Editorial

June was another busy but productive month, as we tended existing projects and launched a foray into social media: you may have noticed a recent flurry of new AE tweets and Facebook wall posts. Preparations for Malta are also proceeding and we already have more than 300 confirmed registrations. This is more than we anticipated and a good indicator that we’ll reach or exceed our goal of 400 delegates.

We were pleased to host some 40 people at our latest lunch debate in Brussels, including four MEPs and members of the European Alzheimer’s Alliance. The audience heard Dr. Armelle Leperre-Desplanques presenting the results and future activities of the ALCOVE project. This was followed by a round table meeting with representatives of pharmaceutical companies and AE member associations. We are very happy with their agreement to jointly contribute to AE’s Dementia Monitor - the first cooperation of this kind. With their combined input, we expect the Dementia Monitor to become the standard reference for comparing European dementia policies. We also held a meeting with our members, to discuss our involvement in future European projects and also ways to make dementia a prominent topic during the upcoming G8 conference and the 2014 EU election campaigns.

The elections will take place during 22-25 May 2014, according to a recent decision of the EU Council. Meanwhile, the EPSCO council adopted the much-awaited MRI directive and five EP parties agreed on a joint initiative to support people with disabilities. Most important of all, the 2014 EU budget has been approved, with an emphasis to boost growth and create jobs in all EU member states.

In our member countries, Scotland saw the launch of its second national dementia strategy and France a successful review of its own plan. The Nordic associations organised a conference in Sweden and Finland also updated its advance directive publications. The German association issued recommendations for long-term care to the government and the Dutch government is reviewing its own advance directive laws. Finally, we congratulate the Bulgarian and Maltese associations for the recent launch of their respective newsletters.

In scientific news, the EMA issued a warning about drugs containing ergot derivatives. June saw the presentation of “Big Brain”, a 3D high-resolution brain model that will apparently show details at the level where brain computations take place.

We also report on other new resources, including a re-edition of the French-language version of the Care Manual and a very comprehensive OECD report on long-term care. Stirling University has published a new issue in its series of books about housing and the University of Tasmania will offer a free online course about dementia. There are open competitions for “healthy” phone apps and social innovation projects, as well as a grant award for Alzheimer’s researchers.

This is the last newsletter before we break for the summer. Our next issue will appear in early September. Until then, we wish all our readers a warm and pleasant summer!

Jean Georges
Executive Director
Alzheimer Europe

17 June: AE Board meets in Brussels

The Alzheimer Europe Board held a meeting on 17-18 June with nine of ten Board members in attendance.

The members heard about AE’s recent meetings and activities, including European initiatives, research projects and the European Working Group of People with Dementia (EWGPWD). They also gave positive evaluations to applications for full membership from Iceland and Monaco. In addition, they reviewed financial accounts from 2013 and the 2014 Work Plan and heard updates on the preparation of Alzheimer Europe’s 23rd Annual Conference.

The next Board meeting will take place on 10 October at the Conference site in St. Julian’s, Malta.

18 June: AE holds a lunch debate near the European Parliament

Marisa Matias, MEP (Portugal) hosted Alzheimer Europe’s latest lunch debate in Brussels. The debate attracted more than 40 participants and focused on the results of ALCOVE, the European Joint Action on Alzheimer’s disease. The main presentation was made by Dr. Armelle Leperre-Desplanques, project leader and Manager of the Department of Pilot Programmes at the French Ministry of Health. She was followed by Bénédicte Gombault from the King Baudouin Foundation, who presented the project’s recommendations for advance care planning.

ALCOVE, the two-year Joint Action on Alzheimer Cooperative Valuation in Europe, involved 30 partners from the health and scientific authorities of 19 countries. Their aim was to improve knowledge on dementia and its consequences, as well as promote the exchange of information to preserve health, quality of life, autonomy and dignity of people living with dementia and their carers in Europe. They also explored ways to prevent excessive prescription of psychotropic drugs to people with dementia.

MEPs Martina Anderson, Sirpa Pietikainen (Finland) and Angelika LWerthmann (Austria) all attended the debate and Marina Yannakoudakis (UK) was represented by her assistant. These MEPS are all members of EAA, the European Alzheimer’s Alliance. There were also representatives from the European Commission, the pharmaceutical industry and 12 member associations of Alzheimer Europe.

The next lunch debate will take place on 3 December 2013. Additional information about ALCOVE is available on the project website.

www.alcove-project.eu

18 June: AE holds a Dementia Monitor meeting

Following the lunch debate, Jean Georges, Executive Director of Alzheimer Europe, presented an update of AE’s Dementia Monitor project. The Dementia Monitor aims to be a European benchmark of national dementia policies. It will be based on data provided by AE’s member associations and pharmaceutical partners - and will be the first time these two groups work together on such a project.

Alzheimer Europe expects that the Dementia Monitor will be useful for presenting comparative data to the European Parliament and European Commission. In addition, national organisations can use it to compare their situation to that of other European countries.

During the meeting, participants discussed the topics that would be included in the monitor and the methodology needed to analyse and interpret the data. They also identified several sources of data and agreed on a timeline for delivery. The meeting was attended by representatives from 12 national Alzheimer’s associations and healthcare companies GE Healthcare, Eli Lilly, Lundbeck, Nutricia and Piramal.

Alzheimer Europe will compile and develop the final report, which will be presented at a lunch debate in the European Parliament on 3 December 2013.

19 June: AE holds a Public Affairs meeting

On 19 June, Alzheimer Europe held a Public Affairs meeting that covered the progress of AE’s Dementia in Europe Yearbook project and an update of AE’s involvement in EU and WHO initiatives on active and healthy ageing and age friendly communities. The meeting also included discussion on the impact of social media in dementia campaigns and the 2014 European elections, as well as a presentation on the UK’s intention to make dementia a G8 priority. The Public Affairs meeting was attended by 17 people, including representatives from 11 member associations:

- Alzheimer Bulgaria: Irina Ilieva
- Alzheimer’s Disease Societies (Croatia): Nino Mimica
- Ceská alzheimerovská spolecnost (Czech Rep.): Iva Holmerová
- Muistiliitto (Finland): Markus Löfström
- Deutsche Alzheimer Gesellschaft (Germany): Heike von Lützau-Hohlbein
- Greek Association of Alzheimer’s Disease and Related Disorders: Ersi Grammatikou
- Malta Dementia Society: Charles Scerri
- Alzheimer Portugal: Maria Do Rosário Zincke dos Reis
- Societatea Alzheimer (Romania): Maria Moglan
- Slovenčina (Slovenia): Štefanija Lukč-Zapec

21 June: Alzheimer Europe steps up social media presence

On 21 June, Alzheimer Europe joined Twitter and decided to increase its Facebook presence. Alzheimer Europe will use both social media to inform its followers and interested individuals about the organisation’s latest activities and campaign priorities.

The organisation can already count on 150 Twitter followers and close to 3,000 Facebook friends. You can join the European dementia community and follow Alzheimer Europe at https://twitter.com/AlzheimerEurope or befriend the organisation on www.facebook.com/alzheimer.europe

Newsletter: June 2013
Impressions from the Lunch Debate and Dementia Monitor meeting

MEPs Martina Anderson and Marisa Matias, Annette Dumai (Alzheimer Europe), Maria Do Rosário Zincke dos Reis (Portugal)

Armelle Leperre-Desplanques, [ALCOVE, French Ministry of Health] and MEP Angelika Werthmann

The Finns: Markus Löfström, Aino Valtanen, MEP Sirpa Pietikäinen

Irina Ilieva (Bulgaria) and Štefanija Lukič-Zlobec (Slovenia)

40+ delegates attended the debate

Maria Moglan (Romania), Gökçe Elkap (Lundbeck), Ersi Grammatikou (Greece)

Helga Rohra (EWGPWD), Maria Moglan (Romania), Nicola O’Brien (UK)

Charles Scerri (Malta) and Iva Holmerová (Czech Rep.)

Carolyn Bodnar (GE Healthcare) and Steve Graves (Nutricia)

AE Projects

31 May: NILVAD project is featured on EU research website

On 31 May, the NILVAD project was featured on the European Commission’s Research & Innovation website. An article entitled “Major human drug trial underway for Alzheimer’s” covered all the aspects of the project, including a quote from Dr. Brian Lawlor, project coordinator: "We are trying to see if it alters the rate of progression of the disease. Animal trials gave promising results and the earlier pilot trial did give an efficacy signal as well."

The full text of the article is available on the project website.


3 June: PharmaCog holds General Assembly

On 3-4 June, the PharmaCog project partners held a Steering Committee meeting and a General Assembly in Lille, France.

During the Steering Committee meeting, participants finalised the progress report for year three of the five-year project, including Key Performance Indicators and milestones achieved. A key achievement is that the clinical trial of Work Package 5 has recruited enough participants to produce significant results. The delegates also reviewed the remaining tasks and objectives of the project, including assigning priorities to the six operational work packages.

At the General Assembly, delegates heard updates from all the Work Packages, including a poster session, as well as a report from the Ethics Advisory Board. They also attended a series of four workshops that discussed how PharmaCog’s work might continue after the end of the project in 2014.

More information about PharmaCog can be found on the project website.

www.alzheimer-europe.org/index.php/Research/PharmaCog

10 June: EMIF project teams hold progress meeting and workshops

On 10-11 June, the EMIF project team held a progress meeting in Sitges, Spain. The meeting focused on the “Platform” side of the project and also featured workshops for WP11, WP15 and WP16.

The EMIF Platform will provide different degrees of access to multiple datasets within an integrated environment. During this meeting, delegates from Work Packages (WP) 9-16 heard an overall project update, discussed user requirements and saw a demonstration of the first tranSMART and EMIF Catalogue prototypes. There were also presentations on the three current Use Cases and the two in development. Each Use Case is a model of a specific function of the Platform, such as cohort dataset integration, data source characteristics feeding and browsing.
In addition, there were meetings of the WP11 (Harmonisation and semantics), WP15 (Sustainability and outreach) and WP16 (Programme management and dissemination) project teams. The WP11 colleagues briefly discussed the immediate actions to take to study the degree of semantics harmonisation required in EMIF. The WP15 colleagues met to discuss the organisation of a workshop to initiate the development of an EMIF-Platform business plan. This aims at ensuring the sustainability of the venture beyond the project timeline. The WP16 team continued to work on the external communications plan, including identification of target audiences and elaboration of key messages. The communications workshop continued on 14 June in Luxembourg.

This work has received support from the EU/EFPIA Innovative Medicines Initiative Joint Undertaking (EMIF grant n° 115372).

**Alzheimer Europe Networking**

On 3 June (Glasgow, UK), Helga and Jean participated in the Alzheimer Scotland conference to mark the launch of Dementia Awareness Week and met Agnes Houston to discuss working methods of European Working Group of People with Dementia.

On 3 June 2013 (Brussels, Belgium) Annette participated in the Age-Friendly Environments for Europe (AFEE) meeting organised by WHO Europe and DG Employment and Social Affairs.

On 4 June (London, United Kingdom), Jean participated in a discussion meeting at the European Medicines Agency on an Alzheimer’s disease progression model.

On 3-4 June (Lille, France), Alex attended the PharmaCog Steering Committee meeting and General Assembly.

On 10-11 June (Sitges, Spain), Alex attended the EMIF Platform progress meeting and workshops for WP15/WP16.

On 12 June (Brussels, Belgium), Dianne attended the first meeting of the ethics working group on perceptions and portrayal of dementia.

On 14 June (Luxembourg, Luxembourg), AE hosted an EMIF WP16 communications workshop.

On 17-18 June (Brussels, Belgium), Dianne attended the regional symposium on “Preventing abuse and neglect of older persons in Europe” organised by the United Nations Human Rights Office of the High Commissioner.

On 17-19 June (Brussels, Belgium), AE Board and staff members attended the lunch debate and meetings of the Board, Dementia Monitor & Companies and Public Affairs.

**Members of the European Alzheimer’s Alliance**

Currently, the total number of MEPs in the Alliance stands at 70, representing 23 Member States of the European Union and all seven political groups in the European Parliament. Alzheimer Europe would like to thank the following MEPs for their continued support of the European Alzheimer’s Alliance:

- **Austria:** Becker K. Heinz (EPP), Werthmann Angelika (NI).
- **Belgium:** Demesmaeker Mark (Greens/EFA), Ries Frédérique (ALDE), Staes Bart (Greens/EFA), Tarabara Marc (S&D).
- **Bulgaria:** Panova Antonya (ALDE).
- **Cyprus:** Triantaphyllides Kyniacos (GUE/NGL).
- **Czech Republic:** Cabnoch Milan (ECR), Kohlček Jaromir (GUE/NGL), Roithova Zuzana (EPP).
- **Denmark:** Christensen Ole (S&D), Rohde Jens (ALDE), Schaldemose Christel (S&D).
- **Finland:** Jääkansaari Liisa (S&D), Jäätteenmäki Anneli (ALDE), Pietikäinen Sirpa (EPP).
- **France:** Audy Jean-Pierre (EPP), De Veyrac Christine (EPP), Griesbeck Nathalie (ALDE), Juvin Philippe (EPP), Pargneaux Gilles (S&D), Ulmer Thomas (EPP), Weisgerber Anja (EPP), Grece: Chounis Nikolaos (GUE/NGL), Koppa Maria Elena (S&D), Kratsa-Tsagaropoulou Rodi (EPP).
- **Ireland:** Aylward Liam (ALDE), Childers Nessa (S&D), McGuinness Mairead (EPP), Mitchell Gay (EPP).
- **Italy:** Panzeri Pier Antonio (S&D), Toia Patrizia (S&D).
- **Lithuania:** Vilija Blinkeviciute (S&D).
- **Luxembourg:** Engel Frank (EPP), Lulling Astrid (EPP).
- **Malta:** Simon Busuttil (EPP), Joseph Cuschieri (S&D).
- **Netherlands:** De Lange Esther (EPP), van Nistelrooij Lambert (EPP), Wortmann-Kool Corin (EPP).
- **Poland:** Łukacijewska Elżbieta (EPP), Pargneaux Gilles (S&D), Štefaniuk Maria (ALDE).
- **Portugal:** Carvalho Maria da Graça (EPP), Coelho Carlos (EPP), Matias Marisa (GUE/NGL).
- **Romania:** Antonescu Elena Oana (EPP), Busoi Cristian (ALDE), Sârbu Daciana Octavia (S&D), Tanasecă Claudia (S&D), Tăriceanu Cristian (S&D), Tăriceanu Cristian (S&D).
- **Slovakia:** Mikolasič Miroslav (EPP), Zoborska Anna (EPP).
- **Spain:** Badia i Cutchet Maria (S&D), Estarás Carreras Margarita (EPP).
- **United Kingdom:** Anderson Martin (GUE/NGL), Ashworth Richard (ECR), Hall Fiona (ALDE), McCarthy Arlene (S&D), McAvan Linda (S&D), Simpson Brian (S&D), Taylor Keith (Greens/EFA), Vaughan Derek (S&D), Watson Graham (ALDE), Willmott Glenis (S&D), Yannakoudakis Marina (ECR).
EU Developments

6 June: EP political groups join forces to support persons with disabilities

On 6 June, the leaders of the main political Groups in the European Parliament announced strong action to support the rights of persons with disabilities in Europe.

This followed a high level meeting between Joseph Daul, Chairman of the EPP Group, Hannes Swoboda, President of the S&D Group, Anneli Jaatteenmaki, Vice-President of the ALDE Group, Rebecca Harms, co-President of the Greens/EFA Group, Gabriele Zimmer, President of the GUE/NGL Group, and EDF President Ioannis Vardakastanis.

The thinking behind this initiative is that it is time to stop thinking only about the financial crisis: we also have to think about the social and human rights crisis. The most vulnerable and disadvantaged social groups - including people with disabilities - are taking the hardest hits.

The six MEPs all signed a declaration to take up a series of important initiatives aiming to ensure the full inclusion of persons with disabilities as well as the enforcement of their rights:

1. The European Parliament will implement and mainstream the UN Convention on the Rights of Persons with Disabilities through the setting up of a cross-Committee;
2. The European Parliament will put forward concrete proposals aiming to protect persons with disabilities from the crisis;
3. In view of the 2014 European elections, the political groups will ensure the accessibility of their websites, documents and information to persons with disabilities;
4. The political groups will push for a strong and ambitious EU legislation on accessibility of goods and services such as a legally binding European Accessibility Act, with strong measures at EU level to improve the accessibility of goods and services of high quality for persons with disabilities.

21 June: Employment, Social Policy, Health and Consumer Affairs Council adopts “MRI directive”

On 21 June, the main results of the Employment, Social Policy, Health and Consumer Affairs Council of 20/21 June were presented.

Among the topics adopted without discussion was the directive on the minimum health and safety requirements regarding the exposure of workers to the risks arising from electromagnetic fields. Alzheimer Europe previously reported on the negotiations and actively campaigned to ensure the use of MRI would not be restricted through this directive. The new directive takes into account the concerns of Alzheimer Europe and the organisations which campaigned in the “Alliance for MRI”.

On health and consumer affairs, the Council agreed on a general approach on a revised draft EU tobacco directive, took note of presidency progress reports on a draft regulation concerning clinical trials of medicines and on two draft regulations concerning medical devices.

Other topics on the Council’s agenda were the European Semester in the field of employment and social policy with a particular focus on youth employment.

27 June: Commission responds to MEP Werthmann’s question on the cost of brain diseases

On 27 June, Angelika Werthmann, MEP (Austria) received an answer from the European Commission to her question about the cost of brain disorders in Europe.

She reminded the Commission that EUR 800 billion is paid every year in Europe to treat brain disorders and that the ageing of the population will exacerbate the number of European citizens affected by brain disorders.

She asked the Commission what strategies it had to advise the Member States on reducing such costs, what programmes focus on preventive medicine and what is the EU contribution to covering these costs.

In the reply Health Commissioner Tonio Borg mentioned a 2011 study by A. Gustavsson et al. that was published in European Neuropsychopharmacology: “Cost of disorders of the brain in Europe 2010” estimated that the total costs of brain disorders, including mental, neurological and neurodegenerative disorders, accounted to EUR 798 billion in 2010.

He then mentioned the Commission’s European Month of the Brain that provided a framework to address brain research and healthcare issues.

As far as EU health policy is concerned, the Commissioner explained that the Commission is working with Member States to implement the European initiative on Alzheimer’s disease and other dementias (2009) and the European Pact for Mental Health and Well-being (2008). In 2013, a Joint Action on Mental Health and Well-being was launched.

Commissioner Borg added that between 2008 and 2013, some EUR 17.5 million had been invested from the EU-Health Programme 2008-2013 into projects, studies,
INNOVAGE is a three year FP7 project that began in December 2012. The full project name, Social Innovations Promoting Active and Healthy Ageing, indicates its aim to develop social innovations that will have a solid impact on improving the quality of life and well-being of older people. In particular, the project intends to make a major contribution to the EU goal of extending healthy life years.

One of the project objectives is to develop ICT-based services to support informal carers. ICT interventions are increasingly popular among informal and professional carers alike: blogs, e-learning courses, telemedicine and smart homes are just a few of the web services offered to carers. INNOVAGE’s Work Package 3 is working to combine web-based services in a multilingual web platform for informal carers of dependent older people.

This work package is led by Eurocarers - a non-profit organisation lobbying for informal carers in Europe - and INRCA, the Italian National Institute on Aging. When their work is complete, the multilingual web platform will host information such as social inclusion, reconciliation of unpaid care and paid work and training on care provision. There will also be specific sections for professional carers and their employers.

For more information, please contact Areti Efthymiou at areti@eurocarers.org or Frank Goodwin at eurocarers@gmail.com

www.innovage.eu

Policy Watch

30 May: Dutch advance directive laws to be re-evaluated

A joint working group of Dutch medical and government experts has been formed to evaluate and clarify the validity of advance directive laws for people with dementia.

Doctors in the Netherlands have expressed difficulties with advance directives - particularly those for euthanasia - for several years. They maintain that some communication is essential if they are to properly understand their patients’ suffering and wishes.

Meanwhile, medical ethicists argue that doctors are placing themselves above the 2002 euthanasia law. This states that doctors can act on an advance directive once a patient becomes incompetent.

The debate began when the Dutch Medical Association proposed to adapt the law. The association suggested that the legally required second medical opinion must not only see but also communicate with the patient.

Before accepting a euthanasia request, doctors in the Netherlands must be convinced that their patient is suffering hopelessly and unbearably. The acceptance of requests from patients in the early stages of dementia increased from 25 requests in 2010 to 49 in 2011.

The working group is expected to report its findings in six months.

www.bmj.com/content/346/bmj.f3547?tab=related

www.alzheimer-europe.org/Donation

3 June: Scotland launches new National Dementia Strategy

Mr Alex Neil, Cabinet Secretary for Health and Wellbeing, launched Scotland’s new National Dementia Strategy at Alzheimer Scotland’s Dementia Connections Conference on 3 June.

A key aim of the new three-year strategy will be to improve standards of hospital care for people with dementia. It will see all general hospitals implement an action plan to prevent people with dementia going into hospital unnecessarily, ensure they get better care when in hospital and are helped to get home as quickly as possible once they are ready to leave.

The strategy will also build upon the achievements of the first strategy, including 300+ Dementia Champions, Alzheimer Scotland Dementia Nurses in health boards across Scotland, the Promoting Excellence knowledge and
skills framework for all health and social care staff and the Standards of Care for Dementia in Scotland.

Secretary Neil said: "I am delighted to launch our second three year National Dementia Strategy, which will further improve diagnosis rates, transform the quality of post-diagnostic support and take forward a national action plan on improving care for people with dementia in hospitals.

“We’ve already seen huge progress since we made dementia a national priority in 2007. Currently 64% of Scots are getting a diagnosis, significantly better than other parts of the UK. Everyone diagnosed from 1 April this year is entitled to a named support worker to help them and their families understand the illness, manage its symptoms and plan for future care, described as a ‘world leading’ commitment by Alzheimer Scotland.”

www.scotland.gov.uk/Topics/Health/Services/Mental-Health/Dementia/DementiaStrategy1316

26 June: Evaluation of the French Alzheimer Plan completed

On 26 June, Marisol Touraine, Health and Social Affairs Minister, Geneviève Fioraso, High Education and Research Minister, and Michèle Delaunay, Minister for Older Persons and Autonomy, received the evaluation report of the third French Alzheimer Plan.

The evaluation was made by Prof Joël Ankri and Prof Christine Van Broeckhoven. It highlights the major achievements of the plan in research, diagnosis, support of people with dementia and support to their families. The report also lists 56 recommendations for future action.

The authors noted the significant progress in patient care pathways. In addition, French research teams are now better recognised at international level. This is due to major achievements in understanding dementia, notably in the field of genetics. Efforts to develop innovative biomarkers must continue, to allow early diagnosis of Alzheimer’s disease.

The report also recommends better national integration and collaboration between care structures and service providers, including entry points, adapted care and specialised Alzheimer teams in healthcare centres all over the country. Finally, the report calls for an extension of the Alzheimer Plan, including other neurodegenerative diseases that may involve common resources.

The three Ministers stated their intention to continue supporting people with dementia and their carers. They will work to integrate the recommendations into a new plan, which will be presented on the occasion of World Alzheimer Day on 21 September 2013.


Members’ News

17 April: Finland’s Muistiliitto publishes advance directive forms

The Alzheimer Society of Finland has published an advance directive form which allows people to express their will regarding personal treatment and care.

Advance directives are written or spoken expressions of will that specify a person’s wishes for good care and rehabilitation. They are commonly used to express preferences for end-of-life care: advance directives allow people to appoint someone to make certain decisions for them if they are no longer able to do so themselves.

This has been an important part of the Society’s advocacy work for years now, as it ensures the best possible quality of life for people with memory illnesses, based on their own wishes and needs.

www.muistiliitto.fi/eng/memory_illnesses/advance_directive/

1 June: Malta Dementia Society launches newsletter

On 1 June, the Malta Dementia Society launched the first issue of its newsletter "Reachout".

The newsletter will appear three times per year, featuring local and international information about dementia. It will be a reference for dementia services in Malta and also act as a forum for readers’ questions and concerns. Finally, each issue will include an interview with a local expert on dementia.

Issue 1 of Reachout is available on the website below.

http://issuu.com/reachoutmds/docs/reachout_-_june_2013

1 June: Alzheimer Bulgaria launches dementia newsletter

Alzheimer Bulgaria has launched the first issue of a quarterly newsletter called "Dementia". The newsletter is intended for families, caregivers and friends of people with dementia, but also for social workers and health professionals. Each issue will feature articles on disease prevention, patient care, research health tips and the rights of people with dementia. The Dementia newsletter can be downloaded from the association’s website.

http://alzheimer-bg.org/

5 June: Alzheimersforeningen hosts Nordic Alzheimer conference

This year’s Nordic Alzheimer conference was hosted by Sweden’s Alzheimersforeningen and took place in Lund during 5-8 June. The conference was attended by representatives from dementia associations from Aaland, Denmark, the Faroe Islands, Finland, Iceland, Norway and Sweden. This group has been meeting on a regular basis since 1993.

The conference agenda included reports from the associations on their daily work, presentations on the latest knowledge in care practice and science and social outings in one of Sweden’s oldest cities. This year, delegates saw presentations from Swedish experts on the latest developments in diagnosing Dementia with Lewy Body.
Bodies, studying heritability, using PET scan and tests on spinal fluids and preventing dementia by vaccination.

There was also a field trip to Minneskliniken, a centre of diagnosis and research into cognitive dementia symptoms. The clinic is developing a national register of assessing and treating challenging behaviour, as well as a web-based "migration school" in cooperation with a clinic in Copenhagen. This ensures that foreigners in Denmark and Sweden can find information on dementia and support services in their own language.

6 June: Ljubljana hosts dementia conference

On 6 June, the mayor of Ljubljana and the city's Department for Health and Social Affairs hosted a round table conference on dementia. The aim of the conference was to raise public awareness of dementia and to highlight the challenges faced by Slovenes with dementia.

Mayor Zoran Jankovič opened the conference by greeting the delegates and outlining the agenda for the day. The keynote speaker was Dr. Aleš Kogoj, psychiatrist and President of Spominčica, the Slovenian Alzheimer association.

Spominčica is very grateful to the mayor and the city for their continued support. The association has many more activities planned for 2013, including the highly popular Alzheimer Cafés and a Memory Walk to commemorate World Alzheimer's Day on 21 September.

27 June: German associations urge government for term care reform

On 27 June, German Health Minister Daniel Bahr officially received the "Report of the Expert Advisory Group on the details of long-term care". This report is the result of a joint effort between various organisations including the German Alzheimer Society.

Under current German law, "care" and "long-term care" are defined as physical support needs, excluding those who need help for mental and psychological limitations. The new report urges the addition of a new definition that includes cognitive impairment.

Bärbel Schönhof, Vice Chairperson of the German Alzheimer Society, said: "The report calls for the inclusion of people with dementia in the future. It also provides a new evaluation process and gives concrete recommendations for implementation. These should provide the government with all the necessary background to begin a comprehensive reform of nursing care very quickly."

Science Watch

21 May: EMA approves a new memantine generic

On 21 May, the European Medicines Agency (EMA) approved a generic memantine drug named Maruxa, which is based on Ebixa. Maruxa will be marketed by Krka d.d. Novo mesto (Slovenia) and TAD Pharma GmbH (Germany).


1 June: General anaesthesia may raise risk of dementia

A French research team has determined that older people who undergo general anaesthesia during surgery are 35% more likely to develop dementia in later years.

The researchers were led by Dr. François Sztark, Professor of Anaesthesiology at the University of Bordeaux. They examined data from a study called 3C that began monitoring the health of 9,294 people aged 65 or over in the French cities of Bordeaux, Dijon and Montpellier in 1999.

Participants were checked two, four, seven and ten years later. Each time, the 7,008 people with no dementia were asked if they had had either a general or local anaesthetic since the last check-up. After two years, 2,309 (33%) had undergone one in that time, of which 1,333 were general and 948 were local.

A total of 632 participants developed dementia over eight years. The researchers wished to establish whether a condition known as POCD (postoperative cognitive dysfunction) was the cause. They found that 37% of people with dementia had been exposed to anaesthesia at the two-year follow-up, compared to 32% of people who did not have dementia. 22% of the people with dementia had undergone a general anaesthetic, compared to 19% of those who were free of dementia.

They concluded that participants with at least one general anaesthesia event over the follow-up had a 35% increased risk of developing a dementia compared with participants without anaesthesia.

Dr. Sztark said that it is still uncertain whether POCD can be a precursor to dementia; there are still questions about why this is the case and whether other factors could be involved as well.

This topic was covered at Euroanaesthesia 2013, the annual congress of the European Society of Anaesthesiology (ESA).

http://journals.lww.com/ejanaesthesiology/Fulltext/2013/06001/Exposure_t o_general_anaesthesia_could_increase_th.768.aspx

1 June: Metabolomics may speed development of blood biomarkers

Researchers at the Mayo Clinic in Minnesota have developed a blood test that may lead to detection of Alzheimer’s disease at its earliest onset.
The team used a relatively new technique called metabolomics, which monitors the activity of metabolites (e.g. sugars, lipids, amino acids) inside cells. This technique provides a profile of what is happening in the body at a given time, providing insight into the cellular processes that underlie a disease.

In this case, the profiles showed metabolite changes in mitochondrial function and energy metabolism. The researchers hope that such changes will lead to the panel of biomarkers which can be used for early diagnosis, monitoring of Alzheimer’s progression and evaluating therapeutic approaches.

The scientists were led by Dr. Eugenia Trushina, Assistant Professor of Pharmacology at Mayo and co-author of the paper. They analysed cerebrospinal fluid and plasma samples from 45 people (15 with MCI, 15 with Alzheimer’s disease and 15 controls) and detected significant changes in the cerebrospinal fluid and plasma in those with cognitive decline and Alzheimer’s. More importantly, changes in the plasma accurately reflected the changes in the cerebrospinal fluid.

Dr. Trushina said: "We want to use these biomarkers to diagnose Alzheimer’s disease before symptoms appear - which can be decades before people start exhibiting memory loss. The earlier we can detect the disease, the better treatment options we will be able to offer."

www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0063644

1 June: Emotional contagion is higher in MCI & AD

A research team from the University of California, San Francisco (UCSF) has shown that people with MCI or Alzheimer’s disease have a higher tendency to develop emotional contagion, i.e. to mirror the emotions of those around them.

According to Virginia Sturm, lead researcher and Assistant Professor of Neurology at UCSF, emotional contagion is a rudimentary form of empathy, enabling people to share and experience other people’s emotions: "It’s a way by which emotions travel across people quickly and even without awareness." She added that this process can shape behaviours and cause changes in the brain.

The study involved 237 adults, including 62 with MCI and 64 with Alzheimer’s disease. The others were healthy controls. They took tests to identify depression and other mental health problems and also underwent MRI scans to identify changes in the brain related to emotional contagion.

The researchers found higher emotional contagion in those with mild mental impairment and Alzheimer’s disease, compared to the controls. They also found that the contagion grew proportionally with damage to the right temporal lobe of the brain. Dr. Gandy said: "Classically it has been the frontal lobe damage that leads to emotional disturbance. Now we know the temporal lobes can play similar roles."

www.pnas.org/content/110/24/9944.abstract?sid=6a3b68b0-c7e7-4d9b-9d04-c56e04309d

6 June: Atrial fibrillation presages cognitive decline

A new longitudinal study shows that people with atrial fibrillation (a rapid and irregular heartbeat) experience faster cognitive decline than people without the condition.

Dr. Evan Thacker, an epidemiologist at the University of Alabama at Birmingham, led the analysis of 5,150 people aged 65 years and older who were enrolled in the U.S. Cardiovascular Health Study. They did not have atrial fibrillation or a history of stroke at baseline.

552 of the participants developed incident atrial fibrillation during an average of seven years of follow-up. Compared to healthy peers, their memory test scores declined faster after developing the condition.

Dr. Thacker said: “Our study shows that problems with memory may start earlier in people who have atrial fibrillation. This means that heart health is an important factor related to brain health.”

www.neurology.org/content/early/2013/06/05/WNL.0b013e31829a33d1.shor t?sid=66367562-a1aa-4504-a5d5-69961780321c

10 June: Hypoglycaemia is a risk factor for dementia

A new study from the University of California in San Francisco (UCSF) shows that diabetics with episodes of significant hypoglycaemia, or low blood sugar, have twice the chance of developing dementia.

Researchers collected data on 783 diabetic patients aged 70-79 and free of dementia at the start of the study in 1997. Over an average of 12 years of follow-up, participants took periodic tests of mental ability.

The results showed that people who were hospitalised for severe hypoglycaemia had twice the risk of developing dementia compared with those who did not. In addition, people with dementia were more than twice as likely to have severe hypoglycaemia.

The research team was led by Dr. Kristine Yaffe, study author and Professor of Psychiatry, Neurology and Epidemiology at UCSF. While the exact reason is unknown, she theorised that hypoglycaemia may reduce the brain’s supply of sugar to a point that causes some brain damage.


13 June: Lilly ends BACE trial for AD

On 13 June, Lilly announced that it stopped its Phase 2 clinical trial of LY2886721, a beta secretase inhibitor (BACE) in testing for Alzheimer’s disease.

The trial was halted when monitors detected abnormal liver biochemical tests. However, Lilly stated that it does not currently believe that the abnormal tests are related to the BACE mechanism.
15 June: NAP protects and restores microtubule functions

A research team from Tel Aviv University (TAU) has developed a drug called NAP or Davunetide that protects and restores microtubule function inside cells.

Microtubules are organised in networks that maintain cell structure and act as highways for intracellular and extracellular transporters. However, neurodegenerative diseases cause this network to break down, resulting in hindered motor abilities and cognitive function.

NAP is a peptide derived from the ADNP protein, which regulates hundreds of genes and is essential for brain formation, memory, and behaviour. In this study, NAP was observed to maintain or revive the transport of proteins and other materials in cells, thus alleviating symptoms associated with neurodegeneration.

The researchers were led by Prof Illana Gozes, Director of TAU's Adams Super Center for Brain Studies. They used two different animal models with microtubule damage. The first group was made up of normal mice whose microtubule system was broken down through the use of a compound. The second group were genetically-engineered mouse models of ALS, in which the microtubule system was chronically damaged. In both groups, half the mice were given a single NAP injection while the control half were not.

The results showed that NAP maintained or revived the transport of proteins and other materials in cells, ameliorating symptoms associated with neurodegeneration.

www.nature.com/mp/journal/v18/n7/full/mp201332a.html

18 June: New concussion-dementia link causes dispute

Researchers at the University of Pittsburgh School of Medicine have concluded that concussion can lead to damage in the white matter of the brain that resembles abnormalities of early Alzheimer’s disease. They added that about 15% of concussion patients suffer persistent neurological symptoms.

White matter is the tissue through which messages pass between different areas of grey matter within the brain and spinal cord. The researchers reviewed past brain scans of 64 people who had suffered a concussion, and compared the scans to symptoms reported by concussed patients - particularly symptoms of Alzheimer’s disease.

The results showed a significant correlation between high concussion symptom scores and reduced water movement in the parts of the brain’s white matter related to auditory processing and sleep-wake disturbances. In addition, the distribution of white matter abnormalities in mildly concussed patients resembled the distribution of abnormalities in people with Alzheimer’s disease.

Dr. Saeed Fakhran, study author and Assistant Professor of Radiology at Pittsburgh, said: “The previous thinking before was you get a concussion, and that causes a certain damage from bopping your head and you get these symptoms. We found it acts as a kind of trigger, and lights a fuse that causes a neurodegenerative cascade that causes all these symptoms down the line. Once you've hit your head, the injury isn’t done.”

The findings drew immediate criticism from experts who believe the researchers went too far in trying to draw a link between concussion damage and the chronic damage found in Alzheimer’s disease. Dr. Ken Podell, a Neuropsychologist at the Methodist Concussion Center in Houston, said: “It’s very inconclusive at this time, and there’s no clinical application of this at this point of time.”

Dr. Ron Petersen, Director of the Mayo Alzheimer’s Disease Research Center, said: “It’s an interesting observation, but I think they are making a leap that the pattern of changes they see on the scan are indicative of what we see in Alzheimer’s disease.”

The study authors agreed that their findings are tentative. They would like to see more research that will further explore this potential link.

http://radiology.rsna.org/content/early/2013/06/04/radiol.13122343.abstrac t?sid=9958a69e-abb4-4fcb-8c0f-06252b3a80b2

www.alzheimer-europe.org/ Donation

19 June: Silent strokes are strongly linked to cognitive decline

A new American population study shows a significant link between people experiencing symptoms of “silent” strokes whose symptoms resolve quickly and the onset of cognitive decline.

The study followed 23,830 people of average age 64 who had no memory problems and who had never had a stroke. They completed a stroke symptoms questionnaire at the start of the study and every six months for at least two years. The participants’ memory and thinking skills were also tested yearly. During the study, 7,223 people developed stroke symptoms.

The bi-racial study found that Caucasians who had stroke symptoms were twice as likely to develop cognitive problems (11%) than Caucasians who did not have stroke symptoms (5%). African-Americans who had stroke symptoms were nearly 70% as likely to develop thinking problems (16%) as African-Americans who did not have stroke symptoms (about 10%).

This study was led by Dr. Brenda Kelley, Associate Professor of Neurology at the University of Cincinnati, along with researchers from the University of Alabama (Birmingham) and Indiana University School of Medicine.

Dr. James Pickett, Head of Research for the UK Alzheimer's Society, commented: “People can think of mini-strokes as a temporary medical problem, yet this research warns us of the lasting damage silent strokes can have on the brain. This study shows how even symptoms of a mini-stroke can still dramatically increase your risk of long term cognitive decline.” The Alzheimer's Society was not involved in the study.

www.neurology.org/content/early/2013/06/19/WNL.0b013e31829a352e.short?sid=df1bda97-6309-428b-9754-16814f3c20eb

www.alzheimer-europe.org/ Donation
20 June: Scientists present high-resolution 3D brain model

An international team of scientists has presented the first high-resolution 3D digital brain model.

"Big Brain" is based on 7,400 sections from the brain of a deceased 65-year-old woman, each half the thickness of a human hair. Each slice was stained to bring out the anatomical detail and then scanned into a computer in high definition. A total of 80 billion neurons were captured in this ten year process.

Prof Paul Fletcher, a Psychiatrist at Cambridge University, said that Big Brain will allow him to see details at the level at which brain computations take place. He said: "We will be able to study the responses seen in people and map it on to an atlas that goes close to the individual layers of the brain's cortex, to the very cells themselves".

Big Brain will be made available to neuroscientists worldwide. It is one of several large brain mapping projects, such as the Human Connectome Project in the US and the Human Brain Project programme in the EU.

www.sciencemag.org/content/340/6139/1472.abstract

27 June: New synthetic molecule improves memory in mouse models

A new study shows that a synthetic molecule called MW108 can reduce the activity of enzymes called CNS-active kinase inhibitors that are thought to cause neuron destruction.

These enzymes modify the activity of other proteins through phosphorylation, i.e. by chemically adding phosphate ions to them. The plaque associated with Alzheimer’s disease is believed to consist of phosphorylated beta amyloid.

Scientists led by Dr. Martin Watterson, Professor of Molecular Biology and Biochemistry at Northwestern University (Illinois), tested the effects of MW108 on Alzheimer’s mouse models and also brain slices. Live mice that were treated with MW108 showed significant memory improvements in water maze tests, while brain slices showed higher levels of activity and reduced decay.

www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0066226

28 June: Amylin protein may be a new AD biomarker

Researchers from the University of California in Davis (UCD) have shown that an amyloid protein called amylin may be a new biomarker for Alzheimer’s disease.

Amylin (IAPP - islet amyloid polypeptide) is a hormone produced by the pancreas along with insulin. It circulates in the bloodstream, acting to regulate blood glucose levels and a high level of amylin in the pancreas is a hallmark of type 2 diabetes. The UC scientists have demonstrated that amylin also accumulates in the brains of diabetics and people with dementia. The hormone creates its own deposits and has also been detected as a component of amyloid plaque.

The team was led by Dr. Charles DeCarli, Professor of Neurology at UCD. He said: “We’ve known for a long time that diabetes hurts the brain, and there has been a lot of speculation about why that occurs, but there has been no conclusive evidence until now. "This research is the first to provide clear evidence that amylin gets into the brain itself and that it forms plaques that are just like the amyloid beta that has been thought to be the cause of Alzheimer’s disease. In fact, the amylin looks like the amyloid beta protein, and they both interact. That’s why we’re calling it the second amyloid of Alzheimer’s disease.”

The research was conducted using tissue from the brains of individuals over 65 donated to UCD: 15 people with Alzheimer’s disease and type 2 diabetes, 14 people with Alzheimer’s disease without diabetes and 13 healthy controls. Scientists found amylin deposits in the grey matter of the diabetic patients with dementia, as well as in the walls of their cerebral blood vessels. They did not find any deposits in the brains of the healthy control subjects.


28 June: EMA restricts medicines with ergot derivatives

The European Medicines Agency’s Committee for Medicinal Products for Human Use (CHMP) has recommended restricting the use of medicines containing ergot derivatives. These medicines should no longer be used to treat several conditions involving blood circulation problems or problems with memory and sensation, or to prevent migraine headaches, since the risks are greater than the benefits in these indications.

This is based on a review of data showing an increased risk of fibrosis (formation of excess connective tissue that can damage organs and body structures) and ergotism (symptoms of ergot poisoning, such as spasms and obstructed blood circulation) with these medicines.

Medicines containing substances known as ergot derivatives can have serious side effects, called fibrosis and ergotism. As a result, they should no longer be used in the EU to treat a number of conditions involving blood circulation problems (that usually affect elderly patients) or problems with memory and sensation, or to prevent migraine headaches, as the risks outweigh the benefits.

Some ergot derivatives are approved in some EU Member States for use in other therapeutic indications, including other circulatory disorders, treatment of dementia (including Alzheimer’s disease) and treatment of acute migraine. These indications were not included in the CHMP review; therefore these products will remain authorised and may continue to be used in those indications.

The full text of the press release can be found on the agency’s website.


Newsletter: June 2013

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Dementia in Society

1 June: New competition aims to reward social innovation

A new competition called “Social innovation in ageing - the European award” has been launched by the King Baudouin Foundation, in association with La Caja Foundation and UniCredit Foundation.

The award intends to promote and support social innovation in the field of active and healthy ageing in Europe. The organisations are looking for social innovations in the field of active and healthy ageing which respond to social problems and needs in a sustainable and socially accepted way.

In a simple sense, social innovation aims at improving the lives of people through new solutions (products, processes, services, practices). An idea becomes an innovation through proving its effectiveness, generating impacts, challenging existing solutions and spreading.

Three winners in this competition will be awarded with EUR 10,000, 5,000 and 3,000. The deadline for applications is 15 July 2013. Registration information is available on the website shown below.

www.changemakers.com/innovationinageing

11 June: York will be a dementia friendly city

The English city of York is proceeding toward its goal of becoming a dementia-friendly city in order to meet the needs of an ageing population. According to the city council, the number of residents aged 85+ are expected to increase by 60% by 2020.

The city authorities began planning in mid-2011, with the aim of enabling elderly residents to live in their own homes and communities for as long as possible. Their major challenge was to manage an increasing service requirement while facing a 28% reduction in government funding. Nonetheless, a plan to develop two new care homes and a community village for older people was prepared and recently approved.

The community village will provide at least 72 homes, a quarter of which will be affordable housing, providing residents with care support from independent living through to end-of-life care. The care homes will be designed for those who are frail, elderly or have dementia. They are based on the household model providing a "home within a home": residents will live in self-contained households of six to 12 people with similar needs, and have a kitchen, living areas and enclosed garden.

These new homes will be a key part of York’s efforts to future-proof the city in line with the changing needs of its residents.

27 June: Judi Dench wins an Honorary Doctorate

On 27 June, Dame Judi Dench was awarded with an honorary doctorate from the University of Stirling for her contribution to film.
half of them will need help to cope with their daily activities.

Yet even today, families and public authorities are struggling to deliver and pay for high-quality care to elderly people with reduced physical and mental abilities. Moreover, few countries systematically measure whether long-term care is safe, effective, and meets the needs of care recipients.

This report is about how countries are addressing these challenges by developing measures to ensure a high quality of long-term care - care that is safe, effective and centred around the needs and abilities of the care recipients themselves.

www.oecd.org/els/health-systems/good-life-in-old-age.htm

14 June: Tasmanian university offers free online dementia course

The University of Tasmania is offering a free online course on dementia that is open to anyone with an interest in dementia.

"Understanding Dementia" is divided into 3 primary themes: the brain, the diseases and the person. It aims to provide understanding and improve quality of life across the trajectory of dementia for people with the condition, their families and carers.

The course builds upon the latest in international research on dementia and draws upon the expertise of Neuroscientists,Clinicians and Dementia Care Professionals at the Wicking Dementia Research and Education Centre.

"Understanding Dementia" provides an opportunity to engage with the perspectives of an international community on this major health issue, without requiring exams or assignments.

Further information is available on the university's website.

www.utas.edu.au/wicking/understanding-dementia

18 June: New edition of the Care Manual in French

Alzheimer Europe is pleased to announce the release of an updated edition of the French-language "Guide des Aidants", a guide for carers of people with dementia. The new edition features new information for Belgium, Luxembourg and Switzerland.

The 2013 Guide des Aidants can be obtained from Alzheimer Europe or its member associations in Belgium (La Ligue Alzheimer), France (France Alzheimer), Luxembourg (Association Luxembourg Alzheimer) and Switzerland (Association Alzheimer Suisse).

The update was made possible by funding from the Fondation Roger de Spoelberch, a Geneva-based foundation that promotes and funds research for neurodegenerative diseases.


20 June: University of Stirling publishes book on housing

The University of Stirling has released a new book entitled "improving the design of housing to assist people with dementia".

The book explains why environmental design is so important for people with dementia and goes on to describe the design features that follow from this. It describes modifications that are recommended within individual houses and flats, along with those that are helpful in communal internal spaces within specialist care housing units. There is also a section on designing outside spaces.

This book is one of a series to raise awareness of dementia design issues and improve the design of buildings used by people with dementia.

The book is available as a free download and can also be purchased as a paperback.

www.dementiashop.co.uk/products/Improving-design-housing-assist-people-with-dementia-free-download

21 June: New website explains dementia research and funding

Alzheimer's Research UK has launched a website called The Lab that provides information on new research and treatments for Alzheimer’s and related diseases. Visitors to the site can see a 3D virtual laboratory and hospital, with texts, slideshows and videos about how clinical research and new treatments are funded.

Tim Parry, Head of Communications and Public Affairs, said: "We wanted to explain the process from scientists having an idea, through to it becoming a treatment, and we wanted people to be able to move through the environment, rather than along it in a left-to-right timeline.

"People want to know what’s going on, and take heart from the fact that research is taking place, and scientists are out there trying to do something to help them. We’re very excited about the role The Lab can play in communicating this."

www.dementilab.org

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Alzheimer Europe Board
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### AE Calendar 2013

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting</th>
<th>AE Representative</th>
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<tbody>
<tr>
<td>9 July</td>
<td>European Parliament breakfast meeting “The challenges of Neurodegenerative Diseases in the workplace”</td>
<td>Annette and Jean</td>
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<tr>
<td>9-10 July</td>
<td>Executive of the European Working Group of People with Dementia (Brussels, Belgium)</td>
<td>Jean</td>
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<tr>
<td>13-18 July</td>
<td>Alzheimer’s Association International Conference (Boston, USA)</td>
<td>Jean</td>
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### Future Conferences

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting</th>
<th>Place</th>
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<tr>
<td>21-26 September 2013</td>
<td>XXII World Congress of Neurology, <a href="http://www.oegnt.at">www.oegnt.at</a></td>
<td>Vienna, Austria</td>
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<tr>
<td>2-4 October 2013</td>
<td>9th Congress of EUGAMS: Improving outcomes in geriatric medicine, <a href="http://www.eugams2013.it">www.eugams2013.it</a></td>
<td>Venice, Italy</td>
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<tr>
<td>3-9 October 2013</td>
<td>26th ECNP (European College of Neuropsychopharmacology), <a href="http://www.ecnp-congress.eu">www.ecnp-congress.eu</a></td>
<td>Barcelona, Spain</td>
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<tr>
<td>11-14 December 2013</td>
<td>The 16th Asia Pacific regional Conference of Alzheimer’s disease international, <a href="http://www.apc2013.hongkong-macau.com">www.apc2013.hongkong-macau.com</a></td>
<td>Hong Kong &amp; Macau, China</td>
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<tr>
<td>20-22 March 2014</td>
<td>58th Annual meeting of the German society for clinical neurophysiology and functional imaging (DGKN), <a href="http://www.dgkn-kongress.de">www.dgkn-kongress.de</a></td>
<td>Berlin, Germany</td>
</tr>
<tr>
<td>20-23 March 2014</td>
<td>30th International Congress of Clinical Neurophysiology of the IFCN (ICCN), <a href="http://www.iccn2014.de">www.iccn2014.de</a></td>
<td>Berlin, Germany</td>
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</table>
23rd Alzheimer Europe Conference
Living well in a dementia-friendly society
St. Julian’s, Malta, 10-12 October 2013
Mark the dates!

www.alzheimer-europe.org/conferences

The Alzheimer Europe newsletter arises from the 2013 Work Plan of Alzheimer Europe, which has received funding from the European Union in the framework of the Health Programme.