Book Review

STILL ALICE: A JOURNEY THROUGH THE LOOKING GLASS OF ALZHEIMER'S DISEASE

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With the rapid strides in healthcare and the medical breakthroughs that have come to epitomise the 21st century, there has been a significant increase in the average life spans of people across the globe. Kerala, with its enviable health indices, has mirrored the developed world in this aspect.¹ Consequently, psychiatrists in our state treat elderly patients quite frequently in their routine clinical practice. Disorders of cognition, especially Alzheimer's disease (AD), form a sizeable proportion of this caseload. However, we often find that, as professionals, we are unable to fully understand and appreciate the world in which these patients live. The book reviewed here, titled "Still Alice", can help us to make better sense of the day-to-day struggles of the Alzheimer's patient.²

The author of the book, Lisa Genova, holds a PhD in Neuroscience from Harvard University. She writes that her background in psychology and neuroscience helped to lay the foundations for the scientifically accurate, yet lucid descriptions of the neurobiology and therapies of AD detailed in the book. Genova reveals that the inspiration for her creative work was her grandmother, who was diagnosed with AD when the author was in her late twenties. This work was the culmination of dedicated research, interviews with clinicians and scientists, and hours spent with AD patients and their caregivers, all in an attempt to connect better with a beloved family member.

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https://kjponline.com/index.php/kjp/article/view/211 DOI: https://doi.org/10.30834/KJP.33.2.2020.211 Received: 30/8/2020. Web publication: 14/9/2020 'Still Alice' is written from the perspective of a Harvard Professor who is diagnosed with early-onset AD at the age of fifty years. The book is divided into 25 chapters, with each chapter representing one month of the year, spanning two years from September 2003 to September 2005. This layout is effective as it also serves as a record of the progressive nature of AD. The first few chapters introduce the reader to the world of the protagonist, Dr Alice Howland; a brilliant professor specialised in the fields of linguistics and psychology. Alice's life is portrayed as one that is intensely academic; days spent teaching students and guiding clinical fellows; nights engaged in reviewing scientific papers; summers spent attending conferences at distant locations, and sabbatical years devoted to writing scientific treatises.

The book does an exemplary job of enticing the readers to immerse themselves in life, as seen through the eyes of Alice. We are slowly, yet surely, introduced to the lurking shadow of AD that gradually rears its head; in the guise of missed appointments, getting lost in familiar places, and words that Alice cannot recollect in the lectures that she has delivered effortlessly countless times. Alice's doubts and insecurities are portrayed well, from the denial of the cognitive lapses, attempting to explain them away as jet lag, stress, or over-work, to the finality of the diagnosis of early-onset AD following genetic testing.

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AD impacts every aspect of life, from relationships and work to one's sense of self and independence. As Alice's lectures lose structure and coherence, she takes the painful decision to step down from her official duties at Harvard. With her once-packed itineraries emptied, she struggles to contemplate the so-called loss of meaning to her life. This loss of identity and self-esteem is a familiar backdrop to the story of each of our Alzheimer's patients. After all, without her lectures, publications, and presentations, was Alice still Alice? This question forms the quintessential pillar and bedrock of the book and provides the unassuming reader with adequate scope for some philosophical reflection.

As mental health professionals, we are keenly aware of the toll taken by AD on caregivers and family members. 'Still Alice' is raw and explicit in detailing the intricacies of the relationships between the lead character and her loved ones, and how they cope with the newfound knowledge of her diagnosis. It soon becomes evident that strong familial bonds and social support go a long way in improving the quality of life of AD patients. The positive role played by patient and caregiver support groups for AD is also elaborated upon and is perhaps something that has scope for further development in our state. In the end, Alice is able to come to terms with her illness and live out her years in peace, grace, and happiness, with the love and support of her family.

The book also touches upon the currently available medications for AD and the research that is being undertaken in the search for newer therapies. We are well aware that the drugs currently available in the psychiatrist's armamentarium are limited in their efficacy to slow the rate of cognitive decline. In the book, Alice is enrolled in a clinical trial for a fictional drug 'Amylix', that is aimed at reducing the build-up of beta-amylase in the brains of AD patients. This drug was modelled after an actual molecule 'Flurizan', that was undergoing research and development at the time of publication but unfortunately failed to show sufficient clinical improvement in those patients enrolled in the phase three trials. ³ Reading through the pages of 'Still Alice' brings to life the weight of the decision made by

patients to enroll in these trials, the uncertainty of not knowing whether the drug that they are taking is a revolutionary molecule or a placebo, and the frustration and disappointment of resigning oneself to the idea that the clinical trial has failed.

These trials and tribulations, more often than not, also lead to mood disturbances and depressive episodes in patients. During the course of the disease, Alice goes through one such dark phase, which leads her to write down a list of five questions to ask herself, when she feels that the disease has overshadowed her will to survive. She adds a note to her future self that if she is unable to recall any of these basic facts, such as the name of her daughter, she needs to go to her bedroom, overdose on her supply of medication, and lie down to pass away silently. The quiet conviction with which she makes these decisions impresses upon us, the treating physicians, the importance of actively seeking out depressive symptoms in the clinical setting.

In conclusion, reading this book would be a worthwhile investment for psychiatrists, psychologists, and any other mental health professional working with persons suffering from AD. 'Still Alice' is a truly mesmerising journey through the looking glass of AD that can help clinicians to better place themselves in the shoes of their patients. This, in turn, can instill a stronger sense of empathy in ourselves; thereby making us better physicians in the long run.

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