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FINK! STILL AT LARGE

A recent study of older people showed a connection between greater life purpose and a reduced risk of mild cognitive impairment and Alzheimer's later in life. How can psychiatrists help patients strengthen their purpose in life?

ne of the great misfortunes of aging is the development of Alzheimer's disease. Some of us have patients who either have

the illness or are perhaps showing signs of impending impairment because of Alzheimer's. Others have questions about how to best help these individuals.

The study under discussion revealed an interesting correlation between the sense of purpose in life that many elders have and a lowered risk for development of mild cognitive impairment and Alzheimer's. The Rush Memory and Aging Project involved more than 900 subjects who were observed and examined over a 7-year period. The study examined the individuals' cognitive, emotional, and physical changes—and many other aspects of their lives. Purpose in life was measured using 10-item scale derived from Ryff's Scales of Psychological Well-Being (Arch. Gen. Psychiatry 2010;67:304-10).

The concept sounds rational and is in keeping with our best geriatric care practices in which we try to inspire elders to see a purpose in life. Certainly, if the idea of maintaining purpose in life becomes part of how we conceptualize the patient with AD, we will be more vigorous in our efforts to inspire patients to see a value in their lives, to recognize the successes they've had during their lifetimes, and to do more with their hobbies and other social and interactive activities. So, this study could be a stimulus to work harder with elders who are sinking in a purposeless life.

Does Connection Really Exist?

I am skeptical, however, of the notion that purposelessness is an important contributory factor to AD. The concept of "purpose in life" is vague and likely very difficult to measure empirically. I think we would all agree that the feeling of purposelessness is not limited to the elderly. So many young people seem to have purposeless lives. So do others of all ages, such as the addicted, the directionless, the failures, and the abused—many of whom persist in their feelings of worthlessness prompted by their parents. It's a condition that we must recognize and work to change if such a person becomes our patient.

In middle age, we tend to see many people who suffer from depression, because they are confronted with a

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JOHNNY WILLIAMSON, M.D., Community Mental Health Inc., Chicago purposeless life as they review their years. The drab, dull, and useless lives of millions of people who have not fulfilled any of their dreams are a tragedy. Many movies have pursued this theme, and Woody Allen has made a career of portraying such types. All of this explains why it seems implausible that elders who seem to have purposeless lives would be more likely to develop AD.

On the last page of the study, the authors state, "An inherent limitation of this study, as in all epidemiologic studies, is the inability to establish causality with certainty." I was very glad to read that acknowledgment, because this study reminded me of Dr. I.S. Ravdin, a renowned surgeon in Philadelphia who was considered the

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"God" of medicine back when I was growing up in that city. He practiced at the University of Pennsylvania and was highly renowned. I recall that when I was a child, there were doctors, diagnosticians, and Ravdin. Later as a medical student, I had the opportunity to make a site visit to a private psychiatric hospital in Philadelphia, and there I discovered Dr. Ravdin.

To my astonishment, Dr. Ravdin was totally lacking cognition during my visit. By that time, he was known to wander the halls of the hospital with the usual absence of the AD patient. I couldn't imagine a man of his stature and fame having no purpose in life. So I must admit to having cognitive interference while reading the study, created by my childhood experiences and Dr. Ravdin—who is long since deceased.

When Age Is Irrelevant

Today, I had an experience which, I think, reminds me of a central purpose in my own life. I was at a conference in which a delegation of 12 people from Ireland came to visit a community-based organization that, I believe, does extraordinary work in reducing youth violence. The Irish visitors were eager to learn about us, and I was there because I am a member of the board of directors and chair of the Oversight Committee of their most successful program.

As I do with most things that contribute to my life's purpose, I spoke with great passion about the program and answered their questions with equal vigor. Just before the meeting closed, one of the visitors asked me, very politely and tentatively, how old I was. They were excited that I was so committed.

As we were leaving the room, I asked that person why he had had asked that question. He said he wanted to know what he had to look forward to. I took the question to indicate that the questioner sensed that I had a purpose in life and that, to me, age was irrelevant.

Reagan Defies the Finding

Perhaps the most well-known person in recent years who had AD was Ronald Reagan. Before his arrival on the national scene, we all joked about the prospects of an actor with the temerity to run for president of the United States. But nothing stopped him. I cannot speak with any certainty about his purpose in life, but he certainly seemed to be a determined man who went after what he wanted and succeeded in getting it. President Reagan is another example of a successful and purposeful man who ended his life with Alzheimer's.

How do we fit President Reagan and Dr. Ravdin into the model suggested by this study's finding? I am neither a researcher nor a statistician, but my own observations and experience offer many examples of purposeful and driven individuals who were nonetheless stricken with Alzheimer's. The authors are honest scientists and offer some concepts suggesting that the association between the sense of purposeless and development of Alzheimer's raises more questions than it offers answers. "Apathy and other lifestyle factors (e.g., exercise and nutrition) may be related to the level of engagement in purposeful behaviors and may have

implications for our understanding of the link between purpose in life and cognition," they wrote.

Cognition is a mysterious part of mental functioning. We hear advice such as "Keep your mind active" and "Do your crossword puzzles" to prevent AD. The aging process is difficult and fraught with many pitlogic—heart disease hyperten-

falls, especially physiologic—heart disease, hypertension, and diabetes—to name just a few.

When older people get together, the conversation often turns to the different ailments from which they are all suffering, the vulnerabilities of old age, and the expectation of some disaster lurking around the corner. Elders get used to hearing that a friend or relative developed cancer or has died. We expect it, and these losses only serve to remind us of our own mortality.

As we age and lose those we love, it is painful and might lead to feeling that life no longer has purpose. I have always tended to see these episodes as depressions and not a precursor to AD. I work with such patients to reignite the spark, that is, their purpose in life.

When my first wife died 24 years ago, I went through a very miserable period, and my friends told me in retrospect that I looked awful. But they all inspired me to return to life—to a purposeful life. Fortunately, I had the support of my children and my friends, and 6 months later, I was as busy as I had ever been.

I do know what the authors mean by a purposeless life. It is a very bad feeling. I imagine that when depressed patients say they feel "empty," that is what they mean, but I agree with the authors of the study that we need to get a better handle on the concept.

If we decided collectively to do an experiment to explore with all of our patients in therapy how they see their life purpose, I think we would be surprised at the variety of answers we would receive. Individuals might have a narrowly focused, highly narcissistic response. A woman might say her purpose is to see her children all grow up and be successful. A man might say his purpose is to earn a million dollars and not have to worry about money. Another man might say his purpose is to give back to society, and a woman might say her purpose was to help poor children learn to read. Among the elderly, there would be a wide range of responses to the question of purpose in life.

The Rush study found an association between purposelessness and mild cognitive impairment or Alzheimer's in later life, but this association is difficult to explain. After all, mild cognitive impairment, a preclinical symptom of Alzheimer's disease, might itself trigger feelings of purposelessness.

Perhaps we as psychiatrists should approach purposelessness in the elderly much as we would that condition in younger people. It is condition that can be addressed psychiatrically, whether or not it has anything to do with Alzheimer's.

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