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**NEW REPORT SAYS
AFRICAN-AMERICANS AND HISPANICS MORE LIKELY TO HAVE
ALZHEIMER'S DISEASE AND DEMENTIA THAN WHITES**

Washington, D.C., March 9, 2010 – According to the Alzheimer's Association's® *2010 Alzheimer's Disease Facts and Figures*, African-Americans are about two times more likely and Hispanics are about one and one-half times more likely than their white counterparts to have Alzheimer's and other dementias. Although whites make up the great majority of the more than five million people with Alzheimer's and other dementias, African-Americans and Hispanics are at higher risk for developing the disease.

There are no known genetic factors that can explain the greater prevalence of Alzheimer's and other dementias in African-Americans and Hispanics than in whites. On the other hand, conditions, such as high blood pressure and diabetes, which are known risk factors for Alzheimer's and other dementias in all groups, are more common in African-Americans and Hispanics than in whites. Socioeconomic factors, such as having a low level of education and low income are also associated with greater risk for Alzheimer's and other dementias in all groups. Data from a federal survey of older Americans shows that African-Americans and Hispanics are disproportionately represented among socioeconomically disadvantaged people in this country. The Association's new report points out that these health and socioeconomic factors probably contribute to the greater prevalence of Alzheimer's and other dementias in African-Americans and Hispanics.

“Alzheimer's disease is the single largest, looming, unaddressed public health threat facing the nation, but we now know the threat is even more substantial in the African-American and Hispanic communities,” said Harry Johns, Alzheimer's Association President and CEO. “These groups are more likely to have Alzheimer's, less likely to know it and, as a result, less likely to receive available treatments and supportive services that can help them cope with the disease.”

High blood pressure and diabetes are potentially modifiable conditions. Better management of these conditions could help to reduce the prevalence of Alzheimer's and other dementias, especially if treatment were begun in people who have these conditions in midlife. Since high blood pressure and diabetes are more common in African-Americans than whites and diabetes is more common in Hispanics than in whites, effective treatment for these potentially modifiable conditions could be especially beneficial for these groups.

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Socioeconomic disparities, such as lower income, translate into reduced access to health care and therefore, reduced opportunities to avoid or better manage high blood pressure and diabetes that, in turn, increase Alzheimer risk.

Underdiagnosis of Alzheimer’s and Dementia in African-Americans and Hispanics

Although African-Americans and Hispanics are more likely than whites to have Alzheimer’s and other dementias, the report reveals that African-Americans and Hispanics are *less* likely than whites to have a formal diagnosis of their condition. National data show that African-Americans and Hispanics with Alzheimer’s and other dementias are less likely than whites to report that a doctor has told them they have a “memory related disease” (45 percent of whites with Alzheimer’s or other dementias compared with 33 percent of African-Americans and 34 percent of Hispanics with these conditions).

Research shows that many African-American family members recognize the value of having a diagnosis; but long delays often occur between family members’ recognition of symptoms of cognitive impairment and the scheduling of a medical evaluation. The same is true for Hispanics. Delays in diagnosis mean that African-Americans and Hispanics are not getting treatment in the earlier stages of the disease, when the available treatments are more likely to be effective and do not have an opportunity to make legal, financial and care plans while they are still capable.

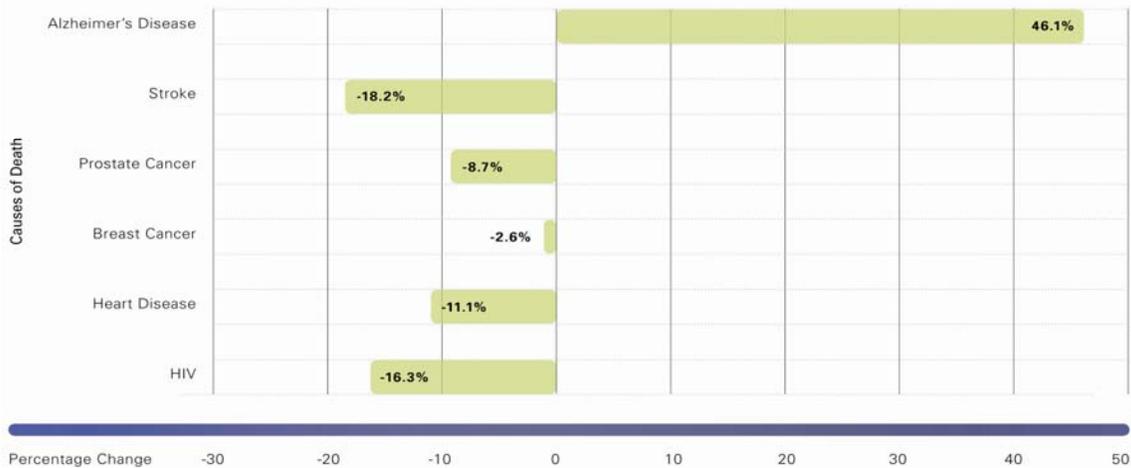
“The Association is committed to increasing awareness about risk factors for Alzheimer’s and other dementias among all Americans,” said Johns. “Greater understanding about the importance of proper management of diseases like high blood pressure and diabetes will allow individuals to make more informed health care decisions and adopt healthy life style behaviors that can also help to reduce Alzheimer and dementia risk.”

Growing Impact of Alzheimer’s Disease and Dementia

According to the report, there are 5.3 million Americans living with the disease and every 70 seconds someone in America develops Alzheimer’s disease. By mid-century someone will develop Alzheimer’s every 33 seconds. In 2010, there will be a half million new cases of Alzheimer’s, and there will be more new cases in each subsequent year. In 2050, there will be nearly a million new cases.

Alzheimer’s was the seventh leading cause of death in the country in 2006, the latest year for which final death statistics are available. It was the fifth leading cause of death among individuals aged 65 and older. From 2000-2006 death rates have declined for most major diseases – heart disease (-11.1 percent), breast cancer (-2.6 percent), prostate cancer (-8.7 percent), stroke (-18.2 percent) and HIV/AIDS (-16.3) while Alzheimer’s disease deaths rose 46.1 percent.

Percentage Changes in Selected Causes of Death Between 2000^a and 2006^b



^a National Center for Health Statistics. *Deaths: Final Data for 2000*.⁽⁴⁾
^b Heron et al.⁽⁵⁾
 Source: Alzheimer's Association 2010 Alzheimer's Disease Facts and Figures.

“Strategic investments in research for diseases such as heart disease, breast cancer, prostate cancer, stroke and HIV/AIDS have all resulted in declines in deaths. We have not seen the same type of significant strategic investment in Alzheimer’s and because of that, deaths from Alzheimer’s disease continue to soar,” said Johns. “Discovering effective treatments that prevent onset or delay disease progression takes on an all encompassing urgency as the nation braces for an onslaught of aging baby boomers. This disease, unlike any other, has the power to undermine all of our best efforts to control health care costs.”

People with Alzheimer’s and other dementias are high users of hospital, nursing home and other health and long term care services, translating into high costs for all payers. The Alzheimer’s Association estimates that total payments for health and long-term care services for people with these conditions will amount to \$172 billion from all sources in 2010. Medicare costs are almost three times higher for people with Alzheimer’s and other dementias than for other older people, and Medicaid costs are almost nine times higher. Most people with Alzheimer’s also have one or more additional serious medical conditions, such as diabetes or coronary heart disease. Their Alzheimer’s greatly complicates medical management for these other conditions, resulting in more hospitalizations and higher costs.

Impact of Alzheimer’s and Dementia on Caregivers

According to the new report, in 2009, nearly 11 million family members and other unpaid caregivers provided 12.5 billion hours of care for people with Alzheimer’s and other dementias, an amount of unpaid care valued at \$144 billion. In fact, Alzheimer’s and dementia caregivers provided care valued at more than \$1 billion in each of 36 states, and nine states saw an Alzheimer and dementia caregiver contribution valued at \$5 billion or more per state.

“Alzheimer’s disease often progresses in a slow, unrelenting pace exacting a tremendous emotional, physical and financial toll on caregivers. Every day these caregivers rise to meet the challenges of Alzheimer’s,” said Robert J. Egge, Alzheimer’s Association Vice President of Public Policy. “The uncompensated care they provide is valued at \$144 billion, which is more than the Federal government spends on Medicare and Medicaid *combined* for people with Alzheimer’s and other dementias.”

More than 40 percent of family and other unpaid Alzheimer and dementia caregivers rate the emotional stress of caregiving as high or very high, compared with 28 percent of caregivers of other older people. Caregivers often report a decline in their own health as they try to balance the demands of caregiving with their own work responsibilities. In 2009, 60 percent of Alzheimer and dementia caregivers were employed full-time or part-time and among those employed, two-thirds said they had to go in late, leave early or take time off because of caregiving; 14 percent had to take a leave of absence and 10 percent had to reduce their hours or take a less demanding job. Juggling the demands of caregiving, particularly in these financially difficult times, has placed additional stress on caregivers as their caregiving duties threaten their own job security.

Ultimately solving the Alzheimer crisis – with its far-reaching impact on families, Medicare, Medicaid and the health care system – will mean addressing the chronic underinvestment in research. A rapidly aging population and dramatic increases in the number of Alzheimer cases in coming years should catapult the government into action. “We know what the future will bring if we do nothing – more lives lost, overloaded nursing homes, overworked caregivers and an overwhelmed health care system,” said Egge. “Our country must increase its investment in research and scientific innovation if we hope to soon live in a world together with Alzheimer survivors.”

The full text of the Alzheimer’s Association’s *2010 Alzheimer’s Disease Facts and Figures* can be viewed at www.alz.org after the embargo lifts. The full report will also appear in the March 2010 issue of *Alzheimer’s & Dementia: The Journal of the Alzheimer’s Association* (volume 6, issue 2).

Alzheimer’s Association’s Facts and Figures

The *Alzheimer’s Association’s Facts and Figures* report is a comprehensive compilation of national statistics and information on Alzheimer’s disease and related dementias. The report conveys the impact of Alzheimer’s on individuals, families, government, and the nation’s health care system. Since its 2007 inaugural release, the report has become the most cited source covering the broad spectrum of Alzheimer issues. The *Alzheimer’s Disease Facts and Figures* report is an official publication of the Alzheimer’s Association®.

Alzheimer’s Association

The Alzheimer’s Association is the leading voluntary health organization in Alzheimer care, support and research. Our mission is to eliminate Alzheimer’s disease through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health. Our vision is a world without Alzheimer’s.

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