knowledge of Alzheimer’s Disease. His teaching includes providing lectures for graduate students, medical students, residents, and faculty colleagues.

Anna Linea Foerges

Anna Linea Foerges is conducting part of her PhD thesis research as a Graduate Research Trainee at the laboratory (Translational Biomarkers in Aging and Dementia (TRIAD), at the McGill University Research Centre for Studies in Aging, Faculty of Medicine and Health Sciences, McGill University from March 9, 2023, to July 27, 2023.

Project: Investigation of the relationship between fluid biomarkers of synaptic function and subjective sleep behaviour in healthy elderly individuals.

Abstract: Neurons communicate via synapses, and their plasticity is the basis for good cognitive function. Synaptic plasticity is closely linked to sleep and plays an important role in many psychiatric and neurological diseases such as dementia. Sleep behaviour has been shown to change with aging and manifest sleep abnormalities have been found in older people and patients with mild cognitive impairments and dementia. The McGill Translational Biomarkers in Aging and Dementia (TRIAD) cohort was designed to
quantify interactions between pathophysiological processes leading to dementia. Participants complete sleep questionnaires and have blood plasma and cerebrospinal fluid samples taken, in which biomarkers for synaptic function can be determined. The relationship between sleep-related information and biomarkers of synaptic plasticity in the cerebrospinal fluid was analysed. We found that the self-reported sleep efficiency, the ratio between time asleep and time in bed, was negatively related with biomarkers of synaptic plasticity. This suggests an association between synaptic dysfunction and poor sleep efficiency in healthy older individuals.

**Teresa Tasillo**

After recently graduating from McGill University with a Bachelor of Science, major Physiology, I joined the McGill University Research Centre for Studies in Aging (MCSA), at the beginning of 2023 as a Lab Technician. My studies focused mainly on the human body and its functions, so joining the research team of the MCSA, has been a great fit. As a Lab Technician, I play a crucial role in ensuring that all lab-related tasks are conducted effectively and that samples are handled with care and precision. I also maintain the Biobank which will be invaluable for future research studies, as this will provide a rich resource for researchers to draw upon in their investigations. I will also be working on clinical trials at the MCSA, and I am incredibly excited as this is a crucial aspect of medical research, as this helps evaluate the safety and effectiveness of new treatments and interventions, potentially contributing to advancements in healthcare. I am enjoying my work and I am thrilled continuing to learn and grow with the amazing team at MCSA and at Crossroads!

**BRAINY BOOMERS EVENTS - SAVE THE DATE**

On October 11th & 25th 2023, we are hosting in-person Brainy Boomer Lectures at McGill University Research Centre for Studies in Aging. You are welcome to join us from 1:00pm to 2:00 pm where you will have the opportunity to not only mingle and socialize with other attendees of the event, but also chat with the key speaker of the day with refreshments! Hurry, limited spaces available!
If you are not able to make it to make it in person, the event will be broadcasted live on Zoom. To register for the in-person call 514-761-6131 x 6308, or Zoom event please email: silvana.aguzzi@mcgill.ca

**October 11, 2023, 1:00 pm**

**Sylvie Dagenais-Douville**
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**October 25, 2023, 1:00 pm**

**Dr. Dolly Dastoor, PHD,**
Chair of the MCSA Education Committee
**“POST–COVID: HOW DID YOU SURVIVE IT?”**
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The Translational Biomarkers in Aging and Dementia (TRIAD) cohort is a longitudinal observational cohort specifically designed to study mechanisms driving dementia. The cohort studies dementia markers and their progression from pre-symptomatic stages to the onset of Alzheimer’s disease or other types of dementia. TRIAD participants are followed in a longitudinal manner with clinical and neuropsychological assessments, fluid and imaging biomarkers every 24 months. Results generated from the TRIAD cohort help advance scientific knowledge and develop better targeted clinical trials to cure Alzheimer’s Disease and dementia. The TRIAD cohort is actively recruiting participants, for more information about the participation criteria and the different measures please refer to https://trip.tnl.mcgill.com, to get additional information or to participate call our research centre 514-761-6131 ext: 6321. For research participants and sponsors that are interested in donating to the TRIAD Cohort Research Study, please contact Jenna Stevenson by email jenna.stevenson2@affiliate.mcgill.ca

DEMENTIA EDUCATION PROGRAM PRESENTS NEW COMMUNITY OUTREACH ACTIVITY: YOUNG CAREGIVER COMMUNITY

The McGill University Research Centre for Studies in Aging and the Dementia Education Program have joined forces to offer free, monthly virtual support groups for young caregivers who are looking after a parent, a spouse or a sibling with young-onset dementia, a diverse condition that affects people under the age of 65. This community outreach initiative offers a safe, non-judgmental online space for caregivers to share their stories, voice concerns and discuss the joys and challenges of this role with their peers. Info and registration: https://mcgill.ca/x/Uff
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Between 2020-2022, our fundraising activities were impacted by the pandemic. Your continued support and encouragement were crucial and have played a central role in the continued success of the Centre’s outreach, research infrastructure objectives, and medical research initiatives for the community. We thank you for your loyal and ongoing support! Thank you for helping us advance our mandate towards prevention, aging research, and education. Income tax receipts shall also be issued for all donations exceeding $15.00. If you would like to donate by mail, phone or email, please contact Silvana Aguzzi at 514-761-6131 X 6308 or by email silvana.aguzzi@mcgill.ca or Alexandra Triantafilopoulos at 514-761-6131 X 6311 or by email alexandra.triantafilopoulos1@mcgill.ca.

DEMENTIA, YOUR COMPANION GUIDE

A free new educational resource, Dementia, Your Companion Guide, was designed to help provide answers. With engaging illustrations and a friendly writing style, this approachable guide covers a wide array of topics to assist both the person living with dementia (PLWD) and their care partners. It includes information on the science and progression of dementia as well as practical advice on safety and self-care. The Book is available in English, French, Spanish, Chinese and Greek.

The guide was created by a multidisciplinary team at the McGill University Dementia Education Program (DEP) in the Faculty of Medicine and Health Sciences (FMHS). The content was provided by the Program’s founder and former care partner Ms. Claire Webster, geriatrician Dr. José A. Morais and neurologist Dr. Serge Gauthier, along with partners from the McGill University Research Centre for Studies in Aging, the Division of Geriatric Medicine, the School of Physical and Occupational Therapy, and the School of Social Work.

Ask for a copy of the book at your next appointment at MCSA or Crossroads! Or Visit: https://www.mcgill.ca/medsimcentre/community-outreach/dementia
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Good day

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You have received this month our Newsletter of August 2023. We are interested in having your feedback. Call us at the above number or send us an email with your comments to **silvana.aguzzi@mcgill.ca** or **brainy.boomer-mcsa@mcgill.ca**.
In case you haven't joined us for our Brainy Boomer Lectures (BB), please send us your email address and we will add you to our BB lectures email list. In case you are interested and would like to check out our BB YouTube lectures please check out the following link: [https://www.youtube.com/c/MCSA2021](https://www.youtube.com/c/MCSA2021).

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Date: Wednesday, October 11, 2023 Time: 1:00 pm
(Refreshments will be served from 2:00- 2:30pm)
Conference will be held in Conference Room at the following address.
How to Register: silvana.aguzzi@mcgill.ca or call T: 514-761-6131 x 6308
If attending online Register: silvana.aguzzi@mcgill.ca to receive zoom link.

Dr. Dolly Dastoor, PhD, Chair of the MCSA Education Committee, McGill University Research Centre for Studies in Aging, McGill University.

“POST-COVID: HOW DID YOU SURVIVE IT?”

What have we learnt? What changes will be permanent? What will go back to the way it was pre-COVID? Difficulty thinking or concentrating? Sleep Problems? Dizziness when you stand up? Change in smell or taste? Depression or anxiety?

Date: Wednesday, October 25, 2023 Time: 1:00 pm
(Refreshments will be served from 2:00- 2:30pm)
Conference will be held in Conference Room at the following address.
How to Register: silvana.aguzzi@mcgill.ca or call T: 514-761-6131 x 6308
If attending online Register: silvana.aguzzi@mcgill.ca to receive zoom link.