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Frames of Mind

Building Cognitive Reserve

From the Frames of Mind Expert Video Series | Frames of Mind is a cognitive health video series featuring experts in brain health and Alzheimer's disease, offering practical strategies and education for healthcare providers.

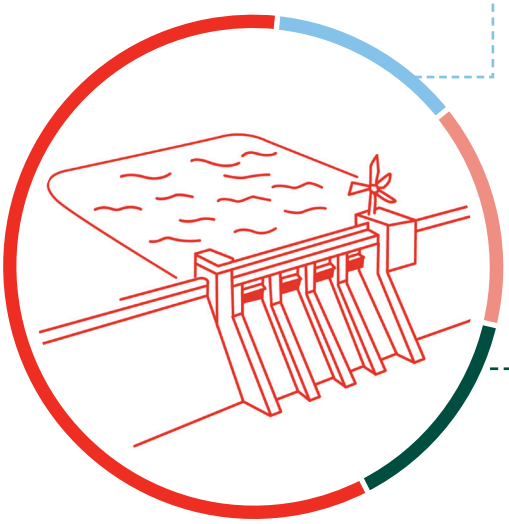
Dr. Patel explores the importance of building cognitive reserve and proactive cognitive health planning. A growing body of evidence suggests that these may improve patients' cognitive health and help reduce risk for developing dementia.[1-3]

Dr. Smita Patel, DO, MS, FAASM
Integrative Neurologist and Sleep Medicine Physician

"I'd like to remind you that it's never too late to start building cognitive reserve. Brain health starts early in life. We should encourage patients of all ages to adopt brain healthy habits to improve long-term outcomes."

- Dr. Smita Patel

KEY LEARNINGS



Cognitive Reserve and Brain Resilience

Cognitive reserve is the brain's ability to adapt and maintain function despite aging or disease-related changes.[1]

A Helpful Analogy

Think of the brain as a dam:

- ✓ A strong dam (higher reserve) can hold back more water, delaying symptoms
- ✓ A weaker dam (lower reserve) may "leak" sooner, leading to earlier cognitive decline

Why Cognitive Reserve Matters

- ✓ Individuals with higher cognitive reserve may remain symptom-free even when Alzheimer's disease pathology is present[1,4]
- ✓ Primary care plays a critical role in supporting cognitive resilience across the lifespan[5]
- ✓ Early detection is essential—spot the cracks before the dam leaks[6]
  - Establishing a **cognitive baseline in midlife** may help clinicians recognize subtle changes over time[7]

Building a Stronger Dam: Evidence-Based Strategies

Managing potentially modifiable risk factors for dementia, including Alzheimer's disease, may help support cognitive resilience. Managing each risk factor acts as structural reinforcement—strengthening the brain's ability to withstand age-related and pathological changes.[1]

Consider discussing the following with patients to help maintain or support cognitive health[1,8-10]*:

Exercise: Regular physical activity is associated with increased brain volume and supports memory and learning

Diet: MIND and Mediterranean eating patterns are linked with reduced dementia risk

Sleep: Addressing sleep disorders such as sleep apnea supports brain health

Mental and Social Engagement: Learning new skills and maintaining social connections contribute to cognitive resilience

Stress Management: Stress reduction techniques may lower inflammation and support psychological well-being

Explore the Frames of Mind videos featuring Dr. Sharon Cohen and Dr. Hemant Pandey for additional perspectives on cognitive assessment and brain-healthy behaviors

It's never too late—cognitive reserve can be supported at any age. Small steps today can lead to meaningful benefits over time.[1,11]

CLICK HERE OR SCAN QR CODE TO VIEW THE FULL VIDEO

Now is the time to frame your patients' cognitive future

"Building cognitive reserve is an ongoing process, and even small efforts today can lead to meaningful improvements tomorrow. Remember, we're all in this together." *- Dr. Smita Patel*

This document summarizes key learnings from a single Frames of Mind video. It is intended for educational purposes only. This material should not replace independent clinical judgement. To explore the speaker's full perspective, please view the complete video at: https://e.lilly/4v6YOgk.

*While this video highlights some potentially modifiable risk factors for dementia, including Alzheimer's disease, other factors—including nonmodifiable risks such as age, genetics, and family history—also contribute.[12] This does not suggest that changes in diet, activity, or lifestyle prevent or treat dementia, including Alzheimer's disease.

MIND=Mediterranean-DASH Intervention for Neurodegenerative Delay

1. Livingston G, et al. *Lancet*. 2024;404(10452):572-628. **2.** Ngandu T, et al. *Lancet*. 2015;385(9984):2255-2263. **3.** Yaffe K, et al. *JAMA Intern Med.* 2024;184(1):54-62. **4.** Jack CR Jr, et al. *Alzheimers Dement*. 2024;1-27. **5.** Lazar RM, et al. *Stroke*. 2021;52:e295-e308. **6.** Mattke S, et al. *Alzheimers Dement.* 2023;19:4252-4259. **7.** Creavin S, et al. *J Alzheimers Dis.* 2022;1241-1248. **8.** Liguori C, et al. *Sleep*. 2017;40(5):zsx011. **9.** Kip E, Parr-Brownlie LC. *Front Neurosci.* 2023;17:1092537. **10.** Gupta DK, Chaudhuri A. *J Med Sci Res.* 2025;16(1):53-60. **11.** Shors TJ, et al. *Behav Brain Res*. 2012;227(2):450-458. **12.** Alzheimer's Association. *Alzheimers Dement.* 2025;21(4):e70235.

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