22 MARCH 2013

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Dementia News

Dementia Care Challenges: The Contemplation of Suicide

Living with dementia is enormously challenging for both the people affected by the disease and their carers. A recent pilot study focused on the wellbeing of family carers found that one in four carers may contemplate suicide more than once.

“We have known for a long time that caring for a person with dementia can lead to depression, anxiety, and poor physical health, but no-one has ever asked about suicide,” said Dr Siobhan O’Dwyer, study leader and Research Fellow from Griffith University’s Research Centre for Clinical and Community Practice Innovation.

The researchers recruited 120 family carers from online carer forums with an online survey for the pilot study. The survey included measures of suicidality, self-efficacy (i.e., belief in themselves), physical health, depression, hopelessness, anxiety, optimism, care giver burden, coping strategies and social support.

The results indicated that 26% of carers had contemplated suicide more than once in the previous year. Carers who had contemplated suicide also had poorer mental health, were less likely to use community support services and relied more on dysfunctional coping strategies than those who did not.

“This study has revealed how difficult and isolating the caring role can be for many people, and the very serious effect it can have on mental health,” said Dr Chris Hatherly National Research Manager of Alzheimer’s Australia.

“It is also important to realise that while supporting an individual with dementia can be at times challenging, it can also be a very rewarding and meaningful experience, particularly if there is adequate support available to the carer to help them in their role.

The Australian Government has made a good start towards improving support for people with dementia and their carers with the Living Longer. Living Better. aged care reforms, but we still need to do more to support people living with the condition and to advance the fight against dementia through research.”

According to Dr O’Dwyer the outcomes of the study provide an important basis for future research. “Large studies will be required to confirm these findings and explore the issues more in depth. But what this research shows is that there are a significant number of carers who are already at risk,” said Dr O’Dwyer.

If you are a carer of a person living with dementia and are contemplating suicide call Lifeline, a 24 hour phone service on 13 11 14. Carers of people with dementia who need advice or support can contact Alzheimer’s Australia’s National Dementia Helpline on 1800 100 500.

For more information click on the links below:
Press link: Griffith University
Journal: International Journal of Geriatric Society (1)
MILD COGNITIVE IMPAIRMENT LINKED TO ILL HEALTH

A new study published in PLOS Medicine has reported a significant link between mild cognitive impairment, physical disability and psychological symptoms such as anxiety.

The research project, led by Dr Stewart and a team of researchers from the King’s College London, UK, analysed survey findings from 15,376 people aged 65 years or older without dementia living in Cuba, the Dominican republic, Peru, Mexico, Venezuela, Puerto Rico, China and India.

The survey used standardised assessments of mental health, physical health and cognitive function as well as interviews. An algorithm was developed based on the Mayo Clinic mild cognitive assessment tool in order to measure mild cognitive impairment.

“Mild cognitive impairment is frequency used to define groups of people who may be at risk of developing dementia,” explained Dr Stewart and his colleagues.

“It can be seen as an intermediate state between normal ageing and dementia.”

The results of the study found that mild cognitive impairment is associated with physical disability, anxiety, apathy and irritability, but not depression.

The researchers concluded that within the study’s cohort, mild cognitive impairment was associated with higher than expected disability and neuropsychiatric symptoms. Further long term studies need to be conducted to support these findings and to investigate the factors that may protect against the progression of dementia.

For more Information click on the links below:
Press link: Psych Central
Journal: PLOS One (2)

PBT2 SHOWS PROMISE AS AN ALZHEIMER’S DISEASE THERAPY

Australian company Prana Biotechnology Ltd. has recently announced a successful animal trial with a drug called PBT2 as a therapy for Alzheimer’s disease.

The study used genetically modified mice designed to develop a build up of mis-folded ‘tau’ proteins that form ‘tangles’ similar to human Alzheimer’s disease. Up to 15 of these adult mice were treated daily with either PBT2 or a placebo. All of the mice underwent a cognitive test (requiring them to learn the way through a maze) before the administration of PBT2 and again six weeks later, at the end of the trial. In the treated mice there were less mis-folded proteins in the brain and better cognitive performance compared to the placebo mice.

PBT2 had previously been shown to be effective against beta-amyloid proteins, which are also associated with Alzheimer’s disease. This trial has shown that the drug can also be effective against tau protein build-up – another component of Alzheimer’s disease and other dementias.

Professor Rudy Tanzi, Prana’s chief scientific advisor, said these findings provide further evidence for PBT2 as a highly attractive therapeutic for Alzheimer’s disease that targets both beta amyloid deposition and tangle formation.

“Translating these dual effects into the clinic could potentially provide tremendous benefit for patients,” said Professor Rudy Tanzi.

PBT2 works by preventing toxic metal-ion mediated protein mis-folding in the brain.

Prana is currently running the IMAGINE clinical trials of PBT2 in the treatment of early-stage Alzheimer’s disease.

For more Information click on the links below:
Press link: Bio Spectrum
Prana Media Release: Prana Biotechnology
**DISCUSS THE SCIENCE**

**VISUAL PAIRED COMPARISON TASK**

The Visual Paired Comparison Task (or VPC) is a test that can assess a person’s recognition memory i.e. their ability to recognise a familiar visual cue compared to a novel cue. The test is performed by measuring the amount of time a person spends looking at a new shape or image on a computer screen compared to the amount of time they spend looking at shapes or images they’ve seen before. This test allows researchers to determine novelty preference.

In people without cognitive impairment, there is a high preference for the novel shapes and images. However, if someone has an impaired recognition memory they are more likely to spend equal time viewing the new and familiar cues as they have difficulty recognising the familiar cues. VPC testing has been found to be a viable method for identifying people with Mild Cognitive Impairment before the onset of dementia symptoms.

The advantages of a VPC test are that it is non-invasive, does not require language ability and that minimal motor skills are required for a person to undergo the test.

**VPC TEST WINS HEALTH PRIZE FOR DEMENTIA DETECTION**

Neurotrack Technologies Inc, a research company based in Atlanta, USA, has won a Start-up Accelerator Prize for the development of a VPC test aimed at detecting preclinical dementia.

The company’s computer-based VPC test evaluates eye movement by using an infrared eye tracking device. The program evaluates the VPC test results and generates a score.

In the first trial of Neurotrack’s VPC program the researchers were able to show a significant difference between people diagnosed with mild cognitive impairment compared to normal controls and people with Parkinson’s disease. People with mild cognitive impairment showed equal preference for novel and familiar images but normal controls and people with Parkinson’s disease both spent on average 70% of the time looking at novel images.

A follow up study also found that Neurotrack’s VPC test may be predictive of the development of Alzheimer’s disease in a population of healthy individuals. 32 people diagnosed with MCI and 60 healthy controls were involved in the study and were followed for three years after completing the initial assessment to assess any changes in diagnosis. The results of the study indicated that 8 out of 9 participants who scored below 50% on the program received an Alzheimer’s disease diagnosis within three years, whilst the 43 participants scoring above 67% had no identifiable symptoms.

Neurotrack plans to sell the program to pharmaceutical companies who may be able to use the test to identify people for clinical trials and develop more effective treatments.

For more Information click on the links below:
Press link: CNN Money

Journal links:
1) American Journal of Alzheimer’s disease and other dementias (4)
2) American Journal of Alzheimer’s disease and other dementias (5)

SXSW Start-up Competition: SWSW
Have you been diagnosed with dementia (any type)?
Are you interested in falls prevention, even if you are not falling?
Are you living at home, somewhere in Victoria?
If you answered "yes" to these questions, you may be interested in taking part in this research study.
The research study conducted by the University of Melbourne will aim to understand how to best share falls prevention knowledge with people living with dementia in the community.

Participation will involve an interview about falls and falls prevention. It will also provide information about falls risk factors and assist you in using knowledge about falls prevention to reduce your risk.
The researcher, Claudia Meyer, is a current recipient of an Alzheimer's Australia Dementia Research Foundation Postgraduate Scholarship Award.
Please contact Claudia Meyer on (03) 8387 2656 or c.meyer@nari.unimelb.edu.au
SUMMIT HIGHLIGHTS NEEDS OF PEOPLE WITH YOUNGER ONSET DEMENTIA

On 20 March Alzheimer’s Australia National President and Australian of the Year 2013, Ita Buttrose, launched a report at the younger onset dementia summit, held in Melbourne.

The report “A New Horizon?” is a result of a conference led by people living with younger onset dementia and their carers to prioritise the action required to meet their needs.

It documents the unique challenges faced by the 24,400 people living with the condition and outlines how the National Disability Insurance Scheme (NDIS), and other funding systems including health and income security, should respond.

Ms Buttrose said people living with dementia under the age of 65 have unique difficulties.

“They don’t typically qualify for aged care and find it difficult to fit into disability services because they have to cope with a completely different set of professional and family-related issues,” she said.

“They also experience difficulties accessing respite care, getting a diagnosis and dealing with stigma and isolation within the broader community.”

More than 320 service providers, stakeholders and policy makers across the aged care, disability and mental health sectors attended the Summit to discuss and address the challenges that people living with younger onset dementia have to overcome.

“With historic changes in health policy taking place with the roll out of the NDIS, and the Federal Government’s proposed aged care reforms, this is the time to make sure that people with younger onset dementia receive the support they need,” Glenn Rees, CEO of Alzheimer’s Australia said.

“The Report, “A New Horizon?” recommends a collaborative approach is needed to create solutions for improved access and choice.

“But for this to happen, consumers will need to be better informed to make choices about the services to meet their needs and service providers will need to be prepared to respond flexibly.”

To download the report “A New Horizon?” click here.

CONTACT
Any questions or comments are welcome.
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This newsletter was funded by the Australian Government as well as the Dementia Collaborative Research Centre: Carers and Consumers
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