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Does Dementia Affect Language More Severely than Creativity? Perspectives through a Literature Review

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Abstract

The research study in connection with this paper centres around the impact of dementia on different modalities of communication. In order to do so, the study has selected available seminal literature on three celebrated individuals (who lived past 60 years of age) from three different genres of the arts, namely, literary writing, art, and music. All three individuals have been clinically diagnosed with different variants of dementia. However, it must be made clear at the outset that this is not a medical-related study of the condition but examines the impact of dementia on language and other creative abilities from a humanistic perspective, although the paper refers to important information from clinical studies where relevant, to shed light on the discussion about the present study. Utilising an exploratory thematic approach to the existing literature on dementia and cognitive abilities, this study finds the enhancement of certain skills in connection with creativity, at least in specific individual cases, together with a drastic decline in language abilities, which is a key feature in dementia.

Keywords: Dementia, Language, Creativity, Degeneration, Enhancement.

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Introduction

According to the World Health Organisation (2025), dementia is a broad term that is used to refer to a cluster of conditions that have been identified as causing progressive neurodegenerative disorder, which gradually brings about drastic changes in the behaviour and the overall personality of the individual afflicted with it, thus severely impeding their quality of life. Dementia is also medically explained as a disease caused by the loss of neurons due to structural and chemical changes in the brain, thus significantly interfering with a person's everyday life. Among the many severe difficulties faced by the individual are issues with memory, abstract thinking, comprehension and production of language and other higher cortical functions. These features, however, may manifest at different degrees in different individuals, depending on the extent to which the disease prevails in each affected individual.

Where the issues involved with dementia are concerned, its impact on language processes is determined by the damaged site of the brain and the extent of the damage, thus enabling the disease to be categorised into different dementia types (Kemper & Altmann, 2017). Alzheimer's disease, which causes the loss of neurons due to the formation of abnormal tangles of protein in the brain cells, has been recorded as the most common type of dementia, with a worldwide population of 55 million affected individuals as recorded in 2020 (World Alzheimer Report, 2020). According to medical research, the other common types include Fronto-temporal dementia (the variants or sub-types of which can be caused by a genetic mutation of chromosome 17), Parkinson's disease (caused by the loss of neurons which secrete dopamine which is a monoamine neurotransmitter), and Dementia with Lewy Bodies (which, like Alzheimer's, is due to the abnormal sedimentation of proteins in the nerve cells). Symptoms similar to dementia may occur in arterial or cerebrovascular disease, such as a stroke, causing vascular dementia.

A larger number of dementia patients (in its different types) has been reported from among the aging population, i.e., those above 65 years of age. However, dementia can affect those below that age, and this condition is known as early-onset dementia, or young-onset dementia.

Literature Review: Dementia and Communication

Brotons et al. (1997) cite the American Psychiatric Association (1994) in providing a clear definition of dementia, which identifies dementia “as an impairment in cognitive functioning, including deficits in short- and long-term memory, abstract thinking, judgement, language (aphasia), and personality change” (Brotons et al., 1997, p. 205). There are many research studies that have shown a deep concern about the relationship between dementia and its effects on language. Brotons and Koger (2000) cite a number of studies which describe the “deterioration of language abilities, including both comprehension and production, [as] a hallmark symptom of dementia” (p. 184). For this review, I have chosen some of the important and relevant studies conducted mainly in the past 40 years, spanning from 1985 to 2025, in this regard, with one other seminal work that falls outside of this time period, being published in 1948.

Kemper and Altmaan (2017) have made an attempt to investigate the effects of the different types of dementia on the use, partial use, and the gradual loss of language in the afflicted individuals, while comparing such changes with the decline in language abilities brought about by normal aging conditions. Different dementia types affect language abilities in different ways and for different reasons. However, to summarise the information in this study by Kemper and Altmaan (2017) (as well as all other studies on dementia mentioned in this article, and its impact on language) into one cluster as the general, yet progressive, features of the disease, the loss of working memory, or the loss of short-term memory for appropriate words can be stated as the immediate sign of this neuro-degenerative disease, causing issues in the retrieval of appropriate words when the affected individual is engaged in a conversation. Burke and Shafto (2007) report a rapid decline in the use of low-frequency words. Frequent use of fillers and repetition of words in the absence of more specific words are accompanied by the unavailability of precise words (Burke & Shafto, 2007; Cook et al., 2009;). An accelerated drop in the grammatical complexity of the sentences produced by individuals with dementia has been identified by Kemper et al. (2001). Le et al. (2011) recognise lexical deterioration as a more distinguishable feature than syntactic diminution. The other general issues concerned with the speech of such persons would be impairments in articulation, errors in grammar, and deficits in semantic knowledge, etc.

Since all types of dementia affect all modalities of language, where the writing ability is concerned, those suffering from dementia would gradually lose their capacity both in word and letter fluency. Their writing will thus begin to show 'low information content, with 'simplified grammatical structures' with the spelling getting regularised (Kemper & Altmaan, 2017, p.1885). Research on dementia and linguistic ability also states that persons with dementia will gradually begin to show signs of 'micrographia, or extremely small writing'. The use of related or substitute words, both in speech and in writing, caused by the deterioration of verb fluency, and the use of either jumbled or even meaningless words can be mentioned as a notable feature in the language of individuals affected by dementia. According to Brotons and Koger (2000, p. 185), as the disease progresses, "the language that relies heavily on cognitive processing such as reading, comprehending divergencies, utilising context and sequential relations suffers a progressive decline".

Hamilton (1994) and Ramanathan (1997) have respectively investigated in their longitudinal research studies, the degeneration of linguistic abilities in a dementia patient over the years, and the impact of the speech context and the interlocutors on the speech of such patients. In her sociolinguistics-based studies on the oral (Hamilton, 2008) and written (Hamilton, 2000) communicative abilities of dementia-stricken individuals, Hamilton concludes that this deficiency in language can be considered as one of the fundamental criteria, and even an early marker, in the detection of the disease. She emphasises the need to understand dementia from a human perspective besides a medical outlook. This viewpoint is reaffirmed by Leibing (2006) in the research, which calls for the need to focus on the capacities and abilities that are intact in 'the person within' even more than the clinical symptoms and the losses of the individuals who have dementia (Leibing, 2006, p. 243). A significant body of literature is available on the stigma associated with dementia and the

related symptoms. The negative labelling, discrimination, and exclusion of dementia patients by the larger society, as if those individuals have already undergone a 'social death' (Sweeting & Gilhooly, 1997), are questioned in the studies by Swaffer (2014), Milne (2010), and Link and Phelan (2001), and many more.

Guendouzi and Muller (2006) appear to have a stance that is contrary to the findings of the majority of research in the area of dementia and language. In discussing the perception of non-dementia persons on individuals with dementia and their language, Guendouzi and Muller (2006) assert that the general public, including those who provide care for those with the disease, tend to recognise dementia as causing a 'loss of self' (Guendouzi & Muller, 2006, p. 146), which the two researchers recognise as a misrepresentation of the reality of the disease, which has given rise to, as Snyder (2006, p. 268) remarks, "a socially constructed fiction" such as the 'long goodbye'. Emphasising the stigmatisation factor associated with dementia, Snyder exemplifies how the sociolinguistic discourse in connection with the description of the disease has been invalidated by the media images that are unfavourable towards those with the disease.

Researchers such as Guendouzi and Muller (2006) and Snyder (2006) are of the view that the public perception shapes the way in which persons without dementia use language to communicate with those individuals stricken with dementia. In other words, these researchers seem to believe that public perception negatively affects the personality of the individual with dementia long way before that individual actually experiences gradual and acute deterioration of her/his language. In-keeping with their viewpoint, Swaffer (2014), too, elaborates on the stigma and the stereotyping attached to the disease. According to Alzheimer's Disease International (2012), this stigma causes a profound sense of shame in those struck with dementia. Seminal research of a relatively earlier time, too, has insisted on the need to be 'concerned with the subjective experience of dementia, the nature of personhood and the self, and the socio-cultural context of disease definition' (Holstein, 1998, as cited in McColgan, et al., 2000).

History has shown that people from several different spheres of life, from various social backgrounds, have been affected by dementia, with their language abilities being heavily impaired. As regards creativity, however, studies have shown that some of the creative abilities remain intact even when language impairment has strongly set in (Crystal et al., 1989; Fornazzari et al., 2006, as cited in Palmiero et al., 2012).

Artists with AD can preserve some abilities that are important for artistic creativity, such as visuo-constructive capabilities, visual short-term memory for drawings, and short-term recognition for faces in the visual domain (Fornazzari, 2005), as well as musical memory (Crystal et al., 1989; Fornazzari et al., 2006) and the ability to play musical instruments in the auditory domain (Beatty et al., 1988; Cowles et al., 2003; Polk & Kertesz, 1993).

Research Gap

Dementia has been widely studied in scientific/medical research as a condition that causes cognitive deterioration, which includes language abilities, and it has been portrayed in literary texts through fictitious characters struck with dementia. However, there is not much of research on the impact of dementia on creative abilities (Palmiero, et al., 2012). Furthermore, research on dementia in the actual producers of works which belong to different genres of creativity, i.e., writers of literary works, painters, composers, etc., who have been clinically diagnosed as struck with dementia, either post mortem or at a time preceding death, is only a few. Although research is abundant on the impact of dementia on language abilities, there is a necessity to find out how this neurological condition affects other types of creativity. Since this is a considerably new area of research, this review paper aims to contribute to the knowledge of the Sri Lankan body of research through a critical exploration and synthesis of available research evidence on how the different and varying states of dementia are reflected in the works produced by a selected number of creative artistes.

Objective of the Study

The intention of the present study was to address the issue of creativity as against impairment in language abilities as caused by dementia in its different variants. The study sought to find out the impact of dementia on creative abilities, whether they are equally hampered as language abilities, or changed in a way that is different from language deterioration.

Methodology

The study took the form of an exploratory, qualitative research, and the required data were collected through a systematic review. As mentioned in the Literature Review, some of the important and relevant studies on dementia spanning a time from 1985 to 2025, with the inclusion of a seminal journal article from outside this time span (published in 1948, chosen on account of the very significant information it contained as regards the topic being explored), were employed for this study. The literature used for exploration were mainly journal articles, and they were selected on two main criteria: (a) some of the texts were selected based on the information they provided about the description of the different types of dementia with particular reference to their symptoms, and (b) the others in light of the specific information they contained on the dementia condition and/or the language and creative abilities of each of the three personalities explored in the present study. In selecting these three personalities, two main criteria were taken into consideration, namely, (1) their clinically investigated and confirmed conditions of dementia, and (2) their esteemed contribution to their respective fields of creative expertise, one being the winner of the Booker Prize, among many other recognitions, for literary writing; the second, a veteran scientist turned painter following the onset of dementia; the third being a composer of music who was considered as the best living composer in the early 20th century. A thematic analysis of the collected information on the three personalities was conducted as regards the connection between

dementia and different modalities of communication, i.e., literary fiction (novels), art and music.

Results and Discussion

The thematic analysis of the above-mentioned data revealed that all three personalities explored in the study were stricken with a dementia type that brought gradual deterioration in language abilities. The main (pre)occupation of Iris Murdoch, which was the writing of novels, seemed directly hit by dementia, as shown in the recorded scholarly research explored for the purpose of the present study. With regards to Anne Adams (scientist turned painter) and Maurice Ravel (pianist and composer), besides the decline in their language abilities, both showed signs of different, yet enhanced, abilities in their fields of creative choice. The outcomes of the present study are discussed below under three themes in relation to the three personalities explored and their different domains of creativity.

Dementia and Decline of Language Abilities: Iris Murdoch (1919-1999)

Among those struck with dementia are individuals whose talents have been celebrated in different fields of achievement before the onset of the disease. Iris Murdoch, the renowned Irish-British novelist, philosopher, and winner of the Booker Prize, was diagnosed with Alzheimer's disease towards the latter part of her life, which fact was further proven post mortem. According to research (Garrard et al., 2005), the gradual deterioration of Murdoch's mental faculties with the advancement of the disease is evident in the last novels she wrote, particularly in the novel *Jackson's Dilemma* which was published in 1995, two years before she was diagnosed with Alzheimer's.

Murdoch's last novel received rather negative comments from literary critics in that the novel was branded as 'strewn with imprecisions and blatant redundancies'. Scientists of the University College London, investigating the impact of Alzheimer's disease on language abilities, have uncovered defects in Murdoch's writing style over the years of her writing career. Their study revealed that, when compared with the works of the early part of her time as a writer, her final novel showed certain inadequacies in her writing, such as a diminished word fluency resulting in a markedly impoverished vocabulary. However, the study also found no evidence for inconsistencies in grammaticality, which further proved that Murdoch had been at the preliminary stages of Alzheimer's disease.

These findings of scientists would be an answer to the disappointment of critics with regard to her last novel, which has been described as blatantly imprecise and redundant. A study carried out by Garrard et al. (2005) making a detailed and systematic comparison among Murdoch's first published novel, *Under the Net* (1954), as well as her most successful, Booker Prize-winning novel, *The Sea, The Sea* (1978), and her last novel, *Jackson's Dilemma* (1995) (the three novels being produced at different intervals of a period spanning approximately 40 years of her writing life), has also shown signs of early Alzheimer's. Using the techniques of automated textual analysis, the study has discovered highly pronounced lexical inconsistencies in her last novel, *Jackson's Dilemma*, a feature that is not in keeping with

Murdoch's celebrated career as an excellent writer. The book appears to have noticeably inappropriate pauses and redundancies in the use of words. A decrease in her use of the passive voice, as well as incongruous word substitution, has also been discovered.

Garrard, et al. (2005), comparing one of Murdoch's richest novels that she produced before the onset of her dementia, i.e., *The Sea, The Sea*, with Jackson's *Dilemma*, note the vocabulary of the latter as rather stunted.

'The chagrin, the ferocious ambition which James, I am sure quite unconsciously, prompted in me was something which came about gradually and raged intermittently'.

(Murdoch: *The Sea, The Sea*).

'He got out of bed and pulled back the curtains. The sun blazed in. He did not look out of the window. He opened one of the cases, then closed it again. He had been wearing his clothes in bed, except for his jacket and his shoes'. (Murdoch: *Jackson's Dilemma*).

Murdoch herself has been reported to have said, '[a]t the moment I'm just falling, falling ... just falling as it were. I think of things and then they go away forever' (Day, 2016, reporting Murdoch as told to Joanna Coles, a journalist of the *Guardian*). All Murdoch's manuscripts were handwritten by her, a task which was done quite effortlessly until the onset of her dementia condition, without granting consent to her publisher for any editing (Garrard et al., 2005).

Identifying certain limitations of the study of Garrard et al., (2005), Le et al. (2011) have conducted another longitudinal study, making a complete analysis of a larger corpus of writings by Murdoch in her 'usual writing methodology' (Le et al., 2011, p. 440). In this quantitative study, they have discovered an abrupt decline in the size of vocabulary in Murdoch's last novel, *Jackson's Dilemma*, a finding which is quite unusual in comparison with her other novels. This finding has further strengthened the conclusions of Garrard et al. (2005) as regards the lexical issue with *Jackson's Dilemma*. In addition to this finding, Le et al. (2011) have also discovered an accelerated drop in the quantity of Murdoch's vocabulary while in the process of writing *Jackson's Dilemma*, particularly in the second half of the book. They further note that "the vocabulary growth of *Jackson's Dilemma* slows down significantly only after the 40,000th token, as distinguished from most of Murdoch's work" (Le et al., 2011, p. 442).

The analysis of the author's works in the study has also found a statistically significant gradual increase in the unnecessary repetition of words and phrases located within close distance towards the last five of Murdoch's novels, culminating in *Jackson's Dilemma*.

Murdoch's overall repetition rate increases significantly, peaking in her 51st year, and again rising in her last two novels. ... At the 51-year mark (*A Fairly Honorable Defeat*), Murdoch's repetition rates climb to a peak (Le et al., 2011, p. 443).

The study also notes an abrupt decrease in the syntactic complexity of the author's writing and a diminishing of her use of the passive voice structures, which coincides with her late 40s. The last novel of Murdoch's has also been found to have inappropriate pauses, which could be evidence of her struggle with writer's block. Le et al (2011, p. 443) report that 'unexpectedly, in 1969-70, more than 20 years before Alzheimer's symptoms became clear, her vocabulary declined'.

It can be noted that the observations of Garrard et al., (2005) of the signs of Alzheimer's disease in Murdoch's final work have also been corroborated by subsequent research. The findings in Pakhomov et al.'s (2011) case study using the Computerised Linguistic Analysis System on Murdoch's writing prove to be consistent with the outcomes of the study by Garrard et al. (2005) in that a clear decline in grammatical complexity in her work has been observed in both studies. According to Garrard et al. (2005, p. 250),

Alzheimer's is known to disrupt the brain's semantic system, but this can happen subtly before anyone has the remotest suspicion of intellectual decline. Intriguingly, Murdoch experienced an intense and unfamiliar feeling of writer's block during this period. It would appear that the disease was already beginning to disrupt her cognitive abilities, which may go some way to explaining why critics were disappointed with the strangely altered quality of her final novel.

The observation of a significant drop in vocabulary size, together with an early decline in syntactic complexity, aligns with the proposition of Le et al. (2011) as regards the relationship between dementia and the difficulty with communicating thoughts properly, with a choice of the right words and with syntactic intricacy.

This early syntactic drop that we analyzed, parallels a trough in her vocabulary and so might signify the pathology of AD [Alzheimer's disease], which, as mentioned earlier, may begin many years or decades before the disease onset. ... The dementia-induced language markers in Murdoch's last novel are prefigured by comparable changes in her mid-career suggest that her AD had a long preclinical period (Le et al., 2011, p. 456).

Zimmerer et al. (2016) confirm the fact that dementia-affected persons tend to increasingly rely on the use of formulaic and fixed phrases in a situation where their ability to produce novel sentences decreases.

Dementia, Decline of Language and Impact on Creative Ability in Visual Arts: Anne Adams (1940-2007)

Dr Anne Adams, a cell biologist attached to the University of British Columbia, quit her work as a scientist in 1986 while in her late 40s and turned herself into a prolific painter, with approximately 1000 paintings to her credit. In the year 2000, she was diagnosed with primary progressive aphasia, a degenerative brain disease that is a variant of frontotemporal dementia. As her linguistic abilities deteriorated due to this condition, she appeared to have gained in other, hitherto unforeseen, abilities in visual art. In a context where studies about neurological

degeneration issues generally “emphasise performance deficits” (Seeley et al., 2008, p. 39) caused by these conditions, Seeley et al. (2008) and Miller (2000) report the case of Anne Adams as an instance for extraordinary gains brought about by her brain disease. Their research in this regard has prompted assumptions about possible changes in the brain due to, and during, the progression of frontotemporal dementia, particularly the primary progressive aphasia, producing skills in artistic creativity.

Neuroimages of Adam's brain taken during this time show that regions in the front part of her brain, which are normally associated with language processing, had begun to deteriorate, while at the same time, regions of the brain responsible for integration of information from the five senses were unusually well-developed (Seeley et al., 2008).

According to Miller (2000), too, emergent artistic creativity could be a consequence of frontotemporal dementia in the case of some of the patients stricken with temporal lobe-predominant degeneration. His research states that ‘[t]he deterioration of the frontal cortex is a symptom of frontotemporal dementia, a disease that is associated with changes in artistic and musical tastes and skills. This argument is latterly supported by Palmiero et al. (2012, p. 197) when they point out that ‘the left temporal lobe variant pattern of FTD [frontotemporal dementia] was found to be associated with facilitation of visual artistic creativity’ (inclusion in square brackets mine).

Friedberg et al. (2023) add to the knowledge on this subject on the alteration of circuits in the brains of those afflicted with frontotemporal dementia. He postulates on a key role of neuroplasticity in this sudden actualisation of hitherto unknown, or dormant, creative skills. They remark that their ‘findings suggest that neuroplastic processes may occur in parallel to the disease process and may be potentially leveraged to develop new therapies’. Miller et al.'s (2000) argument that the loss of function in one region of the brain, in some patients, could trigger a compensatory effect in another region is thus further confirmed by Friedberg et al.'s viewpoint.

We now realise that when specific dominant circuits are injured or disintegrated, they may release or disinhibit activity in other areas. In other words, if one part of the brain is compromised, another can remodel and become stronger (Miller et al., 2000).

The scientific explanation that Miller offers for this change in the brain circuits is as follows:

Loss of function in the left anterior temporal lobe may lead to facilitation of artistic or musical skills. Patients with the left-sided temporal lobe variant of frontotemporal dementia offer an unexpected window into the neurological mediation of visual and musical talents.

In her capacity as a painter, Adams has also created works of trans-modal art, evident in her transliteration of the musical elements of the famous composer Maurice Ravel's celebrated

work of music, Bolero, into a visual interpretation in a painting, which was named Unravelling Bolero. It becomes apparent that these studies appear to attribute the flourishing of Adams' skills in painting to a compensatory effect of her primary progressive aphasia brought about by her condition of frontotemporal dementia, which had an extremely negative impact on her linguistic abilities.

Later paintings, achieved when Adams was nearly mute, moved towards increasing photographic realism, perhaps because visual representation came to dominate Adams' mental landscape during this phase of her illness. ... The findings suggest that structural and functional enhancements in non-dominant posterior neocortex may give rise to specific forms of visual creativity that can be liberated by dominant inferior frontal cortex injury (Seeley et al., 2008, p. 39).

Friedberg (2023) and Miller et al. (2000) observed in their research that in patients with neurological degeneration, 'the left temporal lobe had deteriorated as expected, but concurrently, regions in the back of the brain responsible for visual processing had hyperactivated'. Miller et al. (2000) further remarked that, with these degenerative diseases, suddenly areas of the brain that were neglected or deactivated most of the time may get activated.

Dementia, Decline of Language and Enhancement of Creative Ability in Music: Maurice Ravel (1875-1937)

Maurice Ravel, the French composer and pianist of international fame, was recognized in the early decades of the 20th century as the best living composer of the time. His composition, Bolero, is considered to be his masterpiece. Towards the last years of his life, Ravel is reported to have begun to show signs of dementia, the variant of which expert neurologists identified as frontotemporal dementia, which hampered his speech as well as musical dictation. The seminal publication by Alajouanine (1948) discusses a possible connection between aphasia and artistic achievement, where he gives Maurice Ravel as an example.

Subsequent studies have attempted to find evidence to substantiate this proposition related to Ravel's neurological condition and his astounding creations of music. These studies have discovered that Ravel's composition of Bolero coincided with the time during which he had begun to show signs of early dementia. The symptoms of Ravel's brain disease have been identified as similar to those of the dementia that struck Anne Adams several years later (Miller, et al., 1996).

Many research articles are available on Ravel's illness, which led to his death. According to some of those articles, Ravel had begun to show signs of neurological degeneration around 1932, gradually following a taxi accident, which had not shown much immediate physical repercussions. Other articles argue that he developed the signs of cerebral disorder in the years later than that (Alajouanine, 1948). Amaducci and Marini (1985) presume that the musical structures of two of Ravel's later compositions, Piano Concerto for the Left Hand and Bolero

reveal the deterioration of the left cerebral hemisphere, together with either a simultaneous or subsequent activation of the right hemisphere.

Amaducci et al. (2002) points out that Ravel increasingly developed cognitive decline, with trouble in speech, reading and writing - including the writing of music - to the extent of being unable to sign his name. Nevertheless, his capacity to recognise his own compositions, together with the recognition of the slightest mistakes when those compositions were played, had been intact. This argument aligns with other scientific studies, which have discovered that musical memory survives in severe conditions of Alzheimer's disease and Fronto-temporal dementia, even long after the decline of cognitive abilities (Beatty et al., 1997). Further research has identified patients with aphasic but not a music condition as a consequence of neurological degeneration. Ravel's enhanced artistic creativity is explained by Seeley et al. (2008) as gained by cerebral hemisphere degeneration.

The role of aphasia in Ravel's artistic output could depend on interactions between an undamaged (right-sided) musical system and an injured verbal and linguistic system (left-sided) ... (Cavallera et al., 2012).

Studies on music therapy on patients with dementia also support the viewpoint, with evidence, that 'musical communication and expression helps, especially when language use declines' (Odell-Miller, 2021). Sixsmith and Gibson (2007, p. 128) cite Cuddy and Duffin (2005) and other research which report that individuals who could play musical instruments before being struck with dementia, still seemed to retain their musical abilities, in spite of the loss of language and memory brought about by the disease. The study further remarks,

Such research has also indicated that musical abilities and memories may not be connected to deterioration in the brain relating to speech and language, raising the possibility of music as a non-verbal form of communication for people with dementia (Sixsmith & Gibson, 2007, p. 128).

Baird and Samson (2015) endorse this argument when they state that the ability of persons with dementia "to respond to music is potentially preserved even in the late or severe stages of dementia when verbal communication may have ceased" (p. 207).

Discussing arguments which are skeptical on a possible condition of dementia in Ravel, particularly related to a time of less availability of biochemical techniques, Broder (as cited in Jacobs, 2021) suggests that the availability of adequate circumstantial evidence could be accepted to arrive at a satisfactory conclusion that Ravel had been experiencing primary progressive aphasia, which has been categorised as a type of fronto-temporal dementia. Darvesh et al. (2024) posits that in a context where proper 'post-mortem neuropathological evidence' is not available, most assumptions on Ravel's condition have been based on the pre-eminent study by Alajouanine's (1948) whose extensive assessment and exploration of the progressive nature of Ravel's condition generated his conclusion. Vitturi and Sanvito (2019) state that '[t]he artistic brain of the author of eternal music compositions was progressively silenced due to his neurogenerative disease'.

Summary of the Key Findings

As the review of the literature suggests, dementia in its different variants, can impact human creative abilities in different ways. The three cases subject to exploration in the study stand as evidence for this premise. While dementia causes a definite decline in language creativity (as seen in the writings of Iris Murdoch), the disease may, at least in some cases, either enhance other creative abilities or not make a negative impact on them. Anne Adams' creation of prolific and excellent paintings has been explained in existing studies as a possible cause of a compensatory effect of dementia. This has been explained in terms of neuroplasticity which generates gains in some abilities when other capacities deteriorate. On the other hand, as seen in Maurice Ravel's production of musical compositions, studies have argued that music memory may retain while language memory significantly deteriorates with dementia, in that, dementia may not impact the memory for music.

Conclusion

Studies have shown that the impact of dementia on creative abilities may not be the same for everyone afflicted with the disease in its different variants at different levels of progression. The present article has explored how dementia has affected the creativity in three different personalities representing three domains of creativity, namely, novel-writing, painting and music. Iris Murdoch, the novelist, is found to have shown signs of decreased creative abilities with the progression of the disease. Murdoch was struck with Alzheimer's disease and her creative abilities were directly linked with language, which was strongly affected by the disease. It is evident that her persistent difficulty with words, which she herself has reported at the onset of the disease (though unknown to her at the time) as experiencing a 'writer's block' (Coles, 1996, as cited in Garrard et al., 2019) was brought about by this condition. Murdoch's clinical profile records 'profound semantic and visuospatial impairments' (Garrard et al., 2019).

Although Alzheimer's is characterised by the failure of memory and creative abilities, studies on specific individuals with both creative talents and dementia (for example, Palmiero et al., 2012) have shown that some patients with frontotemporal dementia on the left hemisphere of the brain have retained visuospatial abilities and originality in creative capacities. Primary progressive aphasia, which is another variant of dementia, has also proven to have retained originality in creativity in exceptional cases even with severe deterioration of language and other cognitive abilities. In both Anne Adams and Maurice Ravel, research has uncovered a situation not only where creative abilities have been unharmed by the variants of dementia they experienced, but also where creative abilities have been intensified when linguistic and related cognitive abilities failed.

Contribution of the Study

Thus, the study in connection with the present paper has made an attempt to contribute to the body of knowledge on dementia, looking at it from a different perspective, i.e., how dementia impacts creative capacities other than creativity in language. Furthermore, as

mentioned earlier in the paper, the study also aimed to contribute to the awareness in Sri Lanka on the loss as well as the possible gains that can be brought about by the neurological disease of dementia.

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