

## HIGHLIGHTS

- Call for abstracts now open for #36AEC! (page 4)
- Launch of the “Prevalence of Dementia in Europe 2025” report (page 3)
- New European projects
  - ACCESS-AD (page 6)
  - FIGARO (page 8)
- A new discussion paper on ethical use of technology for and by people with dementia (page 18)

## CONTENTS

WELCOME.....	1
ALZHEIMER EUROPE.....	2
AE NETWORKING.....	5
EU PROJECTS.....	6
MEMBERS OF THE EUROPEAN ALZHEIMER'S ALLIANCE.....	9
EUROPEAN ALZHEIMER'S ALLIANCE.....	9
EU DEVELOPMENTS.....	10
POLICY WATCH .....	10
SCIENCE WATCH.....	11
MEMBERS' NEWS .....	14
LIVING WITH DEMENTIA.....	17
NEW PUBLICATIONS AND RESOURCES.18	
AE CALENDAR 2026 .....	19
CONFERENCES 2026.....	21

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## WELCOME



2026 has opened with a very busy start in January, filled with new projects and productive meetings for Alzheimer Europe.

We hosted our first online Alzheimer's Association Academy of the year for our members and supporters. The session was attended by nearly 70 participants from 24 countries and was dedicated to the new *Prevalence of Dementia in Europe 2025* report, which builds on our previous work presented in the *Dementia in Europe Yearbook 2019*. The team provided an overview of the report's findings, including individual country profiles, with communication plans for sharing news of the report and its results with diverse audiences.

The release of our new prevalence report followed soon afterwards and has been met with great interest. I would like to thank our members for their invaluable support in helping to disseminate the report across their countries and networks during its launch period. Your commitment ensures that these results reach policymakers, researchers and healthcare professionals and people affected by dementia across Europe.

I am also pleased to share a new discussion paper on technology use by and for people with dementia, developed by the European Working Group of People with Dementia (EWPWD) and the European Dementia Carers Working Group

(EDCWG). It explores the opportunities and challenges of technology and outlines eight key issues to raise awareness and encourage developers, policymakers, providers, funders and users to ensure technology respects the rights and inclusion of people with dementia.

This month also saw the launch of the ACCESS-AD and FIGARO projects, and we look forward to working closely with our consortium partners as these collaborations take shape and advance.

Alongside our European activities, we are also delighted to see progress at national level. I would also like to congratulate our colleagues in Poland, where the government has adopted a national dementia strategy, aimed at recognising the needs of people with dementia, and providing coordinated, multi-faceted actions to help people and their families in seven key areas.

Regarding events, together with our co-host, the Alzheimer Society of Ireland, we have launched the call for abstracts for the upcoming 36<sup>th</sup> Alzheimer Europe Conference in Dublin, which will take place from 27–29 October 2026. We look forward to receiving your abstract submissions!

Finally, we would like to congratulate Grazia Tomasini, our long-serving communications assistant, on her retirement, thank her for her many years of service and wish her all the very best for her new adventures.

On that note, I wish all of you, our readers and supporters, every success in 2026!

**Jean Georges, Executive Director**

## ALZHEIMER EUROPE

26 JANUARY:

### Ongoing challenges regarding accessibility and availability of clinical trials



Clinical trials are essential for advancing research in Alzheimer's disease and other dementias, yet taking part in them still remains out of reach for many. In a recent article published in January in Pharmaceutical Market Europe (PME), Project Officer Cindy Birck explains why improving access

to dementia clinical trials must become a shared European priority, addressing the ongoing limitations and presenting opportunities for more inclusive and effective trial environments for participants on a European level.

The current landscape shows that there are approximately 50 active Alzheimer's disease trials taking place in Europe, many of which are investigating treatments to slow disease progression or improve quality of life. Despite this, opportunities to participate are unevenly distributed. Trials are often concentrated in a small number of countries at specialised research centres located in urban or academic settings with a tendency of focussing on people in the earliest stages of the disease. As a result, many people living with dementia, particularly those in rural areas, smaller countries or under-represented communities, are excluded from research that could directly affect them.

Cindy also outlines that lack of clear information, complex procedures and logistical challenges continue to deter participation. To help address this, Alzheimer Europe has developed an online tool called [Clinical Trials Watch](#). Led by Cindy, it is designed to make information about dementia trials easier to find and easier to understand. Most importantly, people with lived experience of dementia have been closely involved in shaping the platform, ensuring it reflects real needs and concerns.

The article also points to promising solutions, such as greater use of decentralised trial designs, digital tools and home-based assessments which could reduce travel burdens and make studies more accessible. At the same time, stronger co-ordination across European regulatory systems and sustained investment in dementia research are crucial to creating a more inclusive research environment.

With the number of people living with dementia in Europe continuing to rise, improving access to clinical trials is not only a scientific necessity but an ethical responsibility. As Cindy concludes, meaningful progress will depend on collaboration,

transparency and a commitment to ensuring that no one is left behind in the search for better treatments.

The full article is available in the Pharmaceutical Market Europe Journal here: <https://pme.pmlive.com/articles/de7347c4-f739-11f0-b33d-4201ac1fa006?fullscreen=false>

27 JANUARY:

### Alzheimer Europe hosts a session of its popular online Alzheimer's Association Academy, dedicated to "The Prevalence of Dementia in Europe 2025"



On 27 January 2026, Alzheimer Europe hosted a session of its popular online Alzheimer's Association Academy, dedicated to "The Prevalence of Dementia in Europe 2025", exploring the new report of the same name, published on Wednesday 28 January.

The Academy is a series of online capacity-building workshops bringing together representatives of national Alzheimer's associations with members of the European Working Group of People with Dementia (EWGPWD) and European Dementia Carers Working Group (EDCWG), as well as representatives from pharmaceutical companies, to learn about dementia advocacy, care, policy, research and treatment.

The session on 27 January was the first Academy of 2026 and was moderated by Owen Miller, Policy Officer, Alzheimer Europe. He and colleagues Lukas Duffner, Project Officer, Christophe Bintener, Project Officer, and Angela Bradshaw, Director for Research, were responsible for authoring and compiling the report.

Owen welcomed close to 70 participants from 24 countries and seven companies to the session and presented the background and methodology for the report. Lukas followed, providing key points from the updated prevalence rates and numbers. Christophe gave a demonstration of the website data visualisations and breakdowns, which is available to

access on the Alzheimer Europe website as of 28 January. Margarita Reyes, Communications Officer, shared the communication and dissemination plans for the report and its findings.

The session was highly interactive, with questions and discussion with the audience throughout, and both the report and the presentations were highly appreciated by attendees. A huge thank you to all speakers and participants at the Academy of 27 January, for making this such an engaging session and a big thank you, also to the European Union's Citizens, Equality, Rights and Values (CERV) programme, without whom both the report itself, as well as our Academy sessions, would not be possible.

## 28 JANUARY:

### New Alzheimer Europe report projects 64% increase in dementia across Europe by 2050



On 28 January 2026, Alzheimer Europe launched "The Prevalence of Dementia in Europe 2025" report, which provides updated prevalence figures for the number of people living with dementia both for Europe as a whole, as well as the countries within. The report builds upon Alzheimer Europe's previous work in the "Dementia in Europe Yearbook 2019". Alzheimer Europe adopted the same methodology, seeking out community-based studies published since the Dementia in Europe Yearbook 2019, from which new prevalence rates across 5-year age bands were derived. These updated prevalence rates were then applied to population projections for 2025 and 2050 taken from the UN World Population Prospects (UN WPP) data 2024.

For 2025, the number of people living with dementia is 9,065,706 for EU27 countries and 12,122,979 for EU and non-EU countries. The report also estimates that by 2050, there will be 14,335,788 people with dementia in EU27 countries and 19,905,856 people with dementia in EU and non-EU countries combined. This means that, by 2050, the estimated number of people living with dementia will increase by 58% in the EU27 countries, and by 64% in EU and non-EU countries combined. To understand whether there had been any significant change in the estimated number of people with dementia, between 2019 and 2025, Alzheimer Europe used its estimates for EU27 countries, as a point of comparison. The overall numbers of people estimated to be living with dementia in the EU27 for the years 2025 and 2050, are broadly consistent across the

two reports. However, among men, consistently higher prevalence rates were observed in each of the 70+ age bands, but in particular for the 70-74 band. The picture for women was generally more mixed.

The projected increase in overall numbers reinforces the call that Alzheimer Europe and its member associations have been making for many years: EU and national decision-makers must take action to ensure that society supports people with the condition, their families and carers to live well as well as possible.

From a policy perspective, health and social care systems must have the necessary capacity and infrastructure to provide high-quality care and support to individuals living with dementia, from diagnosis through to end-of-life care.

Furthermore, research agendas must, as a matter of priority, give dementia the status it deserves, prioritising basic research to better understand the condition, clinical studies to develop diagnostics and treatments, and demographic research looking at the populations affected, allowing for improved system responses.

This report comes at a time when the future budget of the EU is being discussed and we can see that the proposals are moving away from the previous strong commitment to health, social affairs and research, and putting greater focus on defence and economic activities, under the scope of competitiveness. Alzheimer Europe's message for decision-makers at an EU and national level is clear: The number of people living with dementia will continue to grow over the coming decades. A failure to act now, to invest sufficiently in health, care and social protection systems, provide adequate support for research and implement strong preventive interventions, will exacerbate the challenges ahead.

Commenting on the publication of the report, Alzheimer Europe's Executive Director, Jean Georges, stated:

"The scale of the challenge posed by dementia across Europe is substantial and it is our sincere hope that our updated figures provide the impetus for decision-makers, both at the European and national levels, to prioritise dementia and ensure it is addressed across the domains of health, research, disability policy and support for informal carers.

In particular, policy makers must work to improve care services, make investments in health infrastructure for diagnosis and treatment, as well as help for family, carers and supporters of people with dementia. As part of this, they must take into consideration the changing demographics of the population and the prevalence of conditions such as dementia.

Our Helsinki Manifesto sets out a blueprint of actions, at the EU and national level, to improve the lives of people with dementia, their carers and families.

We reiterate the key calls from our Helsinki Manifesto: There is a clear need for a coordinated European Action Plan on Dementia and a dedicated research mission, each with ringfenced funding to ensure their proper implementation."

31 JANUARY:

Call for abstracts now open for the 36<sup>th</sup> Alzheimer Europe Conference in Dublin!



We are delighted to invite you to submit abstracts for the upcoming 36<sup>th</sup> Alzheimer Europe Conference! This year, our annual conference will take place from 27 to 29 October 2026 in Dublin, Ireland. We look forward to seeing you at #36AEC!

Alzheimer Europe and the Alzheimer Society of Ireland are calling for abstracts for oral and poster presentations on the following subjects:

#### Policy

- Dementia strategies
- Advocacy and campaigns
- The role and activities of national Alzheimer's associations
- Cost of dementia care and treatment
- Dementia care and support in rural areas
- Preparing for new treatments

#### Research

- Artificial intelligence
- Brain health and prevention
- Detection and diagnosis
- Treatment and medical management
- Translating research into practice

#### People

- Experiences of people with dementia
- Young carers of people with dementia
- Care work force
- Minority ethnic groups
- LGBTQ+ community
- Disabilities and dementia

#### Dementia and society

- Dementia-inclusive initiatives
- Combatting stigma and discrimination
- Ethical and legal issues in dementia
- Gender and dementia
- Sexuality and intimacy
- End-of-life approaches

#### Care approaches and services

- Assistive technologies
- Psychosocial interventions
- Home care
- Day care
- Residential care
- Hospital care

#### Dementia Researcher of the future:

- Innovative approaches to dementia

Learn more about the guidelines for writing and submitting abstracts here: [www.alzheimer-europe.org/conferences/2026-dublin/call-abstracts](http://www.alzheimer-europe.org/conferences/2026-dublin/call-abstracts)

Information about the conference is available at:  
[www.alzheimer-europe.org/conferences/2026-dublin](http://www.alzheimer-europe.org/conferences/2026-dublin)

## Help us give a voice to people with dementia



**Donate**



**@AlzheimerEurope**  
Non-profit NGO, making dementia a European priority.

- Learn about the Prevalence of Dementia in Europe 2025 Report
- Check out the Dementia in Europe Yearbook 2025
- Join our Public Involvement Pool
- Help us give a voice to people living with dementia
- Submit an abstract to the #36AEC Conference in Dublin
- Subscribe to our Newsletter

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## AE NETWORKING

8 JANUARY	Angela, Ana, Dianne and Faye attended the ACCESS-AD online kick-off meeting
14-15 JANUARY	Lukas attended the AI4Hope AGM in Sevilla, Spain. Dianne joined online
22 JANUARY	Sarah facilitated a meeting with the members of PREDICTOM's Public Ambassador Group
23 JANUARY	Soraya facilitated a meeting with the members of the DORIAN GRAY Public Involvement Board
27 JANUARY	Alzheimer Europe held a session of its online Alzheimer's Association Academy about "The Prevalence of Dementia in Europe 2025"
28 JANUARY	Dianne facilitated a meeting with representatives from AE member associations in German-speaking countries to develop the AE guide on sex and gender in German
29-30 JANUARY	Sarah and Chris participated in the FIGARO project General Assembly Meeting in Munich, Germany

## EU PROJECTS

27 DECEMBER:

New paper explores what “adherence” to dementia risk reduction interventions means to the public



A new open-access perspective article titled “This also matters to me: what does adherence to dementia risk reduction interventions mean to members of the public?” has recently been published in Aging Clinical and Experimental Research.

This publication represents a collaborative effort between three European research projects: EU-FINGERS, LETHE and Multi-MeMo and explores how people understand and experience adherence in the specific context of research-based multidomain lifestyle interventions to reduce dementia risk. Whilst several studies about adherence from the perspective of researchers have been published in the last decades, less is known about how the public, especially older adults, conceptualise and experience it. The present article draws upon perspectives provided by members of Advisory Boards established in three EU-funded research projects linked to the multimodal FINGER intervention model, in which Alzheimer Europe (AE) has been leading Public Involvement activities.

The discussions involved 23 members of the public (lay people with and without dementia) from nine European countries. Feedback was grouped in three overarching themes: (1) “Baking your own cake” which highlights the relevance and understandings of adherence from members of the public; (2) “Striking a balance” which refers to the complexity and influencing factors linked to adherence; and (3) “A two-way process” which emphasises the involvement of members of the public and the importance of clear communication and appropriate support throughout the intervention process. AE Public Involvement Lead Ana Diaz, Public Involvement Officer Sarah Campill and Project Officer Cindy Birck are authors of the paper!

<https://doi.org/10.1007/s40520-025-03288-x>

13 JANUARY:

IHI launches new initiative to support timely diagnosis and equitable treatment for Alzheimer’s disease across Europe

On 13 January, a new European project, ACCESS-AD was launched by the Innovative Health Initiative (IHI). ACCESS-AD aims to improve how people with Alzheimer’s disease are diagnosed, treated and managed by healthcare systems, with a strong focus on timely diagnosis and effective treatment regardless of where people live in Europe.



ACCESS-AD is a five-year programme co-led by Amsterdam UMC, Siemens Healthineers, King’s College London and Gates Ventures. It has a total budget of more than EUR 37 million, including approximately EUR 20 million in funding from the European Commission and around EUR 17 million from industry partners. The consortium brings together 30 organisations, including universities, hospitals, patient organisations, small and medium-sized enterprises, medical device manufacturers and pharmaceutical companies, reflecting the complexity of the challenges facing Alzheimer’s disease in Europe.

Alzheimer Europe plays an active role in the project as co-leader of a workstream focused on stakeholder engagement and Public Involvement. Alzheimer Europe will be helping to ensure that people living with Alzheimer’s disease and their carers are meaningfully involved throughout the project. This includes supporting Public Involvement activities, contributing to ethical reflections on new diagnostic and treatment approaches, engaging with key stakeholders, and helping to translate project results into policy-relevant insights at European and national level.

ACCESS-AD begins at a critical moment for the Alzheimer’s community. In 2025, the first medicines designed to slow the progression of Alzheimer’s disease were approved in Europe, marking an important breakthrough. However, many healthcare systems are struggling to put these scientific advances into everyday practice. Long waiting times for diagnosis, shortages of specialist staff and uneven access to advanced diagnostic tests mean that many people are still diagnosed and treated too late. At the same time, the number of people living with dementia continues to rise and is expected to exceed 19 million in Europe by 2050.

The project aims to help address these challenges by developing a practical framework for diagnosis and treatment that

can be applied across different healthcare systems. This framework combines brain imaging, blood-based biomarkers, digital tools and artificial intelligence to support clinicians in making faster and more accurate decisions. A key objective is to bring high-quality diagnosis and follow-up closer to patients, including outside major specialist centres. ACCESS-AD covers the full patient journey, from identifying early signs of disease to monitoring treatment over time and will also explore lifestyle and nutritional approaches that may support brain health. Real-world data from patients in different countries will play a central role, ensuring that solutions are grounded in everyday clinical practice and remain focused on the needs of people affected by Alzheimer's disease.

Read the full press release: [www.eurekalert.org/news-releases/1112308](http://www.eurekalert.org/news-releases/1112308)

Read more about ACCESS-AD: [www.access-ad.org](http://www.access-ad.org)

#### 19 JANUARY:

### REBALANCE project shares new informative materials on ethics, preclinical research, and focused ultrasound

As part of the REBALANCE project, the consortium has developed a new set of accessible informative materials designed for people living with dementia, their supporters, and wider audiences interested in understanding how neurodegenerative research is conducted, what ethical considerations it involves, and how emerging technologies are being explored.

The materials were developed through a collaborative and iterative process, made possible by the active participation and support of Alzheimer Europe, as well as people living with dementia and their supporters. Sarah Campill (Alzheimer Europe) shared valuable insights and best practices on Public Involvement across Europe, helping to ground the materials in existing experience and standards. Chris Roberts, a former member of the European Working Group of People with Dementia (EWGPWD), and his partner and supporter Jayne Goodrick (Wales, UK) contributed their lived experiences of collaboration with researchers, ensuring that the materials address real concerns and expectations. Without these contributions, this work would not have been possible. Particular attention was paid to clarity and transparency.

#### Ethical aspects of preclinical research

The first set of materials focuses on research ethics, with particular attention to animal research in the field of neurodegenerative diseases. It explains why ethical considerations are central to scientific work, how animal welfare is protected, and what rules and oversight mechanisms researchers must follow. The materials also address common questions about

why animals are still used in some areas of brain research, while highlighting ongoing efforts to develop and use alternative methods wherever possible.

#### Preclinical and translational research

The second set focuses on preclinical and translational research as the early stages of developing new treatments. It explains how laboratory studies, animal models, and other methods help researchers understand disease mechanisms and assess safety before treatments can be tested in humans. Importantly, the materials also highlight the role that people with lived experience of neurodegenerative diseases and their caregivers can play in shaping research priorities: identifying unmet needs and supporting more relevant and responsible research.

#### Focused ultrasound (FUS)

The third set of materials introduces focused ultrasound (FUS) – an innovative, non-invasive technology that is already used in some areas of medicine and is currently being explored for neurodegenerative diseases. The materials explain how FUS works, what stage the research is at, and why it is considered a promising but still early-stage approach for Alzheimer's disease and other neurodegenerative diseases. They also address safety considerations and the need for further research before wider clinical research and use.

All informative materials are freely available online and can be accessed via the REBALANCE website under the "Additional materials" section: <https://uefconnect.uef.fi/en/rebalance/> By making these materials openly available, the REBALANCE project aims to support informed dialogue, realistic expectations, and more inclusive engagement with early-stage research among people living with dementia and their supporters.

The REBALANCE project is funded under the 2022 JPND Call for "Understanding the Mechanisms for Non-Pharmacological Interventions". The project is supported through the following national funding organisations: Academy of Finland, Finland; Brain Canada Foundation; Luxembourg National Research Fund; The Netherlands Organization for Health Research; French National Research Agency and the Latvian Council of Science. The project is being carried out between 01.04.2023–31.12.2026.



**22 JANUARY:****PREDICTOM shares project progress with advisory report members**

On 22 January, researchers from the PREDICTOM project met online with members of the three Public Involvement advisory boards for an informative update on the project's progress since its launch in early 2024. PREDICTOM is an international, cross-sector research initiative developing an AI-driven cognitive and biomarker screening platform to support earlier and more accurate identification of people at risk of dementia, enabling timely diagnosis and personalised prevention strategies.

The meeting brought together members of the European Public Ambassador Group, established by Alzheimer Europe and led by Sarah Campill, Public Involvement Officer; the Norwegian WiseAge group, established by SESAM (Centre for Age-Related Medicine, Stavanger University Hospital) and led by Elin Thuen; and a representative of the Spanish Consejo de Oro, coordinated by Laura Ferré González from the La Fe Health Research Institute in Valencia. This session offered an opportunity to reflect on how these groups' contributions have shaped project approaches, participant-facing materials, and other key outputs.

Following a presentation by Anna Katrine Brem and Zunera Khan, participants were invited to ask questions and discuss developments in more depth. The team highlighted how advisory group recommendations have been incorporated and addressed areas where limitations remain. Being open about such limitations is essential for maintaining trust and supporting meaningful Public Involvement. Members expressed their appreciation for ongoing opportunities to stay updated, understand how their input is used, and see the evolving impact of their involvement throughout the project's lifecycle.

To learn more about Public Involvement in PREDICTOM and the different advisory groups involved, please visit: [www.predictom.eu/public-involvement-user-impact-in-predictom](http://www.predictom.eu/public-involvement-user-impact-in-predictom)

This project has received funding from the Innovative Health Initiative Joint Undertaking under Grant Agreement No. 101132356. This Joint Undertaking receives support from the European Union's Horizon Europe research and innovation programme, COCIR, EFPIA, EuropaBio, MedTech Europe and Vaccines Europe. UK participants are supported by UKRI, and the Swiss participant is supported by the Swiss State Secretariat for Education, Research and Innovation.

**29 AND 30 JANUARY:****FIGARO members meet in Munich for first General Assembly meeting**

On 29 and 30 January, members of the FIGARO project met in Munich (Germany) for their first General Assembly meeting,

hosted by the German Center for Neurodegenerative Diseases (DZNE). FIGARO ("Finding Alzheimer's disease progression markers") is coordinated by Associate Professor Dr Betty Tijms at Amsterdam UMC and brings together partners in Germany, Norway, Luxembourg and Türkiye.

Alzheimer's disease is often treated as a single condition, yet it can vary substantially between individuals. Blood-based biomarkers are becoming useful tools for early screening, but analysing cerebrospinal fluid can provide a more direct view of biological changes linked to disease progression at an individual level. By identifying markers associated with progression and defining molecular subtypes, FIGARO aims to clarify biological processes and support approaches that may influence the course of disease. This could help identify people most likely to respond to new treatments and support monitoring of disease progression over time.

The meeting opened with a welcome and introduction by Stefan Lichtenthaler (Technical University of Munich (TUM) and DZNE), followed by 15-minute introductions from each partner. Alongside Betty Tijms, Frederika Malichová and Anne van Nifterick from AUMC, the participants included Tormod Fladby (University of Oslo), Sarah Campill and Christophe Bintener (Alzheimer Europe), Burcu Ekinci and Kemal Uğur Tüfekci (The Genc Neurodegeneration and Neuroprotection Laboratory) as well as Karsten Nalbach, Stephan Müller and Sarah Tschirner from DZNE.

A seminar on the basics of mass spectrometry covered sample preparation, measurement and quantification and data analysis and statistics. Participants also joined a guided tour of Munich city centre and shared dinner at a traditional Bavarian restaurant.

On the second day, partners discussed trial experiment mass spectrometry results and agreed next steps. They also reviewed coordination and planning across FIGARO work packages, took part in a lab tour and discussed public relations, including visibility and Public Involvement. The discussions focused on timelines, responsibilities and outputs across partners.



## MEMBERS OF THE EUROPEAN ALZHEIMER'S ALLIANCE



Currently, the total number of MEPs in the European Alzheimer's Alliance (EAA) stands at **89**, representing **22** Member States of the European Union and seven out of eight political groups in the European Parliament. Alzheimer Europe is grateful to the Co-Chairs of the EAA: Nina Carberry (EPP, Ireland); Tilly Metz (Greens/EFA, Luxembourg); Romana Jerković (S&D, Croatia); Sirpa Pietikäinen (EPP, Finland); Vladimir Prebilić (Greens/EFA, Slovenia); Hilde Vautmans (Renew Europe, Belgium) and Dainius Žalimas (Renew Europe, Lithuania) for their leadership and for hosting the organisation's European Parliament lunch debates on dementia. Alzheimer Europe would also like to thank the following MEPs for their support of the EAA:

**Belgium:** Kathleen van Brempt (S&D); Johan Van Overtveldt (ECR); Hilde Vautmans (Renew Europe). **Bulgaria:** Radan Kanev (EPP); Andrey Kovatchev (EPP); Ilhan Kyuchyuk (Renew Europe); Tsvetelina Penkova (S&D); Kristian Vigenin (S&D). **Croatia:** Biljana Borzan (S&D); Romana Jerković (S&D); Tonino Picula (S&D); Tomislav Sokol (EPP). **Cyprus:** Costas Mavrides (S&D). **Czechia:** Ondřej Dostál (NI); Tomáš Zdechovský (EPP). **Denmark:** Kira Marie Peter-Hansen (Greens/EFA); Christel Schaldemose (S&D). **Estonia:** Urmas Paet (Renew Europe). **Finland:** Maria Guzenina (S&D, Finland); Merja Kyllonen (The Left); Sirpa Pietikäinen (EPP). **France:** François-Xavier Bellamy (EPP); Mélissa Camara (Greens/EFA); Laurent Castillo (EPP); David Cormand (Greens/EFA); Marie Dauchy (PFE); Christophe Gomart (EPP); Catherine Griset (PFE); Céline Imart (EPP); Isabelle Le Callennec (EPP); Nadine Morano (EPP); Philippe Olivier (PFE); Mounir Satouri (Greens/EFA); Majdouline Sbai (Greens/EFA); Marie Toussaint (Greens/EFA). **Germany:** Alexandra Geese (Greens/EFA); Erik Marquardt (Greens/EFA); Angelika Niebler (EPP); Manuela Ripa (Greens/EFA); Terry Reintke (Greens/EFA). **Greece:** Tsiodras Dimitrios (EPP); Emmanouil (Manolis) Kefalogiannis (EPP); Nikos Papandreu (S&D); Elissavet Vozemberg-Vrionidi (EPP). **Hungary:** Tamás Deutsch (PFE); Enikő Győri (PFE); Kinga Gál (PFE); György Hölvényi (EPP); András Kulja (EPP). **Ireland:** Barry Andrews (Renew Europe); Lynn Boylan (The Left); Nina Carberry (EPP); Luke 'Ming' Flanagan (NI); Billy Kelleher (Renew Europe); Seán Kelly (EPP); Aodhán Ó Ríordáin (S&D); Maria Walsh (EPP). **Italy:** Brando Benifei (S&D); Caterina Chinnici (EPP); Carlo Fidanza (ECR); Aldo Patriciello (PFE). **Lithuania:** Vytenis Povilas Andriukaitis (S&D); Petras Aušrevičius (Renew Europe); Vilija Blinkevičiūtė (S&D); Liudas Mažylis (EPP); Dainius Žalimas (Renew Europe). **Luxembourg:** Marc Angel (S&D); Charles Goerens (Renew Europe); Tilly Metz (Greens/EFA); Isabel Wiseler-Lima (EPP). **Poland:** Elżbieta Katarzyna Łukacijewska (EPP); Michał Szczerba (EPP); Anna Zalewska (ECR). **Portugal:** Marta Temido (S&D); Catarina Martins (The Left). **Romania:** Vlad Vasile-Voiculescu (Renew Europe). **Slovenia:** Matjaž Nemeč (S&D); Irena Joveva (Renew Europe); Vladimir Prebilić (Greens/EFA); Marjan Šarec (Renew Europe); Romana Tomc (EPP); Milan Zver (EPP). **Spain:** Rosa Estarás Ferragut (EPP); Juan Fernando López Aguilar (S&D); Idoia Mendia (S&D); Diana Riba i Giner (Greens/EFA); Ana Miranda Paz (Greens/EFA). **Sweden:** Pär Holmgren (Greens/EFA); Jonas Sjöstedt (S&D)

## EUROPEAN ALZHEIMER'S ALLIANCE

10 DECEMBER:

**Tomislav Sokol MEP hosts a high-level event on the EU's Critical Medicines Act**



A high-level event on the Critical Medicines Act (CMA) was held in the European Parliament in Brussels, hosted by Tomislav Sokol, Member of the European Parliament and EP Rapporteur for the CMA. The meeting opened with speeches by Roberta Metsola, President of the European Parliament, Olivér Várhelyi, European Commissioner for Health, and Emer Cooke, Executive Director of the European Medicines Agency.

The CMA is an initiative that aims to strengthen the EU's resilience against medicine shortages by enhancing supply chain security, encouraging diversified manufacturing within Europe, and improving access to essential medicines. Discussions brought together policymakers, industry representatives, patient organisations, and supply-chain stakeholders, highlighting that robust and coordinated action is needed to address vulnerabilities in medicine supply beyond regulatory solutions alone.

The event included a panel discussion on "The role of the Critical Medicines Act in enhancing Europe's strategic autonomy, addressing medicine shortages, and boosting the competitiveness of the pharmaceutical industry." The panel brought together

representatives from EU institutions, national politics, and the pharmaceutical sector. Panellists were Lorena Boix Alonso, Deputy Director-General for Health at the DG SANTE; Adam Jarubas, Chair of the European Parliament's SANT Committee; Nathalie Moll, Director General of the European Federation of Pharmaceutical Industries and Associations; and Elisabeth Stampa, Vice President of Medicines for Europe.

The discussion focused on the objectives of the Critical Medicines Act, including improving the security of supply of critical medicines, strengthening European manufacturing capacity, and addressing persistent medicine shortages across Member States. Alzheimer Europe was represented at the meeting by our Director for Research, Angela Bradshaw.

## EU DEVELOPMENTS

17 DECEMBER:

### Alzheimer Europe signs Civil Society Europe open letter on cross-border associations



Alzheimer Europe has joined over 250 civil society organisations in signing an open letter coordinated by Civil Society Europe, calling for the European Commission to reverse its decision to withdraw the European Cross-Border Associations (ECBA) Directive.

The legislation would have allowed civil society organisations with members across Europe to be recognised and allowed to operate in all Member States. This would have promoted the creation of new associations, new jobs and stimulated GDP growth, whilst also strengthening the competitiveness of Europe, as well as supporting a sector that provides critical social services.

The open letter notes that as discussions in the Council were taking place and after the European Parliament voted strongly in favour of the proposal, the Commission proposed to remove the Directive in their 2026 work programme, despite no public call for its withdrawal having been made, and this not being among the options considered by the Council.

The letter further highlights the potential benefits of civil society organisations being recognised by ECBA legislation, including Cross-border civil protection units, mobile care units in cross-border regions, cross-country festivals and cultural events, common management and preservation of shared ecosystems and communities gathering patients treating rare diseases etc.

The letter has been sent to European Commission President Ursula von der Leyen and Executive Vice-President Stéphane Séjourné.

The full open letter is available at: <https://civilsocietyeurope.eu/wp-content/uploads/2026/01/Open-Letter-Stop-the-ECBA-Withdrawal.pdf>

## POLICY WATCH

17 DECEMBER:

### Poland adopts national dementia strategy



On 17 December 2025, the Council of Ministers adopted Resolution No. 173, on the "National Programme of Measures against Dementia, public policy until 2030". The National Programme aims to recognise the needs of people with dementia, to provide coordinated, multi-faceted actions to help people and their families, with a focus on seven areas:

1. Raising public awareness
2. Reducing the risk of developing the disease
3. Supporting early diagnosis
4. Treatment, care, and support for patients
5. Support for caregivers
6. Building data collection systems
7. Scientific research

Further information on the status of dementia policy in Poland can be found at: [www.gov.pl/web/zdrowie/pierwszy-program-dzialan-wobec-chorob-otepiennych-przyjety](http://www.gov.pl/web/zdrowie/pierwszy-program-dzialan-wobec-chorob-otepiennych-przyjety)

## SCIENCE WATCH

1 JANUARY:

### Is there a link between high-fat cheese and the risk for dementia?

Diet is a modifiable risk factor for dementia. Dairy products, which vary in processing methods, fat and nutrient content, are an important component of traditional Western diets. Although they have been extensively studied for their associations with various health outcomes, their association with dementia is still debated. In a recent study published in the journal *Neurology*, a team of researchers led by Prof. Emily Sonestedt (Lund University, Sweden), examined the association between high-fat and low-fat dairy intake and dementia risk.



The study included 27,670 adults in Sweden, who were part of the Malmö Diet and Cancer cohort. At the beginning of the study, participants were an average age of 58.1 (61% female). The participants of the cohort underwent dietary assessments at baseline (1991-1996). In order to track eating habits, participants recorded everything they consumed over one week and answered questions about how frequently they ate specific foods during the previous years and discussed their food preparation with the researchers. Participants were then followed for about 25 years. During that time, researchers identified the number of participants who developed dementia through the Swedish National Patient Register.

The first part of the study focused on the daily consumption of high-fat cheese. The team of researchers compared participants who ate 50 grams of high-fat cheese or more per day with those who ate less than 15 grams per day. After adjusting for differences in age, sex, education and diet quality, higher consumption of high-fat cheese was associated with a 13% lower risk of dementia. For the second part of the study, researchers compared people who consumed 20 grams of high-fat cream or more per day with those who did not consume any. Researchers found that daily consumption of high-fat cream was linked to a 16% lower risk of dementia compared with consuming none. The research team also studied the relationship between dementia risk and other dairy foods. However, they found no association between dementia and consumption of low-fat cheese, low-fat cream, high- or low-fat milk, butter or fermented milk.

The results highlighted that it might be more important to focus on the source of the fat rather than on the total dietary fat. However, this study has five important limitations. The first one is that the participants lived in Sweden. Dietary habits differ between regions, and the source and the quality of the dairy are different too. For example, what the animal eats determines what is in the milk and, therefore, what is in the cheese. Dairy from grass-fed animals usually contains higher levels of omega-3 fatty acids, which are protective for the brain. The second important limitation of this study is that diet was assessed only once at baseline and changes in consumption may have occurred over the follow-up period. The third limitation is that this study did not collect detailed information on cheese and cream intake, such as specific types or ways of consuming them. The fourth one, the baseline cognitive status of participants, which is also a predictor of dementia, was not assessed either. And finally, dementia cases were identified through a registry record, therefore, any person who did not seek diagnosis may have been missed. Consequently, it is important to be very cautious about the results in this article and avoid generalising them to other populations.

[www.neurology.org/doi/10.1212/WNL.0000000000214343](http://www.neurology.org/doi/10.1212/WNL.0000000000214343)

5 JANUARY:

### New study investigates finger-prick blood test for measuring AD biomarkers



Blood biomarkers have emerged as accurate tools for detecting Alzheimer's disease (AD) pathology, offering a minimally invasive alternative to traditional diagnostic methods such as imaging and cerebrospinal fluid analysis. A new study recently published in *Nature Medicine*

investigates the feasibility of using dried blood collected via simple finger prick to detect AD biomarker pathology. The study, part of the DROP-AD project, was led by investigators from the University of Gothenburg and enrolled 337 participants from 7 medical centres in Europe who took their blood by the finger prick method. Participants had an average age of 70.8 years, with 27.6% living with mild cognitive impairment and 14.6% diagnosed with AD. The main goal of the study was to see how well blood-spot measurements of p-tau217, widely viewed as the most accurate blood biomarker

of early amyloid pathology, stack up against conventional blood draws.

Findings showed that the levels of p-tau217 in these samples were closely matched to those found in regular blood samples and the degree of agreement was 86%. Two other biomarkers for Alzheimer's disease, GFAP and NfL, also showed strong agreement.

"While we're still years away from clinical use, we're opening doors to research that was previously impossible – studying diverse populations, conducting large-scale screening studies, and including communities that have been historically underrepresented in Alzheimer's research", said Nicholas Ashton.

More information on this study is available here: <https://doi.org/10.1038/s41591-025-04080-0>

#### 6 JANUARY:

### Art-based knowledge translation successfully integrates culturally relevant storytelling with public health outreach and education



A recent research article within the journal *Alzheimer and Dementia – Translational Research and Clinical Interventions* describes the impact of an art-based knowledge translation initiative, named Unforgettable, on underrepresented groups and communities. This initiative employed culturally relevant art and live performances to engage a wide range of people with the view to raise awareness about Alzheimer's disease and related dementias, reduce stigma, and enhance willingness to participate in clinical trials. Underrepresented populations, such as older Black African Americans, are often at greater risk of developing Alzheimer's disease and related dementias, however, they are less likely to receive a diagnosis and experience greater delays in management. Further, they are less likely to receive expensive novel therapies due to socioeconomic factors. Part of the problem in obtaining a diagnosis and accessing clinical trials is low trust amongst these communities, which has arisen because of historical injustices, as well as systemic inequalities.

Unforgettable aimed to address some of these problems, the development team also engaged the support of the Alzheimer's Association Healthy Equity Coalition to enhance implementation. Surveys were circulated after performances, analysis of the surveys collected demonstrated that amongst 334 people from ten cities who attended the event, satisfaction levels were high, and over 80% agreed or strongly agreed that the arts-based intervention gave them insights and knowledge on the importance of: 1) recognising signs and symptoms of Alzheimer's disease and related dementias; 2) finding support and 3) taking part in clinical trials. The authors acknowledged some of the limitations of their investigation, notably weaknesses in the data collection process which did not have a 'before' measure and was based on convenience (i.e. willingness to take part in the survey). Nevertheless, they conclude that the Unforgettable initiative holds promise in reducing health disparities.

More information on this study is available here: <https://pmc.ncbi.nlm.nih.gov/articles/PMC12746347/>

#### 6 JANUARY:

### Survey finds training gaps for monitoring amyloid-related imaging abnormalities



On 6 January, the European Society of Neuroradiology (ESNR)/European Academy of Neurology (EAN) ARIA Working Group published an article on readiness for amyloid-related imaging abnormalities (ARIA) monitoring in the *Radiological Education* journal.

Amyloid-lowering immunotherapies aimed to slow the progression of Alzheimer's disease can cause brain bleeds and swelling, which require brain MRI for detection and monitoring. The Working Group ran a European survey to assess readiness for this logistical challenge and the need for further education.

An online 32-item questionnaire was distributed to ESNR and EAN members. Between June and July 2024, 422 responses were collected from 41 European countries (47% neurologists, 51% (neuro)radiologists). Respondents included 15% residents and 58% worked in academic hospitals.

Sixty-nine percent reported familiarity with amyloid-related imaging abnormalities, and 60% reported understanding risk factors. Confidence in evaluating amyloid-related imaging abnormalities-edema/effusion and amyloid-related imaging abnormalities-haemorrhage was reported by 60% and 69%, with (neuro)radiologists more confident than neurologists. Thirty-four percent felt poorly equipped to meet logistical demands and 82% reported lacking a dedicated imaging protocol. Barriers included limited organisational adaptability and radiology expertise. Seventy-two percent saw potential in support from artificial intelligence approaches and 93% wanted further training on monitoring.

The article has been published open access and can be read here: <https://doi.org/10.1007/s00330-025-12214-8>

#### 9 JANUARY:

#### The proportion of Alzheimer's disease attributable to apolipoprotein E



On 9 January, an international team of researchers from the UK, Finland and Norway published an article on the proportion of Alzheimer's disease attributable to apolipoprotein E in the *npj dementia* journal. The authors note that variation in the APOE gene strongly affects Alzheimer's disease (AD) risk, but that the proportion of AD burden attributable to this variation requires clarification, which would help to elucidate the scope of strategies targeting apolipoprotein E (APOE) for AD prevention and treatment.

To estimate the extent to which clinically diagnosed AD, AD neuropathology and all-cause dementia are attributable to common APOE alleles, the team analysed four large datasets. They used linked electronic health records to ascertain AD and all-cause dementia in two cohorts aged 60 and over: 171,105 participants from UK Biobank and 289,150 participants from FinnGen. They examined amyloid- $\beta$  positivity using amyloid positron emission tomography scans from 4,415 participants in the A4 Study. They also analysed neuropathologically confirmed AD in the Alzheimer's Disease Genetics Consortium, comparing cases with pathology-negative, cognitively intact controls (N=5,007).

In each analysis, they estimated outcome risk among carriers of APOE risk alleles  $\epsilon$ 3 and  $\epsilon$ 4 relative to individuals with an  $\epsilon$ 2/ $\epsilon$ 2 genotype, then calculated attributable fractions for  $\epsilon$ 3 and  $\epsilon$ 4. For AD, attributable fractions ranged from 71.5% (95% confidence interval 54.9% to 81.7%) in FinnGen to 92.7% (82.4 to 96.5%) in the Alzheimer's Disease Genetics Consortium. In A4, 85.4% (17.5 to 94.5%) of cerebral amyloidosis was attributable to  $\epsilon$ 3 and  $\epsilon$ 4. For all-cause dementia, attributable fractions were 44.4% (95% confidence interval 18.2% to 62.2%) in UK Biobank and 45.6% (30.6% to 56.9%) in FinnGen. The authors state that without strong underlying risks from APOE  $\epsilon$ 3 and  $\epsilon$ 4, almost all AD and half of all dementia would not occur and that intervening on APOE should be prioritised to facilitate dementia prevention.

The article has been published open access and can be read here: [www.nature.com/articles/s44400-025-00045-9](http://www.nature.com/articles/s44400-025-00045-9)

#### 19 JANUARY:

#### "From Ageing Biology to Alzheimer's Therapy: Integrating Geroscience, Lifestyle and Pharmacological Strategies" published in latest edition of touchREVIEWS in Neurology journal



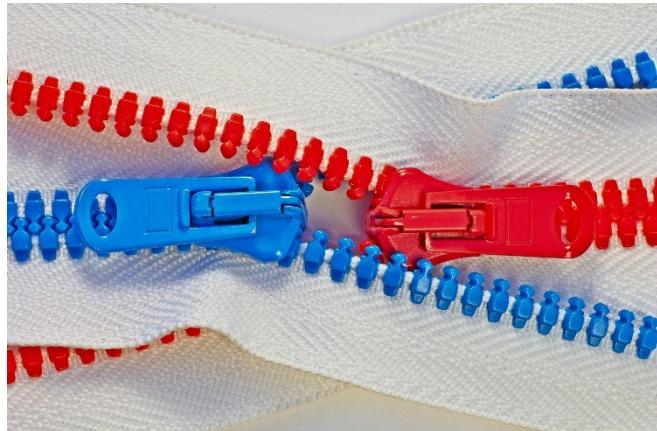
TouchNEUROLOGY recently published an article titled "From Ageing Biology to Alzheimer's Therapy: Integrating Geroscience, Lifestyle and Pharmacological Strategies" in its "touchREVIEWS in Neurology" journal.

The article, authored by Khaled Abdel-sater, investigates how ageing speeds up the pathophysiology of Alzheimer's disease and evaluates emerging geroscience-based interventions targeting biological ageing mechanisms to delay or prevent cognitive decline.

<https://touchneurology.com/alzheimers-disease-dementia/journal-articles/from-ageing-biology-to-alzheimers-therapy-integrating-geroscience-lifestyle-and-pharmacological-strategies/>

22 JANUARY:

## Biomarkers and behaviour: A disconnect?



In a recent publication by Clark, Erickson, Basche and Chin, the authors discuss health behaviours of cognitively healthy adults after receiving their amyloid- $\beta$  (A $\beta$ ) positron emission tomography (PET) results. Amyloid- $\beta$  is a protein that can accumulate in the brain in Alzheimer's disease, and PET imaging is a scan that allows clinicians to visualise whether these abnormal deposits are present.

Biomarker testing, meaning the measurement of biological indicators of disease such as brain protein buildup, may be the key to the timely diagnosis of Alzheimer's disease, as it allows for detection of pathophysiologic changes before symptom onset. Previous research suggested that cognitively healthy

adults who are prepared for biomarker disclosure generally understand their results and deal well with the disclosure process.

Based on a US cohort study with older adults (65-82 years) recruited from the Wisconsin Registry for Alzheimer Prevention, participants were given their PET results indicating high (positive) or low (negative) A $\beta$  and completed a dementia risk-reduction counselling visit. During the post-disclosure counselling session, standard brain-health recommendations, the participants' medical history and risk factors, as well as the development of a brain-health focused goal were discussed.

The authors found that despite participants reporting to be more motivated to improve their brain health after learning their PET scan results, they did not show meaningful increases in actual health behaviours, such as physical activity, social activity, stress reduction activity or sleep quality. Interestingly, participants were reported engaging in fewer cognitive-stimulating activities seven months after risk disclosure. The findings are all based entirely on self-reported data collected before and seven months after participants received their PET scan results.

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2842111>

## MEMBERS' NEWS

16 DECEMBER

### ProPEDeAMCI project Kick off meeting



The ProPEDeAMCI project, titled "Promoting the Effects of Physical Exercise (PE) on Cognitive, Behavioral, Physical, and Functional Symptoms of People Diagnosed with Mild Cognitive Impairment (MCI), Alzheimer's Disease (AD), or other Dementias," represents an innovative European initiative under the Erasmus+ Sports Program's Cooperation Partnerships Ac-

tion. The project kickstarted with an online meeting of partners from nine European Union countries (Greece, Cyprus, Italy, Spain, Portugal, Belgium, the Netherlands, Slovenia, and Czechia) and is coordinated by Alzheimer Hellas demonstrating a commitment to addressing one of Europe's most pressing health challenges. As an ultimate objective, the ProPEDeAMCI project aims to secure that people with MCI, AD, and other Dementias will experience the maintenance of the highest possible level of cognitive, behavioural, and physical functioning and improved quality of life. Beyond the immediate impact, ProPEDeAMCI will provide research-backed policy recommendations to European health and sports authorities, contributing to the long-term integration of structured physical exercise programs into dementia care policies. Through the combination of evidence-based guidelines, professional training, and accessible online resources, the project seeks to create a sustainable impact in the field of dementia care and rehabilitation, fundamentally transforming how health professionals approach cognitive and physical health maintenance in individuals suffering from cognitive decline.

**18 DECEMBER**

## Alzheimer's Association of Türkiye President visits Minister of Health to talk about AD



On 18 December 2025, as part of a visit by Dilek Şahinöz, President of the Alzheimer's Association of Türkiye, to Kemal Memişoğlu, Turkish Minister of Health, an important meeting was held regarding Alzheimer's disease. During the meeting, the societal impact of the disease and the challenges faced by people living with Alzheimer's and their caregivers were discussed.

The National Alzheimer's Strategic Plan was presented, and solution-oriented priority areas were addressed. The minister warmly received our gift of Turkish coffee cups imprinted with the motto #Lets talk about Alzheimer's. They agreed to continue working collaboratively to expand Day Care Centres and to strengthen support services.

**22 JANUARY**

## "Memory and Creativity" – A Successful Two-Day Mosaic Exhibition in Thessaloniki

The power of art as a means of memory, expression, and hope was highlighted through the successful two-day cultural event titled "Mosaic: Memory and Creativity", organised by the Panhellenic Federation of Alzheimer's Disease and Related Disorders (Alzheimer Hellas). The event took place on January 22–23, 2026, at the Vafopoulio Cultural Center in Thessaloniki and attracted significant public and media interest.

The exhibition featured approximately 100 mosaic artworks created by beneficiaries of Alzheimer Hellas, as part of the weekly mosaic workshops held every Tuesday at the organisation's "Agia Eleni" day care unit. Alongside the exhibition, visitors also had the opportunity to attend a mosaic-making workshop, experiencing firsthand the therapeutic and creative value of this art form.

According to Chrysanthi Kidroli, who is responsible for the teaching and curation of both the workshops and the exhibition, this was the first time that the works were presented in a public venue outside the facilities of Alzheimer Hellas, with the financial support of the Greek Ministry of Culture. The mosaic workshops have been running for several years and serve as a valuable form of cognitive stimulation and dementia prevention. Participants, aged between 65 and 80, create artworks inspired by a wide range of themes, including ancient motifs, nature, portraits, religious imagery, and everyday objects.



The official opening ceremony took place on Thursday, January 22, at 18:30, followed by a lecture entitled "Is Dementia Prevention Feasible Today?" delivered by Emeritus Professor of Neurology Magda Tsolaki. The event was generously supported by sponsors Masoutis and AMS Music School & Studio. Through this inspiring initiative, the Panhellenic Federation successfully demonstrated how art can enhance mental well-being, encourage social interaction, and promote awareness about Alzheimer's disease, leaving a lasting impression on visitors and participants alike.

**22 JANUARY**

## Marco Blom honoured with Marco Blom Thesis Award



On Thursday January 22<sup>nd</sup>, Alzheimer Nederland organised a symposium in honour of Marco Blom's farewell. He leaves a legacy in terms of scientific infrastructure and results both in the Netherlands as well as abroad. To honour Marco's contribution, Alzheimer Nederland has renamed their prize for best thesis to the 'Marco Blom Thesis Prize'.

During the symposium, we looked back at 30 years of Alzheimer Nederland and Marco's achievements. His career parallels the huge growth and maturation of Alzheimer Nederland as an organisation and the field of dementia research, both nationally and internationally. In recent years, he served as the Scientific Director of Alzheimer Nederland.

Thirty years ago, the concept of the Alzheimer Café came to life. It started with one Café in Leiden. Today, there are almost 300 Cafés in the Netherlands and over 50 other countries have adopted the concept of Alzheimer Café.

In 2000, the first Alzheimer Centres combining top referent patient care and world class research were established in Maastricht and Amsterdam. To date, there are six Alzheimer Centres throughout the Netherlands. The Deltaplan Dementia, predecessor of the current National Dementia Strategy, originated as a bottom-up initiative from the field and was

launched in 2013. This was an important step forward because it had an inherent public-private character, encompassing both research and care along with a dementia friendly society. Currently, over 750,000 Dutch citizens have completed the online dementia friendly training, which is also hosted by Alzheimer Nederland.

Alzheimer Nederland has a long history of funding dementia research in a wide range of research topics, and it has been evident that investments in research have skyrocketed over the years. One important focus within our research programme is to support early-stage researchers. We do this with several grants, activities and prizes. As Marco is a very much appreciated colleague in the field of dementia research, both nationally and internationally, we decided to honour his contribution and rename the prize for best thesis after him.

Marco is a current member of the Alzheimer Europe Board and will continue in this position. Following his character of building bridges, Marco's advice for the future is to continue and strengthen the collaboration between scientific research, society, government and business partners.



**26 JANUARY**

## Alzheimer Slovenija presents a new digital assistant: Spominko AI

Alzheimer Slovenija is happy to keep pace with modern technology, as digital solutions can significantly improve the quality of life for people with dementia, as well as for their carers and family members. Therefore, Alzheimer Slovenija is proud to present Spominko AI – an advanced conversational agent based on generative artificial intelligence. This represents an important milestone in the digitalisation of the services and is intended for people with dementia and their carers or family members, as well as for professionals and the public.

Spominko AI is a specialised conversational agent which has “read” and learned the entire content of the Spominčica website. Its main task is to quickly and easily answer questions related to the content published on the Spominčica website and it provides only the information available on the Spominčica – Alzheimer Slovenija website, ensuring verified and trustworthy information. It uses one of the most advanced artificial intelligence models, which means it does not merely

search by keywords but understands the context of your question. People can ask the same question in different ways, and it will understand what people are looking for. For best results and the most accurate answers, it is recommended to use standard Slovenian.

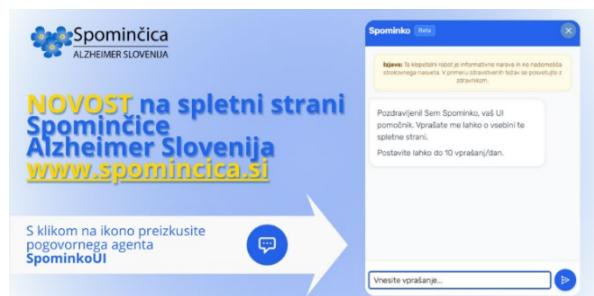
Spominko AI can instantly:

- summarise the content of individual sections or materials on Spominčica's website,
- find and provide direct links to various forms and important documents,
- offer concise answers that precisely address your query.

At present, the system does not yet support searching through past newsletters and other documents in PDF format, but hopefully this functionality will be available soon. The introduction of Spominko AI brings numerous advantages:

1. 24/7 accessibility: People can get answers to any questions at any time, even in the middle of the night or during weekends when the office is closed.
2. Speed: Answers are almost instant, without having to search through website menus.
3. Clarity: Information is presented in the form of short, easy-to-understand summaries.
4. Reduced workload for professional staff: As the agent takes over answering common general questions, staff can devote more time to individual support, counselling and other important tasks.
5. Content adaptation: Through anonymous analysis of questions, it's possible to see what users are most interested in and adapt our content accordingly in the future.

Although you can rely on a high level of accuracy, a certain degree of caution is always necessary when using generative artificial intelligence. The answers provided by Spominko AI are not a substitute for medical advice, medical diagnosis or professional consultation. They are intended primarily as quick guidance when searching for information about dementia, forms of support and the activities of Spominčica. For all health-related questions or other important decisions users should always consult a qualified healthcare professional. Spominko AI is available on our website: [www.spomincica.si](http://www.spomincica.si) You can find it in the bottom-right corner, where clicking on the blue chat icon opens the chat window. As this is a pilot implementation, each user currently has the option to ask up to 10 questions per day.



## LIVING WITH DEMENTIA

3 JANUARY

### "What if...? (Part 2)" by Pia Knudsen, former member of the European Working Group of People with Dementia

December 2025. It has arrived. My early Christmas present. A gift I would very much like to exchange, so if anyone here is willing to trade, I am ready. I will trade it for almost anything—so bring it on. Because. Yes. I have dementia!!!!

Just moments before I received the news, I actually wished that the result of the PET scan would be a yes, so that I could continue living the life I have lived for the past six years—with a mission, and as an influential and important voice in the dementia world in Denmark and the EU. That feeling changed very quickly when the result came. It was brutal, sad, and frightening to be confronted with an image from the PET scan that, with undeniable certainty, showed calcium deposits in my brain and a shrunken protective layer.

It has now been six years since I received the diagnosis, and I have fought to preserve my identity and my life. But now, after this scan, it feels as if a veil has been lifted, and I am standing face to face with an unforgiving truth. The neurologist, who previously doubted whether I truly had dementia because I still appear so (alert) and active, has now confirmed what I feared. It feels as though I have been in a constant battle with an invisible enemy, and now I have been given a slightly clearer picture of what I am up against. I feel like a warrior who has been fighting for years, now facing an enemy that is hard to notice and even harder to understand. How can I be so well-functioning when my brain shows signs of decline? It is a riddle that haunts me. I have always been a person who took responsibility over my life, and fought for what I believed in. But now I find myself in a situation where I cannot fully trust my brain, and therefore, sometimes feel I am losing a bit of myself. But I will not let this diagnosis define me. I will find the best ways to live my life, even though it is characterized by uncertainty. I will continue to fight to preserve the memories I have and the relationships I cherish. I will not give up. I will fight to find the strength to navigate in this new reality, even though it is frightening.

So here I stand, ready to trade. I will trade fear for courage, uncertainty for hope, and I will find a way forward—even when it is unknown and frightening. Because my life is still valuable, and I will not let dementia take it from me without a fight.

If anyone out there is ready to, then let's do it, not trade, [that was just a joke], but find strength in each other, together, and create meaningfulness in a situation that seems meaningless. Thank you.



22 JANUARY:

### New Horizons brings fresh Hope, by Dr Kevin Quaid, Chair EWGPWD

Recently, I did an interview with one of the Irish National newspapers about improvements in dementia care since becoming an advocate over eight years ago and the changes being made. One thing 2025 will go down as the year where real hope began with the announcement of the two new drugs for people who are diagnosed with Alzheimer's. While it's the first step, I think that it's a huge leap forward and should bring hope for everyone affected by dementia, a great hope, that as the medication is further developed, it may help other forms of dementia and that means care for the caregiver as well.

In a world that's so unstable and people are so unsure of what direction it's taking, I think it can bring out the best in good people and organisations, I was never more proud to be part of Alzheimer Europe and to see the amount of work that they are doing, when the going gets tough the tough get going and we as an organisation are going in the right direction. The last European Conference in Bologna was proof of that with over 1500 delegates attending, one of the biggest ever, the amount of work that is being done at local level, to help communities become dementia inclusive and the work that's being done to help people have a better understanding of dementia, all of which leads to a better and safer life for those whose lives are affected by dementia.

The whole approach that has been taken towards dementia has changed so much and the voices of the lived experience has been front and centre of everything about dementia, there was a saying "nothing about us without us" but now it's real action and that



is for the person who has dementia, their carer and those who love them, everyone has a voice, it's no longer a box ticking exercise it's commonplace and along with the new medication , all of this put together makes for a brighter future.

Remember that this is a pot of boiling water and can make an egg hard and a potato soft, it depends on the way you look at dementia and the world.

## NEW PUBLICATIONS AND RESOURCES

### 7 JANUARY:

#### New podcast series on dementia shares patient and expert insights



Tallaght  
University  
Hospital

Ospidéal  
Ollscoile  
Thamhlacha

An Academic Partner of Trinity College Dublin



Institute of Memory and Cognition

**THE MANY FACES OF ALZHEIMER'S**  
presented by Fionnuala Sweeney

Many Faces of Alzheimer's – Tallaght University Hospital (TUH) has launched a groundbreaking 12-part podcast series exploring dementia through a powerful mix of patient experiences and expert insight. Hosted by former CNN and RTÉ journalist Fionnuala Sweeney, the series features interviews with people living with memory difficulties alongside leading specialists from TUH's Institute of Memory & Cognition. Inspired by her father's Alzheimer's diagnosis, Sweeney examines the challenges of dementia, emerging treatments, and how people can live well for longer.

One standout episode features Breda Comiskey, a 69-year-old retired accountant from County Kildare diagnosed with early-onset dementia. A mother of five, Breda reflects on early signs of her condition, including hearing difficulties. Professor Seán Kennelly, Consultant Geriatrician and Director of the Institute of Memory & Cognition at TUH, explains that hearing issues can sometimes be linked to cognitive processing difficulties rather than physical hearing loss. Breda attends the Institute of Memory & Cognition at TUH and is participating in a clinical trial for new dementia treatments. She highlights the vital role of early diagnosis, specialist care, and family support, noting that intervention by TUH's Memory Clinic team has significantly slowed the progression of her symptoms.

"People need to know it's not the end of the road," Breda says. "It's a different stage, but there's still so much you can do with your life." She recalls how her sisters now notice a marked improvement in her confidence and independence during family holidays, crediting their ongoing support and her care team. Professor Kennelly describes an exciting era in dementia research, with over 160 clinical trials underway globally, including studies involving TUH patients. "We're hopeful that treat-

ments targeting the proteins responsible for Alzheimer's disease will become available in Ireland in the coming years," he says. He also stresses that lifestyle changes – staying active, social engagement and lifelong learning – can reduce dementia risk by up to 45%. The series aims to challenge stigma and encourage earlier help-seeking. TUH CEO Barbara Keogh Dunne says the podcast reflects the hospital's commitment to community education and brain health awareness. Produced by Catriona O'Leary of ChromeRadio, the podcast is available on the TUH YouTube channel and all major podcast platforms. <https://www.tuh.ie/News/New-Podcast-Series-on-Dementia-Insights-from-Patients-Experts-on-Managing-Memory-Loss.html>

### 21 JANUARY:

#### Alzheimer Europe launches discussion paper and guidelines for the ethical use of technology for and by people with dementia

Alzheimer Europe has today launched a discussion paper on the use of technology for and by people with dementia. This document was developed jointly by the European Working Group of People with Dementia (EWPWD) and the European Dementia Carers Working Group (EDCWG).

Technology has the potential to assist people with dementia in certain aspects of their daily lives. It can help them overcome various obstacles and challenges, resulting not only from their impairments but also from the way that society is organised. This can include technology developed to address the specific needs associated with dementia. It can also include technology that was not developed for people with dementia, but which is used by people with and without dementia. Some technology can be enabling and promote independence, and



Discussion paper and guidelines for the ethical use of technology for and by people with dementia

December 2025



in some cases provide support to carers. However, some technology creates additional challenges. People with dementia often have no alternative but to use technology or be excluded from some part of social, political, commercial or cultural life. This, combined with the unprecedented rate at which technology is evolving, has resulted in some groups of people feeling "left behind" or excluded from the increasingly technological society in which we now live.

Technology does not, therefore, make everyone's life easier and it is important that appropriate modifications are made and measures taken to ensure that people with dementia have the same rights and opportunities as other members of society (in line with the United Nations Convention on the Rights of Persons with Disabilities). This discussion paper has been developed to promote reflection, raise awareness and hopefully bring about change in relation to the development and use of a broad range of technologies. Members of the EWGPWD and the EDCWG singled out eight key issues that they found particularly meaningful and relevant, which could be of particular interest, for example, to developers, providers, policy makers, users and funders.

The discussion paper and related guidelines can be downloaded from the Alzheimer Europe website, at: <https://bit.ly/AE-Technology-Report>



## AE CALENDAR 2026

DATE	MEETING	AE REPRESENTATIVE
3 February	Consultation with the members of the PREDICT-FTD Public Involvement Board	Soraya
5-7 February	European Association of Nuclear Medicine Focus Meeting 7: Molecular imaging for a personalised treatment in Alzheimer's disease (Palma de Mallorca, Spain)	Angela
6 February	EDF ENGO meeting	Owen
10 February	Consultation with members of the EWGPWD regarding person-centred diagnostic pathways	Dianne and Ana
11 February	Consultation with members of the EDCWG regarding person-centred diagnostic pathways	Dianne and Ana
11 February	Meeting of the TRANSFORM consortium (Ingelheim am Rhein, Germany, and online)	Dianne and Angela
24 February	Meeting with Global Advisory Board – AD-RIDDLE	Ana and Sarah
26-27 February	Online workshop on services for the EPND platform	Angela

## EU project acknowledgements



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The projects in this newsletter are:

ACCESS-AD- grant agreement 101253010 (<https://www.access-ad.org/>)

Lethe – grant agreement 101017405 (<https://www.lethe-project.eu/>)

PREDICTOM - grant agreement 101132356 (<https://www.predictom.eu/>)



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## CONFERENCES 2026

DATE	MEETING	PLACE
4-5 February	2 <sup>nd</sup> International Conference on the Prevention of Alzheimer's Disease (ICOPAD 2026), <a href="https://www.icopad.ch/en/">https://www.icopad.ch/en/</a>	Geneva, Switzerland
26-28 March	20 <sup>th</sup> edition of the World Congress on Controversies in Neurology (CONy 2026) <a href="https://cony.comtecmed.com/">https://cony.comtecmed.com/</a>	Krakow, Poland
14-16 April	37 <sup>th</sup> Global conference of Alzheimer's Disease International (ADI), "Solutions for today and tomorrow", <a href="https://www.alzint.org/what-we-do/adi-conference">https://www.alzint.org/what-we-do/adi-conference</a>	Lyon, France
1-3 July	IPA 2026 International Congress, "Across borders, beyond boundaries: Connecting research, education and practice for better mental health in older people" <a href="https://bit.ly/4pbWkuA">https://bit.ly/4pbWkuA</a>	Leiden, Netherlands
27-29 October	36th Alzheimer Europe Conference (#36AEC), "Sláinte: Building momentum in dementia through policy, research and partnership"	Dublin, Ireland



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Sláinte: Building momentum in dementia through policy, research and partnership

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[www.alzheimer-europe.org/conferences](http://www.alzheimer-europe.org/conferences)