When They Forget Your Name

The Marriage That Survives Dementia at 60+

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Introduction: The Spouse Who Remembers

There is a moment, somewhere in the long slow course of a marriage, when one partner becomes the keeper of the other's life. It does not happen at the wedding. It does not happen at the birth of the children. It does not happen at the silver anniversary. It happens, often without warning, at the moment the other person begins to forget.

This book is about that moment. And the years that follow it.

The diagnosis is Alzheimer's. Or dementia — frontotemporal, Lewy body, vascular. Or it is a long slide that never gets a name, just a slow withdrawing of the person you knew. Whatever the cause, the shape is similar: the marriage you had is changing into a marriage you did not ask for, and the person you married is changing into someone you must learn to love in a new way.

You are reading this because you are the spouse who remembers.

You are the one who knows the stories. The names of the children. The address they lived at for thirty years. The first time they laughed at a joke you told. The way they take their coffee. The song that was playing when you first met. You hold all of it now — alone. The whole archive of your shared life, in one head, in one heart.

This book is not about how to fix your spouse. There is no fixing. There is no reversing. There is no cure that is coming in time to save your marriage. That is the first hard truth.

This book is about the *other* half of the diagnosis. The half the doctors don't talk about, the half the medical books skip over, the half that lives in the bedroom at 11pm when they are asleep and you are not. The half that is the marriage itself. The relationship. The "us" that you are still trying to be, even when one of you can no longer remember what "us" means.

There are roughly 55 million people in the world living with dementia today. By 2050, that number is expected to nearly triple. Most of them are over 65. Most of them are married. And most of them have a spouse — usually older themselves — who is doing the remembering for both of them.

That spouse is who I am writing for.

I am not a neurologist. I am not a geriatrician. I am not a researcher. I am a coach, a businessman, and someone who has been on the other side of a long goodbye. I watched my wife disappear. Not from dementia — from cancer. But the *shape* of the journey was the same. The slow erosion. The role inversion. The loneliness. The grief that has no name because the person is still alive. The marriage that has to keep being a marriage even when one of you can no longer hold up your half of it.

What I learned in those years is this: the marriage does not have to end. It changes. The vows you made — for better or worse, in sickness and in health — were not a contract that expires when memory does. They were a practice. And a practice, like any practice, can be done in a new way.

This book is that new way.

It is not a clinical manual. It is not a research review. It is not a memoir. It is a map for the spouse who is still here, drawn by someone who has walked a similar road and come out the other side changed, and is now writing down what he wishes he had known.

You will find four phases in this book — the four stages of the journey of the spouse who remembers. You will find case studies, composite couples who have lived these phases, drawn from research and common experience. You will find scripts, tools, decision trees, and rituals. You will find, if you read carefully, permission. Permission to grieve the person who is still in the room. Permission to be angry. Permission to ask for help. Permission to put them in care, or to keep them home. Permission to survive.

You are not invisible. You are not alone. And the marriage you are keeping alive — in whatever form it now takes — is not a small thing.

It is one of the bravest things a human being can do.

Let us begin.

Chapter 1: The Forgetting That Isn't Normal

The first sign of dementia is not forgetting a name, or losing a set of keys, or walking into a room and not remembering why. Those things happen to everyone, especially as we get older. The first sign is a *pattern* of forgetting

that is different from the way your spouse has always forgotten. It is qualitatively different. It is the kind of forgetting that is new to them — to the person they have always been.

It is the kind of forgetting that makes you, the spouse, stop and wonder.

Margaret was sixty-three when she started noticing. Her husband Robert, a retired civil engineer, had always been the organized one. He kept the family calendar. He remembered birthdays. He could recite the names of every person they had ever met at church, in order, going back thirty years. Margaret was the mess. She lost her glasses three times a day. She forgot why she had walked into rooms. She wrote herself notes on the back of receipts.

So when Robert started to do the things Margaret had always done — lose his glasses, forget appointments, lose the thread of a conversation — Margaret did not worry. She teased him. *You've finally joined me,* she said. *Welcome to the club.*

It took her eighteen months to realize the difference.

Margaret was forgetting the way she had always forgotten — randomly, without pattern, in clusters. Robert was forgetting in a *progression*. The glasses first. Then the appointments. Then the conversations. Then the names. Then the memories that had been his identity — his career, his children, his mother.

The pattern was not random. It was a slope. And it was going down.

This is the shape of the early forgetting. It is not the forgetting itself that is the warning. It is the *direction* of the forgetting. The first sign of dementia is the moment you notice that the forgetting is not random but progressive. That the person you have known for thirty or forty years is starting to lose the things they used to know how to keep.

There are common early signs. Not every person with dementia will have all of them, and not every sign means dementia — many of these can be caused by medication, depression, sleep apnea, vitamin deficiencies, or normal aging. But the *combination* of several of them, progressing over time, is the pattern to watch for.

- The first signs:**

- 1. Short-term memory loss that disrupts daily life.** Your spouse asks the same question three times in an hour. They forget what you told them at breakfast by lunch. They lose track of what day it is, not in the casual way of someone who never paid attention to dates, but in the way of someone who used to remember perfectly and now cannot.

- 2. Difficulty with familiar tasks.** Your spouse has made the same coffee every morning for thirty years. Now they put the kettle on the stove and the coffee in the fridge. They cannot remember how to set the microwave. They get lost driving to the grocery store they have shopped at for fifteen years.

- 3. Language problems.** Your spouse stops in the middle of a sentence and cannot find the word. They substitute wrong words — "the thing that holds the food" for "refrigerator." They call the grandchildren by the wrong names. They lose the thread of their own stories.

- 4. Disorientation to time and place.** Your spouse forgets where they are, not in the transient way of a tourist in an unfamiliar city, but in the way of someone who is in their own living room and does not know it.

- 5. Poor or decreased judgment.** Your spouse makes unusual decisions with money, or hygiene, or safety. They give money to a telemarketer. They wear the same clothes for a week. They leave the stove on.

- 6. Misplacing things and losing the ability to retrace steps.** Your spouse puts the car keys in the freezer. They cannot retrace where they have been. They accuse you or others of moving their things.

- 7. Changes in mood or personality.** Your spouse becomes suspicious, anxious, fearful, or withdrawn. They get angry in ways they never used to. They are suddenly afraid of things that never bothered them.

- 8. Loss of initiative.** Your spouse stops doing the things they used to love. The hobbies. The reading. The garden. The phone calls to friends. They sit in a chair and stare.

If you are reading this and several of these patterns look familiar, and they have been progressing for six months or more, the next step is a medical evaluation. Not a self-diagnosis. Not a Google search. A neurologist, geriatrician, or memory clinic. There are reversible causes of memory loss — medications, vitamin B12 deficiency, thyroid issues, depression, sleep disorders, infections. These need to be ruled out first.

If the cause is dementia, you will need a diagnosis. You will need a name for what is happening. Not because the name will change it, but because the name will allow you to begin to plan.

But before the doctor, before the diagnosis, there is a longer, harder, more private process. The process of *noticing*.

The first weeks of noticing are the loneliest weeks of the whole journey. You cannot say anything yet. The forgetting is not bad enough to be undeniable. It is

not consistent enough to bring to a doctor. You are seeing things, and the people around you are not seeing them. Your adult children tell you that dad is just getting older. Your friends tell you that mom is fine. Your spouse tells you they are fine.

You begin to wonder if you are imagining it. You begin to wonder if you are being unfair. You begin to wonder if the forgetting is not in your spouse, but in you — in your expectations, in your anxiety, in your need for control.

This is the trap of the first stage. The trap is not that you are imagining it. The trap is that you will silence yourself in order to be a good spouse, a kind spouse, a fair spouse. You will not want to make a fuss. You will not want to be the spouse who panics. You will not want to take away their dignity, their autonomy, their personhood.

But the alternative is worse. The alternative is to wait. The alternative is to let the slope continue. The alternative is to arrive at the doctor's office eighteen months from now, in crisis, when the forgetting has gone past the point of early intervention.

If you are noticing, you are not imagining. The pattern is real. The slope is real. The disease is real.

The most loving thing you can do, in this first stage, is to be the one who says, *I have noticed something, and I think we should look into it together*.

Not *I have noticed something is wrong with you.*

Not *You need to see a doctor.*

Together. As a couple. As a partnership that is facing a new challenge, the way partnerships do.

That is the conversation of Chapter 3. But first, Chapter 2: why you, the spouse, are the one who sees it first.

Chapter 1 at a Glance

- Key takeaway:** The first sign of dementia is not forgetting. It is the *pattern* of forgetting. The slope. The direction. The difference from the way your spouse has always been.

- 5 Things to Remember:**

1. Random forgetting is normal. Progressive forgetting is the warning sign.

2. The first signs are usually short-term memory loss, familiar tasks, language, orientation, judgment.

3. The first weeks of noticing are the loneliest. You are seeing what no one else sees.

4. The trap is silencing yourself to be a "good spouse." That silence can cost you eighteen months of early intervention.

5. The first move is to bring it up — together, as a couple, before the slope goes too far.

- Your Scorecard:** Rate yourself on a scale of 1-5 for each:

- I have noticed a pattern (not just incidents) of memory loss in my spouse.

- The pattern has been going on for six months or longer.

- I have been able to identify 3+ of the early signs.

- I have not yet brought it up with my spouse or a doctor.

If your total is 12 or higher, the next chapter — and the next conversation — cannot wait.

- Key Terms to Know:**

- **MCI (Mild Cognitive Impairment):** A stage between normal aging and dementia, where memory problems are noticeable but not severe enough to interfere with daily life. About 10-15% of people with MCI progress to dementia each year.

- **Dementia:** An umbrella term for a decline in mental ability severe enough to interfere with daily life. Alzheimer's is the most common type (60-80% of cases).

- **Alzheimer's Disease:** A specific type of dementia, characterized by plaques and tangles in the brain, that progresses through seven stages over an average of 4-8 years after diagnosis.

- **Reversible causes:** Memory loss that looks like dementia but is caused by something treatable — vitamin B12 deficiency, thyroid disease, depression, sleep apnea, medication side effects. Always rule out before assuming.

- Reflection Questions:**

1. When did you first notice the pattern, and what did you do about it?

2. Have you been silencing yourself to be a "good spouse"? What did that cost you?

3. What would it look like to bring this up "together" with your spouse, as a partnership facing a challenge?

- Action for This Week:**

If you have been noticing, this is the week to do one of three things:

- Have the conversation with your spouse. (See Chapter 3 for scripts.)

- Schedule a doctor's appointment. (Even a primary care visit to rule out reversible causes is a start.)

- Write down the patterns you have seen. (Dates, examples, what was different from how they used to be.) The written record will matter when you get to the doctor's office.

Chapter 2: The Spouse Who Knows First

There is a particular loneliness that belongs to the person who is the first to notice. It is not the loneliness of being alone in a room. It is the loneliness of being alone in a knowing. You have seen something that no one else has seen yet. The doctor has not seen it. The children have not seen it. Your friends have not seen it. Your spouse, in many cases, has not seen it. You are carrying a piece of knowledge that you cannot yet share, and the weight of that knowledge is changing you.

Why does the spouse see it first?

Because the spouse is the only other person in the world who has lived with this person for thirty, forty, fifty years, day in and day out, in the small hours and the ordinary hours. The spouse knows the rhythms. The patterns. The way the other person takes their tea. The way they tell a story. The way they load the dishwasher. The way they sigh when they are tired. The way they walk into a room. The way they laugh.

When something shifts, the spouse feels it the way a musician feels a note go out of tune. Not because the musician is a perfectionist. Because the musician's ear knows what in tune sounds like, and out of tune is unmistakable.

The adult children do not see it because they are not there every day. They see their parent on Sundays, or on holidays, or for the occasional weekend. By then, the parent has had time to gather themselves, to perform the social self.

The forgetting that happens at home, in the unguarded moments — the word lost in the middle of a sentence, the question asked for the third time, the coffee put in the cupboard — does not happen in front of the children. The parent, even in early dementia, often has a residual social awareness that allows them to cover.

The friends do not see it because they see the same limited version. They do not have the baseline. They cannot tell the difference between the person they have known socially for ten years and the person they have known socially for ten years who is starting to slip. Without the intimate knowledge of the daily rhythms, the small slips are invisible.

The doctor does not see it because the doctor has fifteen minutes, and the person sitting in the examination room is often performing. They have been told, in many subtle ways, that they are there to demonstrate competence. They will often over-perform in the doctor's office. The doctor's office is a stage, and the patient knows the lines.

The spouse sees it because the spouse is the only audience for the unscripted performance. The spouse is the one who is there at 11pm when the script has run out. The spouse is the one who is there in the morning, before the social self has reassembled. The spouse is the one who knows that *something is different*, even when the something is small.

And then comes the loneliness of the knowing.

The loneliness is not about other people failing to see it. The loneliness is about the *changes* it brings in you.

You begin to watch. You begin to evaluate. You begin to monitor. Every sentence they say, you are parsing. Every action they take, you are checking against the version of them that lives in your memory. You are no longer simply living with your spouse. You are *observing* them. You are taking measurements. You are keeping a record.

This is a profound change in the marriage. You are still on the same side of the bed, eating at the same table, but the relationship has shifted from *being with* to *being on watch over*. The marriage has become, in a small but unmistakable way, a clinical relationship. You are the doctor, in the home. You are the monitor. You are the one who notices the symptom.

And the person you are monitoring can feel it. Even in early dementia, even before they have any words for what is happening, your spouse can feel the change in you. They can feel that you are watching. They can feel that

something has shifted. They may not know what it is. But they can feel that you are no longer just their partner. You have become something else. You have become the one who is looking for signs.

This is the first damage of the diagnosis. Not the memory loss itself. The *change in the relationship* that the memory loss brings, even before it has a name.

And the second damage is the silence.

You cannot tell anyone. You cannot tell your spouse — because they will deny it, or become angry, or become terrified, and you are not yet ready to manage any of those reactions. You cannot tell your children — because they will not believe you, or they will panic, or they will treat your spouse differently, and you are not ready for that. You cannot tell your friends — because you are not yet sure, and saying it out loud will make it real in a way you are not yet ready for.

So you hold it. Alone.

You hold it while you make dinner. You hold it while you go to bed. You hold it while you make love. You hold it while you go to the grocery store, watching them try to remember why they came. You hold it while they tell the same story they told yesterday, in the same words, to the same friend, on the same call.

And the loneliness grows. Because the marriage that was supposed to be the place where you share everything has become the place where you cannot share the most important thing.

There is a way through this. The way through is not to keep holding it. The way through is to begin to find the people who can hold it with you.

The first person to tell is your doctor. Not the doctor of your spouse — your own doctor. Because you are going to need to be in good shape for the long road ahead, and the long road begins now.

The second person to tell is a close friend. Not someone who will panic, not someone who will gossip, but someone who has the maturity to hear what you are seeing and to hold it without judgment. The friend does not need to do anything. The friend just needs to know. So that you can say the things you cannot say to your spouse. So that you can cry in a room with someone who is not your spouse. So that you are not alone in the knowing.

The third person to tell is one of your adult children. Pick the one who is most likely to be calm. Pick the one who is most likely to listen before reacting. Tell

them what you have been seeing. Tell them you are not yet sure. Tell them you are not yet ready for the whole family to know. But tell them. Because the load is too heavy to carry alone, and the silence is starting to make you sick.

And the fourth person — eventually, when you are ready, when the slope is undeniable, when the doctor is involved — is your spouse. That conversation is in Chapter 3.

For now, the work of this chapter is to name what you have been doing. You have been the first to see. You have been carrying the knowledge alone. You have been the spouse who remembers, in a marriage that is starting to change in ways you cannot yet name.

You are not imagining it. You are not being unfair. You are not being a bad spouse by noticing. You are being the spouse — the one who has the intimate knowledge, the daily baseline, the pattern recognition that no one else has.

The next chapters are about what to do with that knowing. The first step is to make sure *you* are supported. The second is to begin the medical conversation. The third is to bring your spouse into the conversation in a way that preserves their dignity, your partnership, and the marriage.

You cannot do any of those things if you are carrying the knowledge alone. So start now. Tell one person. Today.

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ABOUT THE AUTHOR

S. Shharma is the author of The Care Collection - books for couples in the second half of life, written by a man who lived the silence and survived it.

He lost his wife of many years to cancer. He was her primary caregiver through every stage of her illness. He held her hand in the hospital. He sat in the waiting room at 3 a.m. He learned the silence of a marriage the way you learn a language you never wanted to speak.

He is also a businessman, an M.Sc., an MBA, and an APSCM from the Indian Institute of Management (IIM) Calcutta, with thirty years in corporate management. But these are not credentials you need to trust him. The credentials that matter are the ones in the books.

The Care Collection is not about how to fix a marriage. The Care Collection is about how to live one - even when the marriage is quiet, even when one of you is sick, even when one of you is gone.

He lives in India. He writes from the perspective of someone who has been on every side of a marriage - the partner, the caregiver, and the one left behind.

THE CARE COLLECTION - 14 BOOKS BY S. SHHARMA

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Fade - Why friendships disappear in midlife and how to bring them back 14. Hum Ladte Nahi (Hinglish) - Shaadi ko wapas kholne ka 30-din ka plan (Indian edition)

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ABOUT THE AUTHOR & THE 48-BOOK ECOSYSTEM

Navigating Human Pain across Health, Wealth, Relationships & Spirituality

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Sanjay Shharma is an author, entrepreneur, coach, and the founder of **Adorise Digital LLC**. Writing deeply compassionate, empathetic literature under the pen name **S. Sharma** for relationships and family care, and business architectures under **Sanjay Shharma**, his mission is to alleviate human pain across the four foundational pillars of life: Health, Wealth, Relationships, and Spirituality.

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