

# Mix of taiji, cognitive therapy and support groups benefits those with dementia

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A therapeutic program that combined counseling, support groups, Taiji and qigong offered many benefits to people with early stage dementia. Photo courtesy of Sandy Burgener.

Those diagnosed with early stage dementia can slow their physical, mental and psychological decline by taking part in therapeutic programs that combine counseling, support groups, Taiji and qigong, researchers report. Some of the benefits of this approach are comparable to those achieved with anti-dementia medications.

The findings are detailed in the *American Journal of Alzheimer's Disease and Other Dementias*.

"Most of the research on dementia and most of the dollars up until this

point have gone into pharmacological interventions," said Sandy Burgener, a professor of nursing at the University of Illinois and lead author on the study. "But we have evidence now from studies like mine that show that other approaches can make a difference in the way people live and can possibly also impact their cognitive function."

In the study, 24 people with early stage dementia participated in an intensive 40-week program. The intervention included biweekly sessions of cognitive behavioral therapy and support groups, along with three sessions per week of traditional Chinese martial arts exercises and meditation, called qigong (chee-gong) and Taiji (tye-jee).

A comparison group of people with early stage dementia did not participate in these programs for the first 20 weeks of the intervention.

Researchers are discovering that multi-disciplinary approaches – those that address patients' physical, mental and psychological dimensions – show the most promise in treating people with dementia, Burgener said.

"There's a lot of support for multi-modal therapies for persons with dementia, especially those with early stage dementia," she said.

"Not only can we help people have a higher quality of life, but these treatments support neuronal function and have the potential for neuronal regeneration."

Earlier studies have shown that such programs can work as well as anti-dementia drugs, Burgener said.

Qigong and Taiji combine simple physical movements and meditation. Qigong is a series of integrated exercises believed to positively affect the mind, body and spirit. Taiji is a type of qigong that melds Chinese philosophy with martial and healing arts, said Yang Yang, a professor of

kinesiology and community health and a co-author of the study. He is a master Taiji and qigong instructor whose research focuses on the efficacy of Taiji and qigong for older adults.

Cognitive behavioral therapy is a form of psychotherapy that seeks positive alternatives to the beliefs and behaviors that can undermine a person's health and happiness. Research has shown that cognitive behavioral therapy and support groups aid those who struggle with depression and other physical or mental health problems.

Participants in the program benefited in a variety of ways. After 20 weeks, those in the treatment group improved in several measures of physical function, including balance and lower leg strength, while those in the comparison group did not. There were also positive cognitive and psychological effects, Burgener said.

"We saw gains in self-esteem in the treatment group and pretty severe declines in self-esteem in the comparison group," she said. "Those in the treatment group also had sustained and slightly improved mental status scores, which meant we were impacting cognitive function."

Both groups saw increases in depression, Burgener said, but the increase for those in the treatment group was a fraction of that seen in the comparison group.

No additional benefits were seen after 40 weeks, but participants were able to maintain their initial gains.

The intervention was quite popular with the study subjects and their caregivers.

Although designed (and funded) to include only 10 participants and 10 people in the comparison group, Burgener and her colleagues enrolled 46

people in the program, with those in the comparison group starting the intervention after 20 weeks.

"People drove from all over to be in this study because there's nothing like this available for them anywhere else," Burgener said.

The program was so popular that she and her colleagues have kept it going for more than three years, with many of the first participants and their caregivers still engaged.

"The clinical findings, from my perspective, go far beyond the statistical findings," Burgener said. "People were happier when they were in the treatment group. Two men came in with walkers and left without them. One is in our Taiji group three years later and is still not using a walker."

Another participant began the program with a score of 26 on a 30-point test of mental status. A score of 24 or below is suggestive of dementia, Burgener said. This man stayed with the group and was recently re-tested. His score was still 26.

"That's never going to show up as a statistical finding but that case example is pretty profound," she said.

Burgener is an advocate for further research into non-pharmacological interventions for people with dementia, which she sees as co-therapies to the drugs that are given to many people when they are first diagnosed.

"Funders and insurance companies are willing to put money into drugs, but it's been a hard sell to get money for these kinds of programs," she said.

Source: University of Illinois at Urbana-Champaign

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