A PUBLIC HEALTH APPROACH TO ALZHEIMER'S AND OTHER DEMENTIAS

ALZHEIMER'S DISEASE – A PUBLIC HEALTH CRISIS







LEARNING OBJECTIVES

- Provide a general description of dementia and Alzheimer's disease
- Explain the current and projected scope of the epidemic
- Discuss the cost burden of Alzheimer's for federal/state governments and individuals/caregivers
- Describe the care burden of Alzheimer's, including caregivers and the health care system
- Identify health disparities related to Alzheimer's and other dementias
- Explain why public health must play a role in addressing the Alzheimer's epidemic

ALZHEIMER'S – PUBLIC HEALTH CRISIS'

- Historically viewed as aging or medical issue
- Impact at national, state, and local levels
- Multi-faceted approach needed

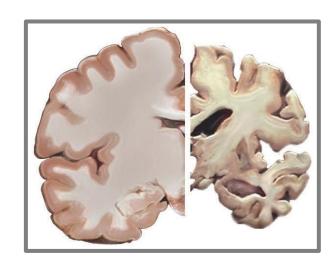


WHAT IS DEMENTIA?^{2,3}

- General term for decline in cognitive function severe enough to interfere with daily life
- Affects memory, thinking ability, social ability
- Many dementias are progressive

WHAT IS ALZHEIMER'S DISEASE?4,5

- Irreversible, progressive brain disease
- Slowly destroys memory, thinking skills, and ability to carry out basic functions
- Brain changes can begin years prior to any noticeable symptoms
- Most common cause of dementia (60%-80% of cases)



SCOPE OF THE EPIDEMIC

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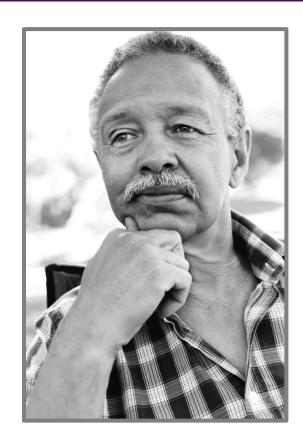
SCOPE OF THE EPIDEMIC (U.S.)6

- Over 5.8 million adults
- I in 10 adults age ≥65
- I in 3 adults age ≥85
- 2/3 are women



HEALTH DISPARITIES^{7,8}

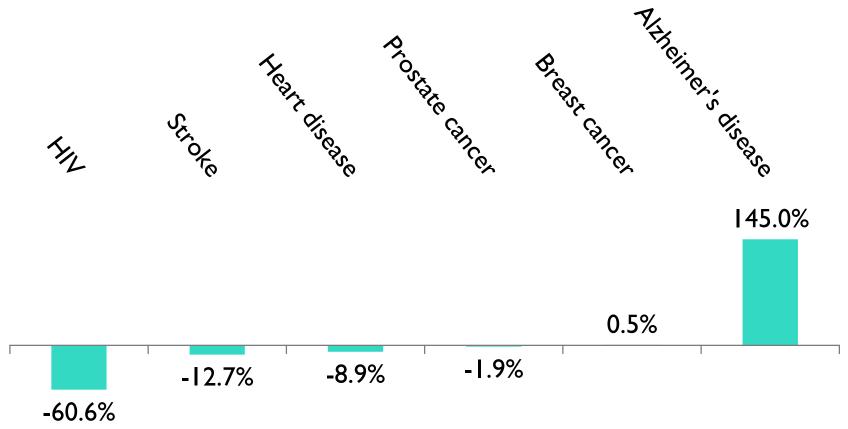
- African-Americans and Hispanics have higher rates of dementia than whites:
 - African-Americans: 2 times more likely
 - Hispanics: 1.5 times more likely
- Less likely to receive a diagnosis
- Often diagnosed at later stages, requiring more medical care



ALZHEIMER'S DEATHS

- 6th leading cause of death
- 5th leading cause among adults age ≥65
- Deaths increased 145% from 2000-2017

CHANGES IN CAUSES OF DEATH BETWEEN 2000-2017¹⁰



GROWING EPIDEMIC 11,12

- By 2050 U.S. population age ≥ 65 expected to be 88 million
- By 2050, I 3.8 million with Alzheimer's
- Today, one new case every 65 seconds
- By 2050, every 33 seconds



WORLDWIDE EPIDEMIC¹³

- Estimated 50 million have dementia with 10 million new cases annually
- Projected to nearly double every 20 years:
 - 82 million in 2030
 - I 52 million in 2050
- New case of dementia every 3 seconds

FINANCIAL BURDEN

ALZHEIMER'S DISEASE – A PUBLIC HEALTH CRISIS

FINANCIAL BURDEN: U.S. & WORLDWIDE 14,15

- Alzheimer's is the most expensive disease in U.S.
- Annual costs of direct care over \$290 billion
- Worldwide annual costs exceed \$818 billion (2015)



DISCUSSION QUESTION I



What are Medicare and Medicaid?

MEDICARE & MEDICAID¹⁶

- Medicare: federally-funded health insurance
 - U.S. citizen or legal permanent resident age ≥ 65
 - People under age 65 with certain disabilities or End-Stage Renal Disease
- Medicaid: funded by federal and state governments
 - Helps with medical costs and nursing home expenses for low-income individuals



ALZHEIMER'S: MEDICARE & MEDICAID 17,18

- Pays 67% of health and long-term costs of Alzheimer's
- Nearly I in 5 Medicare dollars
- Per-person spending for those with Alzheimer's:
 - Medicare: 3 times higher than average
 - Medicaid: 23 times higher than average

ALZHEIMER'S: PROJECTED COSTS (2050)^{19,20}

- Total annual costs over \$1.1 trillion
- Annual costs to Medicare: \$559 billion (over 300% increase)
- Out-of-pocket costs: \$198 billion



CARE BURDEN

ALZHEIMER'S DISEASE – A PUBLIC HEALTH CRISIS

CAREWORKFORCE

- Caregivers (family or friends)
- Health care providers
- Paid care providers



ALZHEIMER'S & DEMENTIA CAREGIVERS²¹

- 83% of care provided to older adults is by family members, friends or other unpaid caregivers
- 70% of people with Alzheimer's live in the community
- Over 16 million caregivers (family and friends)
- 18.5 billion hours of unpaid care annually
- Unpaid care valued at \$233.9 billion (2018)

DISCUSSION QUESTION 2



What might be the roles and responsibilities of a caregiver for someone with Alzheimer's?

ALZHEIMER'S & DEMENTIA CAREGIVERS^{22,23}

- Caregiver profile
 - 2/3 are women (typically daughter or wife)
 - Middle-aged
 - Over half currently employed
- Caregiving responsibilities
 - Help with activities of daily living
 - Medical and financial management
 - Provide increasing levels of care as disease progresses



CAREGIVERS: CHALLENGES²⁴

- Physical, psychological, social challenges
 - \$11.8 billion additional health care costs (2018)
 - 60% rate emotional stress as high or very high
 - 30-40% suffer from depression
 - Increased likelihood of new or worsening health problems



CAREGIVERS: IMPACT ON WORK²⁵

- Went in late/ left early/ took time off (57%)
- Went from full-time to part-time work (18%)
- Took leave of absence (16%)
- Turned down a promotion (8%)
- I in 6 quit work entirely to be a caregiver

CAREGIVERS: LENGTH OF CARE^{26,27}

- 86% at least one year
- 50% four or more years
- May range from 4-20 years
- Burden of care higher than for non-dementia caregiving



CAREGIVERS: CRITICAL ROLE

- Health care system could not sustain costs of care without caregivers
- Support for caregivers is a public health issue





HEALTH PROFESSIONALS: SHORTAGE^{28,29}

- Shortage of health care professionals trained to work with older adults
 - Additional 3.5 million needed by 2030
 - Currently have half the number of certified geriatricians needed
 - Less than 1% of RNs, PAs, and pharmacists identify as geriatric
- Many not adequately trained for Alzheimer's and dementia

DIRECT CARE WORKFORCE³⁰

- Provide majority of care for Alzheimer's (after caregivers)
- Include nurse aides, home health aides, personal-care aides and home-care aides
- Help with daily activities: bathing, dressing, eating
- Costs range from \$48,000 to over \$90,000 a year



DIRECT CARE WORKFORCE: CHALLENGES³¹

- Workforce shortage
 - Rapid increases in number of workers needed as population ages
 - High turnover
 - Recruitment and retention difficult
- Challenging job given nature of the work
- Limited training, especially on Alzheimer's and dementia

PUBLIC HEALTH APPROACH

ALZHEIMER'S DISEASE – A PUBLIC HEALTH CRISIS

HEALTHY PEOPLE 2030³²

- Proposed objectives for Alzheimer's and other dementias:
 - Increasing diagnosis and awareness
 - Reducing preventable hospitalizations
 - Increasing number of older adults discussing their memory issues with a health care professional



ROLE OF PUBLIC HEALTH³³

- 4 key ways public health can have an impact:
 - Surveillance/monitoring
 - Risk reduction
 - Early detection and diagnosis
 - Safety and quality of care



DEMENTIA CAPABLE SYSTEMS AND DEMENTIA FRIENDLY COMMUNITIES

- Dementia capable systems
 - Support services
 - Workforce training and education
- Dementia friendly communities
 - Safe, supportive environments



FOR MORE INFORMATION

For more information, please visit:

Alzheimer's Association: http://www.alz.org

CDC's Alzheimer's Disease and Healthy Aging Program:

https://www.cdc.gov/aging/



COMPETENCIES

Academy for Gerontology in Higher Education (AGHE):

■ 1.3.3 Demonstrate knowledge of signs, symptoms, and impact of common cognitive and mental health problems in late life (e.g., dementia, depression, grief, anxiety).

Council on Education for Public Health (CEPH) Foundational Competencies

- 2. Locate, use, evaluate and synthesize public health information (bachelors-level).
- 4. Interpret results of data analysis for public health research, policy, or practice (masters-level).

Council on Linkages Between Academia and Public Health Practice:

 2A. Identifies current trends (e.g., health, fiscal, social, political, environmental) affecting the health of a community.

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