WELCOME

This month, you will most likely have read a number of disappointing news stories in the field of Alzheimer’s drug research. Pfizer decided to put an end to its early development programmes and there were also negative results from Axovant, Lundbeck, and Takeda and Zinfandel. These are of course worrying announcements, but as our Vice-Chair Dr Charles Scerri comments, in the Science – Behind the Headlines section of this newsletter (p. 20), it’s not all doom and gloom; the long-term potential remains promising, despite the many setbacks. A lot has already been learned in this area, and there are still many companies committed to finding disease-modifying treatments.

It has been a more positive month in terms of dementia policy, with dementia having finally been included in the World Health Organisation (WHO) Work Programme for 2019-2023. We congratulate our friends at Alzheimer’s Disease International (ADI), who campaigned along with a number of others, to get this outcome, to ensure dementia is a global health priority.

Regarding our own work, I am pleased to announce the publication of our 2017 Yearbook on care standards for residential care facilities in Europe and our discussion paper “Dementia as a disability? Implications for ethics, policy and practice”. Both are available to order via our website in the Publications section.

I am also pleased to announce that photos and videos from our 27th Annual Conference (27AEC) in Berlin at the end of last year are now available on our website, in the Conferences section. All of us here at Alzheimer Europe were also really touched to receive news that the leftover 27AEC bags have reached L.M.T. Public School in Assam, India. We donated the bags to be used by the pupils there, who are very grateful. On the subject of our Annual Conference, please keep an eye out for the abstract submission opening for 28AEC in Barcelona. We anticipate the call being launched on 15 February. You can visit our website Conferences section for information on this and other important dates to keep a note of.

Finally, I would like to express our gratitude to two departing members of the European Working Group of People with Dementia (EWGPWD), Alv Orheim and Karin Gustafsson for their important contributions to the group. We are very sad to see them leave and we wish them all the best. We are also grateful to Alv’s wife Berit and Karin’s husband Lars for their support. On a happier note, the group has welcomed a new member from Slovenia, Tomaž Gržinič. We look forward to working with him.

Jean Georges
Executive Director
ALZHEIMER EUROPE

31 December 2017: AE publishes 2017 Yearbook on Care standards for residential care facilities in Europe

The 2017 Alzheimer Europe (AE) Yearbook focuses on the topic of residential care facilities in Europe. It provides an overview of the existing care standards and regulatory requirements these facilities need to meet and addresses key areas that impact on the people in residential care: Physical environment; Staff providing care; Health and social care; End-of-life care; and Abuse and use of restraint.

The information for this comparative report was primarily provided by AE’s national members. For some countries, however, other national experts were also contacted (e.g. Belgium, Austria, Cyprus, Bulgaria, Cyprus, Latvia and Lithuania). Members of the European Working Group of People with Dementia (EWGPWD) and their supporters were also invited to share their experiences with and views on each of the topics addressed. Many thanks to everyone who contributed. Without you, such publications would not be possible!

The 2017 Dementia in Europe Yearbook received funding under an operating grant from the European Union’s Health Programme (2014–2020).

http://alzheimer-europe.org/Publications/Dementia-in-Europe-Yearbooks

31 December 2017: AE explores possible implications for ethics, policy and practice of recognising dementia as a disability

Article 1 of the United Nations Convention on the Rights of Persons with Disabilities (CRPD, 2006) states, “Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.” This clearly applies to the situation and experience of many people with dementia. With this in mind, Alzheimer Europe (AE) has published a new discussion paper, which explores the possible implications for ethics, policy and practice of recognising dementia as a disability.

It was extremely important for AE to ensure that the experience and perspectives of people with dementia were included, in addition to the essential and valuable input from experts in the fields of disability, dementia, law, anthropology, psychology and policy. The entire European Working Group of People with Dementia (EWGPWD) was therefore involved right from the start, first by asking them about their perceptions of disability and dementia and then via a one-day face-to-face consultation and subsequent involvement in the development of an accessible version of the full report. Two members of the EWGPWD, Helen Rochford-Brennan and Helga Rohra, were also members of the AE expert ethics group chaired by Director for Projects Dianne Gove. The other members were June Andrews, Andrea Capstick, Carmel Geoghegan, Jean Georges, Sébastien Libert, Grainne McGettrick, Simo Vehmas and Toby Williamson. We are immensely grateful to both the EWGPWD and the expert ethics group for all their work on this discussion paper.

The discussion paper “Dementia as a disability? Implications for ethics, policy and practice” received funding under an operating grant from the European Union’s Health Programme (2014–2020).

http://alzheimer-europe.org/Publications/Alzheimer-Europe-Reports

31 December 2017: AE conference bags are being made good use of by school children in India

In December 2017, Alzheimer Europe donated 100 left over conference bags from its 27th Annual Conference (27AEC) to L.M.T. Public School, Assam, India. We were delighted to hear that the children received them and are making good use of them already!

12 January: Alzheimer Europe in the spotlight in ICCA newsletter

We are delighted to be featured in this month’s International Congress and Convention Association (ICCA) newsletter, in the “Association Spotlight”. The ICCA represents the world’s leading suppliers in handling, transporting and accommodating international meetings and events, and comprises over 1,000 member companies and organisations in almost 100 countries worldwide.
On a happier note, during the December 2017 EWGPWD meeting, the group welcomed a new member from Slovenia, Tomaž Gržinič. He is supported by Alenka, a staff member from Spominčica (Alzheimer Slovenia).

Tomaž was born in Ljubljana in 1952. His education was in graphic and art editing and most of his life he has been an employee at a famous Slovenian graphic company. He was diagnosed with Alzheimer’s dementia in 2016. He is married and has 2 children, a daughter and a son. He joined the Slovenian Working Group for People with Dementia in 2017 and was also elected President of the group. He was nominated by Spominčica - Alzheimer Slovenia.


Pictured:
1. Alv and his wife Berit during the December 2017 meeting of the EWGPWD in Brussels.

EU PROJECTS

9 January: EPAD holds its first National Leads meeting of the year

On 9 January, the Barcelonabeta Brain Research Center (Barcelona, Spain) hosted the first EPAD National Leads meeting of 2018. The aim of the meeting was to discuss the EPAD Longitudinal Cohort Study recruitment status and needs for the proof of concept study, as well as to set up a contingency programme and to ensure the sustainability of the longitudinal cohort.

EPAD has two main goals this year, announced Serge Van der Geyten, EPAD project coordinator: to increase the number of sites and to start the interventional study. The European Consortium has begun 2018 with 10 sites enrolling participants, but the recruitment will be boosted by the incorporation of 20-25 new sites by summer this year. This recruitment will lead to the start of the interventional study by October/November.

In a video interview during the meeting, Miia Kivipelto, professor of Clinical Geriatrics at the Karolinska Institutet also mentioned the launch of the EPAD Academy, which will contribute to stimulating an academic environment and to encouraging young researchers to put focus their efforts on Alzheimer’s research.

Finally, Philip Scheltens, professor of Neurology at the VUmc Amsterdam, recognised that “as with every project, it takes time in order to get things started”. Despite the “slow” start of the project, due to the ethical committees’ processes and

The spotlight section takes the form of an interview with Gwladys Guillory, Events and Conference Coordinator.

Full interview: https://www.iccaworld.org/knowledge/article.cfm?artid=542

15 January: Photos and videos from 27th AE conference are online

Photos, videos and presentations (where approval has been received from the speakers) from the 27th Alzheimer Europe Conference (@27AEC) on “Care today, cure tomorrow” are now available on our website:
http://www.alzheimer-europe.org/Conferences/Previous-conferences/2017-Berlin-Videos-and-photo-galley/Photo-Gallery

27 January: EWGPWD says farewell to Alv Orheim and Karin Gustafsson, and hello to Tomaž Gržinič

During a meeting of the European Working Group of People with Dementia (EWGPWD), in December 2017, the group and Alzheimer Europe staff bid a very fond farewell to Alv Orheim from Norway who had been a member of the group since 2015 and was appointed Vice-Chairperson in October 2016.

Alv was born in 1947 in Bergen, Norway. He holds an MSc in Economic Geology from the Norwegian University for Science and Technology in Trondheim. He worked in coal mining and petroleum exploration for 35 years, with the last 10 years as an independent consultant. He was diagnosed with Vascular Dementia in 2009 and joined the Norwegian Working Group for People with Dementia in 2014 and subsequently the EWGPWD in 2015.

On 27 January, Alzheimer Europe received news that Karin Gustafsson has also decided to leave the group. Karin became a member in October 2015, attending meetings with her husband and carer, Lars.

On a happier note, during the December 2017 EWGPWD meeting, the group welcomed a new member from Slovenia, Tomaž Gržinič. He is supported by Alenka, a staff member from Spominčica (Alzheimer Slovenia).

Tomaž was born in Ljubljana in 1952. His education was in graphic and art editing and most of his life he has been an employee at a famous Slovenian graphic company. He was diagnosed with Alzheimer’s dementia in 2016. He is married and has 2 children, a daughter and a son. He joined the Slovenian Working Group for People with Dementia in 2017 and was also elected President of the group. He was nominated by Spominčica - Alzheimer Slovenia.


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Finally, Philip Scheltens, professor of Neurology at the VUmc Amsterdam, recognised that “as with every project, it takes time in order to get things started”. Despite the “slow” start of the project, due to the ethical committees’ processes and
regulations, he concluded that “now we are on the right track and we need to prove that we can do it!”

Watch the short interviews on the EPAD YouTube channel here:
https://www.youtube.com/watch?v=POBo5YZm3GM&feature=youtu.be

15 January: The PRODEMOS project kicks off with a meeting in Amsterdam

On 15 and 16 January, the PRODEMOS - Prevention of dementia using mobile phone applications - project held its kick-off meeting in Amsterdam.

The PRODEMOS project aims to make an evidence-based dementia prevention strategy using mobile Health accessible to those at increased risk of dementia who are usually not reached by preventive medicine. From a global perspective, the project will target socio-economically deprived populations in the EU and a population at risk of dementia in China. The final aim is to implement this flexible fully adaptable mHealth platform in a culturally appropriate form in a range of health care settings across the globe.

The PRODEMOS project is led by Eric Moll van Charante and Edo Richard (Academisch Medisch Centrum bij de Universiteit van Amsterdam, Amsterdam). It is sponsored by the European Union’s Horizon 2020 research and innovation programme and will run for the next five years.

Executive Director Jean Georges and Project Officer Cindy Birck attended the kick-off meeting on behalf of Alzheimer Europe (AE). AE is partner in the project and will be representing the patient perspective. AE will be involved in the coordination and management, crossing cultural barriers and dissemination and communication work packages of this project.

This project has received funding from the European Union’s Horizon 2020 research and innovation programme under grant agreement No 779238

16 January: BD4BO meets with sister projects ROADMAP, HARMONY and BigData@Heart to discuss communications and outreach activities

On 16 January, the Innovative Medicines Initiative (IMI) projects ROADMAP (focussing on Alzheimer’s disease – AD), Harmony (Hematology) and BigData@Heart (Cardiovascular) met with BD4BO’s (Big Data for Better Outcomes) Communication and Collaboration Work Package (WP3) in Brussels, Belgium to discuss collaborative communication and outreach activities and to look ahead to 2018.

The meeting was chaired by Shahid Hanif (Association of the British Pharmaceutical Industry - ABPI). In depth discussions revolved around what has worked well and what needs to be improved with regard to BD4BO coordination and support activities. The project representatives gave an overview of the objectives of their projects and updates on the progress of their communication and dissemination activities.

The Communication and Collaboration Work Package then took the opportunity to discuss the communication strategies of the BD4BO projects and proposed a Twitter as well as a Webinar Plan. After this, the meeting ended with an update on communication materials that are being or may be developed including a video, external newsletter and print materials.

If you are interested in finding out more about the project(s), visit http://www.bd4bo.eu.

16 January: EPAD Academy holds a webinar - its first official activity

The European Prevention of Alzheimer’s Dementia (EPAD) project launched in 2017 its EPAD Academy that is aiming to efficiently leverage EPAD resources to foster and develop academic research capacity and output in Alzheimer’s disease (AD) across Europe for maximum global impact.

On January 16, the EPAD Academy held its first activity that is to propose online training/webinars by world-class senior researchers on current topics in AD research for young researchers (EPAD Fellows). The first webinar, out of 14 scheduled for 2018, titled “The Dementia Concept after 2020: Research to change Practice, Public Perception and Politicians’ Perspectives” was held by EPAD co-coordinator, Prof Craig Ritchie.

“In this opening presentation - the fundamentals of EPAD are presented with specific reference to the driving societal, political and scientific factors. I hope EPAD fellows will become aware of the opportunities that will exist to them to help shape research policy, prevention and care in the near future”, commented Prof Craig Ritchie.

It has been discussed what is the utility of the current disease definitions - do they help or hinder scientific development, and what role does the public, science, the media, politicians and
As an Early Stage Researcher, I have been primarily based at the Centre of Gerontology in Prague, with Professor Iva Holmerová, Chairperson of Alzheimer Europe, as my supervisor. The Centre of Gerontology is unique in the way it is the home of the Czech Alzheimer’s Society, but also provides a rehabilitation ward and a day centre for people with dementia from the surrounding district.

Prior to joining INDUCT, I worked for over ten years with people with dementia, which ultimately influenced my decision to begin a career in dementia research. Being based at the Centre of Gerontology has enabled me to maintain frequent contact with people with dementia. More specifically, I have benefitted from being able to volunteer in the day centre and on the ward, speaking with individuals and learning about their experiences of long-term care.

I believe that these conversations have helped determine the direction of my own research project. Now currently on secondment in Belgium, I am writing a review on the self-reported needs and experiences of people with dementia in long-term care, in collaboration with VUB, my host institution. I anticipate that the results of this review will influence the outcome of my study, which is to produce recommendations for the development of electronic systems for assessment and care planning for people with dementia in nursing homes.

In summary, the combination of enriching training opportunities and regular encounters with people with dementia in our host countries and with the EWGPWD have enabled us to shape our research to effectively meet the needs of people with dementia and those involved in their care. I am looking forward to what the next 18 months will bring! Contact email: Kate.Shiells@fhs.cuni.cz

29 January: ROADMAP launches survey to identify important outcomes in dementia

On 29 January, the ROADMAP project launched their recently finalised surveys to obtain views on the importance of different aspects that relate to mild cognitive impairment and dementia to assess meaningful change in disease progression.

Meaningful change in disease progression signals increasing severity of having dementia that affects the person with dementia’s life in a way that inhibits them from continuing to live their life as they were able to before having the condition.

Surveys have been designed to focus on the point of views of different groups involved in or affected by dementia. These include people with dementia, their carers, clinicians, scientists, payers, health economists, as well as other professionals.

For questions about the ROADMAP survey: wp2.survey@roadmap-alzheimer.org.

To access the survey:
https://www.surveymonkey.co.uk/r/ROADMAP_WP2survey_ed
EU project acknowledgement

A number of the projects in which Alzheimer Europe is a project partner receive funding from the Innovative Medicines Initiative and Innovative Medicines Initiative 2 Joint Undertakings. The Joint Undertaking receives support from the European Union’s Horizon 2020 research and innovation programme and EFPIA. The projects in this newsletter with IMI and IMI2 funding are:

- AMYPAD – grant agreement 115952
- EPAD - grant agreement 115736
- ROADMAP – grant agreement 116020

Alzheimer Europe Networking

On 10 January 2018 (Luxembourg), Dianne took part in a telephone conference for the ROADMAP ethics work package.

On 15 and 16 January (Amsterdam, Netherlands), Jean and Cindy attended the kick-off meeting of the PRODEMONS project.

On 16 January (Brussels, Belgium), Gwladys went for a site inspection of hotels.

On 18 January (Luxembourg, Luxembourg), Gwladys and Stefanie met with Visual Online to discuss development of the conference webpages.

On 18 January, Dianne and Vanessa took part in a webinar organised by EDF and AGE Platform on EU rail accessibility.

On 22 January, Ana attended a PACE General Assembly meeting (by telephone).

On 23 January, Dianne attended a telephone conference for the ethics work package of AMYPAD and EPAD

On 23 January, Dianne attended a telephone conference for the SCA working group on continence care

On 24 January (Brussels, Belgium), Vanessa attended an #EU4Health meeting via teleconference.

On 25 and 26 January (Lille, France), Jean attended the Scientific Advisory Board meeting of the DISTALZ Laboratoire d’Excellence of the Institut Pasteur.

On 29 and 30 January, Ana participated via Skype in the INDUCT Winter School.

On 30 January (Brussels, Belgium), Vanessa attended a MSD roundtable.

On 30 January (Luxembourg, Luxembourg), Gwladys met with Lufthansa and HRG to discuss 28AEC airline sponsorship.

Members of the European Alzheimer’s Alliance

Currently, the total number of MEPs in the Alliance stands at 123, representing 27 Member States of the European Union and six out of seven political groups in the European Parliament. Alzheimer Europe would like to thank the following MEPs for their support of the European Alzheimer’s Alliance:

**Austria:** Heinz K. Becker (EPP); Karin Kadenbach (S&D); Barbara Kappel (NI); Paul Rübig (EPP).

**Belgium:** Mark Demesmaeker (ECR); Frédérique Ries (ALDE); Bart Staes (Greens/EFA); Marc Tarabella (S&D); Kathleen van Brempt (S&D); Hilde Vautmans (ALDE).

**Bulgaria:** Andrey Kovatchev (EPP).

**Croatia:** Biljana Borzan (S&D); Tonino Picula (S&D); Ruža Tomašić (ECR).

**Cyprus:** Costas Mavrides (S&D); Eleni Theocharous (EPP).

**Czech Republic:** Olga Sehnalová (S&D); Pavel Svoboda (EPP); Tomáš Zdechovský (EPP).

**Denmark:** Ole Christensen (S&D); Jens Rohde (ALDE); Christel Schaldemose (S&D).

**Estonia:** Urmas Paet (ALDE); Hilde Vautmans (ALDE).

**Finland:** Liisa Jaakonsaari (S&D); Anneli Jäätteenmäki (ALDE); Sirpa Pietikäinen (EPP).

**France:** Dominique Bilde (ENF); Nathalie Griesbeck (ALDE); Christiane Grosssetête (EPP); Philippe Juvin (EPP); Elisabeth Morin-Chartier (EPP); Gilles Pargneaux (S&D).

**Germany:** Angelika Niebler (EPP); Udo Voigt (NI).

**Greece:** Costas Chrysogonos (GUE/NGL); Manolis Kefalogiannis (EPP); Kostadinka Kuneva (GUE/NGL); Kyrkos Miltiadis (S&D); Dimitrios Papadimoulis (GUE/NGL); Maria Spyra Kraki (EPP); Eleftherios Synadinos (NI); Elissavet Vozemberg-Vrioni (EPP).

**Hungary:** Ádám Kósa (EPP); Ildikó Pavonczky (ALDE); Matt Curry (GUE/NGL); Nessa Childers (S&D); Deirdre Clune (EPP); Brian Crowley (ALDE); Luke ‘Ming’ Flanagan (GUE/NGL); Marian Harkin (ALDE); Brian Hayes (EPP); Seán Kelly (EPP); Mairead McGuinness (EPP); Liadh Ni Riada (GUE/NGL).

**Italy:** Brando Benifei (S&D); Elena Gentile (S&D); Patrizia Toia (S&D); Damiano Zoffoli (S&D).

**Lithuania:** Vilius Blinkavičius (S&D).

**Luxembourg:** Georges Bach (EPP); Frank Engel (EPP); Charles Goerens (ALDE); Viviane...
The most recent edition of Government Gazette - a quarterly magazine providing analytical and politically neutral coverage of leading institutions and policy makers in the European Union - contains a special section on dementia policy in Europe: “Recommendations to reshape policy making – Alzheimer’s disease report”. In this section, MEP Nessa Childers (Ireland), Vice-Chairperson of the European Alzheimer’s Alliance (EAA) has published an article about Alzheimer Europe’s European Dementia Monitor.

The European Dementia Monitor, published in 2017, provides a benchmark of national dementia policies, comparing and rating the responses of European countries to the dementia challenge. The key findings, which Ms Childers lays out in her article “Assessing the current state of care in Europe”, highlight inequalities in access to dementia care and treatment across Europe and show a clear East/West divide, with most of the Western and Northern European countries scoring significantly higher than Eastern European countries. As a rule, countries with national dementia strategies scored better in all categories and in conclusion, the article urges European countries to recognise dementia as a national priority and to develop national dementia strategies to respond to the dementia challenge.

This Government Gazette special section also contains articles by EAA Vice-Chairperson MEP Keith Taylor (United Kingdom) and EAA member MEP Heinz Becker (Austria).

It is very heartening to see members of the EAA continuing to highlight the importance of dementia policy in the EU and giving yet more momentum to our continued efforts to ensure dementia is a European priority.

Read this issue of Government Gazette: https://goo.gl/cprQjH
Find out more about the European Dementia Monitor: https://goo.gl/LUjnp1
Find out more about the EAA: http://alzheimer-europe.org/Policy-in-Practice2/European-Alzheimer-s-Alliance

EU DEVELOPMENTS

1 January: Bulgaria takes on rotating role of EU Presidency

Bulgaria will hold the EU Council Presidency from January to June 2018. Its Presidency is part of the Trio Presidency composed of Estonia, Bulgaria and Austria. This will be the first time Bulgaria has held the rotating Presidency since it joined the European Union in 2007.

During the Bulgarian Presidency of the Council of the European Union, the Bulgarian Ministry of Health informed Alzheimer Europe of its plans to conduct a conference on dementia and the problems faced by people with dementia. They said “The organisation of this event is indicative of the importance of dementia, as well as an act of expression of sympathy towards the needs of dementia patients and their caregivers”.

Bulgaria’s other activities in dementia at European level include active participation in the Third European Health Programme for joint action on dementia. The Bulgarian Society of Dementia is the Bulgarian representative for this and is fully supported by the Ministry of Health. Experts from the Bulgarian Society of Dementia are also members of the
European Consortium for Alzheimer’s disease and take part in the preparation of European recommendations towards achieving agreement in the field of dementia. At the same time, the Bulgarian Society of Dementia is a coordinator for the realisation of different activities within the Joint Action 2 “Act on Dementia” project in Bulgaria, which aims to suggest and agree on common principles and national policies at European level, taking into consideration national specificities in dementia care. As part of the project, Bulgaria has planned activities directly targeting people with dementia and their caregivers.

Currently, there is no official dementia strategy in Bulgaria that considers issues related to people with dementia separately, but instead these issues are included in the National Health Strategy agenda for 2020. It states that all developed countries have taken a stance on dementia-related problems during the past years for two main reasons: firstly, its high prevalence, particularly in countries with ageing populations, and secondly, the special care needed by people with dementia, which requires a lot of health worker and family resource investment.

With this in mind, the development of a system for early diagnosis that foresees the risk of dementia development and that of a care plan to slow down the progressive course of the disease has been laid out. The system is to be supported by a network of specialised community services and provision of social and psychological support for the families of people with dementia.

Deputy Minister of Health Jeni Nacheva said “It is also paramount to change existing beliefs and attitudes towards dementia and to encourage people to take responsibility for integrating and supporting those who suffer from it in the society.”

In line with the above commitments, an amendment of the Law on health, which regulates integrated social health services, has already been accepted. The conditions and order of provision of these services, their criteria and quality standards, as well as the order of control of compliance with their execution are yet to be determined with an Ordinance of the Council of Ministers.

8 January: JPND launches joint transnational call to support health and social care research and innovation

The EU Joint Programme on Neurodegenerative Disease Research (JPND) is inviting proposals from multi-national research teams to increase understanding of the factors that contribute to the quality and delivery of health and social care for neurodegenerative diseases.

The aim of the call, which is open to applicants in 20 countries, is to establish a number of ambitious, innovative and multi-disciplinary collaborative projects that address health and social care at both the macro level of systems and infrastructures and the individual level of patients, carers and families.

The total made available for this call is EUR 21 million (from all participating countries). Under this call, each country funds their own national participants in successful collaborative proposals, according to their national budget allocation. The deadline for pre-proposals is 6 March, 2018.


10 January: Dementia features in European Health Forum Gastein 20th anniversary conference report

On 10 January, the conference report of the 20th European Health Forum Gastein (EHFG) “Health in All Politics – a better future for Europe”, was published online.

While there was no dementia-specific session this year, dementia was a topic during three of the conference sessions: Workshop 5 - Track I (on mental illness), Forum 8 - Track II (on health inequalities) and Lunch Workshop 4 - Track IV on “Early diagnosis linking Big Data - hope or nightmare?”

This last session, Lunch Workshop 4, was hosted by Roche and the panel included former Executive Director of Alzheimer’s Disease International (ADI), Marc Wortmann. Mr Wortmann spoke about the importance of timely diagnosis and called for an increase of the budget for dementia research, to at least 1% of the global cost of the disease.

The European Health Forum Gastein was founded in 1998 as a European health policy conference, aiming to provide a platform for stakeholders from the fields of public health and healthcare, among others. Over 500 experts participate in this annual conference, held in the Gastein Valley in Austria during the month of October. This year’s 21st edition will take place from 3 to 5 October.


20th anniversary video: https://www.ehfg.org/about-us/twenty-years/

15 January: Neurodegenerative diseases feature in latest IMI call for proposals

The latest Innovative Medicines Initiative (IMI) call for proposals includes neurodegenerative disease topics.
The call (IMI2 – Call 13) has been open since 30 November 2017 and will close on 28 February at 5pm Brussels time (Stage 1 submission deadline). The Stage 2 submission deadline is 6 September.

IMI2 – Call 13 topic text and Call Conditions are available here: https://goo.gl/VWrwfr

18 January: Council of Europe promotes the right of older persons to dignity and autonomy in care

Older persons have exactly the same rights as everyone else, but when it comes to the implementation of these rights, they face a number of specific challenges. For example, they often face age discrimination, particular forms of social exclusion, economic marginalisation due to inadequate pensions, or are more vulnerable to exploitation and abuse, including from family members.

These challenges require specific policy responses in the context of a rapidly ageing world population, but particularly so in Europe, which already has the highest median age in the world: the World Health Organisation (WHO) estimates that 25% of Europeans will be aged 65 and older by 2050 (from 14% in 2010). Against this background, the question of the human rights of older persons has been receiving more attention within the UN system, but also the Council of Europe, for example in the form of a Recommendation of the Committee of Ministers to Member States on the promotion of human rights of older persons, adopted in 2014.

The European Social Charter, the point of reference for social rights in Europe, was the first international convention to provide specifically for care for older persons. States who have accepted Article 23 of the Revised Social Charter (or Article 4 of the 1988 Additional Protocol to the 1961 Charter) are under obligation to enable older persons to remain full members of society for as long as possible. This includes enabling them to lead independent lives in their familiar surroundings as long as they wish and are able, by adapting their housing to their state of health and by providing the health care and the services they need. For older persons living in residential institutions, states must guarantee appropriate support, while respecting privacy, and participation in decisions concerning their living conditions. Unfortunately, only 20 Member States have accepted this provision, to date.

In a Resolution devoted to the question of the human rights of older persons and their comprehensive care, the Parliamentary Assembly of the Council of Europe (PACE) recognised that the access of older persons to good quality health care and long-term care remains a challenge in Europe. It is urgent for Member States to thoroughly review, with the participation of older persons, their approach to long-term care in order to make it more human rights-based, including in light of the Revised Social Charter (by accepting Article 23 if they have not yet done so), the 2014 Recommendation of the Committee of Ministers, and the 2017 Resolution of the PACE. In addition to providing the resources such a system requires to be accessible and affordable, states must also take account of the training needs of care professionals, as well as of informal caregivers, and ensure that the choices for older persons are maximized, for example when they wish to live in their own homes, while preventing social isolation (the 2003 heat wave in France, which killed many older persons was a terrible wake-up call about the risks of such isolation). Particular attention should be paid to ensure regular independent monitoring of long-term care services on the basis of clear principles and rights that older persons can easily enforce themselves.


23 January: MEP numbers to be cut from 751 to 705 after Brexit

The European Parliament has said it will cut MEP numbers from 751 to 705 after Brexit. 46 of the 73 UK seats freed up by Brexit will be held in reserve for possible pan-European lists and EU enlargement, while the remaining 27 UK seats are to be shared out among 14 under-represented EU countries, say Constitutional Affairs MEPs.

https://goo.gl/h78Uol

23 January: European Commission presents new report - Investing in Social Infrastructure in Europe

On 23 January, the European Commission High-Level Taskforce on Investing in Social Infrastructure in Europe presented its report on how to boost investment in healthcare, long-term care, education and social housing in the European Union. Highlighting important underinvestment in these areas, the high-level taskforce - led by former President of the European Commission Romano Prodi - recommends practical steps the European Union and relevant stakeholders should take to meet the funding gap.

The outcome of the taskforce was a report, drafted by experts Lieve Fransen, Gino del Bufalo and Eduardo Reviglio: “Boosting Investment in Social Infrastructure in Europe”. The recommendations and proposals discussed in this report aim to create conditions to mobilise public resources as well as long-term sustainable private investments, with a special focus on the regions and countries most in need. While social infrastructure is generally built and maintained at national, regional, and local levels, the existing gap implies that neither national nor sub-national bodies have the necessary financial resources.
The main findings of the report are that investments in Social Infrastructure have decreased by 20% since 2009 in the EU and that the investment gap is estimated at EUR 150 billion per year for the next ten years. The report recommends to:

- set-up geographic and/or thematic investment platforms for social sector investments to help bundle projects
- create new financial instruments, suitable to the specificities of the sectors (social outcome contracts, social bonds, etc)
- develop far-reaching systems of technical assistance to build capacity at local, national and EU level
- improve data collection for Social Infrastructure
- facilitate and simplify the blending of resources in the EU 28 (public, private, local, national EU).

The full report can be read here: https://goo.gl/VeE3U4

25 January: European Commission’s 3rd Health Programme calls for proposals for projects 2018

This call is based on Third EU Health Programme (2014-2020) which is the main instrument that the Commission uses to implement action in the field of health.

Following the adoption of the 2018 Work Programme of the health programme, The Consumers, Health, Agriculture and Food Executive Agency (Chafea) has launched the call for proposals for projects with the following topics:

- Implementation of best practices - Scaling up integrated care
- Supporting Member States voluntary cooperation in the area of pricing, through the Euripid Collaboration
- Orpha codes project.

Proposals can be submitted electronically via the EU Research & Innovation Participant Portal: https://goo.gl/VeE3U4

Deadline for submissions is 26 April 2018.

Further information can be found here: http://ec.europa.eu/chafea/health/projects.html

30 January: The Human Brain Project launches three new calls

On 30 January, the Human Brain Project (HBP) has published three open calls:

- Testing pathophysiological models of brain diseases, addressed to organisations interested in pathophysiological models of brain disease, in the field of psychiatry or neurology
- Federated analysis of human intracerebral stimulation and recording data: addressed to organisations specialised in the fields of human intracerebral stimulation and recording data obtained during procedures of deep brain stimulation (DBS) for psychiatric or neurological diseases requiring such treatment (e.g. movement disorders), as well as during stereoelectroencephalography (SEEG) investigations for epilepsy surgery
- Comprehensive ontologies for brain diseases: addressed to organisations interested in Ontologies, in particular in the field of brain diseases.

They are looking for partners to deliver new capacity and functionality to the HBP’s Medical Information Platform. The Medical Informatics Platform is a Global Open-Source Platform allowing hospitals and research centers worldwide to share medical data. It enables online users to access efficiently, accurate and relevant information on brain related diseases, strictly preserving patients’ confidentiality.

Proposals can only be submitted by organisations established in the EU Member States or Horizon 2020 associated countries. The deadline for proposals is 15 March 2018.


POLICY WATCH

1 January: New reform of long-term care insurance comes into force in Luxembourg

On 1 January 2018, a new reform of the long-term care insurance in Luxembourg came into force. The purpose of the reform is to ensure in-kind benefits in the form of assistance and care for dependent people, provided in the context of home support, or via technical aids and home improvements. Today, the long-term care insurance scheme supports more than 13,500 people and this reform aims to modernise it to meet the challenges of a constantly changing population, as well as to continue to guarantee fair access to quality services.

The major objectives of the reform are based on a better individualisation of the supply of quality services that meet the daily needs of each person; the reinforcement of quality by maintaining clear standards and criteria with adequate checks; the simplification of procedures and the consolidation of the system in the light of societal developments; and respect for the fundamental principles of the 1998 “Basic Law”.

Long-term care insurance provides people who need help and care with access to appropriate, quality services. This new reform aims to respond to the needs and expectations of citizens, to adapt the system of dependency insurance to the requirements of a society in constant flux and to ensure affordable access to benefits for all who need them.

16 January: Portugal reviews implementation of Convention on the Rights of Persons with Disabilities, petition calls for further change

On 16 January in the Portuguese Parliament, a conference about the Convention on the Rights of Persons with Disabilities (CRPD) was held, as
A joint initiative of the Portuguese Parliament and the Convention Monitoring and Implementation Mechanism. One of the issues highlighted during the conference was the exercising of legal capacity by people living with a disability, including people with dementia.

According to Article 12, n° 4 of the Convention: “States Parties shall ensure that all measures that relate to the exercise of legal capacity provide for appropriate and effective safeguards to prevent abuse in accordance with international human rights law. Such safeguards shall ensure that measures relating to the exercise of legal capacity respect the rights, will and preferences of the person, are free of conflict of interest and undue influence, are proportional and tailored to the person’s circumstances, apply for the shortest time possible and are subject to regular review by a competent, independent and impartial authority or judicial body. The safeguards shall be proportional to the degree to which such measures affect the person’s rights and interests.”

However, Portugal still has a legal framework that is not in line with what is stated in the CRPD, with regards exercising legal capacity:

A person who lacks mental capacity may be declared either subject to interdiction or incapacitation according to the degree of incompetence. If interdiction is granted, the subject will be considered as incompetent to make any personal, health, property or financial decision;

Interdiction and incapacitation, are regulated in articles 138 - 156 of the Civil Code. These articles have exactly the same content that they had in 1966, when the Portuguese Civil Code came into force;

The legal process is very slow and expensive and there is significant lack of awareness of the importance of appointing a guardian that will have the duty of promoting the rights of the person with incapacity;

There are no professional guardians and no possibility of choosing a guardian in advance, when the person is still capable.

Capacity is seen as an “all or nothing” phenomenon and not assessed according to the person’s concrete needs and with the different categories of acts people may want to perform (make a will, driving, choosing the place to live, take financial or property decisions).

As a result, there is a very large number of people with incapacity with no guardian, being cared for by their families that may act in good faith, but with no legitimacy to act on their behalf. And what’s worse, more and more people with mental incapacity live alone in very bad conditions (lack of food, hygiene, home), because there is no one to appoint to protect them and to act on their behalf. Some of these people have money and property but are not able to manage them.

At the Presidency of the Council of Ministers there is a draft of law waiting to be presented to Parliament. This draft law aims to change the outdated legal framework, to make it more rights-promoting. The Convention Monitoring and Implementation Mechanism has issued a positive opinion on it and made some recommendations.

Previously, there have been some attempts to change the law, but they did not succeed and there is no prevision on when that proposal may be in the hands of the Parliament, be discussed and approved as law.

As the urgency increases, a citizen’s initiative has now begin: a Petition to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities.

The Petition, addressed to the President of the Parliament, was launched in December last year and already has 1,900 signatures. When the Petition reaches 4,000 signatures it is mandatory to discuss it at a Plenary Session of the Parliament. Alzheimer Portugal fully supports this Petition as it seeks to realise one of the association’s main priorities – a legal framework that fully respects the rights, will and preferences of the person living with dementia.

Read and sign the petition: http://peticaopublica.com/pview.aspx?pi=PT87851

21 January: UK takes important step towards the recognition of dementia as a disability

Around 2.4 million disabled people in England have a blue badge, which enables them to park free of charge in pay and display bays and for up to three hours on yellow lines, but very few councils in England recognise hidden disabilities. This could all change, however, due to the proposal of a new policy.

The new policy is designed to provide "clear and consistent" guidelines. Currently, councils have different interpretations of existing rules with only some recognising hidden disabilities, such as dementia and autism.

The Department for Transport (DfT) proposals are the biggest change to the scheme since it began in 1970 and are being introduced in order to help create more equality in the treatment of physical and mental health.

This change aims to prevent obstacles for people with autism and dementia to socialise, access shops and services and to travel to work.

Transport minister Jesse Norman said: "Blue badges give people with disabilities the freedom to get jobs, see friends or go to the shops with as much ease as possible. "We want to try to extend this to people with invisible disabilities, so they can enjoy the freedom to get out and about, where and when they want."

The suggested changes are currently under public consultation “Blue Badge (disabled parking) scheme eligibility review”, which is open until 18 March:

24 January: Global community backs inclusion of dementia in WHO programme

The explicit mention of dementia has been included in the World Health Organisation (WHO) draft 13th General programme of work 2019-2023 following a statement by Alzheimer’s Disease International (ADI) and advocacy by Dementia Alliance International (DAI), Member States and civil society ahead of, and during the 142nd Session of the WHO Executive Board in Geneva.

Paola Barbarino, CEO of ADI, expressed concern at the omission of dementia in the programme, urging that its inclusion was vital to ensure that it retains the significant priority and momentum of the landmark adoption of a Global plan on dementia and the development of the WHO Global Dementia Observatory in 2017. Attention to dementia was also requested in statements made by Member State representatives from Argentina, Chile, Japan, Portugal and the UK, after Alzheimer associations in over 15 countries contacted their representative ministries.

The draft programme of work outlines the priorities of the WHO for the next five-year period starting in 2019 and is expected to be approved at the meeting of the World Health Assembly, the gathering of all Member States of the WHO, in May 2018.

The team at ADI would like to thank everyone who helped to highlight the importance of dementia ahead of the meeting in Geneva and are continuing to advocate for every government to address dementia by developing their own national plan.

WHO draft General programme of work (GPW) 2019-2023:

WHO Global plan on dementia:

WHO Global Dementia Observatory:
http://www.who.int/mental_health/neurology/dementia/Global_Observatory/en/

9 January: 3rd meeting of Twinning Programme between German and Turkish Alzheimer Associations held in Augsburg

The third meeting of the Twinning Programme between the German and Turkish Alzheimer Associations, was held in Augsburg on 9 January. As was the case for the previous two meetings - in Alanya, Turkey for Germans living in the area and in Berlin for Turkish immigrants - the aim of the meeting was to raise awareness about dementia, in the mother tongues of the audience.

After a warm welcome by Sabine Jansen, Executive Director of the Deutsche Alzheimer Gesellschaft (DalzG) - the German Alzheimer Association - and Güzide Şebnem Koçoğlu from the Consulate of Turkey in Munich, the President of the Turkish Alzheimer Association, Professor İşın Baral Kulaksızoğlu from Istanbul University Medical School gave an informative speech about the disease, its symptoms, care and prevention measures.

Nimet Saran from Interkulturelles Netz Altenhilfe, INA explained the healthcare system in Germany, legal and social rights of the immigrants and the procedures to be able benefit from those rights. Füsun Kocaman, Executive Director of Turkish Alzheimer Association, gave a presentation about the services the Association provides to patients and their carers in Turkey.

A widower, whose wife passed away with Alzheimer’s dementia shared his experiences and emphasised the fact that INA was very helpful in his journey as a carer.
Dr Jens Schneider, president of the Augsburg branch of DalzG then gave an overview of the support they offer in their region.

Before the closing, there was a very fruitful Q&A session and there were requests from the audience to organise similar meetings in other parts of Germany.

19 January: The network of “Dementia Friendly Spots” grows in Slovenia

Spominčica - Alzheimer Slovenia continues building the network of Dementia Friendly Spots (DFS) in Slovenia. On 17 January, Spominčica already opened its 11th DFS.

Spominčica has also organised a training course for organisations interested in participating in the DFS programme. More than 40 employees from different organisations have attended the training course, where prof. Zvezdan Pirtošek (also a member of Spominčica Expert Committee) presented the neurological aspects of dementia progression; Mrs Milena Novak from the Psychiatric Clinic Ormož presented the psychiatric aspects; and Mr Jure Markič from the office of the Human Rights Ombudsman spoke about their experience of being the first DFS in Slovenia.

The interest of organisations to join the DFS programme is ever increasing and Spominčica plans to have training programmes in different Slovenian regions. The goal is to establish a network of DFS to improve the quality of life (QoL) of all residents in communities, including older people and other vulnerable groups.

The coordination of DFS is run by Spominčica. DFS are part of the Slovenian project “For Dementia Friendly Community”, which is a part of the Ministry of Health grants.

The project is a direct result and a first stage of the implementation process of the Slovenian Dementia Strategy, adopted in May 2016. Under this grant, eight projects are financed from August 2017 until November 2018. Two projects will provide education and training about dementia for healthcare professionals. The other six projects will improve knowledge about dementia of informal carers, social care workers, volunteers and supporters of persons with dementia. These projects aim to cover all Slovenian communities, especially in less developed regions. With collaborative work, transfer of knowledge will be regionally distributed and contribute to better understanding of dementia and to raising awareness among the Slovenian public.

22 January: Alzheimer Society of Finland celebrates its 30th birthday

The Alzheimer Society of Finland (Muistiliitto) turns 30 this year. The theme of the year is “Towards a memory-friendly Finland”, as the National Memory Programme of Finland also states.

The main celebrations will take place on World Alzheimer’s Day, on 21 September. The society is also taking a look back at its history throughout the year, via social media, where landmarks and milestones are being highlighted.

http://muistiliitto.fi/

24 January: Futura Montenegro reports on its January activities

NVO Futura is newly formed and is the only association for Alzheimer’s in Montenegro. Its main goal is to provide information on all aspects of dementia, as well as providing assistance and education to all who have contact with people with dementia, especially family members. The organisation also aims to raise public awareness of Alzheimer’s disease, and advocates that early diagnosis is very important. The ultimate goal is to provide long-term solutions to help people with dementia and promote and provide better treatment for people with dementia, as well as to provide day care centres.

In January, our main activities focused on hosting on various TV networks, which was a good result. We also organised meetings with people from the state sector (Ministry of Health, Health Insurance Fund, health centres).

We want to mention that we have great support from the Capital and its Mayor, Slavoljub Stijepović, and that we were given cognition in a public competition and were chosen to be an association that will cooperate with the local government, in the creation of legal acts and strategies in order to improve the health and well-being of citizens.

So far, there have been no special actions and strategies related to Alzheimer’s disease in Montenegro, so we are trying to create strategies and influence development through various memoranda of cooperation, projects and promotions through the media and social networks, and we have received support from the President’s cabinet. The governments of Montenegro.

We propose the establishment of the first day care centres, and the space for our counsellor is being built. We applied for a care programme, as well as a programme that focuses on educating young people about dementia through schools and universities, and we hope that our proposals will soon be accepted.

http://www.nvofutura.me/
25 January: Association Luxembourg Alzheimer reports on its recent Academic Session

To close the festivities of the 30th anniversary of the Association Luxembourg Alzheimer (ALA) and the 25th anniversary of the Alzheimer’s Foundation, an academic session was organised on 29 November 2017 at the Tramsschapp cultural centre in Luxembourg city, in the presence of HRH the Grand Duchess of Luxembourg (pictured, top right, shaking hands and top left, holding bouquet), who has been the patron of ALA since 1991, as well as many ministers and private and public partners in ALA.

The arrival of the Grand Duchess was announced by the “Wilhelmus”, played by the cellist Judith Lecuit. The academic session then began with the song “Bonjour an Awuer” performed by Serge Tonnar with the Lalala choir of the “Beim Goldknapp” nursing home, operated by ALA and offering a living environment adapted to people with Alzheimer’s dementia. The song was composed in 2015 by Serge Tonnar, at the request of the Ministry of Family, Integration and the Greater Region, in order to thematise the subject of dementia, inform the general public and break the taboo. A film about the events organised as part of the 2017 festivities was also presented.

Following this were speeches by Mr Jeannot Krecké, President of the Alzheimer Foundation, Ms Liane Kadusch-Roth, President of ALA, Ms Corinne Cahen, Minister of Family, and Mr Mars di Bartolomeo, President of the House of Representatives. There was also a musical intermezzo by Mrs Judith Lecuit. Before the screening of a film, retracing the creation of the ALA and the Alzheimer Foundation, Mr Krecké and Mr Paul Diederich, the founding fathers of ALA, were honoured for their pioneering work.

The evening ended on a Rock ‘n’ Roll note with HeartChor Saar, a rock band composed of seniors and, of course, with a big birthday cake.

25 January: Alzheimer Croatia releases short movie “Dementia” in Croatia and Slovenia

Alzheimer Croatia has released a five-minute movie, Dementia, which has been filmed with the support of the partners of the cross-border EU project Demenca aCROsSLO. Family caregivers, medical doctors and social workers point out the basic facts about dementia, the need for early diagnosis, the importance of psychosocial access to people living with dementia, and conclude that the love of carers for people with dementia knows no bounds.

The movie is in two language versions, Croatian and Slovenian, and will be screened via several TV stations. Along with the rest of the film, it also serves as a source of information on dementia and on the care that Dementia Friends should adopt when joining this Alzheimer Croatia initiative in their country. The movie can be seen on Alzheimer Croatia’s YouTube channel: https://youtu.be/t_83sTDsXwy

26 January: Alzheimer’s Society writes about its partnership with Channel Four

The Alzheimer’s Society has secured a partnership working with broadcaster Channel Four. The partnership is designed to help shift the dialogue around dementia.

Channel Four is a British public-service television broadcaster which has a long history in challenging taboos. It is fantastic that they have now committed to changing the way that dementia is perceived.

As their first step, Channel Four has agreed that all of its employees will become Dementia Friends. We are also exploring creating a dementia friendly guide for the sector, which will change the way that dementia is portrayed in the media and popular culture.

The channel recently screened a ground-breaking documentary by British comedian David Baddiel, showing the impact of his father’s Pick’s Disease. The documentary, titled ‘The Trouble with Dad’ followed a successful stage show, depicted the difficult side of living with dementia, with pathos and some humour.

Channel Four also joined up with fellow broadcaster, ITV, in a UK first, to support the Society’s United Against Dementia campaign, which urged people to put differences aside and to galvanise around the cause.

This partnership brings together the Society’s determination to build its bold new brand, as well as to create real change for people with dementia in communities, enabling them to live their lives without fear or prejudice.

Watch ITV and Channel 4 United Against Dementia: www.itvmedia.co.uk/news/itv-and-channel-4-take-on-alzheimers-together
Watch David Baddiel’s documentary: www.channel4.com/programmes/the-trouble-with-dad

26 January: Alzheimer Society of Ireland reports on its upcoming Campaign on Diagnosis

“I was told I had Mild Cognitive Impairment – that didn’t sound so bad. As I was crossing the car park, I met the original nurse who had assessed me, who apologised for not being with me for the diagnosis. I told her I was fine and thanked her. Again she apologised. In that moment I realised that either I hadn’t heard something or something
hadn’t been said and I asked her straight out, “are you telling me I have Alzheimer’s?” And the answer was “yes”. “

These are the words of Kathy Ryan who was diagnosed with dementia in 2014. Kathy is Vice-Chair of the Irish Dementia Working Group which along with the Dementia Carers Campaign Network has launched a campaign to educate healthcare professionals about the supports people want and need when receiving a dementia diagnosis.

As part of this campaign a new video has been developed which highlights different experiences people have had of receiving a diagnosis including people of different ages, genders and with different types of dementia. This video also features Dr Tony Foley from the PREPARED project (Primary Care Education, Pathways & Research of Dementia), a three-year national primary care dementia project in Ireland.

In the coming months, the two advocacy groups, which are both coordinated and supported by The Alzheimer Society of Ireland, will seek opportunities to present to healthcare professionals – including GPs, Geriatricians, Neurologists and Physicians – about this important issue. Healthcare professionals are also being encouraged to visit dementiapathways.ie which is a web-based clinical education resource designed for GPs and community based healthcare professionals across Ireland.

For more information on this campaign and to watch our video please visit: www.alzheimer.ie

Pictured: Members of the Irish Dementia Working Group and Dementia Carers Campaign Network with Dr Tony Foley

26 January: Integrated Alzheimer’s and related disorders unit, “Apostoli”, opens in Greece

The Integrated Alzheimer’s and Related Disorders Unit, which is a part of the “Apostoli” charitable organisation of the Holy Archdiocese of Athens, is providing specialised high-level services, to patients with Alzheimer’s and related disorders. These may include admission of patients on a short or longer term basis in the unit, medical supervision, administration of medication, occupational therapy, and also psychological support and counselling, for them and their caregivers as well. It is also a place of gathering, creativity and communication.

The Unit consists of:

- An inpatient department, with a capacity to accommodate 25 patients on a permanent basis and also an extra capacity to simultaneously accommodate 5 more patients, on a short-term basis, aiming to relieving their families for a brief period of time, from the burden of their care.
- A day center, which patients with dementia may attend. Patients, caregivers as well as healthy older individuals, may also receive specialised information, consultation as well as education, as far as dementia and preventive measures are concerned.

A memory clinic, which is a specialist outpatient service, at which individuals aged over 60 may be examined, as far as their cognitive functions are concerned, both by a psychiatrist and a psychologist. If needs be, they can also be followed-up by the psychiatrist and receive prescriptions for medication or referrals for further diagnostic control.

The aims of the centre are:

- Diagnosis of dementia and administration of medication as soon as possible.
- Improvement of living conditions of the patients and their functionality as well as their overall quality of life
- Providing psychological support, counseling and information to the families of the patients.

Services provided:

- Medical care and administration of medication
- Nursing care
- Cognitive enhancement therapies
- Psychologic support (information on an individual, group or family basis)
- Counseling and psycho-education of individuals and families.
- Occupational therapy (item construction, everyday activities)
- Music therapy
- Physiotherapy
- Rehabilitation
- Social skills programme
- Launching informative campaigns about Alzheimer’s nationwide and performing memory tests throughout the country, free of charge
- Participating in scientific research as well as in congresses and conferences
- Providing practice to students.

26 January: Alzheimer’s Society writes about its Roadmap for dementia research to 2025

The need for a dementia cure is as pressing as ever, but we also need care research to develop practical solutions that can benefit people with dementia and their carers right now.

Our new report “A research roadmap for prevention, diagnosis, intervention and care by 2025” outlines how research ambitions for care and cure should sit side by side. We asked researchers, people affected by dementia and professionals who support them to help create a ‘roadmap’ for the research needed to deliver these improvements.

The roadmap offers five key goals that we should all be working towards:

- Increase knowledge of risk factors to prevent future cases of dementia
Maximise the benefits of seeking and receiving a dementia diagnosis
• Improve quality of life for people affected by dementia
• Enable the dementia workforce to deliver improved practice
• Optimise quality and inclusivity of health and social care systems.

These broad research goals are then broken down into specific recommendations and an action plan that will help us achieve them, such as supporting knowledge sharing between researchers and recruiting more hard-to-reach research participants like people with advanced dementia who struggle to communicate.

In light of the recent WHO global action plan that urges countries to develop plans on dementia prevention, diagnosis, treatment and care, this roadmap provides an opportunity to align research with emerging national dementia strategies.

2018 has already started with positive news for dementia care, seeing three complementary research calls that together will support over GBP 50 million (EUR 56.7 million) of new research:
• A Care & Technology programme in the UK Dementia Research Institute worth GBP 20 million
• A European-wide research call from the Joint Programming in Neurodegenerative Diseases worth €21 million
• A joint call for research proposals from the Economic and Social Research Council and National Institute for Health Research in the UK

We hope our research roadmap will support global efforts to increase and improve research into dementia diagnosis, care and prevention—therefore helping to improve the lives of people living with dementia now and for future generations.

Read the report here:

https://www.alzheimers.org.uk/researchroadmap

SCIENCE WATCH

20 December 2017: Researchers suggest new genes associated with AD

In a study published on 20 December 2017 in the journal Alzheimer’s & Dementia, US researchers from Boston University identified new genetic factors that could contribute to Alzheimer’s disease (AD).

Scientists used data from the Alzheimer’s Disease Neuroimaging Initiative (ADNI) and conducted genome-wide associations within various subgroups, including normal cognitive, mild cognitive impairment (MCI) and AD participants.

They found new genes that may cause functional and structural changes in the brain. In the normal cognitive group, the total Tau levels were associated with SRRM4 and C14orf79, while the hippocampal volume was associated with MTUS1. These three genes are involved in neuronal signalling, development and loss. In MCI participants, logical memory tests were found to be associated with ZNF804B. Additional analyses revealed that the expression of MTUS1 was higher in AD cases, compared to controls.

“Our findings provide important insight about biological mechanisms leading to Alzheimer disease, especially at stages of the disease before symptoms occur,” said Lindsay A. Farrer, Chief of the Biomedical Genetics section at Boston University School of Medicine.

https://goo.gl/JGamh8

21 December 2017: Eisai and Biogen continue Phase II Alzheimer’s therapy trial for another six months

On 21 December 2017, the two pharma companies Eisai and Biogen announced that they will continue their adaptive Phase II study of BAN2401, after an independent trial review body declared the 12-month findings inconclusive.

The companies initially hoped that they would be able to shorten the trial period from the usual 18 months to 12 months using an advanced statistical method (Bayesian analysis) that allows researchers to assess interim findings. According to the press release, the blinded study (Study 201) with 856 patients will continue and a comprehensive final analysis will be conducted at 18 months, seeking to demonstrate clinically significant results. The results of the final analysis are expected to be obtained during the second half of 2018.

https://goo.gl/Mn8zHM

1 January: Diabetes drug investigated in mouse model of Alzheimer’s disease

On 1 January, a team of scientists from China (Shanxi Medical University and Shaoyang University) and the United Kingdom (Lancaster University) published research on the effect of a diabetes drug in a mouse model of Alzheimer’s disease (AD), in the Brain Research journal.

Some evidence from previous studies has shown that type 2 diabetes and its related conditions could be linked to AD. In this study, the team investigated if a drug, initially developed for type 2 diabetes and already approved for use, might be able to stave off AD.

The sample (altogether 12 animals) consisted of transgenic mouse models (APP/PS1) and wild-type mice as control. The team divided them into three groups; wild-type mice which
received saline only, transgenic mouse models, which also received saline only, and transgenic mouse models treated with the drug. After two months of treatment, the team conducted measurements of behavioural change, neuronal damage, oxidative stress and inflammatory markers. The scientists observed that memory formation in the water maze task was improved by the drug, and the amyloid plaque load in the cortex and hippocampus was reduced. While these are highly interesting results, the sample size consisting of only 12 animals is extremely small and the potential transfer of the effects of such a drug from transgenic mouse models to humans with AD remains uncertain.

4 January: Cortexyme initiates Phase 1 trial of its experimental AD drug

On 4 January, Cortexyme, a clinical-stage pharmaceutical company developing novel treatments for altering the course of Alzheimer’s disease (AD) and other neurodegenerative disorders, announced that the first group of participants has been dosed in the Phase 1 clinical trial of its lead compound for the treatment of AD. COR388 is a bacterial protease inhibitor, targeting a pathogen identified in brain tissue and cerebral spinal fluid of people with AD. The study is a Phase 1 randomised, double-blind, placebo-controlled trial to evaluate the safety and tolerability of a single oral dose of COR388 in healthy participants. The company expects to enrol a total of 76 participants in its first two Phase 1 studies.

5 January: Study investigates how AD could spread through the brain

On 5 January, the journal Brain published a study led by scientists from the University of Cambridge (United Kingdom), who investigated how tau, a key protein that causes nerve cell death, spreads throughout the brain in Alzheimer’s disease (AD). There are three major theories in the medical field that have been proposed to explain the spread of tau: the trans-neuronal spread, metabolic vulnerability and trophic support theory. In the published study, authors supported the trans-neuronal spread theory, suggesting that tau starts in one place and spreads to other regions in a chain reaction. Using two brain imaging techniques (PET and MRI), they analysed the relationship between tau burden and brain functional connectivity in the brain of 17 older people with AD and 12 controls. In addition, scientists analysed tau accumulations in participants with different stages of the disease. They showed that brains with greater levels of tau became less connected overall and the connections that remained became increasingly random.

Researchers also analysed the brain of 17 participants with another type of dementia and reported that tau spreads differently in progressive supranuclear palsy (PSP). They found that unlike in AD dementia, the pattern of tau build-up in PSP was associated with high metabolic demand and a lack of trophic support.

5 January: Neurotrope announces positive results from experimental AD drug Phase 2 study

On 5 January, Neurotrope, a company focused on developing drugs to treat neurodegenerative diseases including Alzheimer’s disease (AD), announced additional results from its Phase 2 clinical trial of Bryostatin-1 for AD treatment. This potent modulator of protein kinase C could activate synaptic growth factors and amyloid-beta-degrading enzymes. The Phase 2 clinical trial was a 12-week, randomised, double-blind and placebo-controlled study to evaluate the safety, tolerability and efficacy of Bryostatin-1 in participants with advanced AD. Two doses of Bryostatin-1 (20 or 40 μg) versus placebo were administered intravenously in a total of 150 participants. The follow-on analysis revealed an improvement in cognition function in participants receiving 20μg of Bryostatin-1 compared to controls. These participants did not receive memantine, an approved AD treatment, as background therapy. The further analysis also showed that participants receiving the 20 μg treatment showed an improvement in cognition 30 days after receiving the last dose. The company is planning a confirmatory study in participants with advanced AD in absence of memantine therapy. The trial is expected to begin in the first half of 2018.

6 January: Pfizer abandons research programmes for new Alzheimer’s and Parkinson’s disease drugs

On 6 January, Pfizer announced its decision to halt its early development programmes with a focus on Alzheimer’s and Parkinson’s disease. According to a statement from the company, it intends to redirect funds “to those areas where we have strong scientific leadership and that will allow us to provide the greatest impact for patients.”

Due to this decision, Pfizer expects to cut 300 positions from the neuroscience discovery and early development programmes over the course of the next months. The affected sites include Andover, Cambridge and Groton, all in Massachusetts, US.
8 January: Axovant announces negative results for intepirdine and positive trends in efficacy from pilot nelotanserin study

On 8 January, Axovant Sciences, a clinical-stage biopharmaceutical company developing novel therapeutic solutions to treat dementia, announced that its experimental drug intepirdine failed to meet its primary endpoints in two Phase 2 studies. This investigational drug candidate is a potent antagonist of the 5-HT6 receptor, promoting the release of acetylcholine in the brain. This neurotransmitter is believed to be critical for alertness, memory, thought and judgement - the key components of cognition and function that are impaired in people with dementia.

The HEADWAY Phase 2b trial was a 24-week randomised, double-blind and placebo-controlled trial evaluating two doses of intepirdine (35 or 70 mg) in 269 people with dementia with Lewy Bodies (DLB). Both doses failed to demonstrate a statistically significant improvement in motor function, cognition and global function at 24 weeks, compared with participants treated with placebo.

The Phase 2 Gait and Balance study was a randomised, double-blind and placebo-controlled trial evaluating the safety of intepirdine (35 mg) in 38 people with Alzheimer’s disease (AD), DLB or Parkinson’s disease dementia (PDD), who were experiencing gait impairment. Although the experimental drug was generally well tolerated, it showed no improvements in gait speed.

In addition, the company reported results in Phase 2 nelotanserin pilot study. The randomised, double-blind and placebo-controlled trial evaluated nelotanserin, a 5-HT2a receptor inverse agonist, over a four-week treatment period in 30 participants with DLB and PDD who were experiencing frequent and recurrent visual hallucinations. The investigational drug showed a positive trend in efficacy in DLB participants.

9 January: Idalopirdine fails to slow cognitive decline in Phase 3 studies for AD

The Danish international pharmaceutical company Lundbeck conducted three Phase 3 studies from October 2013 to January 2017 investigating idalopirdine as a new therapeutic approach for Alzheimer’s disease (AD).

On 22 November 2016, Lundbeck announced the failure of the STARSHINE trial. Three month later, the company announced that idalopirdine failed in its two remaining Phase 3 trials, STARBEAM and STARBRIGHT.

On 9 January 2018, an international team of researchers reported in the journal JAMA the full results of all the three studies investigating idalopirdine.

The three 24-week randomised clinical trials included 2,525 participants who were aged 50 years or older with mild to moderate AD. Scientists concluded that idalopirdine did not improve cognitive functions compared with placebo when added to a cholinesterase inhibitor.

12 January: People with higher amyloid beta may develop increased symptoms of anxiety over time

Developing memory issues can be frightening. Over the course of dementia, tasks that used to be easy can become first subliminally more complex and then harder to carry out.

On 12 January, researchers reported findings in The American Journal of Psychiatry on the connection between anxiety and preclinical Alzheimer’s disease (AD).

The team investigated data from the Harvard Aging Study on amyloid beta (a biomarker for AD) and annual assessments with a depression questionnaire in 270 community-dwelling, cognitively normal older people aged between 62 and 90.

Their results showed that higher amyloid beta levels were associated with increasing anxious-depressive symptoms over time in the study sample.

The scientists concluded that even though this is not a definite result, their findings support the hypothesis that emerging neuropsychiatric symptoms represent an early manifestation of preclinical AD.

The relationship between anxiety and amyloid beta is still not fully clear; it might be that a direct or indirect association exists.

While the quantitative study showed an association, more in-depth research with larger study samples, both from a neurobiological and qualitative-social point of view (amongst others), is needed to better understand the potential relationship.

17 January: Psychosocial interventions for people with dementia, what works and what doesn't? A synthesis of systematic reviews

On 17 January, a team of researchers from the UK published a synthesis of systematic reviews in the Aging & Mental Health journal. The focus of their synthesis was to address the need to identify best evidence through a comprehensive summary.

Clinical services often face the challenge of deciding which intervention should be offered in practice, due to a number of issues, including inconsistencies in findings, differences in study quality, as well as trustworthiness of evidence.

With this in mind, the team of scientists decided to look at systematic reviews of psychosocial interventions in dementia, published between January 2010 and February 2016.
Altogether, 22 reviews, with a total of 197 studies, met their inclusion criteria and were analysed. The scientists took into account that the 22 reviews consistently highlighted a need for longer-term, methodologically strong studies with larger samples. Further, they explained that even though it would have been beneficial, they could not do an analysis of control groups within the scope of their review.

The team concluded that there is good information, suggesting that multi component exercise with an intensity of three times/week, 45-60 min per session for 12-16 weeks improves global physical functions and may lead to better cognitive functions as well as improved activities of daily living skills.

Further, the researchers deduced that group-based cognitive stimulation showed consistent improvement in cognitive functions, social interaction and quality of life.

At the same time, they stressed that so far there is insufficient evidence to determine whether psychological or social interventions might improve either mood or behaviour.

23 January: UK-based study projects rise in life expectancy and more chronic conditions

On 23 January, scientists from the MODEM project (A comprehensive approach to MODelling outcome and costs impacts of interventions for DEMentia) published projections of multi-morbidity in the older population in England to 2035, in the Age and Ageing journal.

The team developed a time dynamic microsimulation model. The model simulates survival as well as disease and associated risk factors, using a set of more than 300,000 individuals aged 35 and over. Their goal was to estimate future prevalence, incidence and life, as well as health expectancies.

The thought-provoking findings indicate that, during the coming 20 years, a massive growth of morbidity and complex multi-morbidity is likely to pose particular challenges for England’s healthcare system.

The researchers estimated that people will live longer (men: 3.6 years, women: 2.9 years). Most of these years will be spent with four or more diseases (men: 2.4 years, 65.9%; women: 2.5 years, 85.2%). Alongside this, the findings indicate that the proportion of people with four or more diseases will almost double between 2015 and 2035 and that two-thirds of those will have either cognitive impairment, dementia or depression.

The scientists conclude that their projections highlight the need for a new focus on prevention as well as appropriate and efficient service provision.

https://goo.gl/QwgcR5

24 January: Is exercise helpful to preserve thinking and decision-making abilities?


The team reviewed 19 studies overall, involving 1,145 older adults, who had either mild cognitive impairment (64%), a parent diagnosed with AD (1%) or had been diagnosed themselves (35%).

Their overall results suggested that exercise has a modest, favourable effect on cognitive functions and that control groups not performing exercise showed signs of decline. Further, the scientists indicated that aerobic exercise, specifically, had a moderate favourable effect.

In addition to this, the team added, that their results are in line with the World Health Organisation (WHO) recommendations on exercise for adults aged 65 and above. The WHO recommends at least 150 minutes of moderate-intensity aerobic physical activity throughout the week, or at least 75 minutes of vigorous-intensity aerobic physical activity throughout the week, or an equivalent combination of moderate- and vigorous-intensity activity.

Consistent with this, their overall finding were that moderate intensity exercise training, performed approximately three days per week for approximately 45 minutes per session, resulted in modestly better cognitive function than in controls.

https://www.sciencedaily.com/releases/2018/01/180126130325.htm

25 January: Researchers publish solanezumab trial results

As previously announced, Eli Lilly’s experimental Alzheimer’s drug solanezumab failed in its Phase 3 clinical trial. In this EXPEDITION3 study, participants with mild dementia due to Alzheimer’s disease were randomly assigned to receive solanezumab at a dose of 400 mg or placebo intravenously every 4 weeks for 76 weeks.

On 25 January, the final report of the Phase 3 EXPEDITION3 trial was published in the New England Journal of Medicine.

https://goo.gl/R92mMc

25 January: Takeda and Zinfandel Pharmaceuticals discontinue Phase 3 TOMMORROW study

On 25 January, Japanese pharmaceutical company Takeda and its US partner Zinfandel Pharmaceuticals announced that the TOMMORROW Phase 3 study, investigating pioglitazone for Alzheimer’s disease (AD), has been abandoned.

The TOMMORROW Phase 3 trial was a double-blind and randomised trial to evaluate the efficacy and safety of the investigational drug pioglitazone, to delay the onset of mild cognitive impairment (MCI) due to AD, in cognitively-normal participants who are at high-risk for developing MCI.

The trial recruited more than 3,500 participants. Although no safety issues were reported, the treatment showed an
inadequate effect to delay the onset of MCI due to AD. The company said that the results will be presented at a future scientific meeting.

https://goo.gl/fZ5t5S

SCIENCE WATCH – BEHIND THE HEADLINES

29 January: Dr Charles Scerri comments on Pfizer ending its research into Alzheimer’s drugs

There have been a number of recent media headlines, about US-based pharmaceutical company Pfizer ending its research into Alzheimer’s and Parkinson’s drugs.

We asked Dr Charles Scerri, Vice-Chairperson of Alzheimer Europe and co-founder and general secretary of the Malta Dementia Society, to comment. Dr Scerri currently lectures in neuropharmacology at the University of Malta. He is also a member of the JPND Scientific Advisory Board and of INTERDEM.

Find out more about Dr Scerri here: http://alzheimer-europe.org/Alzheimer-Europe/Who-we-are/Our-Board/Charles-Scerri

At the beginning of the year, Pfizer announced that it was ending its research in the neuroscience field including the development of new drugs for Alzheimer’s and Parkinson’s disease, the two most important neurodegenerative disease in old age.

Although this may come as a surprise to many, the long list of clinical trials’ failure to meet the desired endpoints, especially in the Alzheimer area, is slowly denting the long-standing commitment that many pharmaceutical companies made in fighting what has been considered as the disease of the century.

To those working in the field, this decision is indeed very disappointing and will surely impact negatively on the hopes of many million individuals who are living with the disease.

Drug development is a costly business involving billions of euros in research and development with no guarantee of success. The last drug to be developed for Alzheimer’s disease was approved in 2003 and although a lot of money has been funnelled into trying to come up with other pharmacological agents, none have reached market approval.

There may be various reasons for this. As some experts in the field have suggested, we may be looking at the wrong target, and that we still have a long way to go to fully understand the pathophysiological process underlying the disease and that current interventions occur too late. Others argue that the pharmaceutical industry, faced with lack of tangible results, is shifting its focus to other areas of pharmacological development where, possibly, scientific research is more developed and the potential for success is greater.

This is not to say that we have not made significant strides in understanding the underlying biology of the most common forms of dementia. This last two decades were characterised by important advancements in the field. One example worth mentioning is the discovery and use of a number of biomarkers as an important tool in diagnosis. Yet another is the important advance we have made in the understanding of dementia risk and protective factors.

However, the brain is a complex organ and we are still far off fully understanding important brain activities such as learning, thinking and memory, all of which become impaired in individuals with the most common forms of dementia. Such a complexity also makes the discovery of new drugs a tremendous challenge.

But it’s not all doom and gloom. Pfizer said that it plans to dedicate a neuroscience venture fund to continue supporting in this area. Other pharmaceutical companies remain committed to the disease in the hope of finding disease-modifying treatments. The long-term potential is very promising despite the many setbacks. Many Alzheimer’s associations will continue their funding programmes and campaigning their governments and global organisations to put dementia research higher up in their agendas.

It is only through a collaborative effort that we can finally defeat Alzheimer’s disease in the years to come. Dementia is too big for us to lose hope.

LIVING WITH DEMENTIA

22 January: Carol Hargreaves tells us about a recent meeting of the SDWG

December was a very busy month for the Scottish Dementia Working Group (SDWG). We had one meeting to meet up with our new members and I’m happy to say we have had quite a few new members join. It’s very important to explain what is involved in being a group member, so we think it’s important to explain what we do, and then we learn as we go along.
We also had a talk on Human Rights and Public Policy, which is very important to everyone.

January has been very quiet. We start back on Tuesday the 23rd for work planning and development day. I am so looking forward to getting back and being involved as have felt a bit lost, not doing anything lately.

NEW PUBLICATIONS & RESOURCES

16 January: ISPOR Updates Its Code of Ethics

On 16 January, the International Society for health economics and Outcomes Research (ISPOR) announced the publication of an updated code of ethics.

The fourth edition of this code was recently published in the December issue of Value in Health.

A large number of updates intend to tackle issues that have arisen in today’s rapidly evolving digital health environment.

ISPOR’s code of ethics is intended to publicise the standards that define what is acceptable and unacceptable in the conduct of all aspects of research, from its inception to the dissemination of its results.

The full publication can be read here:


JOB OPPORTUNITIES

11 January: European Patients’ Forum (EPF) seeks experienced Financial Manager

The European Patients’ Forum (EPF) is looking for a Financial Manager to join its Secretariat from March 2018.

The position is full-time, and the contract runs for one year. It is renewable depending on performance.

Applicants should send a letter of motivation (one page max), CV and two references to recruitment@eu-patient.eu by 2 February 2018 (COB) at the latest.

You can read the full job spec here:


17 January: The University of Exeter is recruiting a Postdoctoral Research Associate / Fellow

The University of Exeter Medical School is looking for a Postdoctoral Research Associate / Fellow.

The post will involve taking responsibility for the organization and administration of a feasibility trial, and overseeing the initial implementation and evaluation of their novel decision support software for dementia identification.

This Halpin Trust funded post is available immediately for two years to participate in our feasibility trial entitled ‘Enhancing the diagnostic pathway for dementia using DECODE’.

Application closing date is by 6 February 2018 at the latest.
You can read the full job spec here:

https://goo.gl/XLhKgt

17 January: The University of Antwerp seeks Scientific Director/ Research Professor

The University of Antwerp and VIB are currently seeking outstanding candidates to fill the position of Scientific Director/ Research Professor to lead the VIB research centre of the University of Antwerp.

The current focus of the research centre is on neurodegeneration, more specifically, Alzheimer’s disease, frontotemporal lobar degeneration, and peripheral sensory and motoric neuropathies.

The position is full-time and date of appointment will be as soon as possible.

Candidates who are interested in this position are asked to send a complete CV, publication list, vision text (max. 5000 words) and 3 letters of reference to marijke.lein@vib.be and vacatures@uantwerpen.be. Closing date for applications is 31 March 2018.

You can read the full job spec here:


EDUCATION

16 January: Registrations now open for KU Leuven 2018 Summer Course on Ethics in Dementia Care

The 2018 edition of KU Leuven’s “Summer Course on Ethics in Dementia Care”, will take place in Leuven, Belgium, from 3 to 6 July.

The objective of the course is to foster exchanges on foundational, clinical-ethical and organisational-ethical approaches to dementia care. During the course, national and international experts will give presentations on various ethical topics in the domain of dementia care. Time will be provided for intensive discussion and interaction.

The course is of interest to participants from diverse professional backgrounds, such as medicine, nursing, psychology, social work, health care administration, philosophy and theology, and to PhD students undertaking courses of study in these areas.

The language of instruction will be English and the deadline for registration and payment is 18 June 2018. An early bird registration fee is also available, until 15 May.

You can find more information in the course flyer:

https://goo.gl/7X7Dcd
16 January: Registrations are open for free University of Tasmania online dementia course

The Wicking Dementia Research and Education Centre of the University of Tasmania welcomes registrations for its next Massive Open Online Course (MOOC) on “Understanding Dementia”. This is an easily accessible online course that builds upon the latest in international research on dementia. It’s free and anyone can enrol.

Access to the course itself will be open from 19 February to 27 April 2018, however enrolment closes on 9 March.

You can find all the necessary information in the course flyer: https://secure.utas.edu.au/__data/assets/pdf_file/0019/1043245/UOTWI171211-A4-Flyer_vFA Edited.pdf

AE CALENDAR

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting</th>
<th>AE representative</th>
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<tbody>
<tr>
<td>2 February</td>
<td>EPF- Workshop on Incentives (Brussels, Belgium)</td>
<td>Vanessa</td>
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<tr>
<td>6 February</td>
<td>Carers’ survey meeting (via Skype)</td>
<td>Ana and Jean</td>
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<tr>
<td>8 February</td>
<td>INTERDEM meeting (Brussels, Belgium)</td>
<td>Dianne</td>
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<td>8-9 February</td>
<td>Joint Action WP Residential Care (The Hague, Netherlands)</td>
<td>Ana</td>
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<tr>
<td>20 February</td>
<td>Meeting with Alzheimer’s Disease International (London, UK)</td>
<td>Jean</td>
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<tr>
<td>26-27 February</td>
<td>Alzheimer Europe Board meeting</td>
<td>AE Board</td>
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<tr>
<td>27 February</td>
<td>Alzheimer Europe Foundation Board (Brussels, Belgium)</td>
<td>AEF Board</td>
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<tr>
<td>27 February</td>
<td>EP Lunch debate “Will we be able to prevent Alzheimer’s dementia” (Brussels, Belgium)</td>
<td>AE Board, members and staff</td>
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<tr>
<td>27 February</td>
<td>Company round table meeting (Brussels, Belgium)</td>
<td>AE Board, members, sponsors and staff</td>
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<tr>
<td>28 February</td>
<td>Public Affairs meeting (Brussels, Belgium)</td>
<td>AE Board, members and staff</td>
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CONFERENCES 2018

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting</th>
<th>Place</th>
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<tbody>
<tr>
<td>15-18 March</td>
<td>AAT-AD/PDTM Focus Meeting on Advances in Alzheimer’s and Parkinson’s Therapies, <a href="http://www.aat-adpd.kenes.com">www.aat-adpd.kenes.com</a></td>
<td>Torino, Italy</td>
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<tr>
<td>22-25 March</td>
<td>12th World Congress on Controversies in Neurology (CONy), <a href="http://www.comtecmed.com/cony/2018/default.aspx">http://www.comtecmed.com/cony/2018/default.aspx</a></td>
<td>Warsaw, Poland</td>
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<tr>
<td>2-4 May</td>
<td>24th Nordic Congress of Gerontology (24NKG), <a href="http://www.24nkg.no">www.24nkg.no</a></td>
<td>Oslo, Norway</td>
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<td>24-26 May</td>
<td>Research in Palliative Care for Older People: Overcoming methodological research challenges, <a href="http://eapm2018.forskningsweb.org/">http://eapm2018.forskningsweb.org/</a></td>
<td>Bern, Switzerland</td>
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<td>7-8 June</td>
<td>HammondCare International Dementia Conference - Mission Impossible? Truth and Lies in the Age of Choice, <a href="http://www.dementiaconference.com">www.dementiaconference.com</a></td>
<td>Sydney, Australia</td>
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<td>7-8 June</td>
<td>BestCare4Dem - Sharing effective community-based support in dementia, <a href="https://www.meetingdem.eu/">https://www.meetingdem.eu/</a></td>
<td>Amsterdam, Netherlands</td>
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<td>Date</td>
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<td>4-6 July</td>
<td>British Society of Gerontology Annual Conference, <a href="http://www.britishgerontology.org">www.britishgerontology.org</a></td>
<td>Manchester, UK</td>
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<tr>
<td>26-29 July</td>
<td>International Conference of Alzheimer’s Disease International (ADI), <a href="https://www.adi2018.org/">https://www.adi2018.org/</a></td>
<td>Chicago, USA</td>
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<tr>
<td>11-14 November</td>
<td>11th International Conference on Frontotemporal Dementia, <a href="https://dconferences.eventsair.com/QuickEventWebsitePortal/icftd2018/cs">https://dconferences.eventsair.com/QuickEventWebsitePortal/icftd2018/cs</a></td>
<td>Sydney, Australia</td>
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<tr>
<td>22-25 October 2019</td>
<td>29th Alzheimer Europe Conference “Making valuable connections”</td>
<td>The Hague, Netherlands</td>
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This conference presents an overview of the latest insights in the field of effective care and support for home-dwelling people with dementia and their informal carers. There are many new types of interventions and services that aim to offer practical support to people with dementia and their informal carers and to make their life more comfortable and pleasant. For example, meaningful activities organized by welfare organisations and cultural facilities (such as museums), innovative technologies and initiatives for a more dementia-friendly society. But which of those work best in actual practice? Which are effective and should be made widely available for the target group?

At the conference a special place is reserved for new day care facilities, such as meeting centres. Many of these centres function as knowledge centres in the community. Adopting new effective types of support enables them to serve a broader target group, also outside the centres, and better meet the variety of needs experienced by people with dementia and their relatives.

**SAVE THE DATE! 7-8 June 2018**

We are looking forward to meeting you in AMSTERDAM

International conference

During the conference various internationally recognised experts will present their views on post-diagnostic dementia care.

Inspirational sessions will focus on providing the latest information about best practice, scientific research, successful implementation of innovations and policy, and on the international exchange of best practice. In addition to lectures there will be interactive sessions, an information market, film presentations, live performances and possibilities for networking.

The conference is intended for care providers, scientists and policy makers in the field of dementia care as well as for people with dementia and their informal carers.