Thanks For Being Part of Our Team!

Over the past twenty-five years now, and we couldn’t have done it without you!

We have had a very productive year, and wanted to share some of our research with you.

We hope to start up our sixth round of testing this year, with an increasing emphasis on health and how it relates to language change.

We hope you will join us again by participating in our studies.

Thanks again for your efforts, and if you have any questions, concerns or comments, please feel free to call us anytime!

Greetings from the Language in the Aging Brain Laboratory. We hope that this newsletter finds you in happy and healthy spirits.

As always, we want to thank you for participating in our studies. Some of you have been coming into our lab for over twenty-five years now, and we couldn’t have done it without you!

We have had a very productive year, and wanted to share some of our research with you.

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Who YOU Are: Some Statistics about the Participants in Our Research Project

Over the past 27 years we have tested 289 different people between the ages of thirty and one hundred in our longitudinal study, as well as many other people who have come in just once to help us with other studies.

You have come from as far away as Florida and Oklahoma, and as near as Jamaica Plain and Brookline.

Twenty-two of you have come in for all five of our testing sessions, and 109 of you have come in for at least three testing sessions.

We think that you are great and thank you for your participation. If your address has changed since the last time we contacted you, please send us your new information so we can stay in touch.
Who We Are: The New LAB Research Team

Martin L. Albert, M.D., Ph.D., the Co-Founder and Co-Director of the Language in the Aging Brain Laboratory (LAB), is Professor of Neurology at Boston University School of Medicine and Director of the Harold Goodglass Aphasia Research Center at the VA Medical Center in Boston.

Jordan Awerbach, B.A., is a research assistant and phlebotomist for the Normative Aging Study and the LAB.

Kit Brady, Ph.D., a clinical neuropsychologist and cognitive neuroscientist, is an Investigator for the VA Boston Healthcare System, Harvard Medical School and BU Medical Center.

Rossie Clark-Cotton, B.S., is a research assistant for the LAB. She is completing her master’s degree in applied linguistics at Boston University.

Lisa Connor, Ph.D., was formerly Assistant Director of the LAB and is now conducting research at the Neuroimaging Laboratory at the Washington University School of Medicine in St. Louis. She stays with the LAB as an investigator and a consultant.

Maria-Julia Glickman, B.S., a volunteer, is completing her master’s degree in speech-language-hearing pathology at the Universidad Nacional de Cordoba, Argentina.

Mira Goral, Ph.D., the project manager of the LAB, is a Research Assistant Professor of Neurology at the Boston University School of Medicine and a speech-language clinician.

Loraine Obler, Ph.D., the Co-Founder and Co-Director of the LAB, is Distinguished Professor of Speech and Hearing Sciences at City University of New York Graduate Center and Research Associate in Psycholinguistics, Department of Neurology at Boston University School of Medicine.

Carole Palumbo, Ph.D., is a Research Assistant Professor of Neurology for Boston University School of Medicine and a neuroimaging specialist.

Avron Spiro, Ph.D., is a Research Scientist for VA Boston Healthcare System, working primarily with the Normative Aging Study, and has academic appointments in the Schools of Public Health and Dental Medicine at Boston University.

Rebecca Williams, B.A., is a research assistant for the LAB and for Kit Brady’s Cognition and Stroke Risk project (CSR).

Dr. Martin Albert Addresses Language Change in Aging

Deterioration is not the only possible change that language functions may undergo in the process of aging. Language capabilities, or at least some of them, may potentially improve throughout the life span. Cicero declared in his monograph on Old Age that “old age is by nature rather talkative.” We have been studying the characteristics of this talkativeness by taping samples of speech in persons of different ages and analyzing the language patterns. We call the common pattern of discourse in older adults “elaborate” whereas the common pattern of discourse in healthy middle-aged adults is abbreviated, where the tendency is for short, concrete, declarative statements, or even sentence fragments.

In older adults, the speech pattern consists of more total words, more words per theme, more detail, more complicated syntax, more modification (use of adjectives or adverbs), more commentary on what they are saying, and more judgmental words (words such as “unfortunately.”)

Additionally, older adults in natural settings (as in writing letters to friends, for example) have a wider range of vocabulary than do young adults. Narrative skills or style may also improve (e.g., older people may be better tale-tellers than younger people).

It is essential to understand not just the impairments of language seen in older adults but also the different strategies they use, which may lead to improvements in communication.

How Does Our Memory Change with Age?

LAB Consultant Dr. Lisa Connor Examines the Cognitive Aging Process

People of all ages, in many cultures of the world, share the belief that memory declines with age. Is this belief justified? Are all memory domains vulnerable to the ravages of old age?

The body of literature on memory and old age is substantial, but several principles emerge to guide discovery of what skills decline and what skills are preserved.

The first, and most reliable, principle is that memory tasks requiring a high degree of effort, such as free recall and working memory activities, will exhibit the largest changes with aging.

The second principle is that memory for context, for example, remembering the source of information, is much poorer in older adults than remembering content.

The third principle is that the process of memory retrieval, rather than encoding or storage, is most affected by aging. This final principle may explain why successful memory training has been so elusive—techniques to enhance retrieval are much more difficult to devise than techniques to enhance memory encoding.


Some Simple Ways to Improve Your Memory for Names

Older adults frequently complain about not being able to remember people's names. If you often find yourself grasping for the name of a friend or acquaintance, these simple tricks might help.

The following techniques can be used:

1. **Face association**
   
   Examine a person's face discretely when you are introduced. Try to find an unusual feature, whether ears, hairline, forehead, eyebrows, eyes, nose, mouth, chin, complexion, etc.

   Create an association between that characteristic, the face, and the name in your mind. The association may be to associate the person with someone you know with the same name, or may be to associate a rhyme or image from the name with the person's face or defining feature.

2. **Repetition**

   When you are introduced, ask for the name to be repeated. Use the name yourself as often as possible (without overdoing it!). If it is unusual, ask how it is spelled, or where it is comes from, and if appropriate, exchange cards - the more often you hear and see the name, the more likely it is to sink in.

   Also, after you have left that person's company, review the name in your mind several times. If you are particularly keen you might decide to make notes.

   "Create an association between an unusual characteristic in the face and the name in your mind."

**Summary**

The methods suggested for remembering names are fairly simple and obvious, but are quite powerful. Association either with images of a name or with other people can really help recall of names. Repetition and review help it to sink in.

An important thing to stress is practice, patience, and progressive improvement in remembering names. These tricks and other mnemonic devices can be found at the Mind Tools website at http://www.mindtools.com/pages/main/newMN_TIM.htm.
Since 1976, researchers from the Language in the Aging Brain project have been investigating the extent to which language abilities change with healthy aging. By 1979, the project had developed into a longitudinal study and, since that time, we have followed the same core group of individuals for over twenty years.

As the lab continues to develop its goals, we ask and have asked the following questions: (1) How does language change with age? (2) Is language change related to cognitive change? (3) Is language change due more to health than to aging? (4) Are the effects of age and health on language direct, or are they mediated by cognition?

By using cognitive and neuropsychological measures, our ultimate goal is to explain changes in language in older adults over time.

Would you, or someone you know, want to participate in a study with us? Call us and leave a message at 617-232-9500 ext 4247

Word Search!

Can you find the following LAB-related words in the box to the left?

- Language
- Aging
- Brain
- Cognition
- Research
- Neuropsychology
- Linguistics
- Tests
- Longitudinal
- Veterans
- Hospital
- Boston
- University