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## **Embargoed until 21 September 2006 - World Alzheimers Day**

### **LOOMING FIVE FOLD INCREASE IN DEMENTIA PROVOKES CALL FOR ACTION – THERE IS NO TIME TO LOSE**

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A report “*Dementia in the Asia Pacific Region: The Epidemic Is Here*” warns that dementia has the potential to have a devastating impact on the health systems of Asia-Pacific countries and the quality of life of their people.

It is estimated that there are already nearly 14 million people with dementia in the Asia Pacific region, a figure that will grow to 65 million by 2050.

The number of new cases in the region is projected to increase from 4.3 million new cases per year in 2005 to 19.7 million new cases by 2050.

In New Zealand there are currently 38,000 people with dementia, a figure that will rise to 118,000 by the year 2050.

The report recommends that all Asia Pacific governments should:

- Create the climate for change through greater awareness and de-stigmatisation of dementia;
- Build effective constituencies and coalitions for partnership between policy makers, clinicians, researchers, care givers and people with dementia;
- Promote the development of care services that are responsive to the needs of people with dementia and their family care givers.

According to Florence Leota, Spokesperson for Alzheimers New Zealand, “the devastating impact of dementia is not only because of the greying of the population but because dementia is among the most disabling of all chronic diseases. Dementia

impacts not only on the person with dementia but also their family and those who care for them.”

“The tragedy for people in many countries in the Asia Pacific region is that there is limited awareness of dementia and often a cultural context that denies its existence. Yet there is a wealth of information on which public health campaigns can be based.

“Even though there is no current cure for dementia, it is clear that people living with dementia and their families can benefit from awareness and information programs, effective drug treatments, and community support. There is now enough evidence of what works to help people in all countries whether rich or poor albeit in very different ways” says Florence Leota.

Ms Orien Reid, Chairman of Alzheimer’s Disease International (ADI) said that “Governments who had not already done so should make dementia a health priority and adopt the policy frameworks within which a better understanding of dementia could be promoted and responsive care services provided to meet the needs of people with dementia and their families”.

The ADI Kyoto declaration provides a framework within which to plan responsive services.

Lynne Pezzullo, a consultant with Access Economics and the author of the Report said that “within the lifetime of most people in the Asia Pacific region, neurodegenerative diseases, in particular dementia, will replace heart disease and cancer as the major threat to health. The disease burden of dementia already exceeded that of malaria.”

The report was commissioned by the 15 Asia Pacific members of Alzheimer’s Disease International (ADI) and was funded by the TSAO Foundation and ADI.

The report is available on [www.alzheimers.org.nz](http://www.alzheimers.org.nz)

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**For more information please contact Florence Leota**

Ph: 04 381 2361  
Fax: 04 381 2365  
Mobile: 021 11609 79  
Email: [florence@alzheimers.org.nz](mailto:florence@alzheimers.org.nz)

Attachment: Dementia: The Facts to Remember



## **Background information**

### **Alzheimer's Disease International (ADI)**

ADI is the international federation of Alzheimer associations throughout the world. The 15 ADI Asia Pacific member organisations are located in Australia, China, TADA Chinese Taipei, Hong Kong SAR, India, Indonesia, Japan, Malaysia, New Zealand, Pakistan, Philippines, Singapore, South Korea, Sri Lanka and Thailand.

### **The Asia Pacific Region**

The total population of the region in 2005 is estimated from United Nations data as 3.58 billion. The population over 65 years is estimated as 238.9 million with 37.2 million people aged over 80 years. There is great diversity in terms of economies, language and religion.

Dementia is poised to become New Zealand's number one health issue by 2050. Currently there are 38,000 people with dementia in New Zealand, a number that will rise to 118,000 by 2050.

### **What is dementia?**

Dementia is an incurable, progressive and disabling condition, primarily of older persons that causes irreversible brain damage.

The condition is caused by a number of diseases which can impair memory, thinking, orientation, comprehension, language, judgement, emotional control and social behaviour. The most common are outlined below:

- Alzheimer's disease (AD)
- Vascular dementia (VaD)
- Dementia with Lewy bodies (DLB)
- Fronto-temporal [lobe] dementia (FTD)

### **What are the symptoms?**

- Symptoms vary and the condition progresses at a different rate according to the areas of the brain affected. Disease progression is categorised as mild (early stage), moderate (middle stage) and severe or advanced (late stage), before the person dies. Early phase symptoms can be subtle, and may include:

- Persistent and frequent memory difficulties (especially of recent events), often associated with personality change (such as aggression or obsessiveness).
- Vagueness in everyday conversation.
- Apparent loss of enthusiasm for activities.
- Taking longer to do routine tasks.

As the disease progresses, changes become more dramatic, and can include loss of memory of well-learned information and skills (how to dress, eat, walk and when to sleep), physical symptoms such as weight loss, incontinence, and hallucinations or misinterpretations.

### **Is dementia the same as being forgetful?**

'Normal' adult forgetfulness can be associated with memory and concentration lapses or slow recall. However, for people experiencing dementia, forgetfulness is persistent, progressive and disruptive, and is usually accompanied by other symptoms.

For example, someone forgetting what they came into a room to get is 'normal' adult forgetfulness, but losing their car keys and then finding them but not remembering what they are for, is a sign of dementia.

### **Who gets dementia?**

The majority of people with dementia are older, with approximately 50 per cent of people in their nineties having the condition. However, it is not just older people who develop dementia in old age there are also younger people who have younger early onset dementia.

Other risk factors include:

- Being the first degree relative (i.e. child, brother or sister) of someone who has been diagnosed with dementia.
- Suffering cardiovascular health conditions (such as high blood pressure, narrowing of the arteries and irregular heart beat).
- Having suffered head trauma with loss of consciousness.

### **Diagnosis and treatment**

There is no single test to identify dementia. Diagnosis and appropriate care assessment are decided after careful clinical consultation and community evaluation of the person's medical state, cognitive abilities, functional skills and deficits, and social support and stresses.

Current drug therapies (e.g. cholinesterase inhibitors (CEIs)) do not stop the progression of dementia but may stall the development of the condition.