

**QUESTION:** I just reviewed your online booklet *Post-Polio Health Care Considerations* but didn't see a section on personality and cognitive changes. I am a mental health therapist and friend to two women who have post-polio. I am seeing changes in both their personalities and cognition. Do you have further information on these changes?

## Response from Rhoda Olkin, PhD:

The very brief answer to whether there are personality and cognitive changes in post-polio is no. But you are observing both, so what might we make of this?

First, there is a tendency to see many aspects of a person in terms of his or her disability. This is what Beatrice Wright (1983) called the spread effect. It means that the disability spreads to other presumed characteristics of the person. An example might be talking loudly to a blind person, on the assumption that hearing is likewise impaired. Another type of example is assuming that Itzak Perlman (the world-renowned violinist, who had polio) excelled at violin because he couldn't play sports.

In your case it might mean attributing observed changes to the polio. However, any changes you observe may be due to aging, menopause, stress, child rearing, worry over the November election (which was not resolved at the time of this writing), low thyroid or any myriad other possible explanations.

'Personality changes' can co-occur with fatigue, i.e., people get grouchy or less tolerant or more self-absorbed or less flexible and accommodating when they are trying to manage symptoms. I would not describe these so much as personality changes, but mood changes, which in turn change behavior.

To an outside observer, who makes what sociologists call the fundamental attribution error, the changes are ascribed to the person rather than to the environment or circumstances or context. To support this

idea that it is the fatigue *per se* and not an actual personality change, one study found that the fatigue associated with PPS had a negative impact on psychosocial functioning (On, Oncu, Atamaz, & Durmaz, 2006).

Regarding cognitive changes, there do not seem to be changes associated with polio or post-polio syndrome. For example, one study of people with polio with and without fatigue found no evidence that fatigue or cognitive load (doing multiple tasks in a row) affected cognitive functioning (Ostlund, Borg, & Wahlin, 2005).

Although an earlier study did find that polio fatigue is associated with attention deficits, a more recent study found "no support [for] the hypothesis of 'brain fatigue' in polio survivors, assessed by cognitive tests or event-related brain potentials" (Schanke, et al., 2002).

So ask your friends what they think. Do they notice changes in themselves? If so, to what do they ascribe these changes? Describe what you notice, then listen to their responses. ■

## References

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**QUESTION:** *I am in my 80s and have become less and less involved in “changing the world.” I have come to terms with that decision and just want to relax and enjoy life. But at the same time it seems like everything is so difficult anymore. Errors abound at the pharmacy, at the doctor’s office, the plumber seems not to carry the basic supplies in his truck, the young cleaning lady has a different definition of clean than I have, etc. Do you have advice on how I can just relax and enjoy these later years?*

**Response from Stephanie T. Machell, PsyD:**

It sounds like those you rely on are what’s preventing you from relaxing and enjoying your life. It must be frustrating to have to deal with so many incompetent people, especially when all you want is for things to run smoothly. Unfortunately, there is no shortage of incompetence in every walk of life. And that’s not likely to change, even if you devote all your time and energy to changing it, because you cannot make the incompetent competent.

There is nothing more frustrating and stressful (or impossible) than trying to change others who have no interest or investment in changing. The best way of reducing your own stress is to stop trying to do this. Instead, fire incompetent service providers and find new ones whose work meets your standards. You have a right to high-quality services and care, and though it may take some initial time and effort, once you have your “dream team” in place life will be much more enjoyable. It might further reduce your stress levels to ask for help from a family member, friend, or even someone from your local senior center or elder service program to deal with certain categories of service providers, and/or to find ones known to work well with older people with disabilities.

If the major stresses you experience come from other people’s behavior and attitudes, it’s worth learning to change the way other people’s behavior affects

you. Think about it: Are those who affect you worth the distress they cause? Do they deserve to ruin your day? Of course they don’t.

It’s hard, but you can learn to be less reactive to others. Try imagining a scale. At one end are events that are of no importance and/or have no lasting effect on you or your life. At the far end is the very worst thing that ever happened to you. Placing the person/event you find distressing on this scale can help you (re) gain perspective. You can count to ten, or take a deep breath, or find the humor in the situation. You can even vent your frustration to a friend or your journal, as long as doing this allows you to let the frustration go.

Many people find meditation useful in becoming less reactive and more relaxed. And of course, it has other health benefits as well. No matter what your belief system is, there is a way of meditating to go along with it.

Feeling disempowered and helpless is anything but relaxing. Studies show that those who remain engaged with their communities age best. Maybe you can redefine your idea of a peaceful life to include continuing to work for change. Maybe you could volunteer at the senior center to help others find more competent providers, or with your post-polio support group to develop or disseminate educational material to local physicians or pharmacies. ■

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