

Ageing Mind Initiative

Issue 33 December 2017 Newsletter
www.uq.edu.au/ami



Page

FEATURE STORIES

The Human Animal Bond	2
Preparing for the death of a companion animal	4
RSPCA Grey Nomad Program	5
Lung Cancer Awareness Month	6

RESEARCH UPDATES

Social Perception Across the Lifespan	8
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CURRENT RESEARCH PROJECTS

Sleep and Neuroplasticity	9
Communication and Technology	10
Developing a Language Bank	11
Cognitive impairment in Parkinson's disease: fMRI Study	12
Sideways balance and hip Osteoarthritis	13
Biomechanics in Flatfoot	14
How we show our empathy to others across lifespan	15
Do you have hip pain?	16
Walking by adults	17
Ankle Pain in Osteoarthritis	18
Short term memory training	19

Merry Christmas to all of our wonderful readers. We have put together an edition celebrating the human animal bond. Many of our readers are pet owners and there has never been a more exciting time for research involving animals. You can read more about this in our first three feature stories (pages 2-5).

It has also been an exciting year with Lung Cancer awareness month in November (page 6), followed by many new and interesting research projects searching for participants.

Thank you to everyone who has participated in a research project this year and to all of the researchers for their tireless efforts in searching for advances in age-related research. We are so proud to be part of this community of passionate individuals.



ISSUE QUOTE:

If you are doing something, you are living.
"Life is Action!" ~ Jerry Seinfeld

Feature Story: The Human Animal Bond

The presence of animals enhances psychological well-being, reduces feelings of loneliness, aids in recovery from illness and is associated with lower levels of depression in bereaved elderly individuals (e.g., Sharkin & Knox, 2003; Wrobel & Dye, 2003). Fundamental to these effects is the human animal bond, a strong sense of attachment between humans and animals that allows for a sense of social relatedness and belonging. This connection is strongly psychologically comforting, if not crucial for a high quality of life (Brown, 2004). The term *companion animal* often means a psychological attachment and a reciprocal relationship (Walsh, 2009).

For many Australians their experience of companion animals spans a lifetime from birth through to retirement. Providing a child with an animal often conjures not only experiences of joy, but also teaching about the responsibilities of caring for a living being. Children learn how to relate to, care for, and love animals and this shapes their child's attitudes and behaviours about the world. Some research has shown that having pets promote positive psychosocial development of children who show heightened empathy, self-esteem, cognitive development, and increased participation in social and athletic activities (Melson, 2001, 2003).

Continued next page...

Archaeological evidence suggests that companion animals have been part of our human experience for over 14,000 years. Starting with domesticated wolves both dogs and cats soon became valued by humans as companions as well as useful assets in human society (Serpell, 2008). In the Greek and Roman empires, dogs were kept as hunters, herders, and guardians, and also cared for as loyal beloved pets (Coren, 2002). In Peru, archaeologists have discovered cemeteries where early Chiribaya people buried their dogs with blankets and food alongside human companions (Begley, Contreras & Hays, 2006).

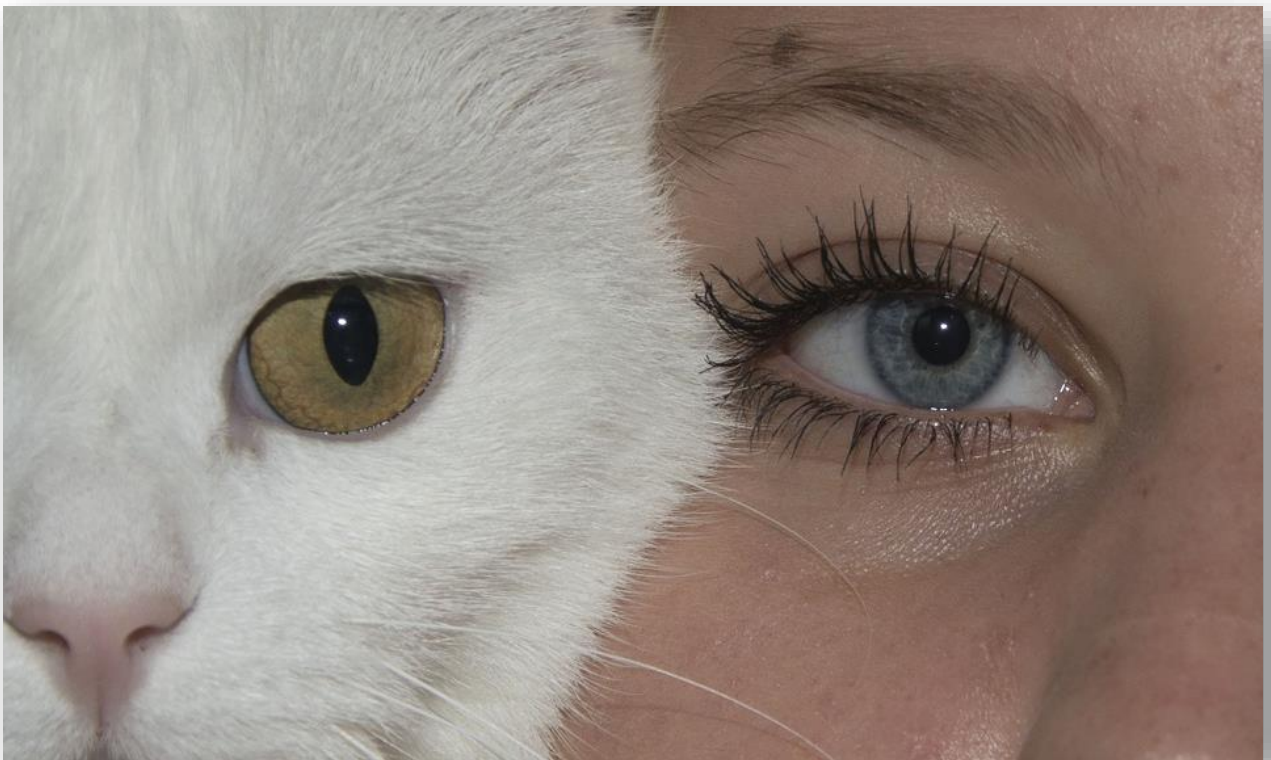


Feature Story: The Human Animal Bond

Continued...

Various studies with adults have reported that pets continue to provide companionship, improve health, increase relaxation, offering protection, love, and loyalty, acting as a channel to express your inner child and of course, providing non-judgemental, unconditional acceptance (Cohen, 2002; McNicholas et al., 2005; Walsh, 2009). As an older adult there can be an increase in losses of personal relationships, physical functioning and social roles. Research studies have continued to show that animals play a positive role in the lives of older persons living alone (Siegel, 1990, 1993). They appear to boost life satisfaction and levels of personal safety after retirement compared to people who do not own animals (Norris, Shinen, Chick, & Beck, 1999).

Famous psychologist Sigmund Freud and his daughter Anna Freud initially reflected that their dogs taught them about “pure love” (Genosko, 1994). Later scholars marvelled at the powerful effect of a perceived nonjudgmental emotional support (Allen, Blascovich, & Mendes, 2002) and its role in helping nurture a person’s skills in forming connections with others through increasing self-cohesion and -esteem (Brown, 2004). If you fear being judged, ridiculed, or not taken seriously in a conversation with a human, animals are a safer and more secure option (Hafen, Rush, Reisbig, McDaniel, & White, 2007). In a global world where we have never been more connected through technology and media, there is still a fundamental need for reliable, meaningful and in-person connections. For many, companion animals provides exactly that.



Preparing for the death of a companion animal

It is undisputed that connections with animals can improve quality of life, improve health and nurture well being. With the formation of such a close bond also comes the significant distress when the loss of a pet occurs. The intensity and length of some peoples mourning for their pets can match or even overtake the grief experienced when losing a human companion (Wrobel&Dye, 2003). While we have established frameworks for supporting people through the loss of human connections e.g., those of a spouse, the societal mechanisms are not as able to recognize or acknowledge the grief of the loss of a pet. This can lead to an experience of loss that goes unrecognized by society as legitimate and causes further feelings of disconnection and a lack of empathy (Meyers, 2002). In such cases, the person experiencing the grief may not receive proper grief support, which can have negative psychological consequences, particularly when bereavement is complex or prolonged.

The reasons for why people may lose a pet are varied and complex. It could be the result of euthanasia, accidental separation, forced separation (in the case of aged care facilities not accepting pets), and even abandonment. The circumstances of the loss can often complicate the process of grieving, and pet owners may experience long-term significant distress. More research needs to be done recognising the importance of the human–animal bond through themes of attachment, loss, and grief. More research also needs to be done in creative initiatives designed to provide specific support to people who have experienced the loss of a pet or companion animal.

Books About Providing Pet Loss Support

- Barton Ross, C., & Baron-Sorensen, J. (2007). *Pet loss and human emotion: A guide to recovery* (2nd Ed.). New York: Routledge.
- Carmack, B. J. (2003). *Grieving the death of a pet*. Minneapolis, MN: Augsburg Fortress.
- Lagoni, L., Butler, C., & Hetts, S. (1994). *The human–animal bond and grief*. Philadelphia: W.B. Saunders Co.
- Odendaal, J. (2002). *Pets and our mental health: The why, the what, and the how*. New York: Vantage Press.
- Nakaya, S. F. (2005). *Kindred spirit, kindred care: Making health decisions on behalf of our animal companions*. Novato, CA: New World Library.
- Odendaal, J. (2002). *Pets and our mental health: The why, the what, and the how*. New York: Vantage Press.
- Sife, W. (1998). *The loss of a pet: A guide to coping with the grieving process when a pet dies*. New York: Macmillan Publishing.



RSPCA Grey Nomad Program

If you have a caravan or motorhome and are looking for a truly unique experience, the Grey Nomads & Motorhome site located at the [Brisbane RSPCA Animal Care Campus](#) could be for you!

The Grey Nomads program has been designed to allow travellers access to a very unique experience. In return for low cost accommodation (donation), we ask that all campers take part in our volunteering program which will give you a great insight into the life changing work that we do here every single day. Shifts will range between 2 & 4 hours per day and tasks may include, but are not limited to;

- General gardening and maintenance
- Assistance with the laundry
- Administrative/ad-hoc tasks

Please note that due to the nature of the program, there will not be an opportunity to assist with any animal care tasks during your stay.

The minimum stay is three nights and a two week maximum stay limit. Bookings are essential and must be made 48hrs in advance. Check in time must fall between 10am and 3.00pm Monday – Thursday.

Any pets must be fully vaccinated, sociable, and must be used to staying in confined areas with use of leash. Unfortunately, we cannot allow other pets to roam our grounds in efforts to keep our shelter animals as calm as possible. Children under the age of 18 are not able to volunteer and must be supervised by a parent or guardian at all times.

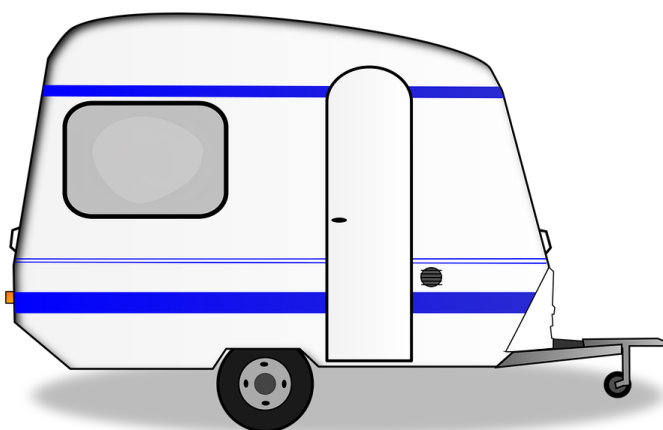
This new initiative has been specifically designed for Grey Nomads with a caravan or motorhome who can stay onsite and use the facilities below:

- Water
- Power
- Waste Disposal
- BBQ/ Undercover picnic area

There are six bays in total for caravans and motorhomes and each site is approximately 30ft in length. Please note that your caravan/motorhome will need to fit in this space.

For further information and bookings, please contact the RSPCA Qld Facilities Hire Coordinator on 07 3426 9943 or email events@rspcaqld.org.au

<https://www.rspcaqld.org.au/volunteer/grey-nomads>



RSPCA 
Queensland

November - Lung Cancer Awareness Month

Highlighting the Similarities and Differences of Lung Cancer vs Mesothelioma

November was an important month to raise awareness about carcinogens that are harmful to our lungs and cause cancer. Lung cancer has been the cause of more lives lost than breast, prostate, and colon cancer combined. While mesothelioma is not defined as lung cancer, it is an aggressive cancer that mainly affects the lining of the lungs, heart, or abdomen. The only known cause of mesothelioma is the exposure to and inhalation of asbestos fibers, which was commonly the case among industrial workers and their spouses who laundered their clothes. The fibers can then become lodged in the lining of the lungs and slowly irritate them over time. While there are other types of mesothelioma (pericardial: heart, and peritoneal: abdomen), [pleural mesothelioma](#) is the most common accounting for 70–90% of the 3,000 new cases per year.

Similarities

To [differentiate between mesothelioma and lung cancer](#), it's important to first discuss how they are similar. In both cases, initial symptoms can come off as nonspecific and may be mistaken as the common cold, flu, or even pneumonia. Many patients will ignore early symptoms believing it to be weather-related. However, as symptoms persist and the 'cold' does not go away, patients begin to notice subtle differences in how they are feeling and what appears to be abnormal.

Differences

Mesothelioma symptoms develop slowly usually not appearing until decades (15-50 years) after initial exposure. Because of the location of where the tumors develop within the lung for lung cancer and mesothelioma, symptoms may present themselves differently so it is especially important to keep track of when you started to feel ill and other factors that may have contributed to it. It is important to note that smoking does increase the risk of developing mesothelioma if you have been exposed to the fibers in the past. Tell your doctor if you have been exposed to asbestos and if you are or were a smoker.

Next Steps

Keeping the conversation going will help save lives. Many survivors or families of loved ones say that they never thought about how they could have been [exposed to asbestos from a job](#) or task they did several years ago that is no longer in their present lives. Knowing how friends and family members could have inhaled asbestos fibers and suggesting they go to the doctor could help with early detection and prognosis should they actually have a tumor.




Quitting tobacco products and avoiding other lung irritants will also reduce the risk of developing mesothelioma and other forms of lung cancer.



Mesothelioma
+ ASBESTOS AWARENESS CENTER

www.maacenter.org

How Symptoms Differ Based on Mesothelioma Type

PLEURAL	<p><i>forms in lung lining</i></p> 	<p>COMMON SYMPTOMS</p> <ul style="list-style-type: none"> Fatigue Difficulty breathing (Dyspnea) Hoarseness Low oxygen level (Hypoxemia) Difficulty swallowing (Dysphagia) Fever/night sweats Fluid buildup (Pleural Effusion) 	<p>COMMON MISDIAGNOSIS</p> <ul style="list-style-type: none"> Influenza (flu) Pneumonia Chronic Obstructive Pulmonary Disease (COPD) Lung Cancer
PERITONEAL	<p><i>forms in abdomen lining</i></p> 	<p>COMMON SYMPTOMS</p> <ul style="list-style-type: none"> Nausea Unexplained weight loss Anemia Blood clots (Thrombosis) Fluid buildup (Peritoneal Effusion) Loss of appetite (Anorexia) 	<p>COMMON MISDIAGNOSIS</p> <ul style="list-style-type: none"> Inguinal Hernia Irritable Bowel Syndrome (IBS)
PERICARDIAL	<p><i>forms in heart lining</i></p> 	<p>COMMON SYMPTOMS</p> <ul style="list-style-type: none"> Irregular heartbeat/palpitations (Arrhythmia) Chest pain Fever/night sweats Coughing Shortness of breath (Dyspnea) 	<p>COMMON MISDIAGNOSIS</p> <ul style="list-style-type: none"> Heart failure Coronary Heart Disease Inflammation of the lining of the heart (Pericarditis) and muscle (Myocarditis)

CAUSE

Asbestos exposure

Notify your doctor if you suspect you've been exposed.

Research Updates!

Social Perception Across the Adult Lifespan

We tested whether a nasal spray containing oxytocin (aka the 'love drug') would reduce age-related difficulties in understanding social information.

Our results showed that overall younger adults performed better than older adults in a task that involved watching videos and inferring how people were feeling. Interestingly, the oxytocin nasal spray improved both groups' performance on the task but failed to reduce the age differences. The eye-tracking analysis showed that the oxytocin changed the way older women viewed the videos, with more gazing towards the people (compared to the background information) in the videos after taking the oxytocin compared to placebo.

Overall, these findings suggest that intranasal oxytocin can alter the way people process social information but it does not appear to be an effective solution for improving age-related difficulties in social understanding.

We would like to thank all the participants who generously volunteered their time to help out with this project!



Current Ageing Research

The following projects are looking for participants. Make a difference in Ageing Research today. Sign up now!

Sleep and Neuroplasticity

Amongst its many functions, sleep plays a critical role in consolidating the memories and skill that were acquired during the day. When we learn a new skill or store a memory, certain physiological processes, known collectively as **neural plasticity**, take place that retain the acquired information. During a particular phase of sleep known as slow wave sleep (SWS), large, highly synchronous bursts of low-frequency brain activity known as **slow-wave oscillations** are critical in consolidating these plastic changes. Consolidation is important in promoting long-term storage of information.

Despite the undeniably important role that sleep plays in promoting neural plasticity, there are many amongst us who find it difficult to sleep properly, and thus, to gain benefit from a good night's sleep. One demographic particularly prone to poor sleep is the elderly, and poor sleep in this group has recently been causally linked to memory dysfunction. Impairments in memory manifest because of impaired plasticity mechanisms.

Recently, non-invasive brain stimulation, transcranial discrete current stimulation (tDCS), has been used to induce these oscillations in the awake human brain, and has consequently enhanced memory. The project described uses

tDCS to harness the beneficial effects of sleep in promoting plasticity in the brain in young and elderly people.

The Queensland Brain Institute (QBI) are currently running studies to investigate these processes further.

For more information, please contact:
Claire Bradley
claire.bradley@uq.edu.au



RESEARCH PROJECTS

The Florence Project at UQ <http://www.itee.uq.edu.au/cis/florence-project> is calling for participants. **Communication and technology:** This is a study exploring needs and experiences related to communication changes for people living with dementia and their communication partners, as well as their experiences with technology. It involves a single interview.



ARC CENTRE OF EXCELLENCE FOR
THE DYNAMICS OF LANGUAGE

**Are you living with dementia?
Or caring for someone who is?**

A study being conducted at the University of Queensland is investigating communication changes and experiences with technology.

Participation would involve one audiotaped interview with you and a family member about your experiences and needs related to communication changes, and use of technology.

If you are interested in participating or have any questions about the study – Please contact Dr Jacki Liddle at the Florence Project at the University of Queensland on:

Email: j.liddle@uq.edu.au

Or phone Rebecca on: (07) 3365 3988

RESEARCH PROJECTS

The Florence Project at UQ <http://www.itee.uq.edu.au/cis/florence-project> is calling for participants. **Developing a language bank:** This is a study exploring whether it is possible to develop and store meaningful language and memories to form a personalised bank of information for people living with dementia. Participants would need to live in and around Brisbane, be living with mild to moderate dementia or be a family member/communication partner. This study involves up to six home visits by a health professional and is very flexible.

Research Volunteers Needed!

Researchers at the University of Queensland are looking for male and female volunteers living with dementia and their caregivers to participate in research.

Under the direction of
Professor Helen Chenery and
Dr. Brooke-Mai Whelan



Who do we need?



- Participants who have been diagnosed with dementia
- Speak English sufficiently well to engage in a series of interviews and conversations
- Be willing try different technologies (e.g., iPad) to assist with communication difficulties (e.g., word finding problems, difficulty remembering what is happening and when it is happening)

Dates and times for participating are flexible and may involve 6 visits to your home (about 1 hour per visit).

Contact for more information: 3365 3988
or bmw@uq.edu.au

RESEARCH PROJECTS

Cognitive impairment in Parkinson's disease: fMRI study

We are conducting a research study examining cognitive impairment in Parkinson's disease. The main purpose of this study is to identify markers for early detection of mild cognitive impairment in Parkinson's disease and underlying brain mechanisms.

We are seeking for healthy individuals, aged 60 – 85 years, with English as a first language, fMRI eligible and no history of neurological disease, mental illness or brain injury.

We will assess each participant with comprehensive interviews and scanning of brain images using fMRI while participant perform specific tasks.

If you wish to participate, you will be invited to
complete a questionnaire mailed to you,
complete an interview (2 to 3 hrs) conducted at the University of Queensland Centre for Clinical Research, Royal Brisbane & Women's Hospital
complete fMRI session where you lie on the magnetic imaging scanner which will measure the blood flow of the brain. This fMRI session will be conducted at the brand-new imaging facility located at University of Queensland Centre for Clinical Research, Royal Brisbane & Women's Hospital.

You will receive \$50 per visit for your time and travel for your appointment.

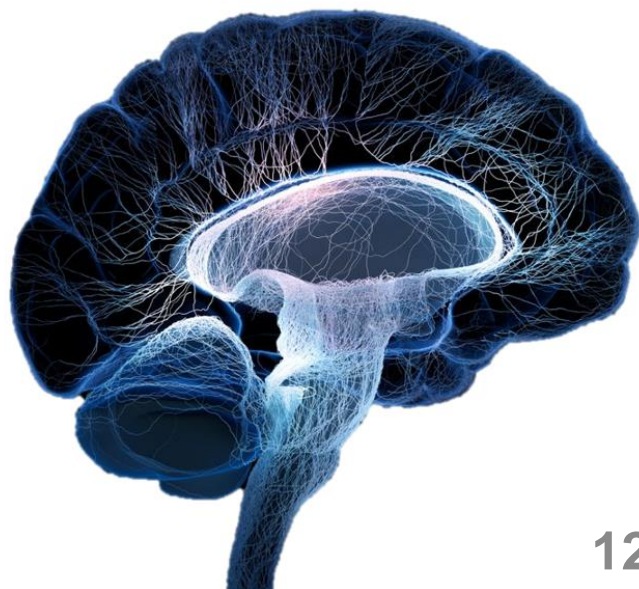
If you are interested in taking part in this study or if you want to know more about this study,

Please contact: **Julia Yang**
Ph 07 3346 5582 or
j.yang1@uq.edu.au

UQCCR
Building 71/918
RBWH Herston, Brisbane City QLD 4029
<https://clinical-research.centre.uq.edu.au>

Am I Eligible to Participate?

- ✓ I'm a healthy 60 to 85 year old
- ✓ English is my first language
- ✓ I'm happy to have an MRI



RESEARCH PROJECTS

Understanding sideways balance in older adults with hip osteoarthritis

Balance problems in older people can be made worse by the presence of disease, such as joints wearing out. However, we don't clearly understand how common diseases affecting the hips and trunk impair sideways balance. This study will look at how hip osteoarthritis affects people's ability to respond to a sudden loss of balance in a sideways direction.

What is involved?

You would be required to come to the Gait Laboratory within the Physiotherapy Department, Princess Alexandra Hospital, for up to 2 hours. We will measure your balance, how your body segments move, and how your leg and trunk muscles work, when you are standing, stepping, walking, and in response to a sudden pull at your waist.

Who can participate?

To be eligible to participate in this important research study you **MUST:**

- **be 60 years old or over**

Unfortunately the study isn't suitable if you have:

- Symptomatic ankle, knee or hip osteoarthritis
- Low back or lower limb pain or disease that effects your daily activities
- Parkinson's disease, Multiple Sclerosis, or have had a stroke
- Sensory problems (e.g. visual, inner ear disorders, peripheral neuropathy) that affect your balance or walking
- Dementia/Alzheimer's Disease

What will you receive?

- We can provide complimentary day parking. Refreshments will also be provided.

Interested?

I'll be happy to speak to you about the study and send you more details. Please contact: Alexandra Picorelli - Tel: 0412 933 810 Email: alexandra.picorelli@uqconnect.edu.au



RESEARCH PROJECTS

Two possible studies on Lower Limb Strength and Biomechanics in Flatfoot

Study 1

The SIRPH Research Unit is looking for **healthy adults between 18 and 70 years with no history of foot or ankle surgery and no lower limb injuries in the last 6 months** to participate in a study investigating lower limb strength and biomechanics. Participants in this healthy group will constitute a reference group for data obtained from people with painful flatfoot condition. You would be required to attend the University of Queensland School of Health and Rehabilitation Sciences at St Lucia for 2 sessions of testing (5 hours total), where a range of clinical and laboratory measurements will be taken, and will be recompensed reasonable expenses.

Please complete this survey <https://www.surveymonkey.com/r/HiPTControls> to check your eligibility to participate or email sirph@uq.edu.au for more information.

Study 2

The SIRPH Research Unit is looking for people with **pain on the inside of the ankle and/or foot** to participate in a study investigating lower limb strength and biomechanics in a condition called posterior

tibial tendon dysfunction (PTTD). You would be required to attend the University of Queensland School of Health and Rehabilitation Sciences at St Lucia initially for 2 sessions (5 hours total), where a range of clinical and laboratory measurements will be taken, and will be recompensed reasonable expenses. Following this, you will be provided with a 12 week hip strengthening program after which the measurements will be taken again.

Please complete <https://www.surveymonkey.com/r/HiPT> to check your eligibility to participate or email sirph@uq.edu.au for more information.



RESEARCH PROJECTS

How we show our empathy to others across life span?

Sometimes, as people get older they report feeling challenged in remembering things, or in moving around; however, their ability to recognize emotions remains unchanged by age. Processing emotions and responding to emotions is a critical ability that influences a lot of social interaction and success. In my studies, I am interested in how processing emotional situations change (or don't change!) as a function of age.

To help me examine these changes, I am seeking volunteers between the ages of **65-85 years**, to participate in a 3-hours study. As a participant you will lay on your back in an MRI scanner for 1 hour. During this time, you will be responding to a task while we take pictures of

your brain. In the remaining times, you will get to complete a variety of easy games with pen/paper, spoken responses, and computer tasks.

The session will be held at the Centre for Advanced Imaging, next to QBI, at the UQ St Lucia campus. You will be helping science in the most fundamental way possible, and you will be helping me to complete my study as soon as possible! At the end of the session, you will receive \$50 reimbursement as a thank-you for your time and effort. **Also, you will receive a picture of your brain.** We can also arrange for FREE parking for you.

If you are interested please feel free to call Maryam on 0422 916 362 or email at Maryam.ziaei@cai.uq.edu.au or maryamziaei@gmail.com



RESEARCH PROJECTS

Do you have pain on the outer side of the hip?

We are seeking volunteers with pain on the outer side of the hip (lateral hip pain) in a study investigating pain perception and physical function. Specifically, we aim to collect information about your response to different types of sensation (heat, cold, pressure) in relation to pain, and the effect of physical load on pain. We will compare this with the information obtained from people without lateral hip pain. We hope that this information will contribute to our knowledge of some of the physiological processes occurring in tendinopathy, and will help us to develop more effective treatments.

What will the study involve?

Completing our online survey. We would like you to answer some simple questions about your health and lateral hip pain to ascertain that you do not have any medical or health related matters that exclude you from the study. This will take approximately 5 minutes to complete.

One testing appointment. For this study, you will be required to undergo one testing appointment at the University of Queensland of approximately 2.5 hours. This includes a free physical assessment, questionnaires and a number of sensation tests for heat, cold and pressure.

What will you receive?

You will receive a free clinical assessment, a \$10 Coles/Myers gift voucher after completion of your appointment and parking costs will be covered.

Are you interested?

If you are interested and would like to know if you fulfil the requirements to participate, please go to

<https://redcap.health.uq.edu.au/surveys/?s=NM3YTCXMHF>

For further information, please contact Melanie Plinsinga at m.plinsinga@uq.edu.au



RESEARCH PROJECTS

Walking by adults research study

What is the study all about?

The aim of this study is to perform a multiday mobility survey using a GPS data logger to capture the walking behaviour of older adults. We aim to understand where and when older adults walk, how much they walk, how often they walk, and in particular how the characteristics of the built and natural environment influence walking behaviour among older adults.

This will unveil the key drivers that govern walking mobility in older adults. Walking mobility is the best guarantee of independence in older age and an active lifestyle is a known imperative to 'ageing well'. Walking is the most common form of any physical activity and the simplest way to remain active. Further, walking can be relatively easily introduced into ones' daily routine. The aim of this study is to understand facilitators and barriers to walking. Developing a knowledge of both the facilitators and barriers will be an important precursor to developing effective policy aimed at improving walking in an area.

Who is carrying out the study?

The survey is being conducted for the PhD research at the University of Queensland Anurodh Khanal, under the supervision of PhD supervisors Prof Jonathan Corcoran and Dr Elin Charles-Edwards (University of Queensland, School of Earth and Environmental Sciences) and has been approved by the University of Queensland Human Ethics Committee [20170802]

How much time will the study take?

Your commitment would be to participate in an initial meeting (approx. 30mins), followed by

participation in a mobility survey for seven days and participation in a follow up interview (approx. 45mins). At the first meeting you will complete and sign the consent form as well as the pre-GPS survey questions. In this meeting, GPS data logger will be handed to you along with and a demonstration on its use. You will then carry this GPS data logger over a seven day period with you every time you travel outside. At the end of the seventh day, research staff will contact you in order to arrange a time and location to collect the GPS data logger. During this meeting, a final follow-up meeting will be scheduled (approximately 1 week later) to discuss your mobility pattern across the 7 day survey period.

Can I withdraw from the study?

Participation is voluntary and you can withdraw at any time and your data will be withdrawn. Completion of the GPS survey and participation in post interview indicates your consent to participate in the study. Your data is important as we need a diverse group of respondents. We value your thoughts and ideas as they will provide important insights to the results of the project.

Will the information I provide be kept confidential?

Collected data from the survey and interview will be transcribed, encoded and analysed. All aspects of the study, including results, will be strictly confidential and only the researchers will have access to information on participants.

Interested?

If you are interested in participating, **please contact Anurodh Khanal**, email: a.khanal@uq.edu.au or phone: 0404161352 to register your interest.

RESEARCH PROJECTS

HELP UQ RESEARCHERS UNCOVER HOW ANKLE OA AFFECTS PEOPLE.

DO YOU HAVE ANKLE OSTEOARTHRITIS?

The Australian Institute for Health and Welfare estimate that 1 in 11 Australians have osteoarthritis and as the population continue to age, the prevalence of osteoarthritis is expected to significantly increase.

Considerable research has investigated hip and knee osteoarthritis and related impairments, little attention has been given to ankle osteoarthritis. Therefore, more research is warranted to understand impairments that characterise ankle osteoarthritis.

Researchers are looking for people with ankle osteoarthritis to fill an online survey about symptoms and disability they experience.

This study can be completed by individuals living anywhere in Australia. Completing the survey takes approximately 20-30 minutes, and will help us to better understand the problems experienced by people with ankle osteoarthritis.

If you have osteoarthritis in the ankle joint and would like to help advance ankle osteoarthritis research please click the link to complete the online survey:

<https://www.surveymonkey.com/r/ankle-pain-Part2>



RESEARCH PROJECTS

YOUR TIME CAN MAKE A LIFE-LONG IMPACT TO PEOPLE SUFFERING FROM ANKLE PROBLEMS.

HEALTHY VOLUNTEERS ARE NEEDED. ARE YOU 40-75 YEARS OLD?



Researchers at The University of Queensland are inviting healthy volunteers aged between **40-75** years old to be part in a lab study to test foot posture, ankle joint muscle strength, mobility, sensation, balance and function.

You will receive a gift voucher and free ankle joint x-ray to thank you for your participation.

If you are in this age group and willing to help UQ researchers please email munira.almahrouqi@uq.net.au or go to <https://www.surveymonkey.com/r/EOI-Lab>

Participate in a Short Term Memory Training Project

Have you ever wondered what is really happening with your memory as you age? Or if your memory is actually failing you? Maybe you are forgetting more often where you parked your car or put your keys. If yes, then this study will be of interest to you. I am studying the potential of a new short term memory training program in answering those questions, as well as teaching some basic memory skills that you can use in everyday life. The aim of this study is to help you feel more secure about your memory and to be able to use it better. This study runs over five mornings over a two-month period.

We are currently looking for older adults aged 60+ who can commit the time to improve their memory. Having a smartphone is good but not essential. At this point of time we are only looking for older adults that have not been diagnosed with neurological disorder such as Dementia and Alzheimer's and have unimpaired/corrected vision and hearing. The training will be held at the University of Queensland and a certificate of completion will be provided once the training is completed.

Please contact me on 0425 207 506 or email me at h.jensenfielding@uq.edu.au for more information or if you would like to sign up.

We are looking forward to hearing from you.