SITTING the other day in front of Picasso’s rapturous “Girl Before a Mirror” at the Museum of Modern Art, Rueben Rosen wore the dyspeptic look of a man with little love for modern art. But the reason he gave for disliking the painting was not one you might expect to hear from an 88-year-old former real estate broker.

“It’s like he’s trying to tell a story using words that don’t exist,” Mr. Rosen said finally of Picasso, fixing the painter’s work with a critic’s stare. “He knows what he means, but we don’t.”

This chasm of understanding is one that Mr. Rosen himself stares into every day. He has midstage Alzheimer’s disease, as did the rest of the men and women who were sitting alongside him in a small semi-circle at the museum, all of them staring up at the Picasso.

It was a Tuesday, and the museum was closed, but if it had been open other visitors could have easily mistaken the group for any guided tour. Mr. Rosen and his friends did not wear the anxious, confused looks they had worn when they first arrived at the museum. They did not quarrel in the way that those suffering from Alzheimer’s sometimes do. And when they talked about the paintings, they did not repeat themselves or lose the thread of the discussion, as they often do at the long-term care home where most of them live in Palisades, N.Y.

At one point, a member of the tour, Sheila Barnes, 82, a quick-witted former newspaper editor who suffers from acute short-term memory loss, was even characteristically aware of the limitations of her memory. “If I’ve told this story before, then somebody just say, ‘Cool it, Sheila,'” she announced, laughing.

She was a test subject, in a sense, in a growing effort to use art as a therapeutic tool for those in the grip of Alzheimer’s. Art therapy, both appreciating art and making it, has been used for decades as a nonmedical way to help a wide variety of people - abused children, prisoners and cancer and Alzheimer’s patients. But much of this work has taken place in nursing homes and hospitals. Now museums like the Modern and the Museum of Fine Arts, Boston, are trying to bring it into their galleries, using their collections as powerful ways to engage minds damaged by dementia.

It seems to be working, though no one knows exactly how. While extensive research has been conducted on the effects of music and performing arts on brain function - the Institute for Music and Neurologic Function in the Bronx has been studying the phenomenon for a decade now - there has been comparatively little work done in the visual arts.

What exists mostly is a stockpile of anecdotal evidence, encouraging but murky. Why did Willem de Kooning become more productive, almost maniacally so, as he descended into Alzheimer’s? Why does frontotemporal dementia, a relatively rare form of non-Alzheimer’s brain disease, cause some people who had no previous interest or aptitude for art to develop remarkable artistic talent and drive?

"Certainly it’s not just a visual experience - it’s an emotional one," said Oliver Sacks, the neurologist and writer. "In an informal way I have often seen quite demented patients recognize and respond vividly to paintings and delight in painting at a time when they are scarcely responsive to words and disoriented and out of it. I think that recognition of visual art can be very deep."

The Museum of Modern Art began to experiment with short, focused tours a year ago, working with an Alzheimer’s care company called Hearthstone, based in Woburn, Massachusetts. The Museum of Fine Arts, Boston, began to reach out to Alzheimer’s patients more than five years ago, offering tours alongside those for other disabled groups. And the Bruce Museum of Arts and Science in Greenwich, Conn., also offers tours, in addition to conducting a program in which it sends educators to Alzheimer’s care facilities to help with art therapy.

At the Modern, which plans to expand the Alzheimer’s program next year to families and other care providers, the effects of the tours are often striking and seem to speak - in a world of reproduction - to the power of the original. (For now, the tours focus on representational art, on the theory that it’s an easier touchstone for narratives and memories. There are no Pollocks, for example.)

Besides improving patients’ moods for hours and even days, the tours seem to demonstrate that the disease, while diminishing sufferers’ abilities in so many ways, can also sometimes spark interpretive and expressive powers that had previously lay hidden. Mr. Rosen, for instance, who had little interest in art when he was younger, talked with ease and inventiveness about the composition of Rousseau’s “Sleeping Gypsy.”

"If you met these people back where they lived on an
ordinary day, you simply would not see them being this articulate and this assured," said John Zeisel, the president of Hearthstone, who conceived the program with Francesca Rosenberg, the Modern's director of community and access programs.

On that Tuesday, as the group of two men and three women and a volunteer museum educator wound their way slowly through the empty galleries, Kerry Mills, who runs the residence in Palisades, pointed out one elderly man in particular, Frank Ertola, a former New York City police detective who was making his third visit to the museum.

Mr. Ertola, 86, burly with a thick sweep of white hair, had been living in the residence for almost three years and had recently begun to struggle with his emotions. "The smallest things in the world irritate him, and it's become very hard to get him engaged," Ms. Mills said.

But as he sat on a folding stool in front of Andrew Wyeth's "Christina's World," he smiled, listened and at one point - after abandoning a wheelchair he had requested when he arrived - stood and speculated on why there was an ellipse of mown grass surrounding the haunting farmhouse in the painting's upper right corner.

"It's to let you know that someone lives there," he said.

Later, in front of Matisse's "Dance," he was asked to provide a title for the painting, and on a notecard wrote "Dance of the Beauties." He smiled rakishly when asked to explain. "I see a naked woman?" he said, shrugging. "I think it's beautiful."

Ms. Mills was surprised to see him so talkative. "He was like he was last year," she said later. "He's such a fun person and such a gentleman, and all those things come out when he's at the museum."

More than four million Americans suffer from Alzheimer's disease, and the number is expected to rise as the nation's overall population ages. With no cure on the horizon, caregivers are increasingly exploring art as a way to help manage the disease, and they take encouragement from the results with music. Dr. Sacks noted that exposure to music can even result in lowered dosages for patients being medicated for cognitive and emotional disorders.

One avenue of thinking about both music and art, he said, is that it engages parts of the brain that remain intact long after the onset of dementia and that have to do with procedural memory - the kind that governs routine activities like walking, eating, shaving. One musician whom Dr. Sacks has observed has almost entirely lost his memory, but his musical memory is intact. "Nietzsche used to say that we listened to music with our muscles," he said. The question is whether a similar mechanism is at work in making and looking at art.

The National Institute on Aging held a conference in Alexandria, Va., last year to allow researchers to compare notes on Alzheimer's and artistic activity. One speaker, Bruce L. Miller, clinical director of the Memory and Aging Center at the University of California, San Francisco, said he believed that even sitting and looking at art is much more active than most people assume, and such activity could have positive effects on damaged brains.

"There's a lot of general excitement in this area, but not much known about it," he said later in an interview. "I think there is, tucked in there, a research question that really hasn't been answered yet, which is: by looking at or making art, is there a way to improve the brains of those with Alzheimer's?"

Museum and Alzheimer's care officials say that at the very least, they see temporary but palpable, and moving, improvement in the small group of people who have participated in the tours. Hannah Goodwin, the manager of accessibility at the Museum of Fine Arts, Boston, recounted watching an elderly man react to a Stuart Davis painting. "Very spontaneously, he just starting talking about the painting and about the time period in New York," she said. "He was talking about jazz and improvisation and everything. It was very beautiful and unexpected. There was this absolute clarity and connection that I think was really sparked by the painting."

Irene Copeland Brenton, 73, one of the visitors to the Modern on that Tuesday, suffers from a kind of Alzheimer's that has made it very difficult for her to read and to find the right words to say. But in front of the Wyeth and later the Rousseau, she was almost loquacious. Her husband, Myron, said that while specific memories of the museum might evaporate, she seemed to retain a kind of emotional memory long after the visit ended.

When he reminded her that she had visited the museum and that Ms. Mills had written an account of it, he said, "her face lit up."

"She really wanted to hear about the whole thing," he said. "It seemed the experience relived itself when I prompted her."

That day at the museum, looking longingly at the figure lying in a field at the bottom of the Wyeth painting, she seemed to identify deeply with the thin young woman in the dress, her left hand reaching out toward the farmhouse.

"You can't see her face," Ms. Brenton said, "but looking at her you get the feeling she's happy."

She was asked why.

"Because you know she's going to get to the house," she said, adding: "I'd like to go into that house, too."

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Irene Brenton talks to Xanthe Alban-Davis about Andrew Wyeth's "Christina's World" at MoMA (Photograph: Sara Krulwich/The New York Times)