

Ageing Well

A guide to healthy cognitive ageing in your patients

Measurable changes in cognition occur with normal ageing¹

As we age, our bodies change in noticeable ways – our hair greys, our skin wrinkles and loses its elasticity. However, the changes that happen within our brains are less obvious.

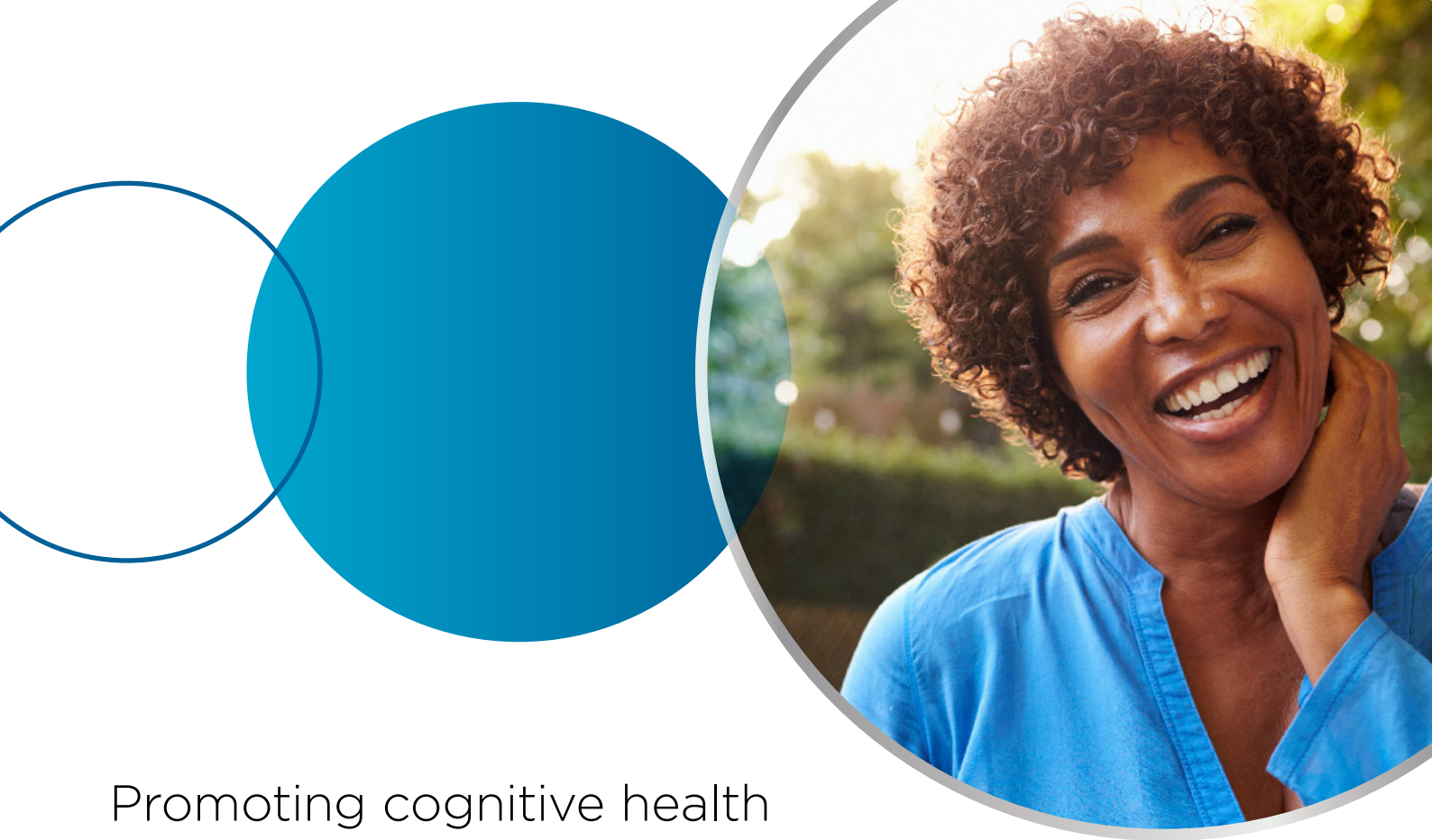
Ageing shrinks the brain and changes the vasculature.² Older brains tend to show a reduction in hippocampal, frontal, and temporal lobe volumes.³ These likely contribute to some of the cognitive changes we may experience.³

Our thinking abilities appear to peak around age 30 and, on average, very subtly decline with age.³ Areas influenced by age-related decline include overall slowness in thinking and difficulties sustaining attention, multitasking, holding information in the mind and word-finding.³ A mild reduction in these abilities is **not** the same thing as dementia.³

Interestingly, not all cognitive abilities decline with age. In fact, vocabulary, reading, and verbal reasoning can remain unchanged or even improve during the ageing process.^{3,4}



Understanding how we can support cognitive health is **key** to supporting the overall wellness of our ageing population.



Promoting cognitive health

How can you support your patients?

LIFESTYLE ADVICE

Here are four simple tips you can share with your patients:



Stay socially active

Close relationships with family and friends, as well as participating in meaningful social activities, may help maintain thinking skills and slow down cognitive decline.⁵



Keep learning

Developing a high cognitive reserve may make us more resilient to the effects of ageing.^{5,6} Education, an engaging occupation, mentally stimulating activities, learning, and social interactions may help to build cognitive reserve.⁵⁻⁷



Exercise

Physical exercise enhances cognitive function, improves memory abilities, and prevents cognitive decline linked to ageing.⁸



Maintain a healthy diet

Numerous studies show a higher diet quality (e.g. Mediterranean diet) is associated with a reduced risk of cognitive impairment.^{9,10}



PHARMACIST-LED INTERVENTIONS

Review the anticholinergic burden of current medications

Medications that inhibit acetylcholine can negatively impact cognition. These include antihistamines, urinary antimuscarinic agents and OTC cold treatments.^{11,12}



Check the anticholinergic burden of your patients' medication list. If ≥ 3 , advise your patients to speak with their prescriber to review their medication.¹³

Consider recommending a multivitamin

Centrum Silver has been **clinically shown to support cognition** in older adults.¹⁴

Through statistical modelling the researchers from COSMOS-Mind suggest daily intake of Centrum Silver for three years may **slow cognitive ageing by 60%*** compared with those taking a placebo.¹⁴

*Predicted modelling used to estimate age-related decline within the study, with observed treatment-related protection against cognitive ageing of 1.8 years in 3 years.

COSMOS-Mind study summary

Study Objective¹⁴

Assess the effects of:

Centrum
Silver



Cocoa
extract



on

1

Global
cognition



2

Episodic
memory

3

Executive
function

in



Older
adults aged
≥ **65 years**

Number of
participants:

2,262

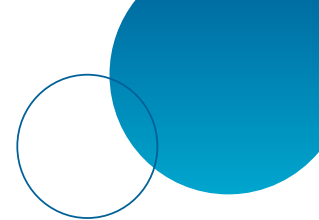
Methods:

Cognition was assessed by
telephone at baseline and
then **annually for three years**

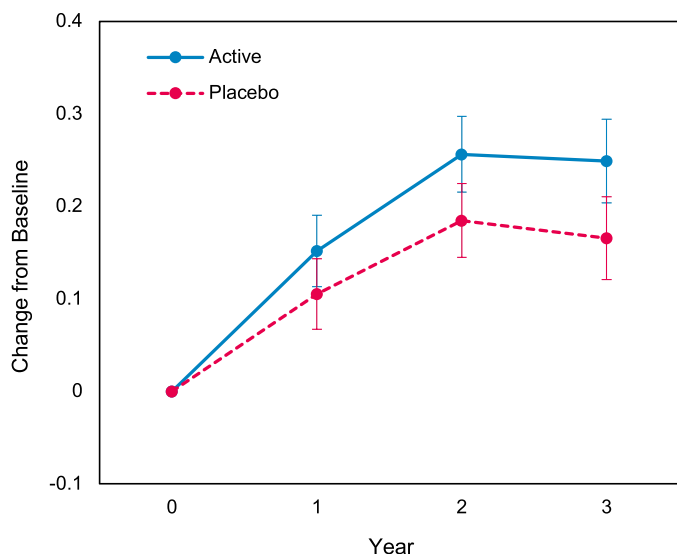


Cognitive function was measured according to three criteria:

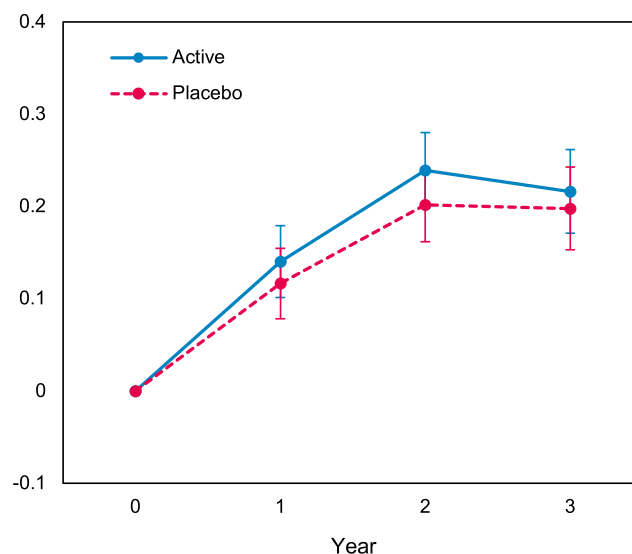
- » **General cognitive status** – a composite of cognitive abilities of both episodic memory and executive function.¹⁵
- » **Episodic memory** – the ability to encode, store and recollect learnt events.¹⁶
- » **Executive function** – the ability to carry out goal-direct behaviour through strategy, planning and awareness of information.¹⁶



Centrum Silver



Cocoa Extract

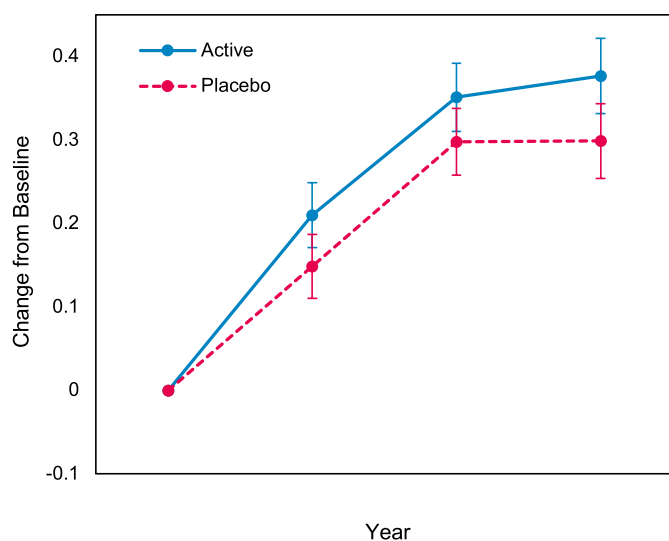


Patients taking Centrum Silver showed significant improvements in cognition vs patients who were taking placebo ($P=0.007$). No improvements were noted for those taking cocoa flavanols ($P=0.28$).

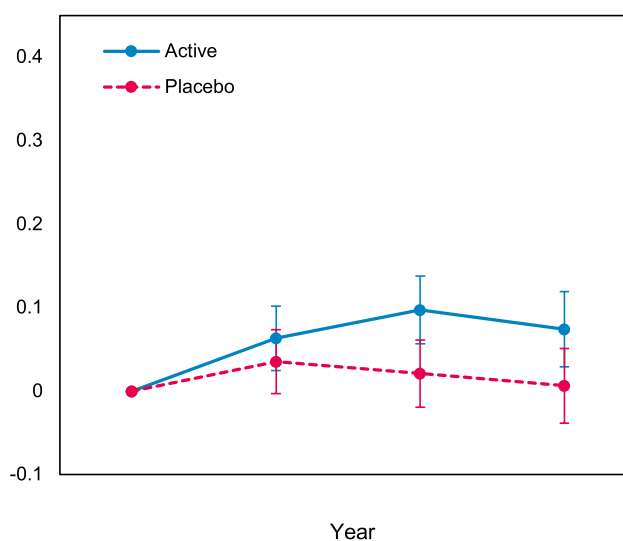
Through statistical modelling, researchers from COSMOS-Mind suggest daily intake of Centrum Silver for three years may **slow cognitive ageing by 60%*** compared with those taking a placebo.

Daily use of Centrum Silver had a **significantly positive effect** on global cognition in older adults.¹⁴

Episodic Memory



Executive Function



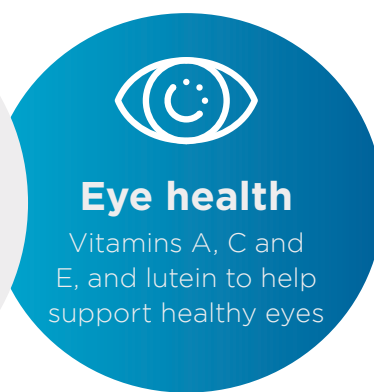
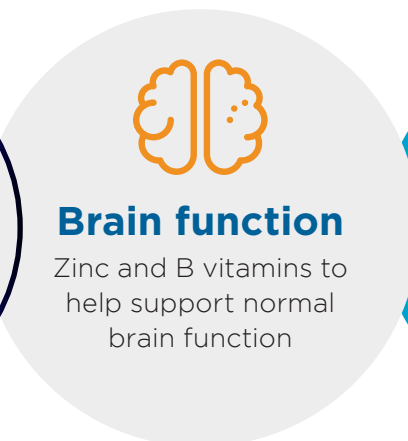
Patients who took Centrum Silver daily experienced an improvement in episodic memory ($p=0.04$) and executive function ($p=0.02$) over three years vs those taking placebo.

*Predicted modelling used to estimate age-related decline within the study, with observed treatment-related protection against cognitive ageing of 1.8 years in 3 years.

Centrum Silver

Centrum Silver is developed for people aged 50+ and helps to support healthy ageing.

It contains essential vitamins and minerals to keep your heart,* brain, and eyes healthy.



Summary

- » Cognitive changes are a natural part of the ageing process.¹
- » Building cognitive reserve may help to preserve cognitive function.⁵⁻⁷
- » Daily supplementation with Centrum Silver is clinically shown to support cognition in older adults.¹⁴



Support wellness
with Centrum Silver

*Not a replacement for cholesterol-lowering drugs. This statement has not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease. This product is not intended to provide daily intake of lutein. Take with a diet rich in fruits and vegetable.

References:

1. Murman DL. Semin Hear. 2015;36(3):111-21. 2. Peters R. Postgrad Med J. 2006;82(964):84-88. 3. University of California San Francisco. Healthy Aging. Available at: <https://memory.ucsf.edu/symptoms/healthy-aging>. Last accessed November 2022. 4. Harada CN et al. Clin Geriatr Med 2013;29(4):737-52. 5. Age UK. Cognitive reserve. Available at: <https://www.ageuk.org.uk/information-advice/health-wellbeing/mind-body/staying-sharp/thinking-skills-change-with-age/cognitivereserve/>. Last accessed November 2022. 6. Almeida-Meza P et al. Neurology. 2022;99(12):e1239-50. 7. Stern Y. Lancet Neurol. 2012;11(11):1006-12. 8. Mandolesi L. Front Psychol. 2018;9:509. 9. Psaltopoulou T et al. Ann Neurol 2013;74(4):580-91. 10. Smyth A et al. Neurology. 2015;84(22):2258-65. 11. Kim J & Parish AL. Nurs Clin North Am 2017;52(3):457-68. 12. Pazan F & Wehling M. Eur Geriatr Med 2021;12(3):443-52. 13. Boustani M et al. Aging Health 2008;4(3):311-20. 14. Baker LD et al. Alzheimers Dement 2022 doi: 10.1002/alz.12767. 15. Tam HMK et al. Appl Neuropsychol Adult 2015;22(2):94-99. 16. Cacciaglia R et al. Hum Brain Mapp 2018;39(11):4565-79.