

Welcome to the Cutting Edge Health Podcast with Jane Rogers, where we discuss science to help prevent cognitive decline.

[00:00:00] Jane Rogers: Welcome to the *Cutting Edge Health Podcast*. I'm Jane Rogers, journalist, health coach, consultant to doctors, and recovering chocoholic. My passion is helping my friends and others squeeze every drop out of life, using the latest scientific breakthroughs to make 90 the new 40, extend our health spans by 10 to 20 years, and prevent the diseases of aging. I travel the world interviewing leading experts in health and longevity to learn how to live longer, and better. Buckle up. It's never too late to ride the Cutting Edge, to grow younger, sexier, healthier, and sharper together.

My guest on this episode is Dr. Richard Restak. Dr. Restak is a neurologist and a neuropsychiatrist in private practice in Washington, DC. He's also a professor of neurology at the George Washington Hospital University School of Medicine. He's written 20 books about memory. His most recent is *The Complete Guide to Memory: The Science of Strengthening Your Mind.* I was excited to talk to Dr. Restak today about overcoming the everyday problems of memory. Dr. Restak, I want to thank you so much for being on this podcast.

[00:01:10] Dr. Richard Restak: Thank you.

[00:01:11] Jane: How are you doing this morning?

[00:01:12] Dr. Restak: I'm doing fine. How are you doing?

[00:01:14] Jane: I'm doing really well. Thanks. You write in your latest book, *The Complete Guide to Memory*. You say, where do I start here? You write, "A poor memory doesn't necessarily imply dementia, but a well-functioning memory virtually eliminates a concurrent diagnosis of dementia." That is a strong statement. Tell me about that.

[00:01:40] Dr. Restak: Well, it's very strong. I thought about it before I put it in the book. Went back over my own experience and interviewed some doctors, neurologists as well myself. I think it holds up. Some people that are born with forgetful. They're the forgetful professor. They make fun of them when they're in grade school, so they have a memory problem all their life.

It's part of the personality. Other people have good memories. What we're doing here in this statement is you're seeing that somebody can have a poor memory. It'd be perfectly normal, but when you go to the other end and you say, well, I want you to test so and so for dementia, Alzheimer's specifically, it's impossible for them really to turn up a pump a normal memory. Normal on testing and normal on interview and yet to have established generative dementia of disease.



[00:02:32] Jane: Now you are celebrating a major birthday this year, a major birthday. You're going to turn 80. You're a memory expert, and I bet you are doing some things that our viewers, our listeners, really want to know about. Tell me about your days. What are you doing to make sure that you keep that vibrant memory?

[00:02:55] Dr. Restak: Well, I practice every day with some of the methods that are in the book, and we can discuss them during our conversation. Then I continue to maintain an act of practice, and then I'm writing books, and then I give talks out again. I read an awful lot. I read about two or three books a week. I'm constantly reading both fiction and nonfiction. I've made some observations about the difference between fiction and nonfiction when it comes to memory. Namely, I think that fiction is a more challenging thing to do in terms of maintaining memory.

You can take a nonfiction book, like my book, and you can open it up if you like. In fact, that's the way I wrote it to any page that may be interesting to you. You might like one of the chapter titles, you can start reading it and you'll do pretty well with it. It's the rare novel that you could open up in the middle and start reading and not having read what came previously so, in the novel, you have to maintain characters.

You've got to maintain your judgment and the author's judgment about the character. What they've done. How they fit into the particular plot. That's difficult. That's a very demanding thing. I always noticed that the two things that often turn up when people are starting to have dementia or mild cognitive impairments so that they switch their reading to almost all nonfiction. Very few continue fiction unless it's very simple.

[00:04:26] Jane: Oh, that's interesting.

[00:04:27] Dr. Restak: Yes, very simplified in fiction, but demanding not so plot-driven thing they'll give up in terms of reading fiction. I've noticed that that's true.

[00:04:40] Jane: If you're doing memory exercises every day, you must believe in your core that having a good memory and really practicing it, strengthening your memory, consciously doing that. We'll talk about the ways you think it's best to do that. Do you think that will serve as a prophylactic to help prevent the cognitive decline of dementia?

[00:04:59] Dr. Restak: Well, Samuel Johnson said, the art of memory is the art of attention, but really, all memory methods are having to do with putting your attention on something. For instance, my wife's dog, who called her Schipperke, and dog lovers that may be listening in they'll recognize that as a Belgian barge dog. They're lovely dogs, but a very strange name, Schipperke. After a couple of experiences of someone stopping me on the street when I'm walking her dog and saying, "What kind of a dog is that?" I can't come up with the answer, I thought, well, let's create it into an image.



I have an image in my mind of a small robot, but a huge captain [unintelligible **00:05:44]** his finery and deliver and all that, holding a key. It comes right away, Schipperke. My wife thinks of it as skipping along, a girl skipping rope because she goes along holding a key. It's two different things, and the image I notice I'm saying as a proprietary image. Everybody has their own image of it based on their experiences, but by forming that image right now we'll never have any problem remembering the name of that dog.

[00:06:12] Jane: What you're saying is it's important for all of us to be very observant so that we can take in what we are seeing because when we see something, we'll remember much more readily than just when we read about something, right? When we have this visual image.

[00:06:30] Dr. Restak: That's correct, we have to learn to read and write, but we don't have to learn how to vision things. The God-given sensory or power, if you will, is image. The rest of the stuff is artificial writing and reading. What you're trying to do, essentially, the number one rule, well, the number one rule of attention, as we just said a moment ago. Number two rule is to convert language. Do that any way you can do it.

I'll give you a couple of methods as we go on, but I've already given you the one leg with that dog. Create either through the looks of it, sound of it, sometimes you use the sound, but the sight is the best because we're not primarily visual creatures. Seeing something and converting the word or a sense into a picture, into a mental drawing is the key to setting up memory.

[00:07:29] Jane: What if you're like my husband who just has a horrible visual memory? Is there a way that we can work to improve our visual memories?

[00:07:38] Dr. Restak: Well, you can. There are people that have visual memories and people who have auditory memories. It comes out in school. Some people learn a lot more listening to the professor talk, whereas other ones can't wait to get out, so they go back and read the notes and all that because they do better with reading something and with visual memory. There are these distinctions. You can, of course, build up.

There's an old method that a Chinese woman wrote a whole book about, the 1920s, and it has to do with teaching a child to look at an object and then close their eyes and try to see it as clearly as they can. Not to put it into words, but to see it very clearly and then when they think they've seen it, so they've almost copied it, open their eyes and see what it is they missed. As a result, you enhance the memory gets stronger and stronger. That's the thing your husband should be doing.

[00:08:41] Jane: I'll get on him about that. I'm sure he will appreciate it. He wants to improve. One of the things I read in your book was that you should cook and you should

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try to work off a recipe sometimes or try to memorize that recipe. Is that a good way to strengthen your memory on a daily basis?

[00:08:58] Dr. Restak: It's interesting You should bring that up. I said just a minute ago that one of the things I noticed when people begin to lose their memory powers that they begin to shift from fiction to nonfiction. Remember the other thing I've noticed people stop cooking because they can no longer bring everything together. The cooking is the magic of getting it all together so that it all comes. You're not looking for a piece of a recipe that you put aside, you have to set everything up like a seashell and then do it.

People with memory problems tend to have a problem, but suddenly the food is right, it's not cooked, and they're coordinating the different dishes. The main dish with the side dishes, they have to be at the same time. They'll bring out the nice prime rib and then the potatoes are still cold and have to be warmed up. You have to get it all linked together. That's a memory exercise, which I highly recommend. There's a lot to be said for cooking. It's cognitive. A lot of things are, memorization, remembrance organization, observation, taste, of course. All these things come together.

[00:10:10] Jane: How about speaking of cooking, you got to go to the grocery store first and I was blown away. I always have a list. I go to the grocery store, I keep my list all week and go, you're saying, no, take that list, memorize everything on the list. Leave the list in your car and go into the grocery store just from memory and get what you need. Is that a good training for your memory?

[00:10:32] Dr. Restak: Well, that's good training if you have what I call memory path that you follow. The key is to come up with 10 images that you see every day and best of all, that you see sequentially and have them so embedded in your brain, you then can put on those images or associate those images with something that you're going to be buying.

First, my images of my house, I'm going to give you 10 of my house, nearby library, coffee shop, liquor store, Georgetown University Medical School where I went, then a restaurant which I go to called Cafe Milano and then Key Bridge, and then the **[unintelligible 00:11:22]** you can see where I'm going. If Washington, then you go out to Reagan airport. I have each of those embedded in my mind. If I want to go to the store, I'd memorize them and put various things in on them.

For instance, if they're going to get quarter of milk, my house to now is in the shape of a milk and there's milk coming out the top of the chimney. Bread is the next thing. Well, then I go to the library instead of books, there's loads of bread. Next place is the coffee shop. If I'm looking for coffee, then I'll obviously that's the thing to do right away, just have a giant cup of coffee outside of there and the liquor store, you can have people

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sitting around outside drinking liquor, laughing and carousing and all that. Then you can put one of the objects there.

If you were also going to go there for orange juice, you could have orange juice are using as a mixer. Then you walk through there all 10 of them. Then when you get to the grocery store, you have your list, not in the car, because that's too inconvenient in your pocketbook. Then you go and you get all these things that you memorized. Then as you go to the checkout, just before you're going to get in line, you look at what you have your cart and then it should be the same and it will be soon. That's a good example right there.

[00:12:45] Jane: Oh, that's an excellent idea.

[00:12:47] Dr. Restak: Yes.

[00:12:47] Jane: Excellent idea. Speaking of the liquor store, how about alcohol and memory?

[00:12:53] Dr. Restak: It used to be thought that a little bit of alcohol was good for people, and it helped their cognition in general. Therefore, they would say, well you don't have to be a **[unintelligible 00:13:03]**, but just occasional alcohol. Well, now we're looking at this stuff a little more critically. A lot of times, among the people who are listed **[unintelligible 00:13:15]** and don't drink are people who formally used to drink.

I guess they drank enough that doctors or relatives said I think maybe you better just cut it out. They're not really abstemious, they're just former heavy drinkers. They're now starting to have results from the drinking history that they had. They're obviously not going to do as well as expected, most of all, they're going to be noted illnesses that they get from the previous alcohol intake that they had before. Is that clear or--

[00:13:53] Jane: Yes. Very clear. If you've got a history of using alcohol to some level of excess, you can expect possibly to see some memory issues down the road even if you are on the wagon.

[00:14:07] Dr. Restak: Correct. That's a good way to put it. Right, exactly. Therefore, they put you in a control group because they say you don't drink. Well, you're going to have problems because you drank before. Because I--

[00:14:21] Jane: Let's talk about technology.

[00:14:24] Dr. Restak: Sure.

[00:14:25] Jane: Because I find that my attention span is not what it used to be. Sometimes I worry it's because technology continues to interrupt all the time. You get



texts, you're doing email, you use your phone for things that maybe you be using your mind for, like doing addition on the calculator. Well, maybe I should do mental math. Tell me about technology and what you feel is a safe level for us to be using if we're concerned about memory.

[00:14:51] Dr. Restak: Well, technology could be used in a very positive way, in a very helpful way. For instance, if you're trying to think of a specific fact about historical figure, nice, if you could remember it, make a guess what the answer is. Then you would get on your iPhone and look it up on Google and what it was and find it out. That's a positive part of technology. You're using it as something that supports your memory, not replacing your memory. You don't need to say, oh, I'll just look this up. Try to remember it first. See if you come up with it. Write the answer down and see if you're right. It's also interesting to measure the degree of certitude that people have about their memory.

It's not just a matter, do you remember, but how certain are you that you're correct? There's often a discrepancy between those two things. If I say to you, what's your name? You say, I'm Jane, and I say to you, what percentage would you put of your certainty? You'd say, I'm 100% certain. That's my name. I suppose they asked you about something else that was not so well known that you weren't quite as sure of. You might say, well, 20% correct. The memory is not an all or none thing. It's more colored picture begins to lose certain colors.

It gets desaturated, it natured little bit. It doesn't just fall off the radar usually, for instance, sudden losses of memory or things that you think you would remember are worse. We have what I call the law effect where someone reads an ad in the paper and one of the stores is a special and an object they'd like to buy. He's a jewelry. They get in the car and run there and park and run into the jewelry store. Guess what? They're lucky they got the last one. They buy it and they're really happy and then they leave the jewelry store, and they can't remember where they parked.

Now is that a memory problem? Is that somebody that go to a doctor? Something like that? No, when you went there, all you were thinking of was this jewelry. When you got there and that's all you looked for was a general parking place. You didn't care long, was so close to the jewelry store that you could up in there. Then when you got what you wanted and talked to the salespeople and spent some more time you come out and don't remember where you parked. It's not a big deal. I suppose you came out said, "Did I drive here? Did somebody let me off? Did I take the bus or an Uber?"

That would be a worry because that would imply that so many different things have been forgotten. The conversations that you had with the driver, the observations that you made as you looked out the window, all these things are just wiped off the board, if you can't remember how you got to the mall. That's the difference between a normal and an abnormal memory. I sent that out earlier in the book. I give about 12 examples



of things that may or may not imply the memory that you should worry about. That's one of the things I give is the mall experience.

[00:18:05] Jane: A good example. Very good example. I can relate.

[00:18:08] Dr. Restak: We could all relate to that, I think. Also going into another room, get something and forgetting what it is that's so common that it's not at all a of serious memory impairment. What it is. You were, from the time you left the first room, you got to the second, you filled in the travel time with some thinking of something else. Then when you got to the second place, you thought, oh, my God, what the hell am I going to be in here for? I don't remember what it was.

[00:18:36] Jane: Oh, I love you because that happens to me. It scares me honestly.

[00:18:40] Dr. Restak: Happens all the time. It's not at all abnormal.

[00:18:43] Jane: Thank you. Good.

[00:18:45] Dr. Restak: You could go to the first room and standing there and looking around and say, oh yes, of course I was going into the comb. Go back and get the comb.

[00:18:55] Jane: Speaking of transportation, getting to the mall. In the book, you recommend that once in a while we don't use our GPS on our phones to get us where we need to go to navigate for us, that we do it ourselves with our own visual memory, with looking at buildings. That's a real good exercise.

[00:19:13] Dr. Restak: The GPS is helpful, but it's good to be able to drive places to places without using it because it keeps up your knowledge of the local geography. If you use it, become totally dependent upon it, you really lost your sense of where you are in sense of accepting time it'll take to get there by GPS. I think that it's something that is useful and helps the memory because you can learn new ways. You want to get to a certain place, you're not sure how to get there and you turn the GPS on. You've learned how to get there.

You use technology to strengthen the brain, not to weaken it. Then once you've learned how to get there, you don't need GPS. Creative thinking is to be able to use the images in your head. Of course, the more you can remember, the more images you have, and the more variegated they are in different parts across the different disciplines, the better you are at being able to use them in a creative way. It would be hard to think of somebody who is highly creative, who has a serious memory problem.



In fact, people with advanced degrees of dementia, not only can they not remember, but if you say to them, "Well just tell me what you think tomorrow is going to be like, just tell me the things you will probably be doing tomorrow." That'd probably be a problem for you and me because our days are probably quite different, but if you're one of these facilities, it's a pretty good guess that you could answer that question by just simply reciting what you did today. Can't do that. Can not only enter the present but locked out of the creative aspects of the future and of course, the past.

[00:21:13] Jane: If you don't have memory, then don't you lose your sense of self because we're only a compilation of our memories.

[00:21:23] Dr. Restak: That's correct. That's very true. That's what makes it so valuable because as it goes away, we become a shell of ourselves.

[00:21:38] Jane: Let me think if there's anything else. Oh, there's so much I want to talk to you about. How about sleep?

[00:21:46] Dr. Restak: Well, sleep will enhance memory because napping helps you to be able to put things together because you wake up refreshed, you see new connections sort of adrenaline rush, you do it right, so napping is very good. It's been shown that it does help memory, people remember things better, links into dreams.

Professor Dement at Stanford showed that if you gave puzzles to students and told them to think about the puzzles during the last 15 or 20 minutes, they were awake and often the solution would be suggested in a dream, not given to them but suggested so that it sometimes had to be interpreted so which was very interesting so the person was both aware of it and not aware of it.

They come in and they'd say, "Well, I had a dream of such and such," other students and the professor would laugh. They'd say, "Well, yes, so what does that mean, what was the answer to the puzzle." They said, "Well, that's the dream I'm trying to get which is a little more needed, but they're on the way, they're closer than ones who didn't.

[00:23:07] Jane: Speaking of dreaming, I've been told that if you don't have a robust dream life or if you can't remember your dreams, that's possibly a little red flag that you've got something going on with the brain that is not healthy.

[00:23:22] Dr. Restak: The other thing about dreams, you can force yourself to remember dreams, and it's very simple. That's all you have to do is express to yourself that the desire to remember dreams. Over the space, about two weeks, you begin to have and remember the dreams. Most of the dreams occur prior to awakening. Let's say you wake up at seven o'clock or 7:15, if you really want to start dreaming and get yourself up at 6:00 and then go back to sleep, then you'll almost certainly have dreams.



In fact, people who study dreams they do that because they know that's the time when most of our dreams occur. Isn't that interesting?

[00:24:06] Jane: Good idea, very good idea. It is interesting. I can do that. How about diet, what are you eating these days, are you eating a lot of blueberries and brightly colored foods for their antioxidant quality, or what are you eating?

Dr. Restak: Well, I think that's a good idea. There's a study that came out just this week showing that fast food is not good for cognition. You're better off eating your vegetables and things like that. The vegetarian diet is a very good diet. If you want to have the wine with it, that's fine. It's not something I would rule out for somebody, but you don't have to. It's a very good diet.

[00:24:45] Jane: How about exercise?

[00:24:46] Dr. Restak: Well, of course, the exercise is very linked with one's age. In the last 10, 20, 30 years, we're all exercising. When I was in medical school in the 1960s, we had one student who had gone to Boston University on the track team, and every morning he used to get up and he would run around Upper Northwest around the medical school. We would all laugh at him, and we'd say, "What is this all about?" He must have been-- Why is he doing this? This exercise is not something that comes naturally to people of every age. However, I'd say anybody that's less than 50 years of age, they're into exercise and they should be. It's helpful. Every study is showing that it's helpful.

[00:25:36] Jane: Good. Playing games. You like to play games and you like to play the game 20 questions.

[00:25:43] Dr. Restak: That's one that enables you to exercise your working memory because you have to remember each of the questions and each of the answers so that if your first question, is it mineral, vegetable, or animal and they say mineral. Well, you're not going to ask later on, is it a fish? You've got to remember all this and keep it in mind. It doesn't have to be 20 questions. You can make it fewer questions, and it can be played between two people.

[00:26:08] Jane: You need to keep it in mind. One other thing we need to touch on before we end this, and that's depression and memory.

[00:26:16] Dr. Restak: Well, if you're depressed, you tend to have depressive pressing thoughts because it just so happens that the brain tries to go back and find an explanation for everything. We're an explanation-seeking creatures. If we feel depressed, then we try to look back and say, I'm depressed because my marriage fell apart. This happened, or what happened? Well, it may be, but it may not be.



You're just looking for a reason and your thoughts are depressed, and your memory is affected negatively. The people sometimes are sent to doctors like me, and the complaints are, can't remember anything. Well, they're really depressed and they're so depressed, they really can't activate themselves to remember, but when their depression is treated, then the memory comes by.

[00:27:08] Jane: I think we've covered everything. Is there anything you'd like to wrap up with? What have we missed, Dr. Restak? What other advice do you have to share with this audience?

[00:27:22] Dr. Restak: I think those are the main things. Changing language into pictures and setting up a memory path that you can walk. I think that's the big thing and if you can do that, you'll remember things a lot better than the great majority of people that you run into.

[00:27:40] Jane: Excellent. Dr. Restak, thank you for your time. I really appreciate it and I hope you have a wonderful day.

[00:27:45] Dr. Restak: Same to you, Jane, and thank you for asking me. Bye-bye.

[00:27:49] Jane: Bye-bye.

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