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Surgeon General's Perspectives

A PLAN TO ADDRESS ALZHEIMER'S DISEASE

Alzheimer's disease is a significant issue for our nation's public health, affecting as many as 5.1 million Americans and the loved ones who care for them.[1] The challenges of Alzheimer's disease are great and are likely to grow with the aging of our population. The risk of Alzheimer's disease increases with age, and those aged 85 years and older are in the fastest-growing age group in the U.S. for Alzheimer's. If we are to meet the overarching goal of the National Prevention Strategy—to increase the number of Americans who are healthy at every stage of life—then we must make overcoming Alzheimer's disease a priority now.[2]

Millions of American families struggle with the physical, emotional, and financial costs of caring for a loved one with Alzheimer's disease. People with Alzheimer's experience memory loss, personality and behavioral changes, and declines in functional status.[3] The condition significantly damages quality of life, as those who suffer from it may become unable to recognize close family members or perform simple daily tasks such as eating.[4,5] The physical consequences of the disease are compounded by stigma and public misconceptions that contribute to isolation for people with Alzheimer's disease and their families. The majority of people with Alzheimer's disease live in the community, with family members providing most of their care. Caregiving for a loved one with Alzheimer's can exert a major toll on the caregiver's health and well-being. About one-third of individuals who act as caregivers to people with Alzheimer's disease report symptoms of depression,[6,7] and caregivers have worse health outcomes compared with their non-caregiving peers.[8]

The economic impacts of Alzheimer's disease are also significant for families and society. When a person with Alzheimer's disease moves to a nursing home to receive 24-hour care, the financial cost to families is great: an estimated $78,000 per year.[9] Nearly half (48%) of nursing home residents suffer from Alzheimer's.[10] However, people with Alzheimer's disease also have greater acute care needs and are admitted to the hospital two to three times more often than people without the disease who are admitted to the hospital. This disease places a major strain on Medicare and Medicaid, the primary funders of this care.[11]

However, we are making progress. On January 4, 2011, the national significance of Alzheimer's disease was recognized when President Barack Obama signed into law the National Alzheimer's Project Act. The Act requires the Secretary of Health and Human Services to develop a plan to transform the way we approach Alzheimer's disease.[12] A newly formed Advisory Council on Alzheimer's Research, Care, and Services makes recommendations to the Secretary regarding the plan. As the Surgeon General, I am proud to serve on the Advisory Council.

VADM Regina M. Benjamin, Surgeon General

In May 2012, Secretary Kathleen Sebelius released the National Plan to Address Alzheimer's Disease.[11] This document provides a blueprint for significantly reducing the burden of Alzheimer's disease. Specifically, it defines five key goals to transform our nation's fight against Alzheimer's:

1. We seek to prevent and effectively treat Alzheimer's disease by 2025. Currently, no effective pharmacological product or intervention exists to definitively treat, prevent, or cure the disease, and we need more concerted efforts in this area.[11] To aid in this goal, President Obama added $50 million to fund Alzheimer's research in fiscal year 2012, and the President's budget proposes $80 million in fiscal year 2013.
2. We must enhance the quality and efficiency of care for people who have Alzheimer's disease,

including an emphasis on culturally competent patient care provided by specially trained professionals from the point of Alzheimer's diagnosis onward.

3. We must expand support for people with Alzheimer's disease and their families and caregivers. Too often, family members feel unprepared for the challenges of caring for a person with Alzheimer's disease (e.g., addressing sleep disturbances, needs for physical assistance, and behavioral changes).
4. We need heightened public engagement and awareness. Many people can identify the disease and some of its symptoms, but there remains widespread and significant public misperception about diagnoses and clinical management.
5. We need to track progress by improving data. To measure progress against the disease and understand the changing impact of Alzheimer's disease on people who have it, their families, and health and long-term care systems, we need a data infrastructure that supports monitoring and evaluations of our progress in implementing the National Plan.[11]

Since the release of the National Plan, significant steps have been taken to identify research priorities, with new funding going toward research studies. These steps include a genetic analysis aimed at discovering genetic risk factors for Alzheimer's disease, as well as potential protective factors that reduce the risk of disease; initial human trials of new approaches to treat Alzheimer's; and clinical trials of new strategies for preventing Alzheimer's by intervening at early stages in the disease, before symptoms emerge and before irreversible damage has occurred. The national network of Geriatric Education Centers is working to improve and disseminate Alzheimer's-specific interprofessional education and training to health-care providers. The U.S. Department of Health and Human Services launched both an awareness campaign and a website, Alzheimers.gov, which provides current information and resources on Alzheimer's and related dementias to people with Alzheimer's disease and their families.

Alzheimer's disease is a large and complex challenge, but with the ongoing leadership and cooperation from our dedicated team, and our existing and future partners who are working with the Advisory Council, we can achieve our goals. I believe one day we will have a nation free from Alzheimer's disease.

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REFERENCES

1. Hebert LE, Scherr PA, Bienias JL, Bennett DA, Evans DA. Alzheimer disease in the US population: prevalence estimates using the 2000 Census. Arch Neurol 2003;60:1119-22.
2. National Prevention Council. National prevention strategy: America's plan for better health and wellness. Washington: Department of Health and Human Services, Office of the Surgeon General (US); 2011.
3. Burns A, Iliffe S. Alzheimer's disease. BMJ 2009;338:b158.
4. National Institute on Aging. 2009 progress report on Alzheimer's disease: translating new knowledge. Washington: Department of Health and Human Services (US), National Institutes of Health; November 2010. NIH Publication no. 10-7500.
5. Alzheimer's Disease Education and Referral Center. Alzheimer's disease fact sheet [cited 2012 Nov 6]. Available from: URL: http://www.nia.nih.gov/alzheimers/publication/alzheimers-disease-fact-sheet
6. Yaffe K, Fox P, Newcomer R, Sands L, Lindquist K, Dane K, et al. Patient and caregiver characteristics and nursing home placement in patients with dementia. JAMA 2002;287:2090-7.
7. Taylor DH Jr, Ezell M, Kuchibhatia M, Ostbye T, Clipp EC. Identifying trajectories of depressive symptoms for women caring for their husbands with dementia. J Am Geriatr Soc 2008;56:322-7.
8. Mahoney R, Regan C, Katona C, Livingston G. Anxiety and depression in family caregivers of people with Alzheimer's disease: the LASER-AD study. J Am Geriatr Psychiatry 2005;13:795-801.
9. MetLife Mature Market Institute. 2011 market survey of long-term care costs. New York: MetLife Mature Market Institute; October 2011.
10. Magaziner J, German P, Zimmerman SI, Hebel JR, Burton L, Gruber-Baldini AL, et al. The prevalence of dementia in a statewide sample of new nursing home admissions aged 65 and older: diagnosis by expert panel. Gerontologist 2000;40:663-72.
11. Sebelius K; Advisory Council on Alzheimer's Research, Care, and Services. National plan to address Alzheimer's disease. Washington: Department of Health and Human Services (US); 2012.
12. S. 3036 111th Congress (2011).