

Is My Memory Loss a Masquerade?



Memory challenges after stroke are not uncommon. But sometimes, what appear to be memory challenges may be other stroke deficits masquerading as memory problems. Here are some things to consider and ask your healthcare provider about. Many of the items on this list can look like memory loss, especially to family members, but the processes underlying these changes are different. The good news is that many of these can be treated:

Do you take medications such as high blood pressure meds and sleeping pills?	These may be making you drowsy or preventing you from focusing.
Do you have hearing or vision deficits?	It is possible that survivors with these deficits may appear to have forgotten something when they never heard or saw it to begin with.
Do you have problems paying attention?	If you aren't paying attention, you may not be encoding new memories.
Do you have sleep apnea?	If so, you may be sleep deprived, which may cause problems with attention and concentration.
Do you have difficulty recalling names, even of people close to you?	This may be anomia, a language problem, not a memory problem.

About Skill Memory



Skill memory relates to behavior that we've practiced. We'll use the example of playing the piano:

- A survivor's inability to play may relate to physical challenges, like the loss of motor control in their fingers or lost sensation that prevents them from being aware of where exactly their fingers are, which key a particular finger is touching.
- Apraxia may prevent them from organizing the movement of their fingers up and down.

- The stroke may have affected their ability to generate the right pattern to play the keys in the right order.

These issues may look like memory loss, but they are not and may respond to therapy. Talk with your doctor or therapist about your situation. It may be that you have problems with some other cognitive, sensory or motor function or a combination.