

Frequently Asked Questions Newly Released Report on Alzheimer's in California

Q: What is Alzheimer's disease?

A: Alzheimer's disease is a progressive, irreversible neurological disorder characterized by severe memory loss. It is the most common type of dementia and ultimately fatal.

Q: What is this report and why is it important?

A: Titled the *Alzheimer's Disease Facts and Figures in California: Current Status and Future Projections*, this report is the first of its kind to focus on our state. It forecasts an alarming and unexpected increase in the number of Californians who will develop Alzheimer's and other types of dementia. However, if acted upon, increased support for Alzheimer's research may lead to treatments that can delay onset of the debilitating symptoms of the disease, thus reducing the burden of the disease on our publicly funded health programs, on families, businesses and taxpayers.

Q: How many people will develop Alzheimer's in California?

A: The number of Californians with Alzheimer's disease will nearly double to 1.1 million by 2030, with all race and ethnic groups experiencing dramatic increases, as well as every region of the state. California baby boomers age 55 and older have a one in eight risk of developing Alzheimer's disease, and a one in six risk of developing a dementia of any type.

Q: Are some groups more impacted than others?

A: Yes. Especially hard-hit will be many of California's ethnic populations, where Alzheimer's is often underreported and diagnosed at a later stage of the disease. Among ethnic communities, the report predicts Alzheimer's will double among African-Americans, and triple among those of Latino and Asian descent.

Q: Will deaths from Alzheimer's increase?

A: It is likely based on current trends. Alzheimer's is now the sixth leading cause of death in California. It moved from the eighth leading cause in 2004 to sixth in 2005.

Q: Who else will be affected by this alarming trend?

A: Primarily family caregivers, 75 percent of whom are women. California alone is home to 11 percent of the nation's family caregivers who are already providing unpaid care for a person with Alzheimer's or related dementia. Caregivers of people with severe memory problems or dementia spend an average of nearly 54 hours a week providing help, which leads to a disproportionate number of caregivers being forced to miss work, reduce work hours, change jobs or quit their jobs altogether. In addition, family caregivers of people with severe memory problems are more likely than other family caregivers to experience financial hardship, report health difficulties, experience emotional stress and suffer from sleep disturbance.

Q: What's the financial impact on the economy?

A: The dramatic increase in numbers of people living with Alzheimer's will touch all parts of the economy, both the private and public sectors. The total costs of community care in California for people with Alzheimer's disease, including unpaid family care and out-of-pocket expenditures, are expected to increase from \$50.5 billion in 2008 to \$98.8 billion in 2030. Meanwhile, businesses suffer from absenteeism when caregivers are forced to take time off. This cost is already estimated at \$548 million annually, using a median wage of \$16.91. There is also a heavy fiscal impact from increased Medi-Cal costs resulting primarily from the lack of community-based services that often drive people into nursing homes where Medi-Cal costs are highest for people with Alzheimer's.

Q: Will taxpayers be affected by this trend?

A: Yes, primarily through a growing cost burden placed on Medi-Cal. While less than 6 percent of people living with Alzheimer's disease reside in skilled nursing facilities, the cost of formal care for these individuals living in

institutions such as nursing facilities will increase from the current \$2.4 billion to more than an estimated \$4.7 billion by 2030. In California, nursing home care for a person with Alzheimer's can cost between \$64,068 and \$72,919 each year. With many families unable to pay these costs over the often long course of the disease, that increase will fall on the state and federal government, and from there, onto taxpayers.

Q: What can be done to reduce this cost?

A: The report's findings underscore the need to intensify research efforts. The facts indicate that by delaying onset of the debilitating symptoms of Alzheimer's by just five years, prevalence rates could be cut in half. A decline in the number of people being treated for dementia can result in a parallel decline in the burden on Medi-Cal — and on taxpayers.

Q: What can people do on an individual level?

A: Everyone will be affected one way or another by this dramatic increase in the number of people with Alzheimer's, either directly by family members or indirectly as taxpayers. People can take action by contacting their legislators and urging them to support AB 292, which will extend the Alzheimer's Research Fund tax check-off. They can contact the Alzheimer's Association or go to www.alz.org to learn about the early warning signs of Alzheimer's disease and follow up with their doctor if warranted. They can become an Alzheimer's Champion and participate in the Alzheimer's Association Memory Walk in their community.

Q: Who funded and prepared this report?

A: The report was funded by The Rosalinde and Arthur Gilbert Foundation and supported by the Alzheimer's Disease Program at the California Department of Public Health. It was prepared by the Institute for Health and Aging at U.C. San Francisco in consultation with the Alzheimer's Association, the nation's leading voluntary health organization in Alzheimer's care, support and research.

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