Alzheimer’s Disease: Remember to Laugh
By Laurie Young and Kay Caskey

This paper first appeared in the Association for Applied and Therapeutic Humor Newsletter and was delivered as part of a white paper for the International Society for Humor Study’s annual conference held in Italy.

In the activity room, Hazel said to Clyde, “I bet I can tell you how old you are.” “No you can’t.” said Clyde. “Oh yes I can. Stand up and turn around.” He did what he was told. “Now pull down your pants.” He hesitated and then dropped his pants. “You’re 84.” she said. Clyde was stunned. “How in the world did you know that?” “You told me yesterday.”

Bill Clinton walks into a nursing home. “It has been awhile; does anyone here know who I am?” A grandmotherly resident patted him on the shoulder and said, “Don’t worry hon; just go to the front desk and they’ll tell you.”

These jokes are told with great amusement at senior centers, clubs, and golf courses—anywhere elders are gathered. Long before people are personally affected by the care-taking needs of loved ones, before they themselves show any signs of memory loss, people find ways to joke about their concerns. Middle-aged people commonly make light-hearted comments about “senior moments”. We poke fun at things that concern us and jokes about memory are common, especially among seniors.

Certainly there is nothing funny about Alzheimer’s Disease (AD). Caregivers struggle with its cruel effects, often for years. People bearing the diagnosis feel anxious and helpless. Although research has produced only minor treatments, one major change has occurred in recent years. While a definitive diagnosis still requires autopsy, the disease is now well enough understood to be diagnosed relatively early in the process. To banish laughter for the caregiver or the person with AD means to forsake a powerful coping tool. Joking gives a sense of control over a disease that has no clear cause and currently no cure.

Humor Among Caregivers

“I laugh to survive.” “If I didn’t laugh I would cry.” are phrases frequently heard at AD support groups—indeed are commonly used by people who face any serious life challenge. Currently four million Americans have Alzheimer’s and it’s predicted that as baby boomers age that number will grow to over 14 million. AD is usually a family matter and many caregivers find that joking is a good way to help distance and relieve the stress caused by the increasingly complex needs of loved ones.

On very active AD chat lines we have observed both the humor and its angry dismissal. (There is nothing funny about this disease and I care more than you—if you really did care, you wouldn’t be laughing.) New subscribers seem to be most offended by the humor, which probably illustrates the “humor is tragedy plus time” philosophy. Others amaze even themselves by the degree to which they use humor to cope:

“I have polled all the caregivers I know and they all said the same thing. Laugh whenever you get the chance. Dealing with AD is not very funny so if something happens that is even remotely funny, let it rip.”

One director of an AD daycare center said “If you don’t have a sense of humor you have no business in this line of work.”

Humor and People with Alzheimer’s disease

Some of the hallmarks of AD are wandering, agitation, hostility, and even paranoia. Historically institutions drugged patients and tied them down. We believe treatment methodologies, even more than the disease itself can create the very thing caregivers were trying to correct. Fortunately, the philosophy of care for AD patients has changed drastically.
One post said: “My daughter is four and hates being told what’s good for her, and she hasn’t lived independently for years. It must be hard as hell and terrifying to realize that after all these years, you aren’t clear about things and you need help. That’s why the humorous approach will work when a direct tactic fails miserably. Humor helps maintain the loved ones dignity.”

Humor and laughter can calm, reassure, and send a message of light-hearted joy. One woman told about arriving at her parents’ home to take them to church. Mom told dad to go get dressed and he emerged from the bedroom wearing his wife’s clothes. Mom and daughter pealed with laughter and seeing this, dad joined in. Their laughter relieved their own stress and it also sent a joyful, non-alarming message to the dad. Because they didn’t get uptight, he didn’t either. Another said, “I owe my mom some levity. If I see her situation as grave, she will pick up on that.”

Finding the humor in Alzheimer’s is wonderfully depicted in Debbie Hoffmann’s Oscar nominated documentary, Complaints of a Dutiful Daughter (1995). It’s a moving, surprisingly humorous account of Hoffmann’s experience caring for her mother. Her groundbreaking effort differed vastly from the typical grave educational films about dealing with the burden of AD.

She portrays her own denial of her mother’s disease in a humorous, self-deprecating style. In a wonderfully funny scene, Debbie recounts a phone conversation with her mother, Doris Hoffman who mentioned offhandedly that it was the month of May. Debbie got so involved with wanting to correct her, as it was June, that her mom was reduced to tears. Debbie then hurried over to her mother’s apartment saying, “I’m here to show you June.” By that time Doris had no memory of that difficult conversation. Debbie’s liberating moment came when she realized that while reality was important to her, it had no meaning for her mother. Enjoying each other’s company did not depend on accurate facts. The sheer craziness of trying to control the uncontrollable allowed Debbie to finally say, “What does it matter if she thinks it May?” Not so long ago stressing reality was thought to be the most appropriate treatment plan. Once Hoffman rejected this established wisdom and concentrated on joy, both women’s lives changed dramatically.

Laughing and even gentle teasing of people with the disease can turn into a tension relieving exercise for the caregivers and patient alike who, while cognitively impaired, is still greatly influenced by ambient tensions. Too often AD is seen only as defeat and decline. For the caregiver, there is only burden; for the person with AD a slow slide into despair. Debbie ended the film with “We have very few coherent conversations anymore, but she loves to talk. I don’t know what she’s talking about, but she’s having a great time. She laughs, I laugh. She’s really doing fine.”

**Prevention, Humor and Play**

While researchers have been slow in developing treatments that will prevent or slow the progression of AD, they have made some interesting discoveries resulting in recommendations that can be put in place at any age. Essentially they say to “use it or lose it”. The key to growing a better brain is to look for NEW challenges because learning stimulates rapid growth in the connections in the brain, creating a surplus of brain tissue that can compensate for cells damaged by disease. Play is the brain’s favorite way of learning, and solving puzzles, learning to juggle, playing word games or improv can all have brain-enhancing benefits. So go forth and play—it’s good for you—and don’t forget to laugh.

©Kay Caskey and Laurie Young teach Health and Humor, Successful Aging and Holistic Approaches to Play Across the Lifespan through Western Michigan University’s Graduate Holistic Health program. The also give keynotes and workshops through their company, Laughter Works. www.LaughWays.com 800-575-2844