NEW REPORT REVEALS GLOBAL COST OF ALZHEIMER’S AND RELATED DEMENTIAS IS MORE THAN $600 BILLION

- Researchers Descend on Capitol Hill to Deliver Petition to Make Alzheimer ’ s a National Priority and Increase Investment in Their Critical Work -

Washington, D.C., September 21, 2010 – The total estimated worldwide costs of dementia are $604 billion in 2010, according to the newly released World Alzheimer Report 2010: The Global Economic Impact of Dementia from Alzheimer’s Disease International (ADI), a London-based, nonprofit, international federation of 73 national Alzheimer organizations, including the Alzheimer’s Association (U.S.).

Released on World Alzheimer’s Day, September 21st, the Report found that:

- Dementia care costs around 1% of the world’s gross domestic product (GDP).
  - If dementia care were a country, it would be the world’s 18th largest economy (ranking between Turkey and Indonesia).
  - If dementia care was a company, it would be the world’s largest by annual revenue, exceeding Wal-Mart ($414 billion) and Exxon Mobil ($311 billion).
- By 2030, worldwide societal costs will increase by 85% (a very conservative estimate considering only increases in the number of people with dementia).
- Worldwide, the costs of dementia are set to soar.
  - The Report finds that costs in low and middle income countries are likely to rise much faster than in high income countries, because, with economic development, costs will increase towards levels seen in high income countries, and because increases in numbers of people with dementia will be much sharper in those regions.

In the Report, costs were attributed to the direct costs of medical care (the costs of treating dementia and other conditions in primary and secondary care), direct costs of social care (provided in residential care settings and by community care professionals), and informal care (unpaid care provided by family caregivers and others).

“This report clearly illustrates that dementia is already affecting health systems around the world, and for the families who are forced to face Alzheimer’s the anguish is universal,” said Harry Johns, Alzheimer’s Association President and CEO. “The World Alzheimer Report 2010 urges all countries – including the U.S. – to develop national plans to deal with the disease.”
“Given the magnitude and the impact of Alzheimer’s, the U.S. federal government’s response to this crisis has been stunningly neglectful,” said Johns. “We know Alzheimer’s will place a massive strain on an already overburdened health care system, especially Medicare and Medicaid. Substantial investment in Alzheimer research is required to avoid an even more painful future for American families and already overwhelmed state and federal budgets. Yet, the government has no national plan for how to deal with this crisis.”

The Association is working to enact critical legislation to address these issues. The National Alzheimer’s Project Act (S.3036/H.R.4689) would create a National Alzheimer’s Project Office and an inter-agency Advisory Council responsible for developing a national plan to overcome the Alzheimer crisis. This new office would provide strategic planning and coordination for the fight against Alzheimer’s across the federal government as a whole, touching on issues from research to care to support, at no additional cost to the government. (Note: see attached fact sheet.)

“We need all Americans concerned about Alzheimer’s disease to tell their representatives in Congress and the President to pass the National Alzheimer’s Project Act as a significant step forward in the fight against Alzheimer’s,” said Robert Egge, Vice President of Public Policy for the Alzheimer’s Association.

This summer, the Alzheimer’s Association and the Alzheimer’s research community have been working – and cycling – together to do just that. The Alzheimer’s Association Alzheimer’s Breakthrough Ride was originally conceived by Alzheimer researcher Bruce Lamb, PhD, of the Department of Neurosciences at the Lerner Research Institutes of the Cleveland Clinic and the Departments of Neurosciences and Genetics at Case Western Reserve University, who shared the idea with the Alzheimer’s Association and then enlisted the participation of researchers and scientists from across the country.

“It was a Sunday morning last summer and I was on my usual bike ride,” Lamb said. “I felt increasingly concerned about the declining funding for Alzheimer research through the National Institute on Aging. Because of this, many Alzheimer’s research laboratories were forced to contract in size and some closed altogether. Even worse, critical research that could provide new insights into potential Alzheimer therapies would not be conducted. Given the increasing number of people affected by Alzheimer’s, more research is required, not less.”

The Alzheimer’s Breakthrough Ride engaged more than 55 researchers and 100,000 Americans to urge Congress to make Alzheimer’s a national priority. Demonstrating both the urgency of the issue and the dedication of the research community, these researchers spent 67 days this summer cycling relay-style throughout the United States to raise awareness about Alzheimer’s disease. (Note: see attached fact sheet.)

Today, the Alzheimer’s Breakthrough Ride culminates at Upper Senate Park in Washington, D.C. when the Alzheimer’s Association and the research riders present a petition with more than 100,000 signatures to Congress.
“A crisis of this magnitude requires commitment and dedication from all of us – from citizens, the scientific community, business and government,” said Lamb. “The outpouring of support from the public has been overwhelming as we’ve cycled across the country. Now we need elected officials to prove they understand what’s at stake by developing a comprehensive Alzheimer’s disease strategy and investing in research.”

In addition to the recommendation for countries to develop national Alzheimer’s plans, the 2010 World Alzheimer Report contains six further recommendations, which call on governments to increase dementia research funding, develop policies and plans for long-term care, and ensure access to cost-effective and appropriate healthcare services. *(Note: see attached fact sheet.)*

**U.S. Alzheimer’s Disease Facts and Figures**
In the U.S., according to the Alzheimer’s Association’s *Alzheimer’s Disease Facts & Figures 2010*, there are as many as 5.3 million Americans living with the disease and every 70 seconds someone in America develops Alzheimer’s. In 2010, there will be a half million new cases of Alzheimer’s. By 2050, there will be nearly a million new cases of Alzheimer’s every year.

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.

The Alzheimer’s Association estimates that total U.S. payments for health and long-term care services for people with these conditions will amount to $172 billion from all sources in 2010. Nearly 11 million U.S. family members and other unpaid caregivers provided 12.5 billion hours of care for people with Alzheimer’s and other dementias, valued at $144 billion.

**2010 World Alzheimer Report**
The 2010 *World Alzheimer Report* is a culmination of the most comprehensive, current data on the prevalence of dementia and the costs associated with care for people affected in different world regions. Methodology used to prepare the 2010 World Alzheimer’s Report is explained in the full printed report and can be found online at [www.alz.co.uk/research/worldreport/](http://www.alz.co.uk/research/worldreport/)

**About the Alzheimer’s Association**
The Alzheimer’s Association is the leading U.S. voluntary health organization in Alzheimer care, support and research. Its 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. The Association’s vision is a world without Alzheimer’s disease. For more information, visit [www.alz.org](http://www.alz.org).

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NATIONAL ALZHEIMER’S PROJECT ACT

ALZHEIMER’S ASSOCIATION FACT SHEET

National Alzheimer’s Project Act (S. 3036/H.R. 4689) – Develops a coordinated federal strategic plan to address Alzheimer’s disease. In 2050, up to 16 million Americans will have Alzheimer’s disease, creating an enormous strain on the health care system, families, and the federal budget. Yet, the federal government has no plan for how to deal with this looming crisis.

The National Alzheimer’s Project Act (NAPA) would launch a campaign within the federal government to overcome Alzheimer’s disease. An inter-agency Advisory Council would be established to create a coordinated National Alzheimer’s Disease Plan to comprehensively address the federal government’s efforts on Alzheimer’s research, care and services.

In addition, NAPA would:
- Update and report the National Plan to Congress annually.
- Coordinate and evaluate all federal efforts on Alzheimer’s research, care, institutional services, and home- and community-based programs.
- Accelerate the development of treatments for Alzheimer’s disease.
- Ensure the inclusion of racial populations at higher risk for developing the disease.

**Status**: This legislation has 29 Senate cosponsors and 101 House cosponsors.

**Background**
Alzheimer’s is a national crisis, affecting Americans across all walks of life and across all regions of the country.
- As many as 5.3 million people – 5.1 million aged 65 and older – have Alzheimer’s disease, and another American develops Alzheimer’s every 70 seconds.
- Caring for those with Alzheimer’s and other dementias costs U.S. society a total of $172 billion, including $122 billion in costs to Medicare and Medicaid.
- Nearly 11 million caregivers provide care for people with Alzheimer’s disease or other dementias – unpaid care valued at an additional $144 billion.

The Alzheimer’s crisis is only going to get worse.
- In 2050, 13.5 million Americans aged 65 and older will have Alzheimer’s disease, and someone in the U.S. will develop Alzheimer’s every 33 seconds.
- Caring for people with Alzheimer’s and other dementias in 2050 will cost Medicare and Medicaid more than $800 billion (in today’s dollars).

**Countries with a National Alzheimer’s Disease Plan**
- Australia
- England
- Scotland
- Norway
- South Korea
- France
ALZHEIMER’S BREAKTHROUGH RIDE

ALZHEIMER’S ASSOCIATION FACT SHEET

This summer, more than 55 researchers rode their bicycles relay-style across the country in the Alzheimer’s Association Alzheimer’s Breakthrough RideSM. Along the route, the researchers collected petition signatures asking Congress to make Alzheimer’s disease a national priority.

The public response to the petition was so overwhelming that as the Alzheimer’s Breakthrough Ride hit the halfway point in their 67-day route from San Francisco to Washington, D.C., they were more than 80% of the way to their goal of 50,000 signatures. Based on the support of the American public, the Alzheimer’s Association and researchers doubled that goal to 100,000 signatures to present to Congress on World Alzheimer’s Day (September 21).

Culmination -- On World Alzheimer’s Day (September 21), 40 researchers will cycle up Capitol Hill to join the Alzheimer’s Association and approximately 150 advocates in presenting 100,000 petition signatures to members of Congress. The presentation will occur at 10:30 a.m. in Upper Senate Park in Washington, D.C.

Inspiration

The Alzheimer’s Breakthrough Ride was originally conceived by Alzheimer researcher, Bruce Lamb, PhD. During a casual bike ride last summer, Dr. Lamb pondered the difficulties in getting adequate federal funding for Alzheimer research and became convinced that researchers needed to do even more to fight the disease. He shared the idea of a cross-country bike ride to build support for Alzheimer’s with the Alzheimer’s Association, and now idea has the support of more than 100,000 Americans.

Quick Facts
- Route – Launched in San Francisco on July 17 and will culminate in Washington, D.C. on World Alzheimer’s Day (September 21).
- Total miles travelled – More than 4,500.
- Congressional districts crossed – More than 65.
- States crossed – 14 (California, Arizona, New Mexico, Texas, Oklahoma, Kansas, Missouri, Illinois, Wisconsin, Indiana, Michigan, Ohio, Maryland, and Pennsylvania).
- Estimated miles per day – 75-85 miles per day.
- Estimated average mile per hour – 15-25 miles per hour.
- Total number of cyclists – 62.

Get Involved -- The toughest hill to climb is Capitol Hill, but to address a public health crisis of this magnitude we must correct the chronic underinvestment in Alzheimer research and demand a strategic national plan from our federal government. To help support an Alzheimer’s breakthrough, visit alz.org.

For more information, contact Erin Heintz at 312-912-2916 or erin.heintz@alz.org.
RECOMMENDATIONS
From the World Alzheimer Report 2010

The World Alzheimer Report 2010 contains seven recommendations, listed below. These recommendations provide a global framework for action on Alzheimer’s and other dementias.

1) Alzheimer’s Disease International calls on governments to make dementia a health priority and develop national plans to deal with the disease.

2) Alzheimer’s Disease International reminds governments of their obligations under the UN Convention on the Rights of People with Disabilities and the Madrid International Plan for Action on Ageing to ensure access to healthcare. It calls on governments to fund and expand the implementation of the WHO Mental Health Gap Action Plan, including the packages of care for dementia, as one of the seven core disorders identified in the plan.

3) Alzheimer’s Disease International requests that new investment in chronic disease care should always include attention to dementia. For example, the WHO Global Report on ‘Innovative Care for Chronic Conditions’ alerts policymakers, particularly those in low and middle income countries, to the implications of the decreases in communicable diseases and the rapid ageing of populations. Healthcare is currently organized around an acute, episodic model of care that no longer meets the needs of patients with chronic conditions. The WHO Innovative Care for Chronic Conditions framework provides a basis on which to redesign health systems that are fit for their purpose.

4) Alzheimer’s Disease International calls on governments and other major research funders to act now to increase dementia research funding, including research into prevention, to a level more proportionate to the economic burden of the condition. Recently published data from the UK suggests that a 15-fold increase is required to reach parity with research into heart disease, and a 30-fold increase to achieve parity with cancer research. International coordination of research is needed to make the best use of resources.

5) Alzheimer’s Disease International calls on governments worldwide to develop policies and plans for long-term care that anticipate and address social and demographic trends and have an explicit focus on supporting family caregivers and ensuring social protection of vulnerable people with dementia.

6) Alzheimer’s Disease International supports HelpAge International’s call for governments to introduce universal non-contributory social pension schemes.

7) Alzheimer’s Disease International calls on governments to ensure that people with dementia are eligible to receive and do receive disability benefits, where such schemes are in operation.
KEY FACTS AND FINDINGS
From the WORLD ALZHEIMER REPORT 2010

- The total estimated worldwide costs of dementia are US$604 billion in 2010.
- These (total) costs account for around 1% of the world’s gross domestic product, varying from 0.24% in low income countries, to 0.35% in low middle income countries, 0.50% in high middle income countries, and 1.24% in high income countries.
  - If dementia care were a country, it would be the world’s 18th largest economy, ranking between Turkey and Indonesia. If it was a company, it would be the world’s largest by annual revenue exceeding Wal-Mart (US$414B) and Exxon Mobil (US$311B).
- Costs were attributed to informal care (unpaid care provided by family and others), direct costs of social care (provided by community care professionals, and in residential home settings) and the direct costs of medical care (the costs of treating dementia and other conditions in primary and secondary care).
- Costs of informal care and the direct costs of social care generally contribute similar proportions of total costs, while the direct medical costs are much lower. However, in low and middle income countries, informal care accounts for the majority of total costs and direct social care costs are negligible.
- The per person cost for someone with dementia varies widely in high, upper middle, lower middle and low income countries. For high income countries, the average per person cost is $32,865; in upper middle income countries it is $6,827; in lower middle income countries it is $3,109 and in low income countries the cost is $868.
- In lower income countries informal care costs predominate, accounting for 58% of all costs in low income and 65% of all costs in lower middle income countries, compared with 40% in high income countries. Conversely, in high income countries the direct costs of social care (professional care in the community, and the costs of residential and nursing home care) account for the largest element of costs – nearly one half, compared with only one tenth in lower income countries.
- Worldwide, the costs of dementia are set to soar. We have tentatively estimated an 85% increase in costs to 2030, based only on predicted increases in the numbers of people with dementia. Costs in low and middle income countries are likely to rise faster than in high income countries because, with economic development, per person costs will tend to increase towards levels seen in high income countries, and because increases in numbers of people with dementia will be much sharper in those regions.
- There is an urgent need to develop cost-effective packages of medical and social care that meet the needs of people with dementia and their caregivers across the course of the illness, and evidence-based prevention strategies. Only by investing now in research and cost-effective approaches to care can future societal costs be anticipated and managed. Governments, health and social care systems need to be adequately prepared for the future, and must seek ways now to improve the lives of people with dementia and their caregivers.
- In the World Alzheimer Report 2009, ADI estimated that there are 35.6 million people living with dementia worldwide, increasing to 65.7 million by 2030 and 115.4 million by 2050.

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