Whites make up the majority of the over 5 million people in the United States with Alzheimer’s. But, combining evidence from available studies shows that African Americans and Hispanics are at higher risk.

- African Americans are about two times more likely than white Americans to have Alzheimer’s and other dementias.
- Hispanics are about one and one-half times more likely than whites to have Alzheimer’s and other dementias.

Although the rate of Alzheimer’s and other dementias in African Americans and Hispanics is higher than in whites, they are less likely than whites to have a diagnosis of the condition.

- While African Americans are about two times more likely than whites to have Alzheimer’s and other dementias, they are only 34% more likely to have a diagnosis.
- Hispanics are about one and one-half times more likely than whites to have Alzheimer’s and other dementias, but they are only 18% more likely to be diagnosed.
When they are diagnosed, African Americans and Hispanics are typically diagnosed in the later stages of the disease, when they are more cognitively and physically impaired — and therefore in need of more medical care.

- As a result, African Americans and Hispanics diagnosed with Alzheimer’s use substantially more hospital, physician, and home health services — and incur substantially higher costs for those services — than whites with Alzheimer’s.

- In 2014, average per-person Medicare payments for African Americans with Alzheimer’s and other dementias were 35% higher than those for whites with Alzheimer’s and other dementias. Medicare payments for Hispanics with Alzheimer’s and other dementias were 7% higher than those for their white counterparts.

Genetic factors do not appear to account for the greater prevalence of — or the greater risk for developing — Alzheimer’s.

- High blood pressure and diabetes — suspected risk factors for Alzheimer’s and other dementias — are more prevalent in the African American community, and diabetes is more prevalent in the Hispanic community. These conditions, among others, may contribute to the greater prevalence of Alzheimer’s among these groups.

- In fact, some studies suggest that after adjusting for health and socioeconomic risk factors, no differences in Alzheimer’s prevalence exist.

- As a result, better management of risk factors — particularly high blood pressure and diabetes — may help reduce the risk of Alzheimer’s and other dementias among African Americans and Hispanics.