WHO’s commitment to dementia

Dr Tarun Dua
World Health Organization
Geneva
Outline of presentation

- Understanding the Dementia Challenge
- National and Global Response
- WHO's priorities around dementia
  - Setting dementia research agenda
  - Policy action
  - Information and communication technology for dementia care
  - Bridging the gap between NCDs and dementia
  - WHO Global Dementia Observatory
Why is dementia a public health issue?

- The number of older persons has more than tripled since 1950, and will almost triple again by 2050.

![Bar chart showing population growth from 1950 to 2050.](image-url)
Population aged 60 years and older: 2015-2050

Populations are getting older

Percentage aged 60 years or older:
- 30% or more
- 10 to <30%
- <10%

2015

Source:
Dementia: Global public health threat

Numbers will approximately double every 20 years

- 47 Mio in 2015
- 75 Mio in 2025
- 132 Mio in 2050

Figure based on estimates from the World Alzheimer Report, 2015
Dementia prevalence (for >60yrs) by GBD region: 2009 vs 2015 estimates

Source:
Incidence of dementia by world region and development status

Over 9.9 million new cases each year worldwide
One new case of dementia every 3.2 seconds

FIGURE 1. Meta-analysed estimates of the incidence of dementia by world region/development status (2)

Source:
Huge economic impact

- US$818 billion per year (as estimated in 2015)
- 1.1% of GDP; equivalent to world’s 18th largest economy
- Costs are unevenly distributed
- Per capita cost (2015):
  - LICs: US$ 1,019
  - LMICs: US$ 1,560
  - UMICs: US$ 5,284
  - HICs: US$ 36,669

The societal costs of dementia in different sectors

Figure based on estimates from the World Alzheimer Report, 2015
The dementia challenge

Public understanding
- Often considered normal part of ageing
- Stigma, social isolation
- Dismissive attitudes of service providers

Health and social care needs
- Underdiagnosed or diagnosed late
- Currently no cure

Informal care and families
- Most care provided by informal, unpaid caregivers
- Caregiving can be overwhelming for families
- Health, social, financial and legal support required
RESPONSE TO THE DEMENTIA CHALLENGE

National and Global.......
Global responses to the dementia challenge

- WHO/ADI Report, 2012
- World Dementia Council
- WHO Director General, Dec 2013
- OECD Addressing Dementia 2015
- Global Dementia Observatory
- G7 Legacy Events UK, Canada/France, Japan, & US 2014-5
- WHO 1st Ministerial Conference, March 2015
- UK G8 Dementia Summit 2013
Countries with National Dementia Plan

Australia, Austria, Belgium, Chin. Taipei, Costa Rica, Cuba, Czech Rep., Denmark, Finland, France, Germany, Greece, Indonesia, Ireland, Israel, Italy, Japan, Luxembourg, Malta, Mexico, Netherlands, Norway, Rep. Korea, Sweden, Switzerland, UK, USA

Source: https://globaldementiaframework.wordpress.com/leadership/ (accessed April 2016)
MOTION - (Sen. (Dr.) Wilfred Machage)
(Department of Health)

THAT, aware that currently there are approximately 44 million persons living with dementia worldwide, a figure that is expected to triple by 2050; acknowledging that caring for dementia patients can be a difficult experience; appreciating the contribution of family members and other care givers of people suffering from dementia across Kenya; noting with concern that mental healthcare does not seem to be a priority in the public health sector in Kenya since the allocation for mental healthcare is less than 1% of the total public health budget; acknowledging the importance of raising awareness of dementia and ensuring that people with dementia are treated with dignity and respect; appreciating the contribution of non-governmental organizations such as the Africa Mental Health Foundation and the International Institute for Legislative Affairs who provide a platform for sharing of views and experiences on care of people with dementia; noting the need to enhance awareness on and provide better care for patients of dementia; the Senate directs the Standing Committee on Health to immediately initiate review of the existing legislation on health care in order to mainstream and enhance care for patients of dementia and further that the Committee submits a report to the House on the matter within ninety (90) days.
First Ministerial Conference on Global Action Against Dementia 16-17 March 2015

Around 450 people; 89 countries; 80 foundations; 45 NGOs
CALL FOR ACTION
by the participants in the First WHO Ministerial Conference on Global Action Against Dementia (Geneva, 16-17 March 2015)

APPEL À L’ACTION

دعاء إلى العمل

ПРИЗЫВ К ДЕЙСТВИЯМ

LLAMAMIENTO A LA ACCIÓN

行动呼吁
Call for Action (1)

- Raising the priority accorded to dementia
- Strengthening capacity, leadership, governance, multisectoral action and partnerships
- Raising public awareness and engagement
- Advancing prevention, risk reduction, diagnosis and treatment of dementia
- Technological and social innovations to meet the needs of people living with dementia and their caregivers
- Increasing collective efforts in dementia research and fostering collaboration
Call for Action (2)

- coordinated delivery of health and social care
- supporting a gender-sensitive approach
- identify and address barriers to dementia care
- strengthening international efforts to support plans and policies at all levels
- supporting the efforts of the World Health Organization, within its mandate and workplans, to fulfil its leadership role in full collaboration with national and international partners to promote and monitor global efforts to address dementia.
Global action against dementia

What we must do

CIVIL SOCIETY

Raise awareness and increase understanding

WHO

Provide a knowledge base

Assist countries with dementia plans

Monitor progress

GOVERNMENTS

Develop and implement policies and plans

Increase investment in research

Improve health and social care
World Health Organization Approaches and Initiatives

Knowledge exchange

Prevention

Policy

Research Agenda

Care and Services

Treatment
1. Setting agenda for dementia research

- Dementia research portfolio analysis
  - To map the current directions for dementia research
  - Diverse systems and nomenclature being used by different agencies
  - Will enable strategic investments, improved coordination and reduced duplication
Setting agenda for dementia research

- Developing Dementia Research Priorities and Setting the Agenda
- Core role of WHO in shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge
- Research prioritization important for
  - maximizing disease burden reduction in equitable and cost-effective way
  - improved health system efficiency and intervention delivery
  - discovery and development of new interventions
  - education regarding controllable risks
2. Dementia care and prevention: Policy action

- Continuum of care pathway

Health system

Prevention; Awareness raising

Diagnostic; Post-diagnostic services

Community services; Supporting carers

Supported or institutional care; End of life care

Institutional

General public and health workers

Community and social care

Supporting countries for developing and implementing dementia friendly policies: mental health, ageing, NCDs, or dementia specific
Clinical guidelines for non-specialized health care workers - updated 2016

Watch This Space

mhGAP Intervention Guide
for mental, neurological and substance use disorders in non-specialized health settings

World Health Organization

Translated in more than 20 languages and used in more than 90 countries
4. Are cardiovascular disease and risk factors present?

Assess for
- Hypertension (blood pressure)
- Hyperlipidaemia
- Diabetes
- Smoking
- Obesity (weight, waist-to-hip ratio)
- Heart disease (angina or myocardial infarction)
- Previous stroke or transient ischaemic attacks

**YES**
If cardiovascular risk factors or disease are present

- Reduce cardiovascular risk factors according to local guidelines:
  - Advise person to stop smoking
  - Treat hypertension
  - Advise weight-reducing diet for obesity
  - Treat diabetes
- Refer to appropriate specialists.

5. Does the person suffer from other physical conditions?

- Evaluate nutrition, eyesight, hearing, dentition, bladder and bowel function, and pain
- Obtain urinalysis
- Review medications, particularly those with significant anticholinergic side-effects (such as amitriptyline (an antidepressant); many antihistamines, antipsychotic drugs)

**YES**
If associated physical conditions are present, especially:
- Poor nutritional status
- Urinary tract infection
- Constipation or diarrhoea
- Medication interactions or side-effects

- Treat associated physical conditions as it might improve cognition.
- Refer to appropriate specialists.

6. Is the carer experiencing strain or in need of support?

Assess
- Who is the main carer?
- Who else provides care and what care do they provide?
- Is there anything they find particularly difficult to manage?
- Are the carers coping? Are they experiencing strain? Are they depressed?
- Are they facing loss of income and/or additional expenses because of the needs for care?

**YES**
If carer is:
- Experiencing strain
- Depressed
- Facing overwhelming treatment costs

- Provide interventions for carers. **DEM 3.5**
- Explore psychosocial interventions:
  - financial support such as disability services
  - information about the condition of the person
  - respite care
  - activation of community support network
  - family or individual therapy if available
- Follow up. **DEM 3.6**
- Assess carer depression according to Depression Module and manage accordingly. **DEP**
iSupport

AN E-HEALTH SOLUTION TO SUPPORT CAREGIVERS
OF PEOPLE LIVING WITH DEMENTIA
iSupport

- Goal: to provide knowledge and skills training for caregivers to provide better care for people with dementia and prevent or diminish health problems.

- Platform: public website with private area for intervention.

- Browser version and for mobile devices.
iSupport

Do you care for a family member with memory problems or dementia? That can be difficult, stressful, and exhausting.

iSupport helps to provide good care and to take care of yourself.

Start the online program iSupport for free ▶️ SIGN UP ▶️

About iSupport

iSupport helps you. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco.

To understand the impact of dementia

Dementia is a brain disease that has an impact on your family member, but also on you.

How to deal with challenging behavior

Memory problems and behavior changes can be difficult to cope with.

How to provide good care

Daily activities like bathing and eating can become difficult as the dementia progresses.

How to take care of yourself

Caring can be difficult, stressful, and exhausting.

Memory problems, Dementia, Alzheimer and Caregiving

It is estimated that today, more than 47 million people around the world are having dementia.

For professionals

As a health professional, you are invited to refer caregivers to iSupport.

Read more ➤
4. Bridging the gap between NCDs and Dementia

- NCDs and dementia share same risk factors
- UN High Level Political Declaration acknowledged dementia as an important contributor to NCD burden
Combined efforts to develop an integrated approach to NCDs and Dementia – at policy and programme level

- Chronic Respiratory Diseases
- Cancer
- Diabetes
- Cardiovascular Diseases
- Dementia
- Other NCDs
- Obesity
- Tobacco use
- Unhealthy diets
- Alcohol use
5. The WHO Global Dementia Observatory

Observatory will provide data, and analysis highlighting dementia burden and response

- Global epidemiological trends
- Policy formulation and adoption
- Country implementation through health and social care system
- Partnerships
- Research
Objectives of the Global Dementia Observatory

- To increase countries’ capacity to systematically generate information and to use it for policy and practice
- To monitor progress within countries and globally
The Global Dementia Observatory consists of...

● **4 domains** with sub-domains → “building blocks” OR “levers” *(organised in columns)*

● **8 thematic areas** → “objectives OR goals” *(organised in rows)*
  – derived from OECD/WHO and other frameworks
  – measured by several indicators across the 4 domains
  – not all necessarily reflected on all 4 domains

Together they build the Observatory Framework
1) Dementia on National Agenda
2) Human rights and advocacy
3) Dementia awareness (incl. dementia-friendly communities)
4) Risk reduction
5) Workforce training
6) Timely diagnosis
7) Post-diagnostic support
   - Care coordination
   - Early initiation of treatment
   - Management in the community
   - Residential or institutional care
   - Management in hospitals
   - End-of-life care
8) Caregiver support

General indicators (e.g. sex, age, dementia type, dementia severity used for stratification)
Key global sources to inform the development

- WHO AIMS
- Global Health Observatory
- OECD, EC and other reports
- ADI reports
- World Dementia Council
- Alzheimer Europe Yearbooks

* as well as relevant country reports (e.g. national plans, policies etc.)
The Global Dementia Observatory – Project phases

Phase 1
- Stakeholder consultation
- Develop framework, domains, sub-domains and indicators
- Conduct dementia landscaping
- Pilot test platform

Phase 2
- Data input from countries ready for GDO
- Establish knowledge exchange platform
- First report and country profiles
- Observatory launch

Phase 3
- Data input from additional HICs and LMICs
- Second report and country profiles
- Observatory updates and newsletters
- Knowledge summaries and policy briefs

Phase 4
- Data input from larger set of countries
- Observatory updates & newsletters
- Country profiles
- Knowledge summaries and policy briefs
Potential pilot countries

Selection based on:
- presumed readiness to take part in GDO
- expressed interest

High and low/middle income countries

Covering all 6 WHO regions:

Africa
- Mauritius (Swaziland)
- (Togo)

Americas
- Costa Rica
- Dominican Republic
- Chile

South-East Asia
- Bangladesh
- Maldives
- Myanmar

Europe
- France
- Hungary
- Italy
- Netherlands
- Sweden
- Switzerland
- UK

Eastern Mediterranean
- Jordan
- Qatar
- Tunisia

Western Pacific
- Australia (Fiji)
- Japan
Stakeholder Meeting, 5/6 July 2016

- Bringing together project advisory group, country focal points and other stakeholders
- Preliminary results from pilot testing
- Seeking consensus on the conceptual framework and the proposed indicators
WHO's Priorities around Dementia:

- For further information
  http://www.who.int/mental_health/neurology/dementia/en/

Thank you