Where are we, with research, care and societal acceptance of dementia? 30 years on; how has it changed and how will the future be?
Research: ADI, 10/66
Closing the treatment gap in LAMIC

• The 10/66 Dementia Research Group research program was designed to quantify dementia prevalence, incidence and impact in LAMIC.
• Developed and validated a novel approach to diagnose dementia, in older people with little or no education.
• The findings of this group, have helped in closing much of the gaps in our understanding of the burden of dementia and its impact in the LMIC, laying the foundation for developing need based interventions to improve the quality of care for people with dementia in these regions.
• It has helped us to work closely with national, regional and international policymakers in the formulation of national plans, and in the interpretation and dissemination of knowledge from the 10/66 studies.
• Has contributed to global and regional awareness on the impact of dementia and other chronic health conditions
WHO

Closing the treatment gap in LMIC

• Mental health Gap Action Program (mhGAP), an initiative of the WHO, that provided an evidence based model of intervention guide for the management of dementia.


• First Ministerial Conference on Action Against Dementia.

-www.alz.co.uk/WHO-dementia-report
- First WHO Ministerial Conference on Action Against Dementia, Geneva, 16-17 March, 2015
A Global Momentum
Global Action Against Dementia

• Started by the UK government (G8;2013)
• A coordinated international cooperation and effort.
• WDC
• Finding a cure? Disease modifying drug by 2025?
• 10 years of failure? Why not experience?
Global Action Against Dementia
WDC

- Integrated development
- Finance
- Open Science and Data (OECD)
- Care
- Risk reduction

Societal acceptance

- PWD
- DFC’s concept*
- Should not be guided from the top or standardized.
- AA and other non-governmental organizations role.
- Linkages and synergies with other city oriented initiatives to maximize effectiveness.
- Platform to connect and share best practices around DFC’s

Villa Francisca
10/66 catchment area
Care

• Education and behavioral interventions improve quality of life
• Brain health getting more emphasis
  – Physical exercise helpful
  – Diet may work
  – Brain games unclearly beneficially but life-long education is key
  – Sense of purpose in community perhaps most important
• Moving more towards public health and prevention.
• Global Observatory: ADI/WHO
• International standardization of care practice?
The Future

• Better understanding of normal brain ageing.
• More research in basic science, due to the complexity and heterogeneity of the problem.
• Continued development of integrated care systems and dementia friendly communities.
• Use of information technology from mobile devices to robots.
• Increasing attention to LAMICs – they will help wealthier countries develop practical ways of addressing the challenges of cognitive aging.