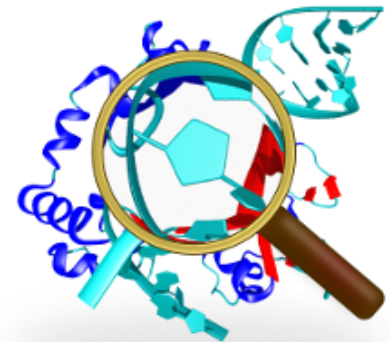




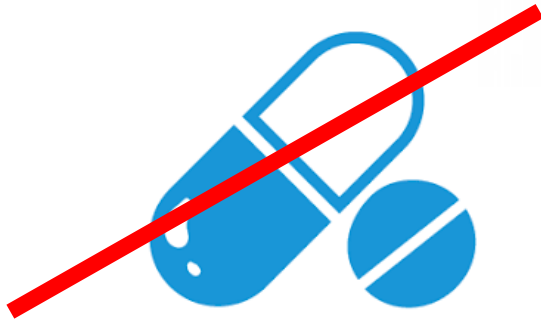
Vascular and genetic risk factors for dementia

CACHET Spring seminar



Ruth Frikke-Schmidt, MD DMSc PhD, Chief Physician, Rigshospitalet.

*Clinical Research Associate Professor and Deputy Head
Department of Clinical Medicine, Faculty of Health and Medical Sciences
University of Copenhagen.*



Dementia prevention, intervention, and care



Gill Livingston, Andrew Sommerlad, Vasiliki Orgeta, Sergi G Costafreda, Jonathan Huntley, David Ames, Clive Ballard, Sube Banerjee, Alistair Burns, Jiska Cohen-Mansfield, Claudia Cooper, Nick Fox, Laura N Gitlin, Robert Howard, Helen C Kales, Eric B Larson, Karen Ritchie, Kenneth Rockwood, Elizabeth L Sampson, Quincy Samus, Lon S Schneider, Geir Selbæk, Linda Teri, Naaheed Mukadam

Executive summary

Acting now on dementia prevention, intervention, and care will vastly improve living and dying for individuals with dementia and their families, and in doing so, will transform the future for society.

2 Be ambitious about prevention

We recommend active treatment of hypertension in middle aged (45–65 years) and older people (aged older than 65 years) without dementia to reduce dementia incidence. Interventions for other risk factors including more childhood education, exercise, maintaining social engagement, reducing smoking, and management of hearing loss, depression, diabetes, and obesity might have the potential to delay or prevent a third of dementia cases.



PREVENTION

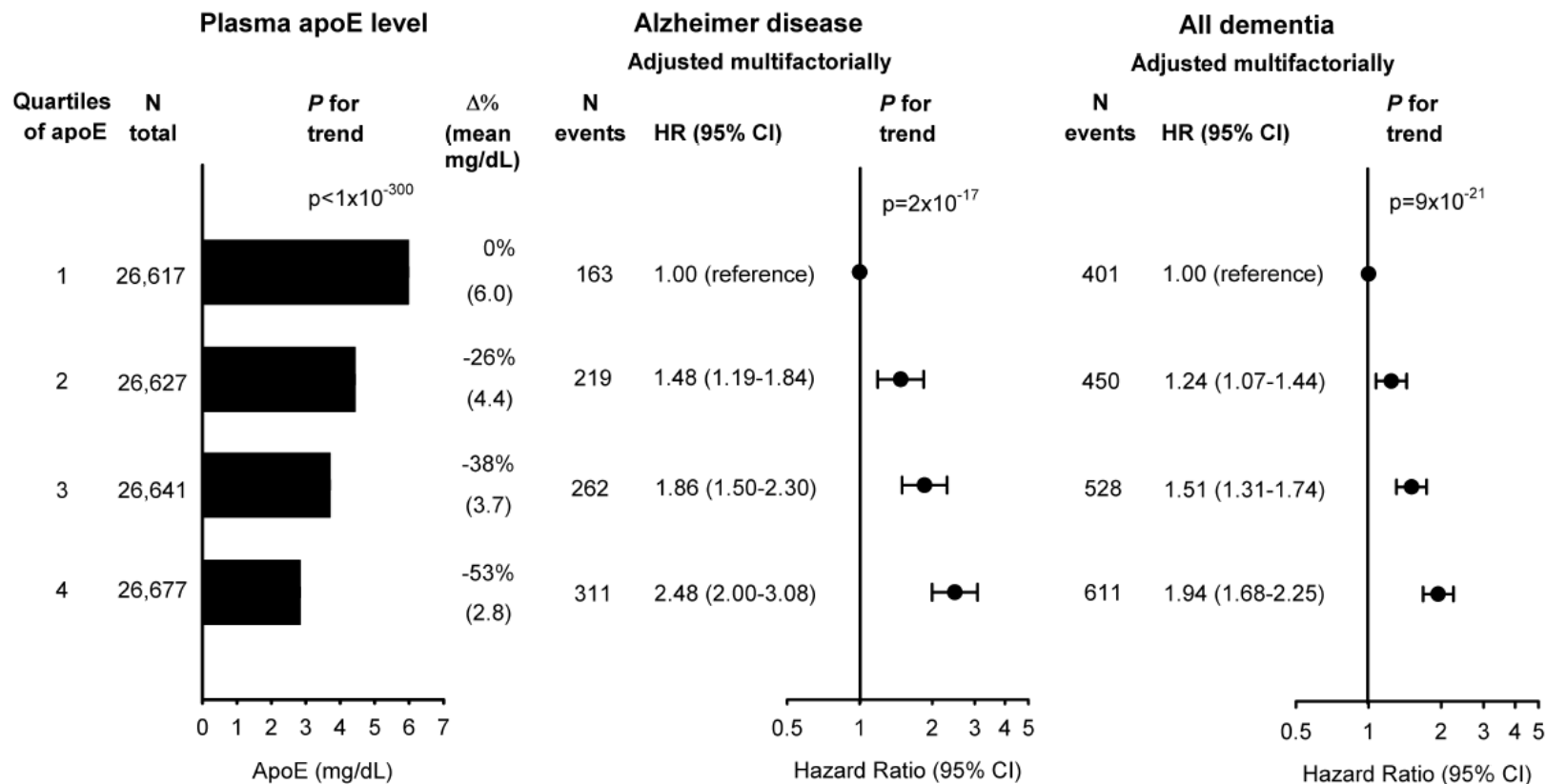
RISK STRATIFICATION





RISK STRATIFICATION

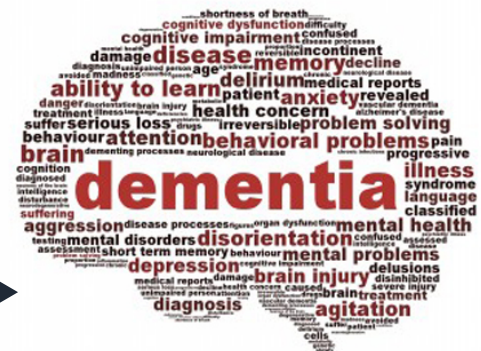
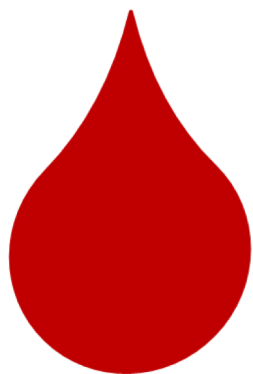




Rasmussen et al., *Alzheimers Dement* 2017



Risk score





Products & services

The extensive statistical material that we possess allows us to offer a range of solutions for individual customers for a fee. The solutions typically differ from our official statistics by being more detailed and contain other combinations of data than what has been published.

Surveys

We perform surveys relevant for the society covering both individuals and companies.



Data for research and analysis

We give access to micro data to authorised research institutions, ie. data at the individual and company level.

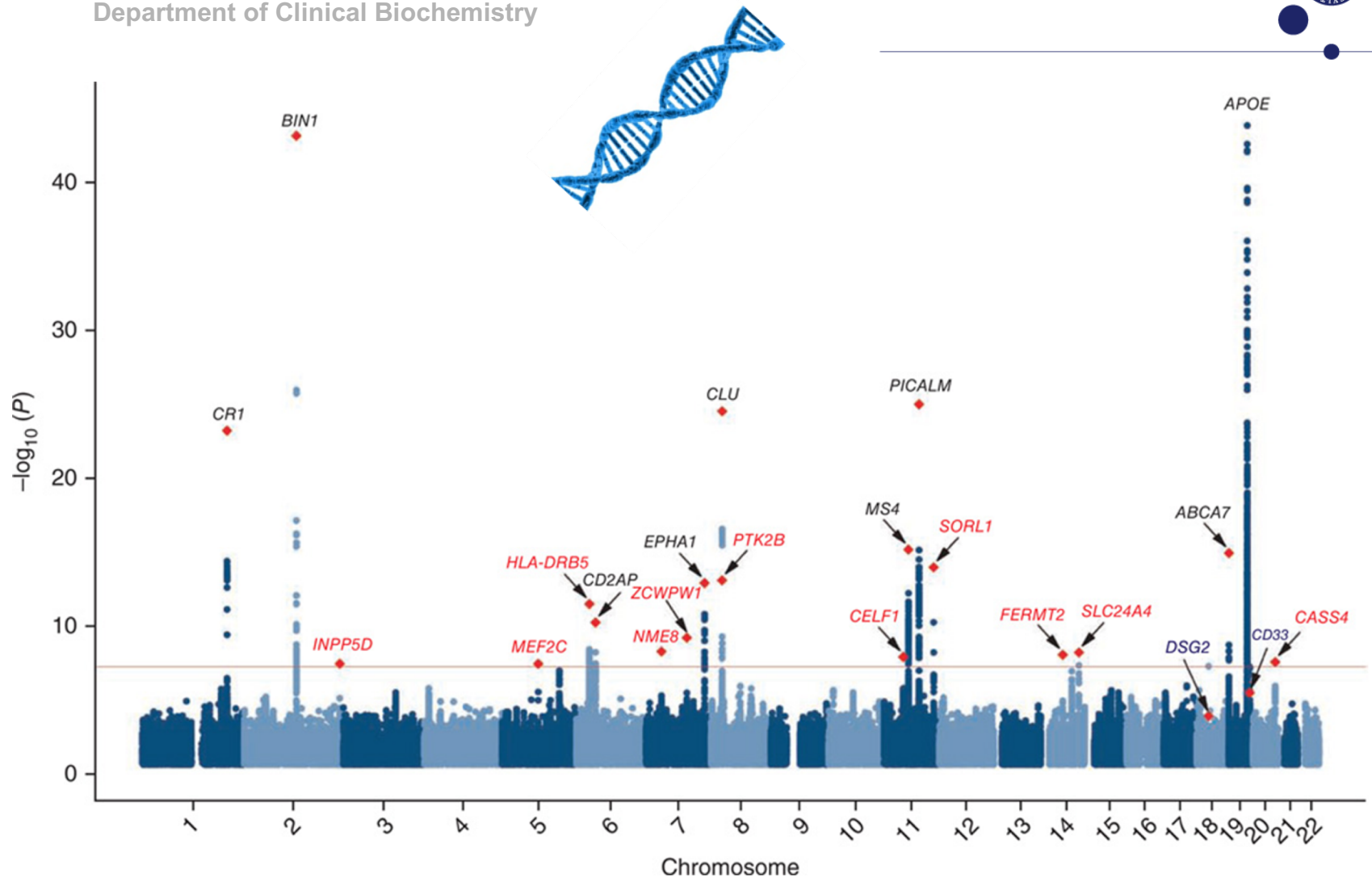


Tailor-made solutions

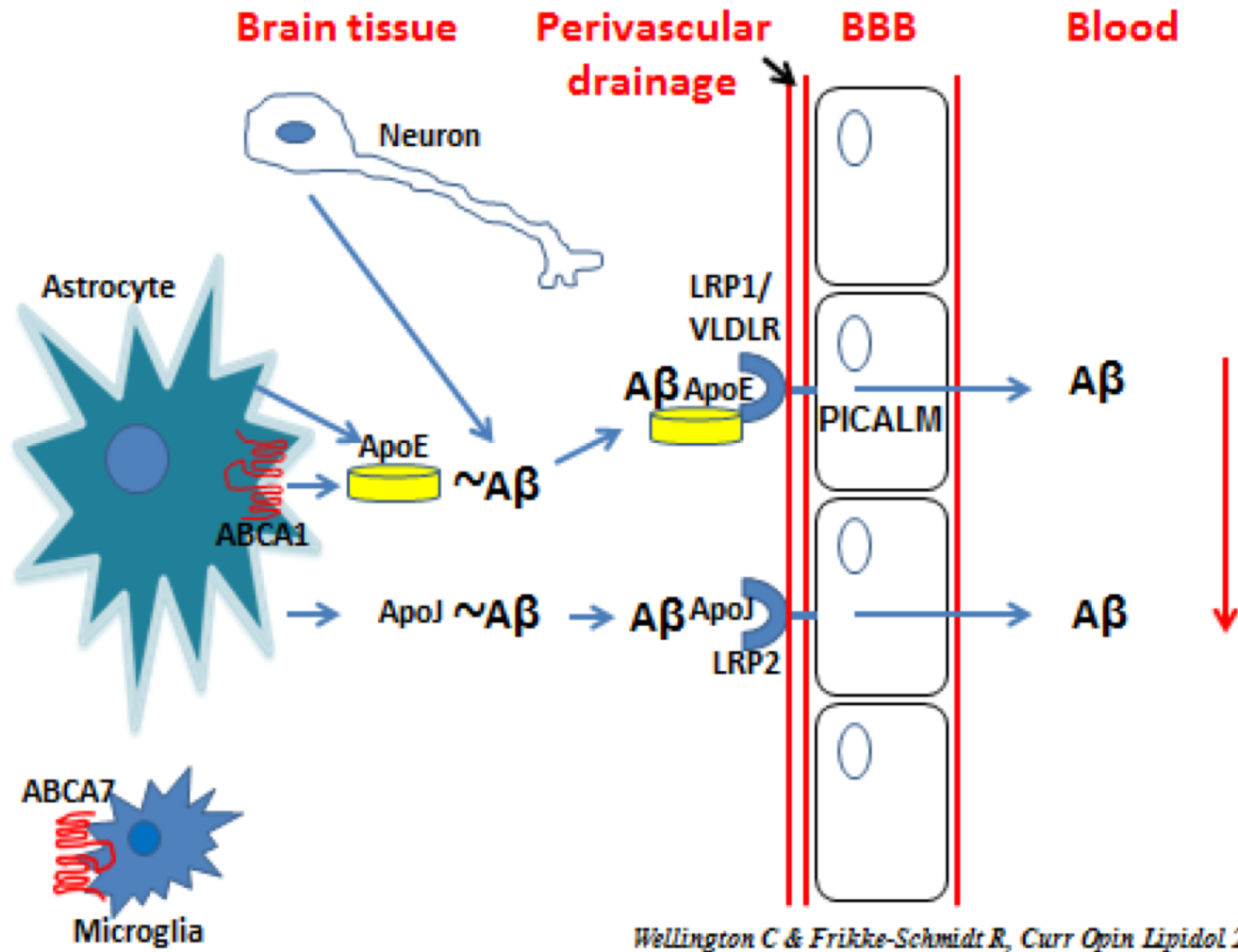
When the customer's needs cannot be met by StatBank Denmark or a predefined standardised solution.

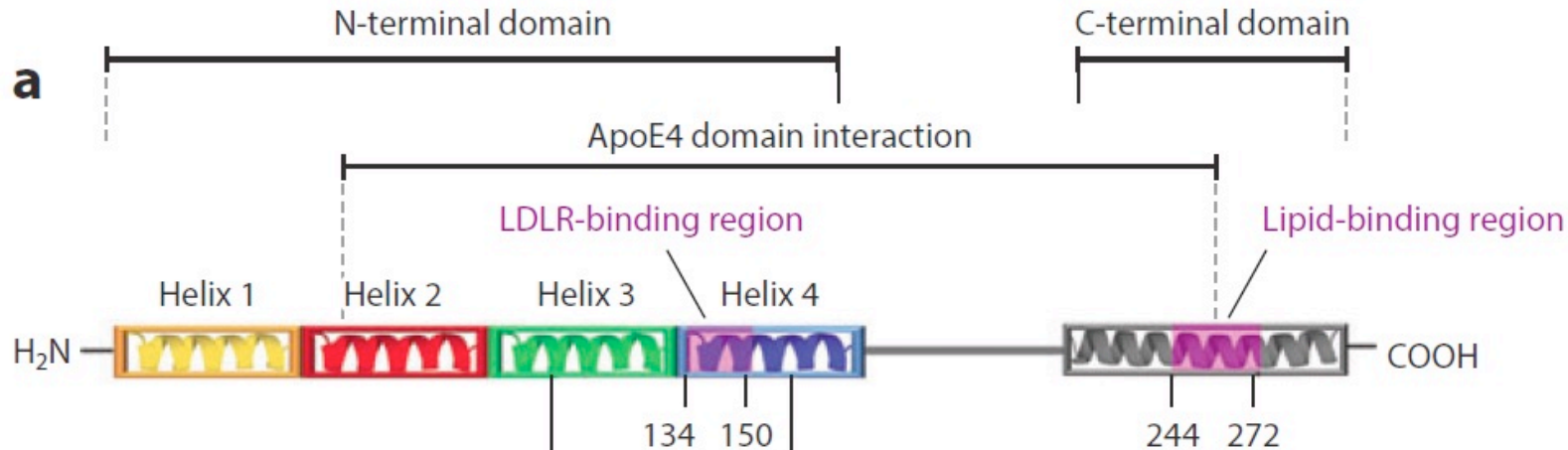


Demography
Work relations
Education
Income
Retirement status
Emigration/Immigration
Ethnicity
Diseases
Medicines

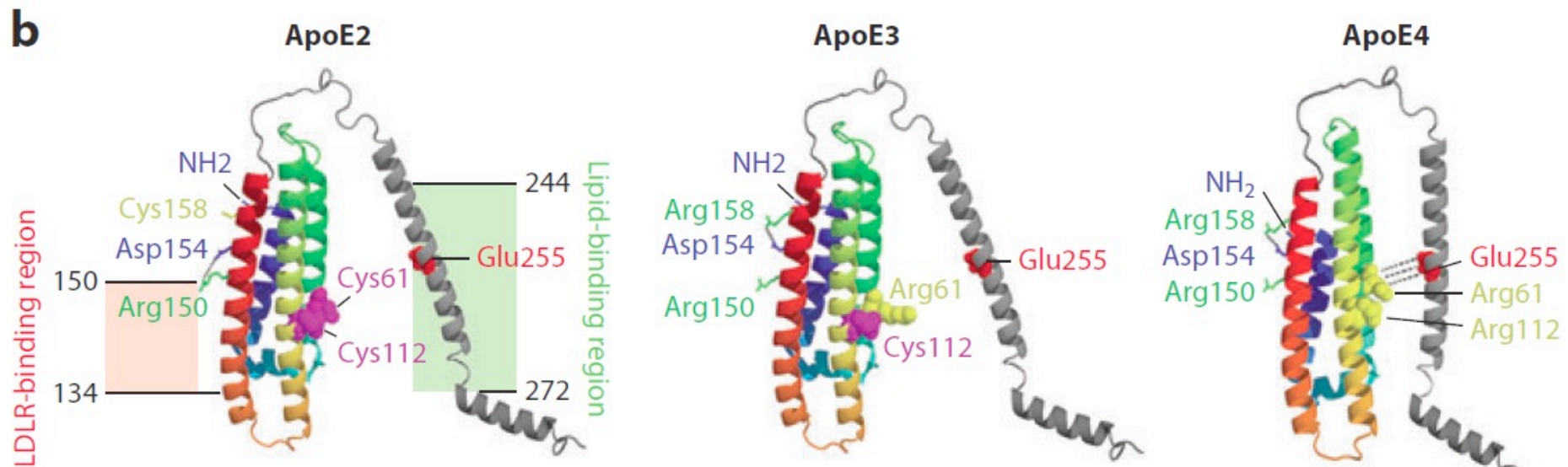


J.C. Lambert et al. Nat Genet 2013;45:1452-1458





	112	158	Frequency in populations
ApoE4	Arg	Arg	15–20%
ApoE3	Cys	Arg	60–70%
ApoE2	Cys	Cys	5–10%

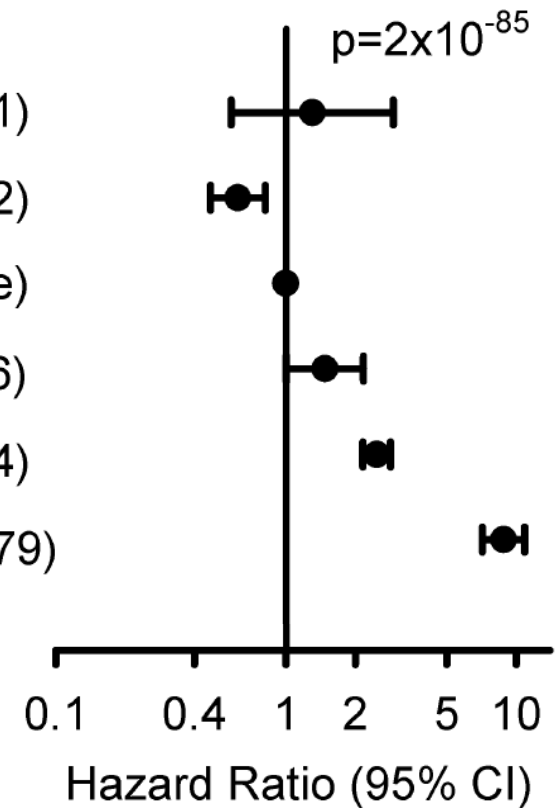




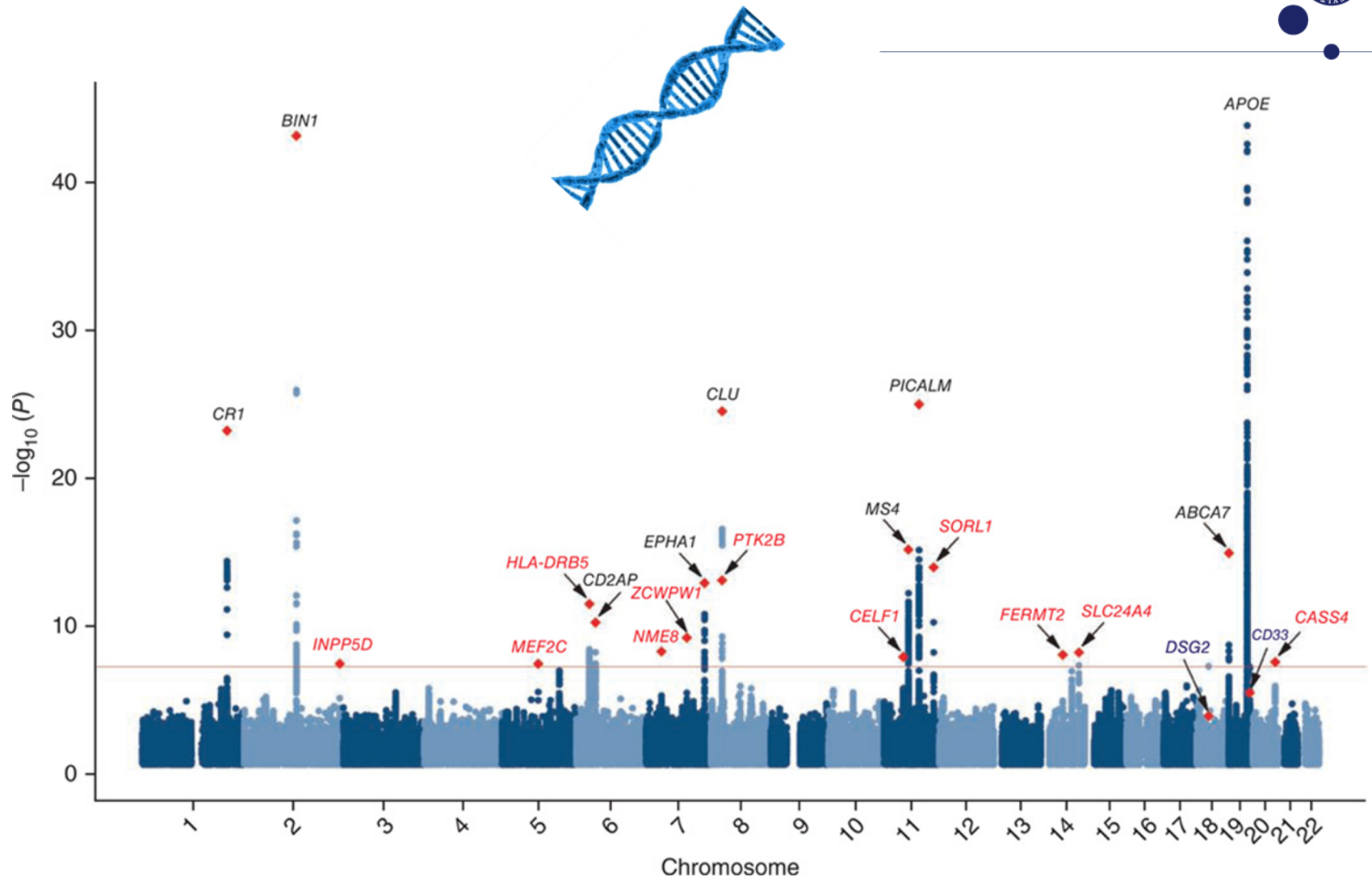
APOE genotype	N total	N events	Hazard ratio (95% CI)	P for trend
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Alzheimer disease

ε22	715	6	1.30 (0.58-2.91)
ε32	12,994	59	0.62 (0.47-0.82)
ε33	58,172	405	1.00 (reference)
ε42	3,013	28	1.48 (1.01-2.16)
ε43	26,626	398	2.47 (2.15-2.84)
ε44	3,017	112	8.74 (7.08-10.79)



Rasmussen et al., Ann Neurol 2015



J.C. Lambert et al. Nat Genet 2013;45:1452-1458



A 2 year multidomain intervention of diet, exercise, cognitive training, and vascular risk monitoring versus control to prevent cognitive decline in at-risk elderly people (FINGER): a randomised controlled trial

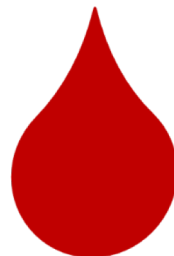


Tiia Ngandu, Jenni Lehtisalo, Alina Solomon, Esko Levälähti, Satu Ahtiluoto, Riitta Antikainen, Lars Bäckman, Tuomo Hänninen, Antti Jula, Tiina Laatikainen, Jaana Lindström, Francesca Mangialasche, Teemu Paajanen, Satu Pajala, Markku Peltonen, Rainer Rauramaa, Anna Stigsdotter-Neely, Timo Strandberg, Jaakko Tuomilehto, Hilikka Soininen, Miia Kivipelto

Summary

Background Modifiable vascular and lifestyle-related risk factors have been associated with dementia risk in observational studies. In the Finnish Geriatric Intervention Study to Prevent Cognitive Impairment and Disability (FINGER), a proof-of-concept randomised controlled trial, we aimed to assess a multidomain approach to prevent cognitive decline in at-risk elderly people from the general population.

Lancet 2015; 385: 2255-63
Published Online
March 12, 2015
[http://dx.doi.org/10.1016/S0140-6736\(15\)60461-5](http://dx.doi.org/10.1016/S0140-6736(15)60461-5)



HIGH-RISK INDIVIDUALS



BENEFIT - PREVENTION



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LUNDBECKFONDEN



Alzheimer
foreningen
Livet med demens



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