LIVING WELL

Is Your Forgetfulness Normal or Something More?

The telling difference is not one lost name or misplaced key, but whether memory changes are becoming more frequent, unusual, or disruptive.

The keys are missing again

You walk into a room and lose the reason you came. A familiar name refuses to arrive until the conversation is over. Then you find your keys in the coat you wore yesterday-and wonder whether this is ordinary forgetfulness or the start of something serious.

Memory is selective by necessity. Every day brings more experiences and new information than your brain can store, so some details are retained and others are not. Short-term memory holds information for seconds or minutes; long-term memory keeps it longer. Neither works perfectly all the time.

Growing older can make remembering slower. Occasionally forgetting a name, where you left your keys, or whether you locked the front door can be normal. These lapses may be irritating or embarrassing, but one familiar mistake does not, by itself, tell you that your memory is failing.

That matters because anxiety can turn a small lapse into a frightening story. Anxiety is fear, dread, or uneasiness, and it can be a normal response to stress. But when worry does not go away, worsens, or interferes with daily life, it is no longer just a passing reaction-including when memory has become the subject of that worry.

Look for a changed pattern

The most useful comparison is not between your memory and an imagined perfect one. It is between your current pattern and what has been usual for you. Taking longer to retrieve a word is different from losing the ability to perform a familiar task. Misplacing a phone is different from forgetting how to use it.

Frequency also matters. An older adult who forgets things more often than other people of the same age may have mild cognitive impairment (MCI). MCI sits between healthy ageing and dementia, but that description is a category used in research and care-not something you can

determine from one bad afternoon.

A 2022 systematic review of 66 studies, covering 242,804 community-dwelling adults aged 50 and older, estimated that 15.56% had MCI. Prevalence rose with age and varied with education level, gender balance, and study region. The number shows that MCI is not rare. It does not tell you whether your particular lapse belongs to it.

Memory is only part of the picture. Researchers distinguish amnestic MCI, in which memory is affected, from non-amnestic MCI. That distinction is another reason not to treat every missing word as proof of one condition-or to assume that memory must be the first or only ability to change.

The hardest, most useful question is whether forgetfulness is changing what you can do.

Independence is the dividing line

A misplaced object is frustrating. Getting lost on the way home is different. So is forgetting how to use your phone. These changes reach beyond imperfect recall and into your ability to navigate ordinary life or use something familiar.

The hardest, most useful question is whether forgetfulness is changing what you can do. Memory trouble that begins to interfere with familiar daily activities deserves more attention than a detail that eventually returns. The consequence of the lapse can reveal more than the lapse itself.

More serious memory problems do not point automatically to Alzheimer's disease. Possible explanations include other types of dementia, stroke, depression, head injuries, blood clots or tumors in the brain, kidney, liver, or thyroid problems, and reactions to certain medicines. That range is precisely why guessing at home has limits.

Some conditions can also involve broader cognitive changes. Schizophrenia, for example, can include cognitive impairment alongside disruptions in thought processes, perceptions, emotional responsiveness, and social interactions. A memory complaint alone does not establish that diagnosis. The larger pattern and a clinician's assessment matter.

Worry is not a memory test

Once you become frightened by forgetting, you may start monitoring every name, key, and closed door. But fear is not evidence that a lapse is dangerous. Anxiety can bring hard-to-control thoughts, restlessness, tension, a rapid heartbeat, dizziness, shortness of breath, and changes in behavior such as avoiding ordinary activities.

Persistent anxiety can itself become a health concern when it does not go away, worsens over time, or interferes with work, school, relationships, or everyday activities. If worry about memory is taking over your days, that interference is worth discussing with a health care professional even if you remain unsure what the lapses mean.

Try not to use other people as casual diagnostic tools. Friends may miss a meaningful change, while an alarming story may make an ordinary lapse feel ominous. Even research prevalence cannot settle the question for one person. The useful evidence is the pattern: what changed, how often it happens, and whether familiar tasks or routes have become difficult.

This is also where the issue stops being a lifestyle puzzle. If forgetfulness is more frequent than among others your age, concerns you, or includes losing your way or forgetting how to use familiar things, contact your health care provider. A professional can consider the many possible explanations rather than reducing every memory change to ageing or dementia.

Be cautious with the hopeful evidence

Research into cognitive impairment offers reasons for interest, but not a do-it-yourself answer to occasional forgetfulness. A 2022 review of 71 randomized trials involving 5,606 people with MCI or dementia found that exercise interventions increased or maintained global cognition. Resistance exercise ranked highest overall, while multicomponent exercise ranked highest for global cognition and executive function among participants with MCI.

Those findings apply to people already identified as having cognitive dysfunction. They do not prove that a certain kind of exercise will prevent a person who sometimes loses keys from developing dementia. The review also found different results depending on the group and cognitive outcome. Promising evidence is not the same as a personal forecast.

Likewise, a 2024 review of eight placebo-controlled drug trials involving 6,547 participants with MCI or Alzheimer's disease found cognitive benefits on some measures, but no clear winner among several disease-modifying medicines. Donanemab and lecanemab were less acceptable and tolerable than placebo, while aducanumab was also less well tolerated. These are clinical decisions, not remedies for self-diagnosed forgetfulness.

For the next week, notice patterns without putting yourself on trial. Pay attention to whether a forgotten detail returns and whether you can still use familiar objects, follow familiar routes, and manage ordinary activities. If those abilities are changing-or the worry itself is disrupting your life-make an appointment rather than making a private diagnosis.

Where this comes from

- Memory

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/memory.html
- Anxiety

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/anxiety.html
- Schizophrenia | National Institute of Mental Health

  National Institute of Mental Health · https://www.nimh.nih.gov/health/statistics/schizophrenia
- Comparative efficacy of various exercise interventions on cognitive function in patients with mild cognitive impairment or dementia: A systematic review and network meta-analysis.

  Journal of sport and health science, 2022 · https://pubmed.ncbi.nlm.nih.gov/34004389/
- Comparative efficacy, tolerability and acceptability of donanemab, lecanemab, aducanumab and lithium on cognitive function in mild cognitive impairment and Alzheimer's disease: A systematic review and network meta-analysis.

  Ageing research reviews, 2024 · https://pubmed.ncbi.nlm.nih.gov/38253184/
- The cognitive effect of non-invasive brain stimulation combined with cognitive training in Alzheimer's disease and mild cognitive impairment: a systematic review and meta-analysis.

  Alzheimer's research & therapy, 2024 · https://pubmed.ncbi.nlm.nih.gov/38937842/
- Worldwide prevalence of mild cognitive impairment among community dwellers aged 50 years and older: a meta-analysis and systematic review of epidemiology studies.

  Age and ageing, 2022 · https://pubmed.ncbi.nlm.nih.gov/35977150/