‘The Nun Study’
by Reverend Myles N. Sheehan, S.J., M.D.

In the first years of the 20th century, Alois Alzheimer, a German neurologist, cared for a middle-aged woman with a marked personality change, characterized by bizarre behavior and memory loss. This woman died about five years after he first met her, years characterized by an inexorable decline to a final stage in which she was bed-bound, required total care and was unable to communicate meaningfully. After her death, Dr. Alzheimer studied the brain of his patient and described the changes in intellect, behavior and brain structure that characterize the disease now known by his name.

Alzheimer’s disease is a particular type of dementia. Dementia, when used as a diagnostic term in medicine, refers to the progressive loss of cognitive function in an individual. Thus dementing illnesses affect memory, language, the ability to recognize and name individuals, sense of direction, personality and other aspects of what it means for us to think and reason. There are various kinds of dementing illnesses, but

Reverend Myles N. Sheehan, S.J., M.D.

Father Myles Sheehan, S.J., M.D., (pictured right) is Provincial for the New England Province of the Society of Jesus. Previously, he ministered as a professor of Medicine and senior associate dean at Loyola University’s Stritch School of Medicine.

In September, Father Sheehan will be hosting a five-part miniseries on graceful aging that can be viewed on CatholicTV, as well as online.

Alzheimer’s is by far the most common. (Others include vascular dementia from multiple strokes and very unusual dementias like those caused by mad cow disease.)

Because there is no specific diagnostic test for Alzheimer’s disease, diagnosis is made by exclusion. In other words, a physician examining a person who has evidence of a cognitive problem will perform a physical exam, order laboratory tests (including neuroimaging studies like a CAT scan or MRI) and make a presumptive diagnosis of Alzheimer’s after ruling out multiple strokes, vitamin deficiencies (Vitamin B12 is the common one), thyroid abnormalities, depression, brain tumors or subdural hematomas (a collection of blood pressing on the brain). The diagnosis of Alzheimer’s disease is certain only after brain tissue has been examined under the microscope.

The whole topic has great significance for our future, both as individuals and as a nation. Dementing illnesses are highly prevalent with increasing age. (The fastest growing age group today includes people 85 and over.) Alzheimer’s disease afflicts individuals, wears down their families and taxes the social support and health care structures of our nation. It is difficult not only for the afflicted individual, but also for those who love them. However, in some cases patients have a gentle decline, become progressively more forgetful and, in earlier times, would probably have been called “senile” before they succumbed to a peaceful death ascribed to “old age.” But for other individuals, there is no mildly amusing “Arsenic and Old Lace” kind of batty confusion, but profound changes in the ability to think, relate to others, deal with emotions and perform some of the most basic functions of life like eating, bathing and using the toilet. Especially distressing are behaviors like running away, becoming violent or wandering and yelling.

But not everyone who becomes old develops Alzheimer’s. Some older individuals whose brains look pretty bad at autopsy (lots of tangles, plaques and missing neurons) were spry and active in life. Other individuals whose brains look quite well preserved spend their last few years appearing to have advanced Alzheimer’s. What is going on? No one is quite sure, but there are a lot of researchers
The Nun Study, continued

trying to ask the right questions, figure out the answers and give some clues as to ways to prevent, cure and better help those with the disease.

One of these researchers is the epidemiologist David Snowdon, who has written *Aging With Grace: What the Nun Study Teaches Us About Leading Longer, Healthier, and More Meaningful Lives*, a deeply moving account of a group of women he studies as part of his work. You may have seen some of the hoopla in the media about the “Nun Study” where Dr. Snowdon and his co-investigators looked into the lives, habits, histories and brains of women from the School Sisters of Notre Dame. Part of that work involved the fascinating comparison between essays these women wrote as novices prior to taking their religious vows, and their subsequent development of Alzheimer’s disease. In some cases, these essays were written well over a half century before any clinical evidence of Alzheimer’s disease appeared. Women with richer vocabularies and syntactically sophisticated linguistic styles appeared to fare better than those who had a paucity of polysyllabic words or complex sentences. (I am hoping this last sentence is predictive of remaining cognitively intact in my 90’s!) *Aging with Grace* is not only about different aspects of the nun study; it is a rich description of a group of women, a scientific quest and an excellent popular account of our current knowledge about Alzheimer’s.

Dr. Snowdon is a very engaging writer who clearly cares about science but cares at least as much about the women who are permitting him to do his research, allowing him to explore their past, their current knowledge and, even, after death, examine their brains. Regrettably, some review accounts of *Aging with Grace* have been quick to giggle about studying nuns and seem to delight in trivializing the religious commitment of a group of women. What makes Snowdon’s book so wonderful is that he clearly cares for these women, admires their commitment, is respectful of their way of life and is aware that their selfless generosity, manifest across their lifetime of work, continues after death by the donation of their brains for painstaking study and analysis.

Photograph by Ruth Jackson

Sr. Nicolette Welter, SSND, welcomed a special guest, Dr. David Snowdon, to her 101st birthday party. Sister was featured in “Aging with Grace,” Dr. Snowdon’s popular account of the Nun Study.
The Nun Study, continued

Snowdon neatly combines a good story, some well-explained science and a nicely developed spiritual sense. The pursuit of scientific research provides the bare bones of the story. Snowdon has used the School Sisters of Notre Dame as research subjects for a variety of reasons that make them an excellent group for study. Many who study Alzheimer’s disease, or, for that matter, other conditions that afflict humans, are bedeviled by the presence of what are called confounding variables, specific habits or traits of individuals that may predispose them to a particular illness. As a group of human beings, however, there is a uniformity in the lives of the School Sisters of Notre Dame that decreases some of the most common confounding variables. They did not smoke. They did not drink. There are good records of their lives that explain what they did in common and when individuals had unusual experiences. These characteristics make the sisters a remarkably good research group. Snowdon writes about hypotheses and testing data with verve and full of a sense of the excitement of good research. He provides the best popular account I have read of what we know about dementing illnesses and how to minimize or avoid them, and offers excellent explanations of some of the basic scientific principles that could lead to cures in the future.

But the best thing about this book is the stories of lives spent in service to God. Snowdon is very sensitive to the spiritual lives of these women: he honors their commitments and, in telling their stories, makes clear that God is present and active even in those who are confused or unable to remember. Hope and love can remain alive even when cognitive function declines. Aging With Grace is a realistic, honestly hopeful and grace-filled book about a difficult illness. It combines good science with wise advice and thought-provoking stories. I would recommend it to all who are at risk for Alzheimer’s disease—in other words, anyone with a brain. The book will be especially helpful for persons with early Alzheimer’s disease (yes, people with early Alzheimer’s can read, think and enjoy life fully), as well as family members and caregivers of individuals who are in any stage of the disease.
The theme for this issue of *Engaging Aging* is memory care. This is an issue that affects many religious as well as numerous people in our country. One of the articles that we present to you is about Our Lady of the Angels, a memory care facility in Milwaukee for two religious congregations.

A memory care environment is designed for persons with a level of impairment making it unsafe for him or her to continue to live in an active community, but who does not require the intensive care of a skilled nursing facility. Memory care allows a person experiencing memory loss to maintain a level of independence while relying on the safety and security of being in a residential facility with a professional staff.

The School Sisters of Notre Dame and the School Sisters of St. Francis planned and built their memory care facility with the assistance of NRRO’s planning and implementation process. If you are interested to see how NRRO can help your congregation to plan for the care of your elder members, please go to: [http://www.usccb.org/about/national-religious-retirement-office/planning-and-implementation-assistance.cfm](http://www.usccb.org/about/national-religious-retirement-office/planning-and-implementation-assistance.cfm)

The brochure will explain the planning process along with the eligibility requirements. We are currently enrolling religious institutes for the 2013 workshops. If your community has 25 or more members and less than 50% of the funds that NRRO projects that you will need, we encourage you to apply.

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**Calendar**

**September 18 - 20**
- Planning and Implementation workshop; Baltimore, MD

**September 20 - 23**
- CMSWR Assembly; Belleville, IL

**September 22 - 26**
- NCDC Annual Conference; Nashville, TN

**October 16 - 19**
- RCRI National Conference; Orlando, FL

**November 2 - 4**
- NRRO Consultant In-Service; St. Louis, MO

**November 13**
- NRRO/Avila Institute Webinar at 1:00 PM EST

**December 8 - 9**
- Retirement Fund for Religious National Collection Dates
Planning for the Future by Sister Elise Zettel, SSND

It all began the day I met Sister Adele who was alone and anxious. She asked me, “Where am I supposed to go? What do I do now?” I tried to allay her fears with the perfect answer when I was jolted into the reality that I didn’t have one. Our building contained seven wings and the enrichment center was two wings and two floors away. Then I learned that Sister Madeline had left the building and was walking down a busy street in search of her parents. Sister Sarah had begun entering the rooms of the sisters, frightening them in the middle of the night. Now I began to ask, “Where do we go from here and what do we do?”

I raised this red flag to our leadership and I asked other communities what they were doing to help sisters with memory loss. They were also struggling with the same issues. So, in 2006, nine religious communities began to discuss how we might solve this dilemma. Eventually, two of these communities, the School Sisters of St. Francis and the School Sisters of Notre Dame, collaborated with Community Care, our local provider of the Program of All-inclusive Care for the Elderly (PACE) to provide appropriate services for this population of our sisters.

We designed a building fitted to the needs of sisters with memory loss: bright rooms with large open living space and corridors configured so that walkers would have no dead ends. This plan included inner gardens where they can safely enjoy the outdoors. Next we prepared our staff with dementia training, and we decided to educate our entire membership about dementia. For this, we called on our local Alzheimer’s organization.

The heart of all of this planning and collaboration was to provide our sisters with a meaningful and dignified life. These sisters need to know that they are not alone but that they are supported in every way by a caring and compassionate staff. Community Care provides for their physical and psychological needs. The day is structured with a variety of activities to stimulate thinking. They also
Planning for the Future, continued

have opportunities to enjoy the arts. Each sister receives a calendar of activities for the month. Personal choices are honored, giving each sister freedom to be the unique person she really is. There are activities for all levels of ability.

Our pastoral minister provides for their spiritual needs by offering communal worship experiences, spiritual programming, and one-on-one visits.

The religious communities assign a sister to provide for the personal needs of the sisters. She meets with them regularly, sharing information, answering questions, and updating them on affairs of their religious community. Many volunteers come to visit, to help with activities, and to accompany sisters on clinical visits to doctors.

In addition, we assist the families of the sisters by communicating with them about their concerns. We assure them that they are always welcome to visit. Now when a sister asks, “What do I do now?” we are so pleased to be able to answer the question and sisters are content, knowing their day will be interesting and meaningful.

The Program of All-inclusive Care for the Elderly (PACE) is a managed care program that offers frail older adults comprehensive medical services and integrated Medicare and Medicaid financing. PACE strives to empower patients to remain in their homes and their communities for as long as possible. PACE providers assume responsibility for all of a patient’s needs and employ a multidisciplinary, team approach to patient care.
The National Religious Retirement Office coordinates the national collection for the Retirement Fund for Religious and distributes these funds to eligible religious institutes for their retirement needs. Our mission is to support, educate, and assist religious institutes in the U.S. to embrace their current retirement reality and to plan for the future.