

Meeting of the Communications Committee of the Board of Trustees

Thursday, August 11 5:30 – 6:30 PM ET

Via WebEx

Meeting Number: 2662 959 5548

Meeting Password: SalvQaP@398 ((72587271 from phones)

See e-mail invitation sent by Ms. Cianciotto

Members: Dr. Richard Isaacson, Communications Committee Chair; Dr. Michael L. Dockery, MBRF

Chair, Dr. Patricia Boyle, Dr. John Brady, and Dr. Sue Pekarske

Also Attending: Dr. Angelika Schlanger, Ms. Amy Porter and Ms. Valerie Patmintra

AGENDA

5:30 pm ET ACTION	1.	Call to Order/Welcome/Roll Call a. Minutes from the March 8, 2022 Meeting b. Updated Communications Activity Timeline	Dr. Isaacson
5:45 pm ET ACTION	2.	Patient Education Brochure a. Review and provide feedback on the two versions of the patient brochure	Dr. Isaacson Ms. Patmintra
6:00 pm ET ACTION	3.	MBRF Consumer Newsletter a. Review updated draft of the consumer newsletter b. Discuss ideas for newsletter name	Dr. Isaacson Ms. Patmintra
6:15 pm ET	4.	Review and provide feedback on ideas for McKnight Brain.org home page updates a. Visuals available for review here:	

Communications Activity Timeline

As Outlined in the 2022-2023 Communications Plan

Updated August 9, 2022

Activity	Date/Status	Action	Responsible Party	Comments
Patient Education Brochure	January-September 2022	Draft content and design a new patient education brochure	V. Patmintra	Worked from patient education content posted on the McKnight website to draft content for the new patient education brochure. Worked with designers to come up with different cover designs and titles for the patient education brochure. Based on feedback shared by the Communications Committee during their March meeting, the brochure was separated into two versions – one focused on maintaining brain health and the other on cognitive aging. The two versions of the brochure will be shared with the Communications Committee for review when they meet on August 11.
McKnight Brain Website	December 2020 COMPLETE March - August 2022 COMPLETE	Drafted and added content on the inaugural recipients of the MBRF Innovator Awards Updated and added new content to the website on the CTRS Awards	V. Patmintra	Drafted content and added new pages to the For Researchers section of the website promoting the application period for the 2022 awards and announcing the inaugural recipients of the Innovator Awards. Drafted and added new content to the For Researchers section of the website announcing the recipients of the 2021 CTRS awards and promoting that the 2022 application window is open.
	March – August 2022 COMPLETE/ON HOLD	Develop content to build a dedicated area of the website for PCP education	V. Patmintra	Created web content to educate PCPs on the differences between Alzheimer's disease and cognitive decline and age-related memory loss. Content emphasizes the need for appropriate patient screening and offers vetted screening tools/resources PCPs can use with patients. PCP section of the website was added in early May 2021.

	March 2022 – Ongoing Spring 2021 – Ongoing	Expert Interview Blog	V. Patmintra	Working with members of the communications and education committee to determine how to optimize the content developed for PCPs and drive them to the website. Interview McKnight Trustees and experts from the MBIs
		Series		to post the bi-monthly "Three Questions with" Expert Interview blog series. Interviewed Dr. Ralph Sacco on Tuesday, February 23 and posted his Q&A to the blog in March.
Social Media	January – December 2022 ONGOING September 2022	Develop monthly conte themes and make regu posts to the MBRF Twit account and Facebook page	lar	Developing themes and drafting content on a monthly basis to make 3-4 social media posts each week. Leveraging boosted Facebook posts and Google ads to drive additional traffic to the McKnightBrain.org website. Working on plans for a larger social media campaign to launch in September tied to Healthy Aging Month.
Tracking and Quarterly Reports	Began in 2019 Ongoing	Conduct media tracking and provide quarterly updates.	V. Patmintra	Track media and social media metrics and reach throughout the year and provide quarterly updates to the Trustees. Tracking topics include: brain health, agerelated memory loss, McKnight Brain Research Foundation, McKnight Brain Institutes. Q2 2022 Media Tracking report will be shared with Trustees on August 29.
Communications Working Group	Ongoing Next meeting to be held in September following the August Trustees meeting	Quarterly calls and activities with members of the Communications Working Group	A. Porter/V. Patmintra Meeting Schedule – January 2022 Sept 2022 Nov. 2022	Schedule and hold quarterly calls with members of the Communications Working Group to engage in ongoing activities, including: • Identifying core competencies needed for each MBI to move forward with communications outreach • Reviewing, vetting and approving materials • Providing input on upcoming studies with

relevant consumer/medical media angles

		Identifying young researchers and studies of note to highlight on the MBRF website
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MINUTES

MCKNIGHT BRAIN RESEARCH FOUNDATION COMMUNICATIONS COMMITTEE OF THE BOARD OF TRUSTEES CONFERENCE CALL March 16, 2022

Draft for Committee Approval

The McKnight Brain Research Foundation's Communications Committee conference call began at 2:00 p.m. Eastern on Wednesday, March 16, 2022.

The following MBRF Trustees participated in the call:

Dr. Richard Isaacson, Chair

Dr. Patricia Boyle

Dr. John Brady

Dr. Sue Pekarske

Ms. Amy Porter and Ms. Valerie Patmintra also participated.

1. Call to Order and Roll Call

Dr. Isaacson opened the call by welcoming Dr. Brady to the communications committee and thanking him for agreeing to serve on the committee.

Ms. Porter noted that Dr. Dockery was unable to join the call. Dr. Isaacson then asked for approval of the minutes from the last communications committee meeting held on October 21, 2021. Dr. Isaacson called for a motion to approve the October 21 meeting minutes and they were approved.

2. Review of the Patient Education Brochure

Dr. Isaacson presented the different cover designs for the patient education brochure that were sent for the committee member's review before the meeting. Ms. Patmintra noted that each of the four cover designs shared shows a different lifestyle photo and presents different title options that could be used for the brochure. Dr. Isaacson said he thinks the brochure design options and content are a good start and that he has never seen a publication on cognitive aging geared for patients before. He also said that he likes all of the different cover options and leans toward a title like "Cognitive Aging Explained" or one of the options that includes brain health. Dr. Brady agreed that he also hasn't ever seen a brochure like this and that the content is great. Dr. Brady also said he likes the direction of including brain health in the title over cognitive aging because the language is more recognizable. Dr. Pekarske agreed that the brain health language makes the most sense for a lay audience and that the terms brain and health are very popular with the public. Dr. Boyle also agreed with leaning toward brain and health in the cover title and asked if different cover designs could be used for the brochure.

Dr. Isaacson said he thinks two different cover designs could be used and also noted that the discussion echoes the findings from the Alzheimer's Association study showing 85 percent of people surveyed don't understand the term mild cognitive impairment (MCI). Dr. Isaacson noted that he wasn't surprised by the findings and doesn't like using the term MCI. He thinks there could be an opportunity to use "Brain Health Tips" or something similar as the brochure title with "Cognitive Aging Explained" as a subhead to communicate that the brochure will cover both

topics. Dr. Brady agreed and said he liked the design of cover option #4 that includes "How to Keep your Brain Healthy" with "Cognitive Aging Explained" as the subhead.

Dr. Isaacson then suggested that the brochure may be easier for patients to follow if it was separated into two parts, with one focused on understanding cognitive aging and the second offering tips to keep your brain healthy. He noted that handling one topic at a time also works better for online lessons and multimedia presentations and shared the series of online lessons he developed for his new role with Florida Atlantic University as an example. Drs. Boyle, Brady and Pekarske all agreed with the idea of separating the brochure into two separate pieces and Ms. Patmintra said she would work with the designers to come up with formatted drafts of the two different versions of the brochure for the committee to review when they meet next.

Dr. Brady then asked what the dissemination plan is for the brochure and whether it is meant to be posted online or distributed in doctor's offices. Dr. Isaacson noted that he was part of a study with the American Association of Neurologists that showed brochures aren't effective for knowledge transfer and suggested that this type of brochure is needed as a communications tool for the Foundation, but doesn't think mass distribution will work.

Dr. Boyle asked the group if they had an impression on the distribution plan coming out of the discussion with the education committee and Dr. Isaacson said he thought weighing whether to create an online or print piece was something the web agency, Look Think, would figure out. Ms. Patmintra noted that the initial plan was to develop the patient education brochure as an online tool to complement and encapsulate the patient friendly information offered on the website and that any plans or budget committed to print the brochure would come later. The group agreed to table the discussion for the following week when all of the Trustees meet in Tucson.

3. Innovator Awards Announcement Plans and AFAR Promotion Opportunity

Dr. Isaacson noted that he, Dr. Dockery and Dr. Thambisetty had all reviewed the press release announcing the two inaugural recipients of the Innovator Awards and made only minor edits. Ms. Patmintra let the group know that the American Federation for Aging Research drafted the press release and that, after incorporating the edits provided by MBRF, distributed the final press release on Monday, March 14. She said the release would also be posted to the MBRF website and shared via the Foundation's social media channels.

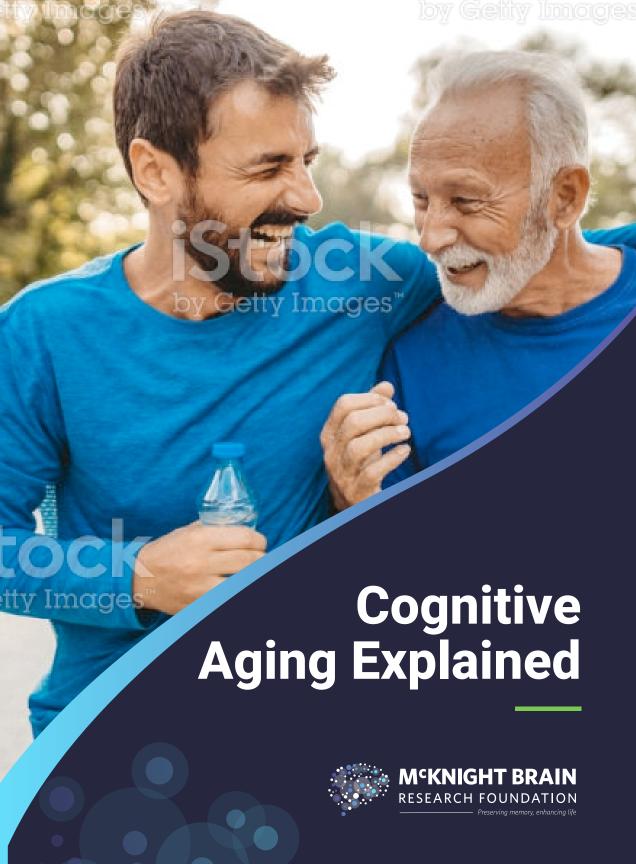
Dr. Isaacson then brought up the opportunity for the Foundation to participate as a promotional partner in the AFAR/Prevention magazine's May webinar focused on the aging brain. With Ms. Patmintra noting that there would be no cost to the Foundation and that Dr. Sara Burke from the University of Florida MBI was being considered as one of the experts to participate in the webinar, the committee agreed participating in the webinar is a good idea. The committee agreed to being a promotional partner in the webinar and will recommend the opportunity for approval by the Trustees during the March 23 Board meeting.

4. Discussion of Ways to Survey/Focus Group Test PCPs about the Educational Needs

Dr. Isaacson referenced the discussion from the education committee meeting on Sunday and said he thinks gauging the education needs of PCPs will only work with the help of a dedicated consulting group. He mentioned contacting the group referenced in the Alzheimer's Association report and mentioned they could likely cost up to \$100,000 or more, but that they may be best positioned to help the Foundation develop an outreach plan targeting PCPs. Dr. Brady asked what additional information the Foundation needs and suggesting asking the consulting firm if they already have information on the educational needs of PCPs. Dr. Boyle also asked if there was information from the Alzheimer's Association report that the Foundation could leverage.

Dr. Isaacson clarified his initial comment noting that the annual report of Alzheimer's statistics is a marketing tool for the Association and that the Foundation needs their own survey or similar initiative to leverage as a marketing and media relations tool. He suggested reaching out to the company to see what their costs are to develop a similar survey and how we could work together on a similar initiative to the Alzheimer's Association Facts and Figures Report. Ms. Porter advised the committee that the appropriate next step is to share the idea with the full Trustees during next week's meeting and secure approval for reaching out to the group and getting an idea for the cost and level of effort involved in developing a survey and resulting report for the Foundation's use. She offered to share the Alzheimer's Association report with the Trustees before their meeting and ask that they review it in advance for discussion during the meeting.

With no additional items to discuss, Dr. Isaacson adjourned the call at 2:45 p.m. Eastern.



WHAT IS COGNITIVE AGING?
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What is Cognitive Aging?

As we age, our brains age too. Cognitive aging is a natural process that can have both positive and negative effects and these effects vary widely from person to person.

Our brains age at different rates and in different ways. While wisdom, expertise and vocabulary increase with age, other abilities like processing speed, decision-making and some types of memory may decline with age.



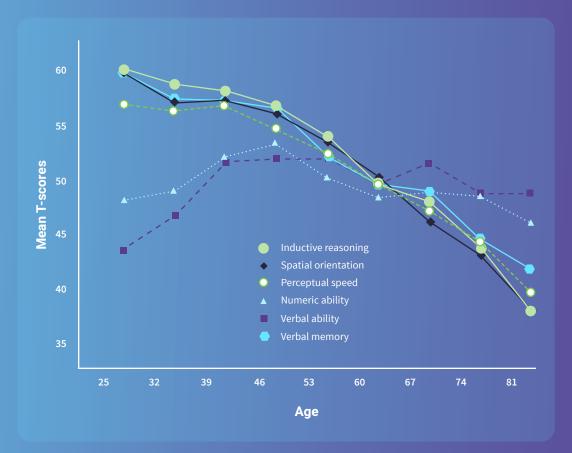
Did You Know?

Cognitive health is the ability to clearly think, learn and remember. It's just one component of overall brain health and is an important component of performing everyday activities.

Cognitive Aging Is Not a Disease

The brain changes associated with aging are part of a natural process that starts at birth and continues throughout the lifespan.

Cognitive aging cannot be prevented, but there are steps you can take to optimize your brain and cognitive health. Reference the chart below to understand the points at which the brain is likely to change.



**Cross-sectional data from the Seattle Longitudinal Study. Declines are evident in all domains, with the exception of preserved verbal and numeric ability.

2

Optimizing Cognitive Health

A growing body of scientific research suggests the following factors promote cognitive health as you age:



Maintain your physical health.

- Get health screenings as recommended for your age.
- Talk with your doctor about the medicines you take and discuss the possible side effects they may have on your memory, sleep and brain function.
- Don't smoke or use other nicotine products.
- Get enough sleep aiming for 7-8 hours every night.



Manage high blood pressure and other vascular conditions.

- Preventing or controlling high blood pressure may help your brain in addition to your heart.
- Observational studies have shown having high blood pressure in midlife – from your 40's to early 60's – increases the risk of cognitive decline later in life.



Keep your mind active.

- Staying intellectually engaged is one of the most powerful things you can do to maintain brain health.
- Reading books; playing games, like chess; solving crosswords; or learning a new skill, like a foreign language or photography can reduce your risk of developing cognitive impairment.



Eat healthy foods.

Eating a healthy diet with a variety of fruits and vegetables, whole grains, lean meats, fish, poultry, and low-fat or nonfat dairy products can reduce the risk of many chronic diseases and promote brain health.



Engage in physical activity.

- Physical activity is beneficial for the brain and cognition.
- Aim for 30 minutes of physical activity every day.



Stay connected.

Connecting with people through social activities and community programs may improve cognition and lower the risk of other health problems. It also helps improve mood and psychological functioning.



Manage stress and other mental health conditions.

- Stress is a natural part of life, but over time, chronic stress can negatively impact the brain, affect memory, and increase the risk for Alzheimer's and related dementia.
- Manage stress by getting help from a counselor or therapist, reaching out to friends and family for support, writing in a journal, and practicing relaxation techniques.

MEMORY & AGING MEMORY & AGING

Memory & Aging

As you get older, it's normal to worry about your memory and thinking abilities. These changes are usually associated with mild forgetfulness – often a normal part of aging – and not a sign of a serious memory problem.



Know the Difference

Some normal signs of aging include:

- Making a bad decision once in a while
- Missing a monthly payment
- Losing track of time
- Not being able to find the right words
- Losing things around the house

Serious memory problems make it hard to do everyday things like driving and shopping. Signs may include:

- Asking the same questions repeatedly
- Getting lost in familiar places
- Inability to follow instructions or directions
- Becoming confused about time, people, and places



If you or a loved one is experiencing signs of a serious memory problem, talk with a doctor to determine whether the memory problems are normal and to find out what may be causing them.

Memory and other thinking problems have many possible causes, including depression, an infection, or medication side effects. Sometimes, the problem can be treated, and cognition improves. Other times, the problem is a brain disorder, such as Alzheimer's disease, which cannot be reversed.



Diagnosing

Talk to your doctor about any of the memory problems you're experiencing. Finding the cause of your memory problems is an important first step in determining the best course of action to address them.

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Our Strategic Pillars



Lead

First to establish a dedicated area of research specifically focused on agerelated cognitive decline and memory loss



Inspire

Sharing information and research to help people maintain cognition and brain health for life



Partner

Forming partnerships and collaborations among scientists, institutions and organizations



Recognize & Reward

Offering scholarships and grants to attract bright young researchers and support current scientists

The McKnight Impact



\$180,000,000

Funding over \$180 million in research specifically targeting cognitive aging, age-related cognitive decline and memory loss through direct contributions and strategic initiatives in partnership with the four McKnight Brain Institutes and the National Institute on Aging (NIA) through the Foundation for the National Institutes of Health (FNIH)



240

Researchers and five endowed Chairs supported across the four McKnight Brain Institutes



\$15N

Awarded to FNIH resulting in nearly 40 new grants over two cycles



10 scholars

Partnering with the
American Academy of
Neurology via the American
Brain Foundation to fund
ten cognitive aging research
scholarships over five years



4 institutes

Established McKnight Brain Institutes at the University of Alabama at Birmingham, the University of Arizona, the University of Miami and the University of Florida



3 summits

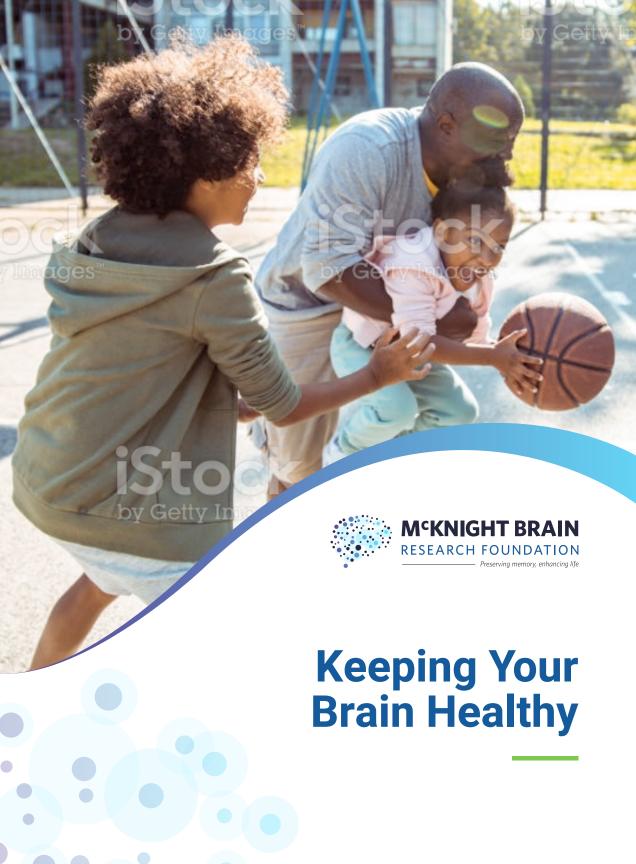
Hosted three successful Cognitive Aging Summits in partnership with the NIA, resulting in the Reserve and Resilience Program



1 report

Developed the **Cognitive Aging Report** in partnership with the **National Academy of Medicine** to promote cognitive health

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Brain Health Facts

It's a fact: your brain ages just like the rest of your body. It shrinks in size, slows down in speed, and becomes less adaptable to change as you age. While research on how to maintain brain health later in life continues at a rapid and expanding pace, we know there is growing hope and expectation that living longer, fuller cognitive lives is possible.

Brain health refers to how well your brain functions across several areas. Aspects of brain health include:



Cognitive Health

How well you think, learn and remember.



Motor Function

How well you make and control your movements, including balance.



Emotional Function

How well you interpret and respond to emotions – both pleasant and unpleasant.



Tactile Function

How well you feel and respond to sensations of touch, including pleasure, pain and temperature.



Tips to Maintaining Brain Health

Growing evidence shows that making behavioral and lifestyle changes can help you maintain cognition and brain health later in life.

Adopting a combination of healthy behaviors, which have also been shown to reduce cancer, diabetes and heart disease, will help you achieve maximum benefits for both your brain and body. And the good news is, it's never too late to adopt healthy habits.



Did You Know?

Brain health can be affected by age-related changes in the brain; injuries, such as stroke or traumatic brain injury; mood disorders, like depression, substance abuse or addiction; and diseases, like Alzheimer's disease.

Strategies to Protect Brain Health

Start adopting these 8 strategies today to protect your brain health now and in the future:



Exercise

Break a sweat and engage in regular cardiovascular exercise that elevates the heart rate and increases blood flow to the brain and body. Several studies have linked regular physical activity with a reduced risk of cognitive decline.



Quit Smoking

Evidence shows that smoking increases risk of cognitive decline. Quitting smoking can reduce that risk to levels comparable to those who have not smoked.



Get Enough Sleep

Not getting enough sleep may result in problems with memory and thinking, yet a third of American adults report regularly getting less than the recommended 7-8 hours of sleep. Help protect your brain by getting better sleep.



Stay Socially Engaged

Social and intellectual engagement is important to brain health. Pursuing interesting and meaningful social activities will help you keep connections with others. Try volunteering at a local church or animal shelter or just share the activities you enjoy with friends and family.



Keep a Healthy Heart

The risk factors for cardiovascular disease and stroke — obesity, high blood pressure and diabetes — also have been shown to negatively impact cognitive health. Preventing and managing high blood pressure and cholesterol will help protect the heart and take care of the brain.



Eat a Healthy and Balanced Diet

Following a diet that's low in fat and high in vegetables and fruit has also been linked to reducing the risk of cognitive decline. Although research on diet and cognitive function is limited, certain diets, like the Mediterranean and Mediterranean-DASH (Dietary Approaches to Stop Hypertension), may help maintain brain health.



Continue Learning and Welcome Challenges

Challenging and activating the mind by doing puzzles, building furniture or playing games are good ways to encourage strategic thinking. Taking an online class or learning a new language will also help keep your mind sharp.



Don't Forget Mental Health

Some studies also link depression with increased risk of cognitive decline. Managing stress and seeking medical attention for any symptoms of depression, anxiety or any other mental health concerns will help optimize your brain health.



EXERCISE FOR BRAIN HEALTH

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Exercise for Brain Health



Did You Know?

Exercise is linked to stimulating the brain's ability to maintain and create network connections – which is linked to improvements in memory, learning, and spatial memory.

Physical activity is a valuable part of any overall body wellness plan and is associated with a lower risk of cognitive decline.

Many recent studies have linked regular physical activity with benefits for the brain. In fact, exercise has been linked to stimulating the brain's ability to maintain old network connections and make new ones that are vital to cognitive health, as well as increasing the size of a brain structure important to memory and learning and improving spatial memory.

Beneficial Exercises



Be sure to consult a doctor about your overall health before starting any new exercise program.



Aerobic Exercise

Aerobic exercise, such as brisk walking, is thought to be more beneficial to cognitive health than non-aerobic stretching and toning exercise. Research is ongoing, but aiming to move for about **30 minutes** on most days is shown to have many benefits.

Cardiovascular Exercise

Engage in cardiovascular exercise to elevate your heart rate, if you're able to do so safely. This will increase the blood flow to the brain and body, providing additional nourishment while reducing potential dementia risk factors like high blood pressure, diabetes and high cholesterol.





The More The Merrier

Incorporating other physical activities you may enjoy, like walking with a friend, taking a dance class, joining an exercise group or golfing may also be mentally or socially engaging. Activities can be as simple as bike riding, gardening or walking the dog.



Tips to a Brain Healthy Diet

Many foods, including blueberries, leafy greens, and curcumin (found in the spice turmeric), have been studied for their potential cognitive benefit. These foods were thought to have anti-inflammatory, antioxidant or other properties that might help protect the brain. So far, there is no evidence proving that eating or avoiding a specific food can prevent age-related cognitive decline.

While research on the relationship between diet and cognitive function is somewhat limited, it does point to the benefits of two specific diets that can reduce heart disease and may also be able to reduce the risk of cognitive decline: the DASH (Dietary Approaches to Stop Hypertension) diet and the Mediterranean diet.

The Dietary Approach to Stop Hypertension (DASH)

The DASH diet aims to reduce blood pressure and recommends:



Eating a diet that is low in saturated fat, total fat and cholesterol; and high in fruits, vegetables and low-fat dairy.



Consuming whole grain, poultry, fish and nuts.



Decreasing intake of fats, red meats, sweets, sugared beverages and sodium.

The Mediterranean Diet

The Mediterranean Diet incorporates different principles of healthy eating, typically found in the areas bordering the Mediterranean Sea and recommends:



Focusing on fruit, vegetables, nuts, and grains.



Replacing butter with healthy fats, like olive oil.



Limiting red meat.



Using herbs to flavor food instead of salt.



Eating fish and poultry at least twice a week.

9



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