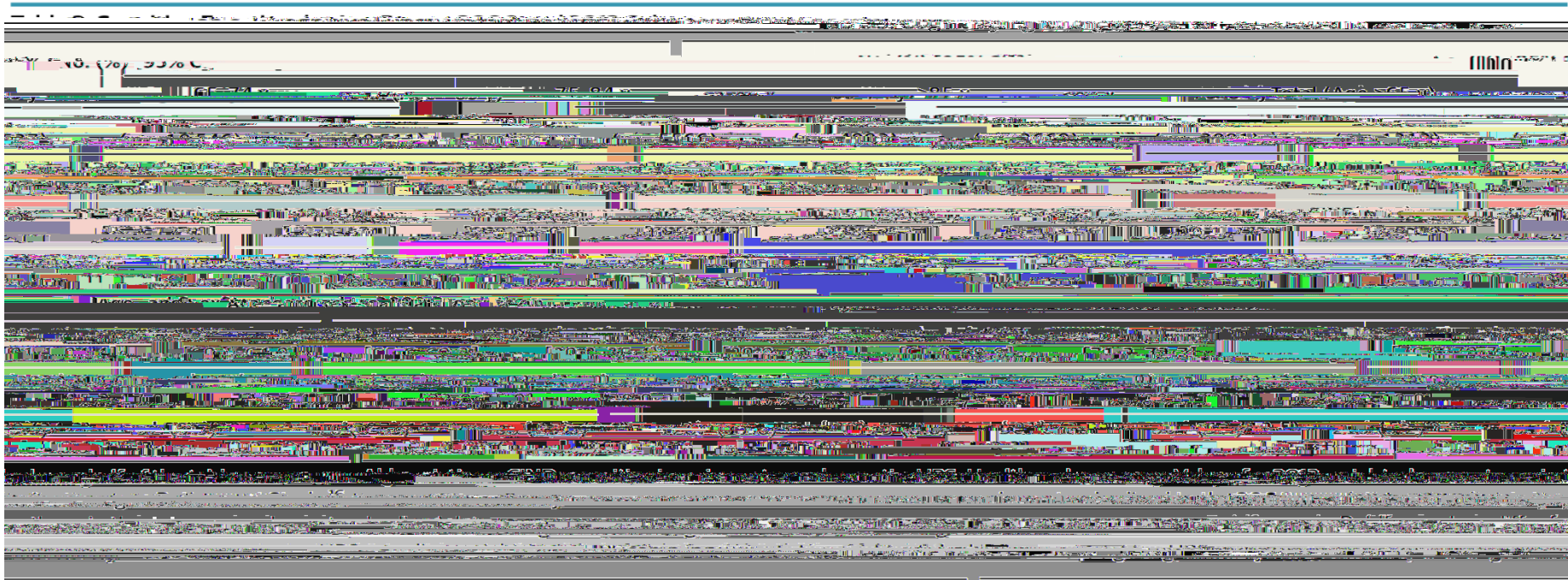


From: **A Comparison of the Prevalence of Dementia in the United States in 2000 and 2012**

JAMA Intern Med. 2017;177(1):51-58. doi:10.1001/jamainternmed.2016.6807



DEMENTIA is DECREASING in the United States

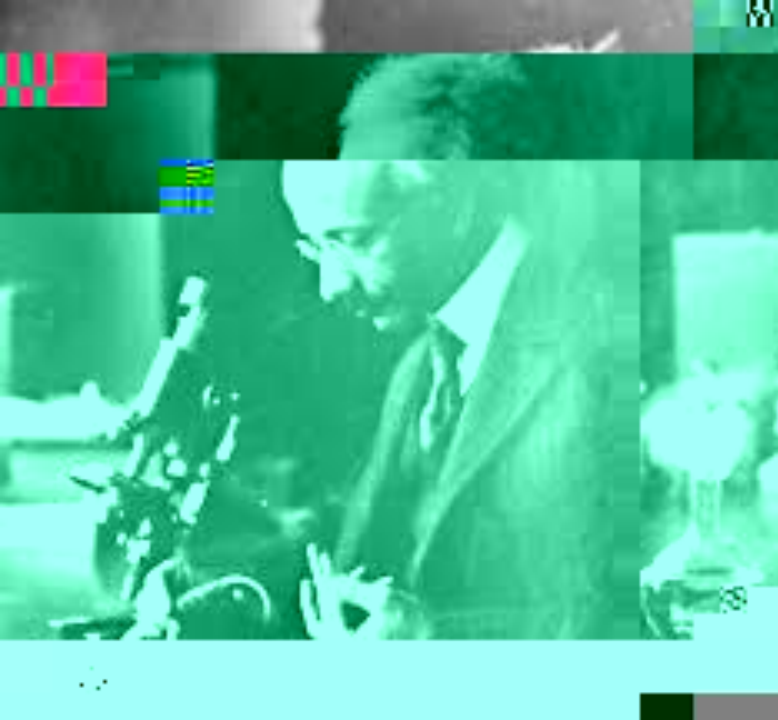
Seattle-based Adult Changes in Thought study

- Alzheimer's disease..... 45%
- Vascular based lesions..... 33%
- Lewy Body Dementia..... 10%



Correction of visual loss		
Stability	1 [Reference]	
Conversion	1.12 (0.27–4.71)	.877
Reversion	4.65 (1.58–13.70)	.005
Discontinuation of anticholinergic		
Stability	1 [Reference]	
Conversion		

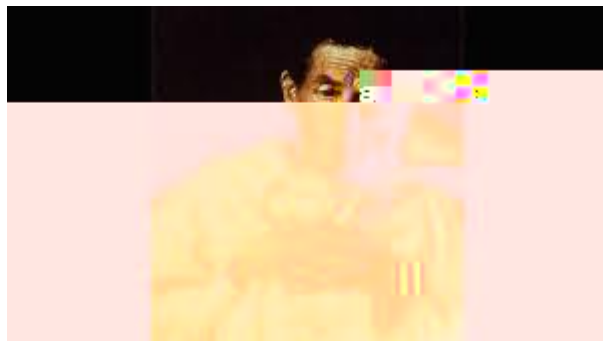
Cognitive Deficit Reversal as Shown by Changes in the Veterans Affairs Saint Louis University Mental Status (SLUMS) Examination Scores 7.5 Years Later



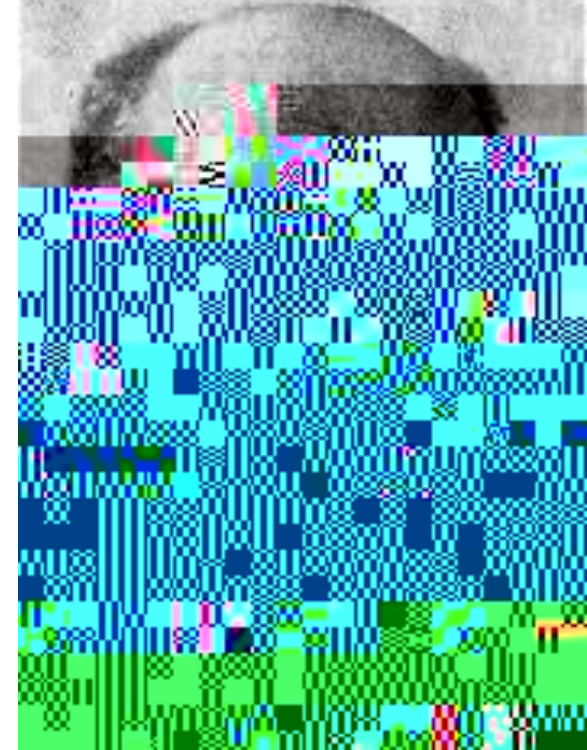
Solomon Carter Fuller, 1906



Aloysius Alzheimer, 1906/7



Oskar Fischer, 1907

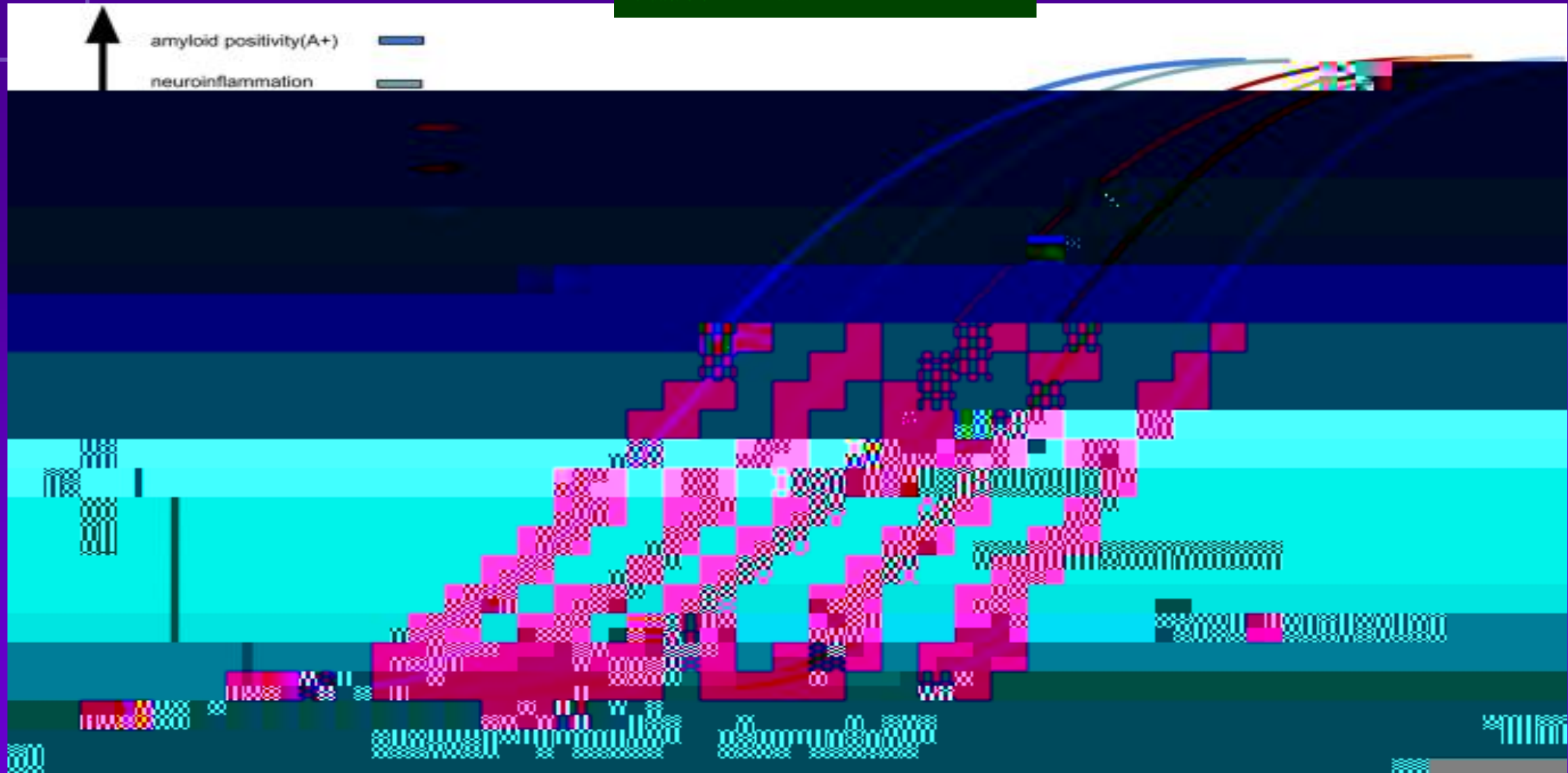


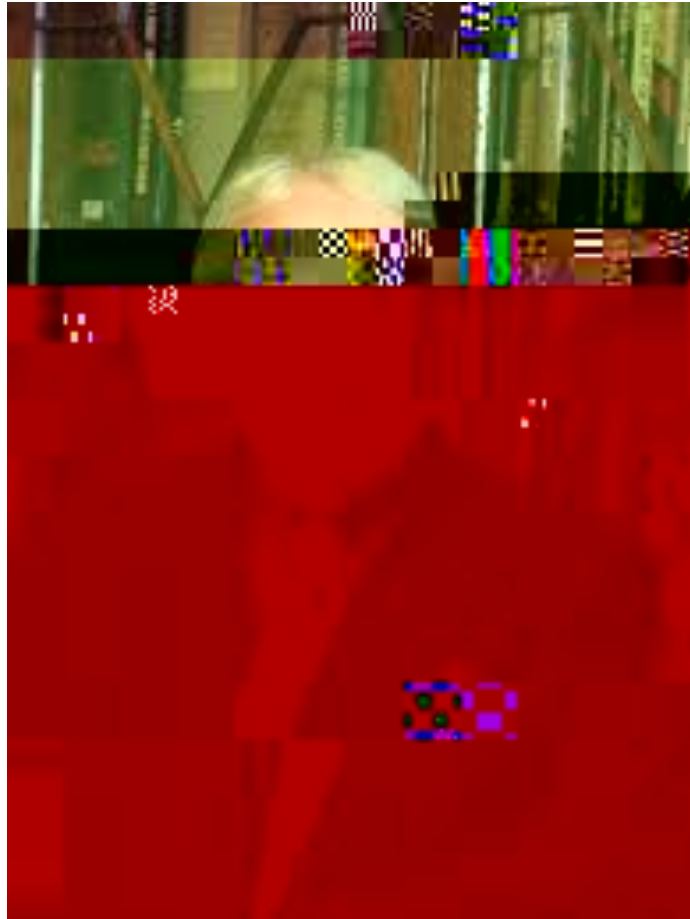


amyloid positivity(A+)



neuroinflammation





David Bowen



Peter Whitehouse

Mean Change in ADAS Total Score during the Phases of the Study.

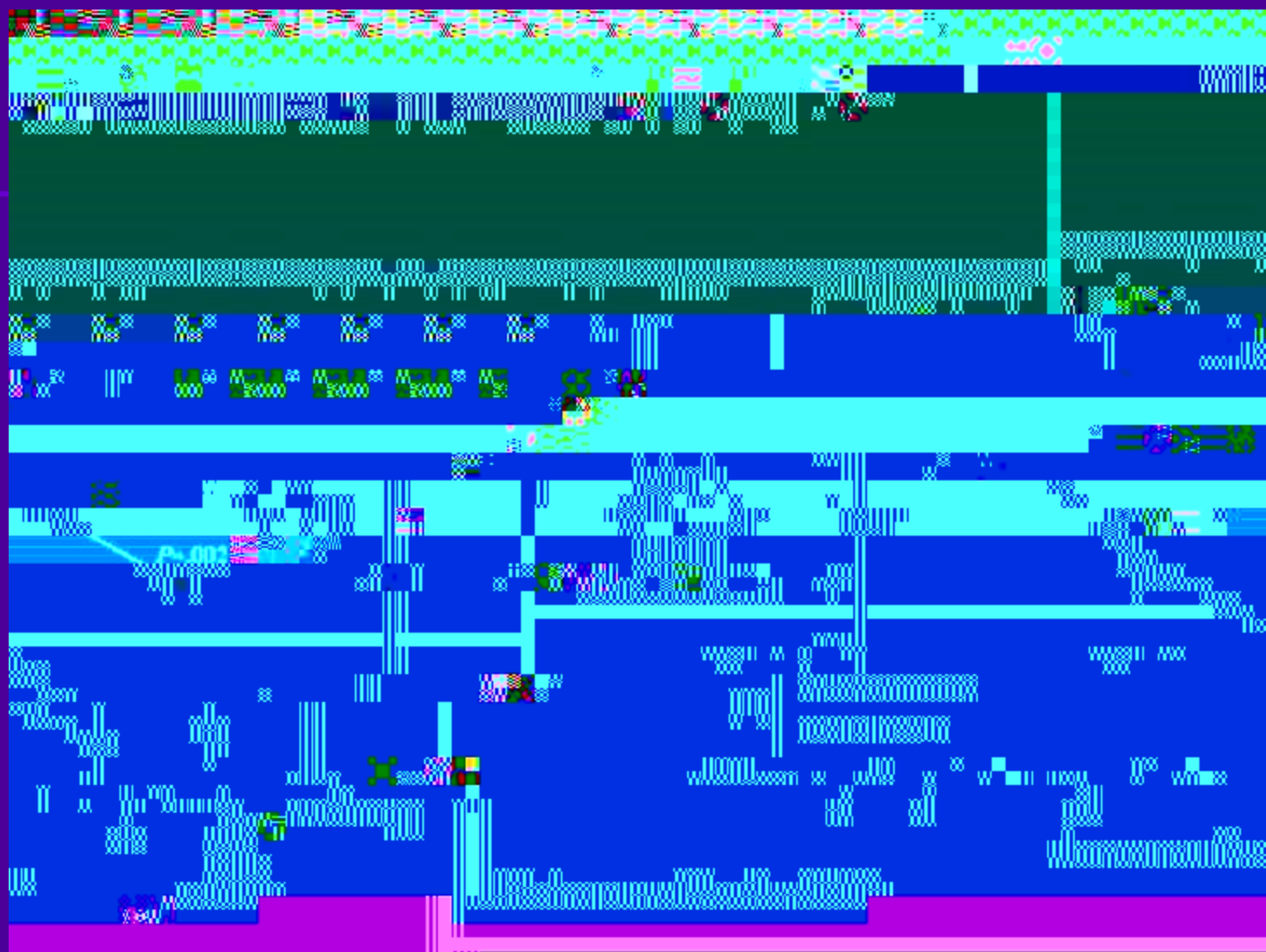


22 trials met the inclusion criteria. Follow-up ranged from six weeks to three years. 12 of 14 studies measuring the cognitive outcome by means of cognitive subscale showed differences ranging from

Benefits were also reported from all 12 trials that used the clinician's interview based impression of change scale with input from caregivers. Methodological assessment of all studies found considerable flaws for example, multiple testing without correction for multiplicity or exclusion of patients after

TABLE 1

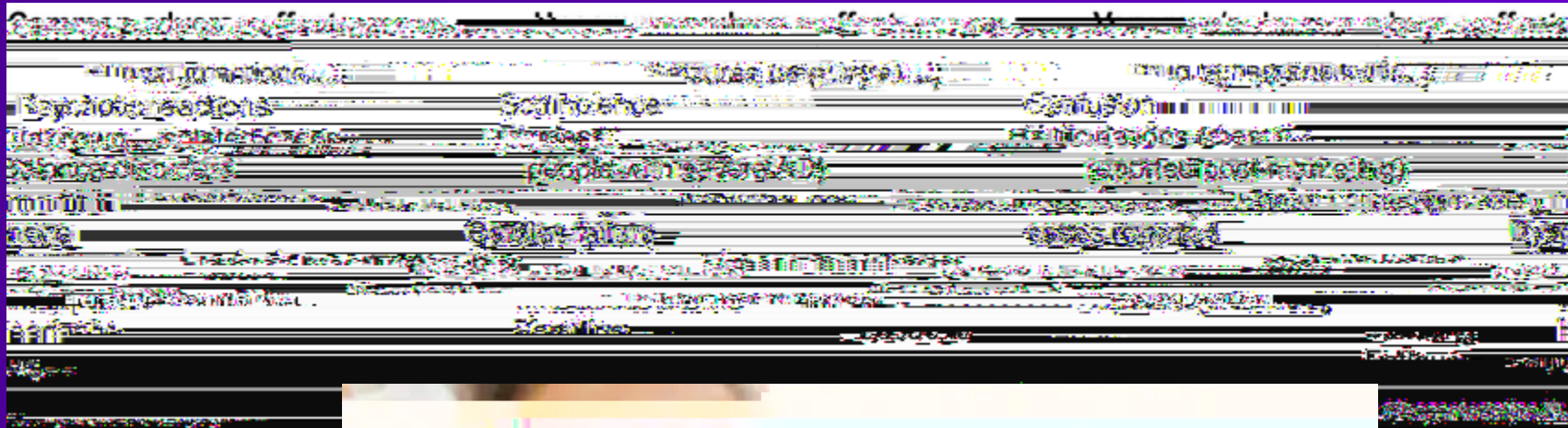
Country	Year	Sample Size	Study Design	Intervention	Control	Outcome
USA	1998	1,000	Randomized	Vaccination	No vaccination	95%
USA	2000	1,000	Randomized	Vaccination	No vaccination	95%
USA	2002	1,000	Randomized	Vaccination	No vaccination	95%
USA	2003	1,000	Randomized	Vaccination	No vaccination	95%
USA	2004	1,000	Randomized	Vaccination	No vaccination	95%
USA	2005	1,000	Randomized	Vaccination	No vaccination	95%
USA	2006	1,000	Randomized	Vaccination	No vaccination	95%
USA	2007	1,000	Randomized	Vaccination	No vaccination	95%
USA	2008	1,000	Randomized	Vaccination	No vaccination	95%
USA	2009	1,000	Randomized	Vaccination	No vaccination	95%
USA	2010	1,000	Randomized	Vaccination	No vaccination	95%
USA	2011	1,000	Randomized	Vaccination	No vaccination	95%
USA	2012	1,000	Randomized	Vaccination	No vaccination	95%
USA	2013	1,000	Randomized	Vaccination	No vaccination	95%



Momenting Plus Diagram

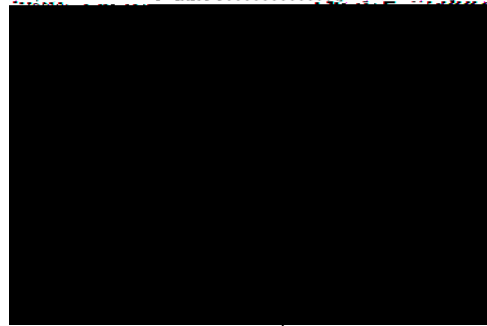
Shear Force = 318 kN/m² 10 Meters in Water Air



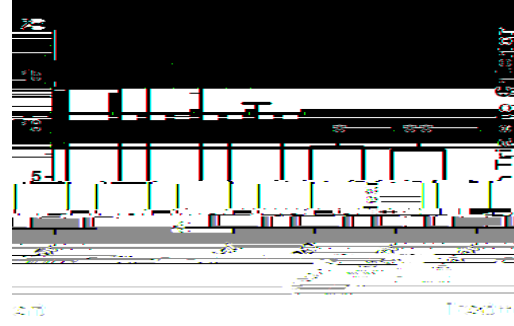


Extra Virgin Olive Oil Extracts

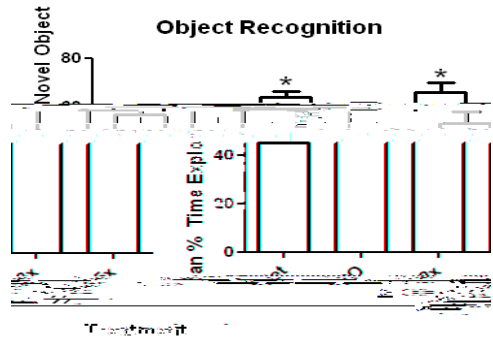
A



B



C



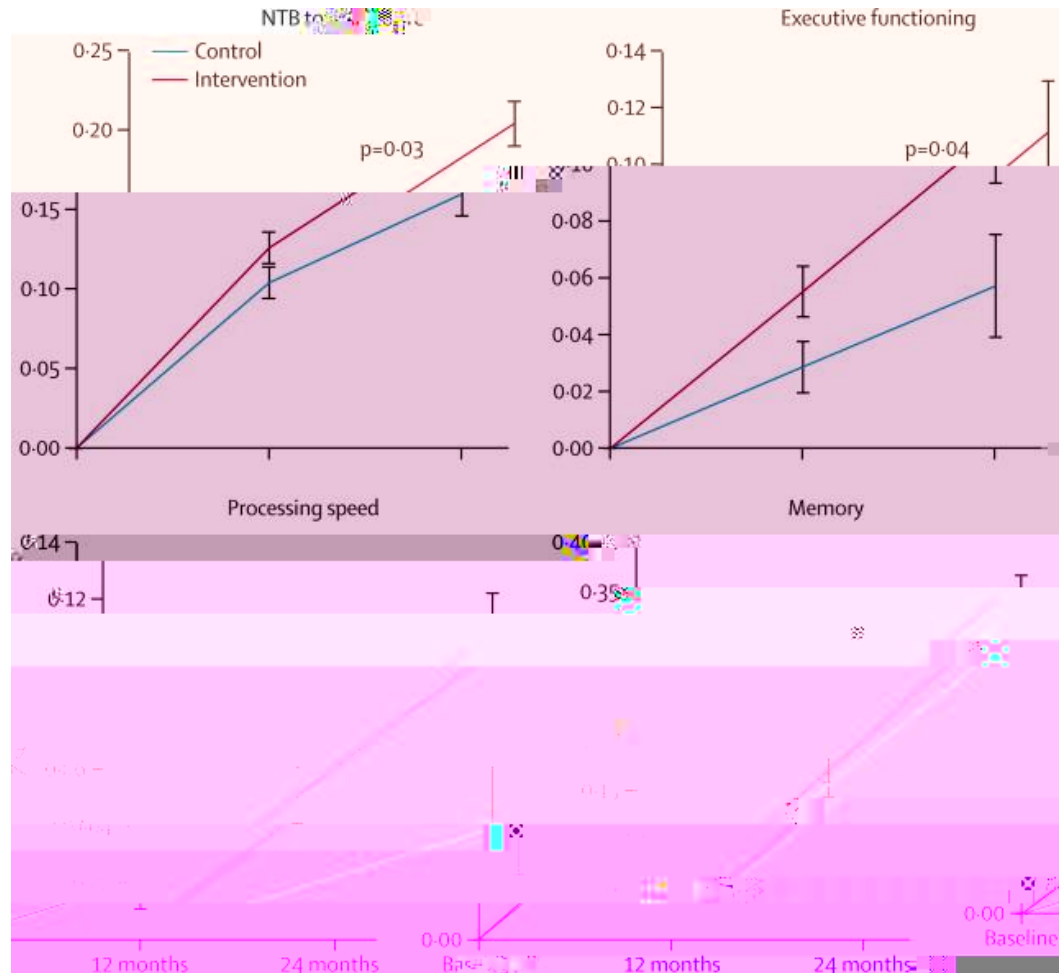


FINGER STUDY

Aged 60-77 years recruited from previous national surveys.

A 2 year multidomain intervention (diet, exercise, cognitive training, vascular risk monitoring), or a control group (general health advice).

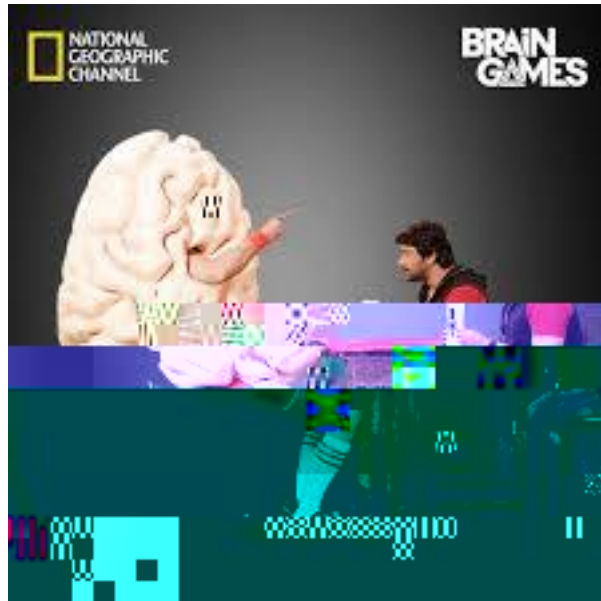
1260 to the intervention group (n=631) or control group (n=629).



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

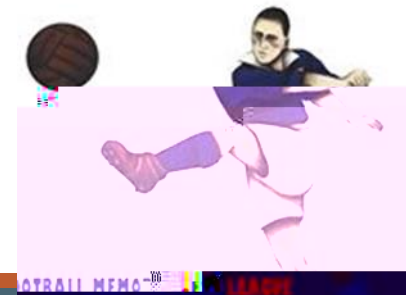
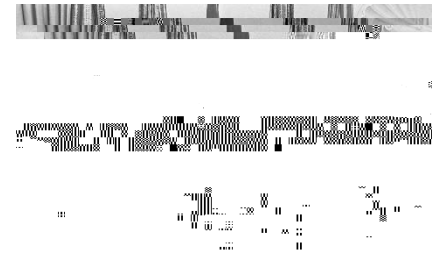
Tiia Ngandu , Jenni Lehtisalo , Alina Solomon , Esko Levälähti , Satu Ahtiluoto , Riitta Antikainen , Lars Bäckma...





Reminiscence Therapy*

- Discussion about the past, often using prompts (e.g. pictures, objects, music) with groups or individuals (e.g. life review books).
- Focuses on long-term memory, the last to deteriorate in dementia.
- Extremely popular - helps to avoid failure experiences, aids communication.
- Cochrane review** showed marginal improvements in cognition and mood.
- [Football for men with dementia: lessons from a realistic evaluation.](#) , Schofield I. Nurs Inq. 2012 Mar;19(1):63-70



*Butler RN & Lewis MI (1977). Aging and Mental health: Positive psychosocial approaches. Saint Louis: CV Mosby Company.

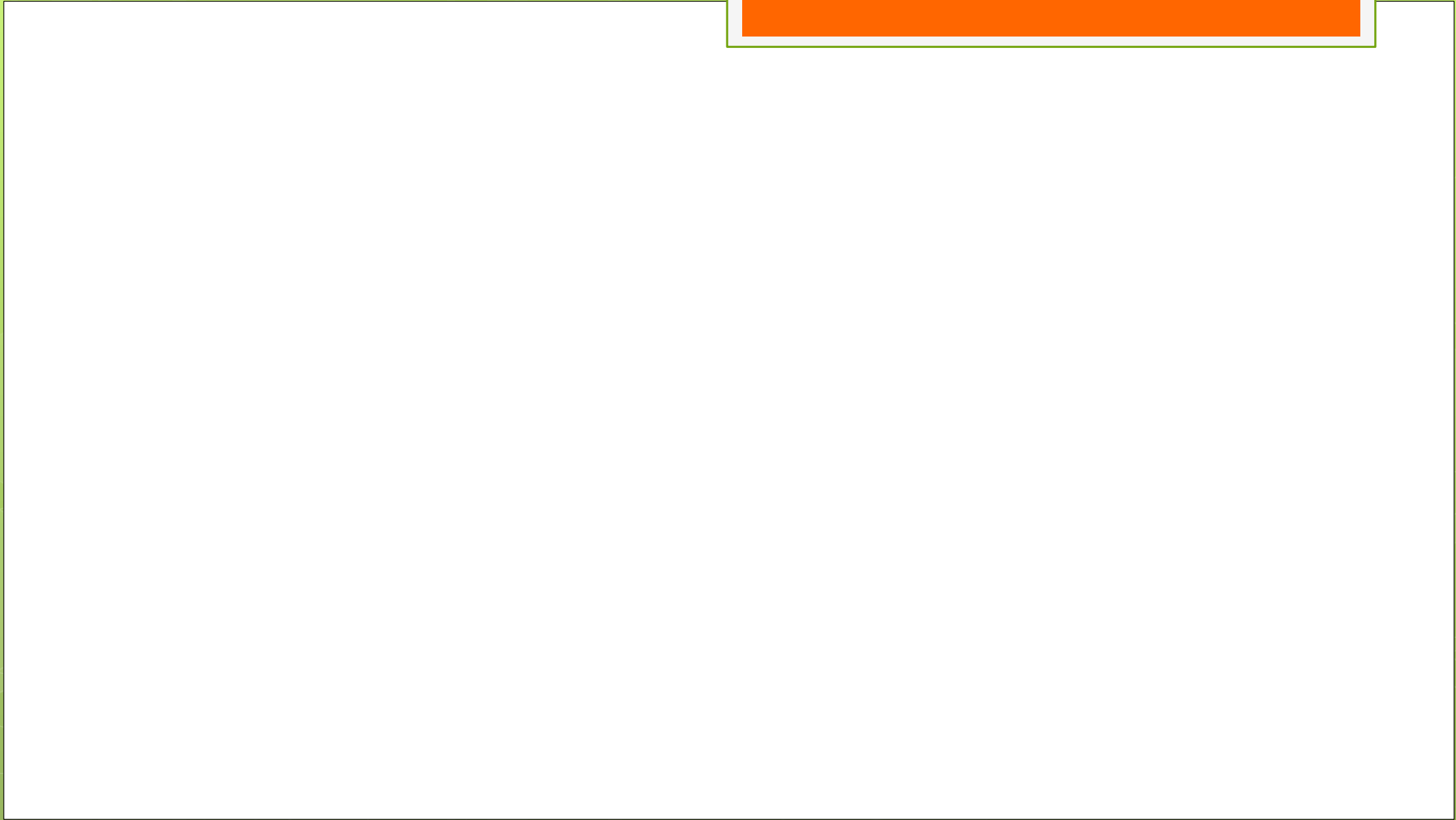
**Woods, B., Spector, A. E., Jones, C. A., Orrell, M., & Davies, S. P. (2005). Reminiscence therapy for dementia.

Cardinals Reminiscence League



SAIDO

J Am med Dir Assoc 2015;16:56





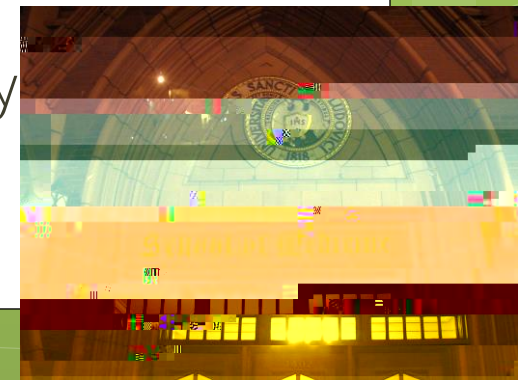
Created largely by Aimee Spector, Martin Orrell, and Bob Woods:

www.cstdementia.com

Began with a review of literature on non-pharmacological therapies for mild to moderate dementia

Grounded in reality orientation, the founders combined the most effective elements of the different therapies to create CST

North American Training Center for CST at St Louis University





2003 Pilot Study (Spector et al., 2003)

Examples of Participant Improvement in Clock Drawing Test

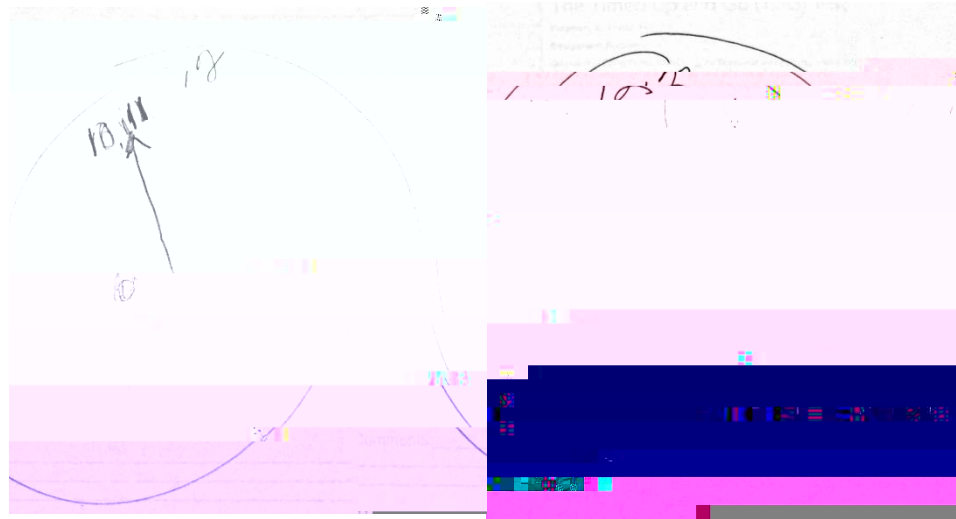


Fig. 1. Resident A Clock Drawing Test Pre- and Post-CST Results

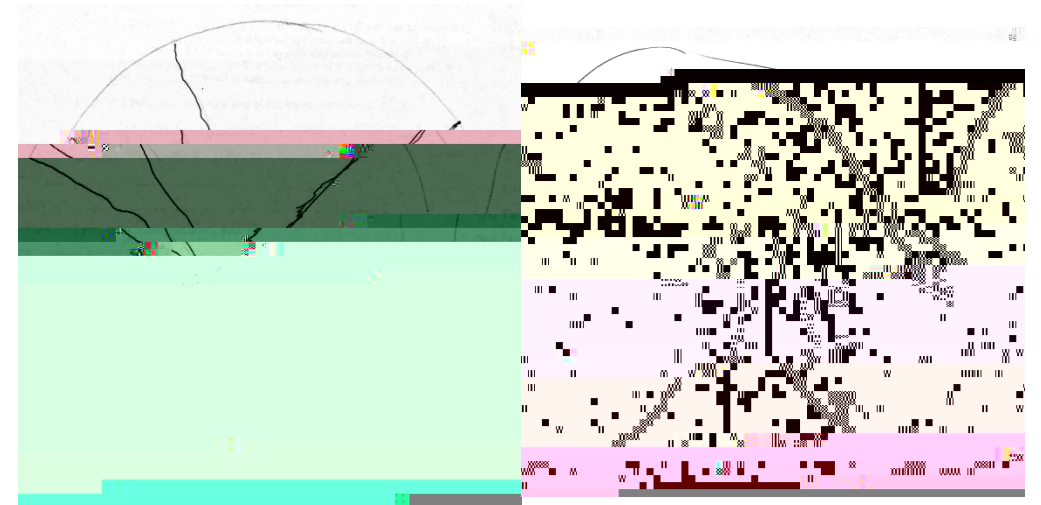
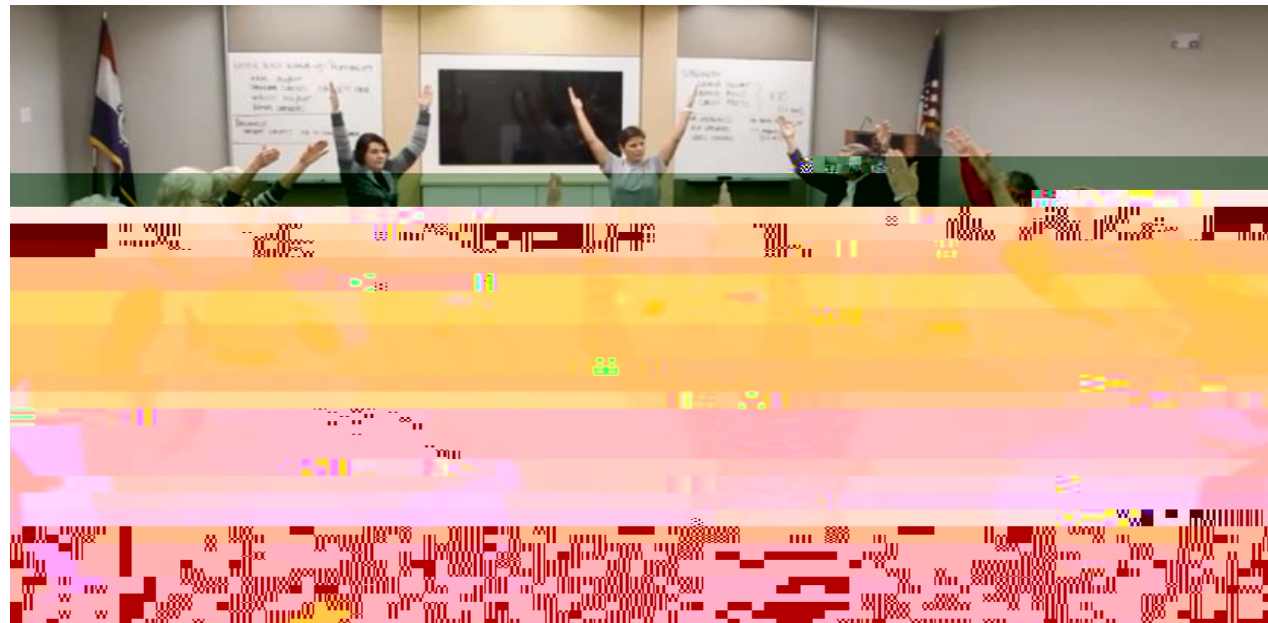
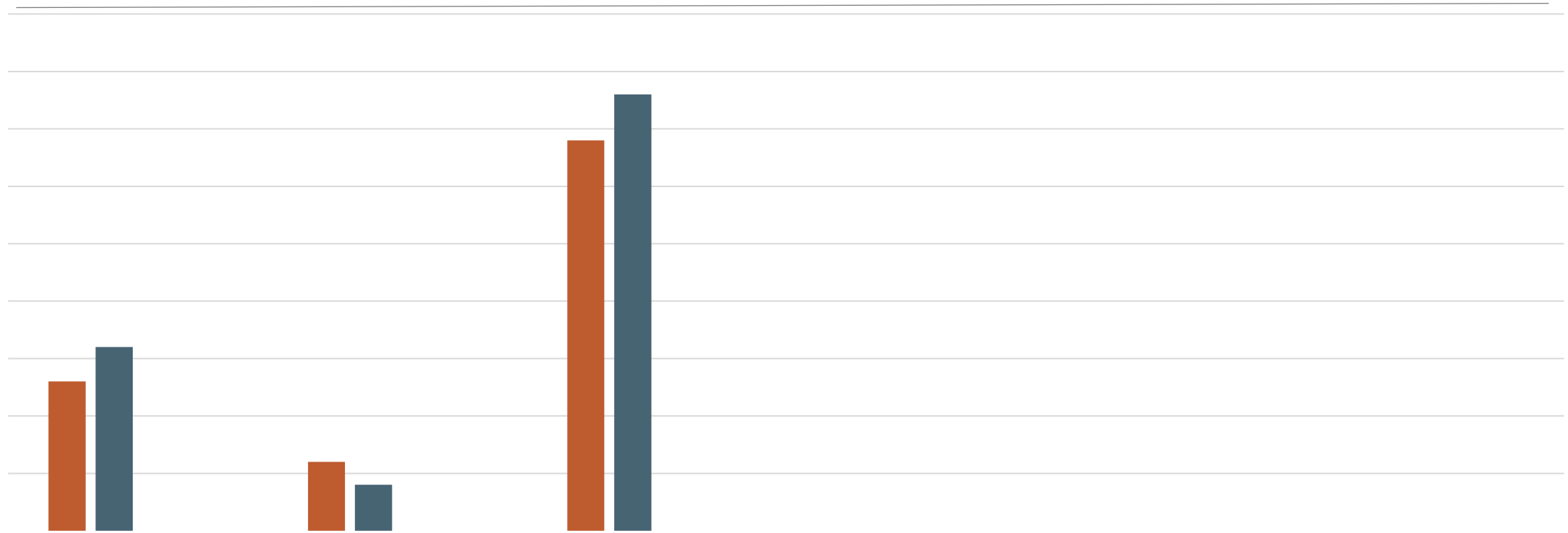


Fig. 2. Resident B Clock Drawing Test Pre- and Post-CST Results



Combining Physical Exercise with CST



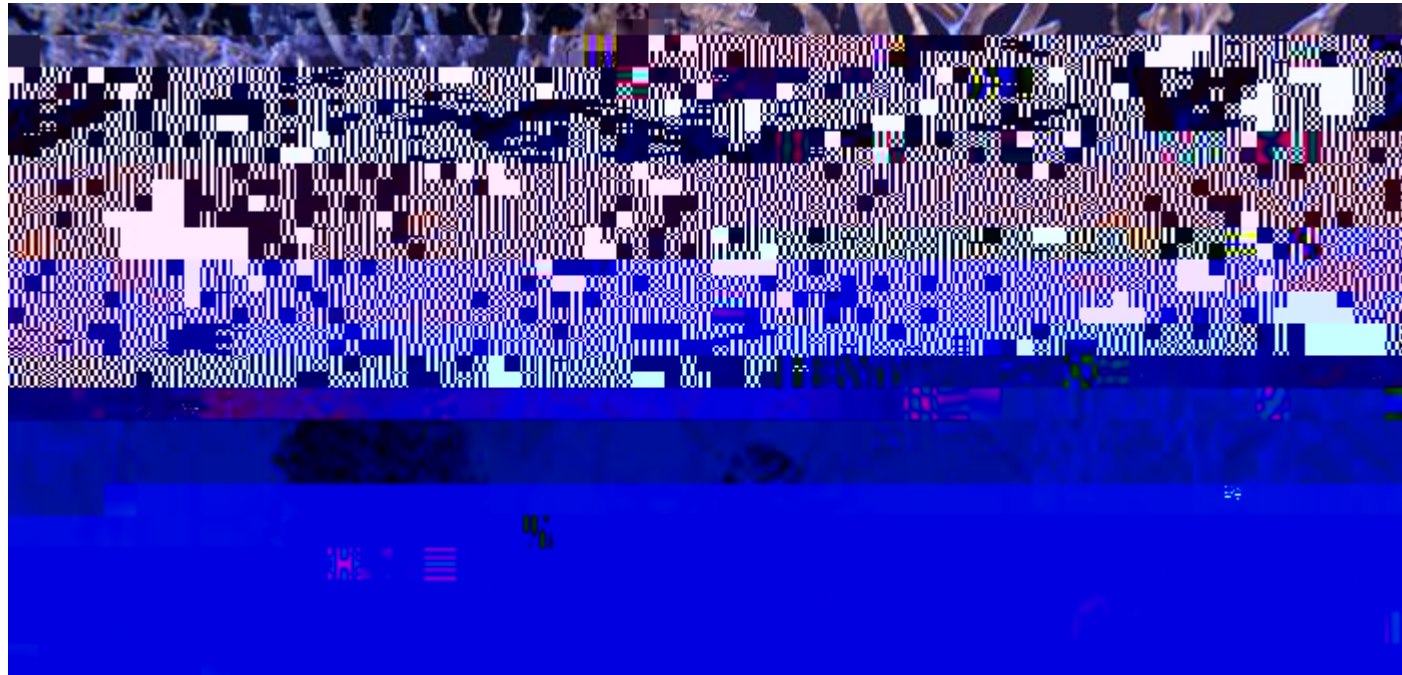


SLUMS: <20 dementia
 CCSD: A score >12 depression
 QoL-AD: maximum of 52

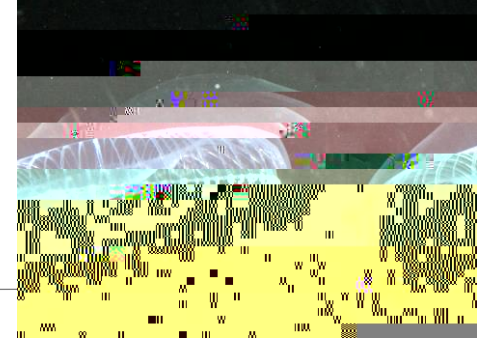
Measures high risk for falling, disability, and morbidity in older adults:
 Timed Up & Go:
 Functional Reach: 6 inches or less
 Five Times Sit to Stand: > 13.6 seconds

Oligomannate

- China approves seaweed-based Alzheimer's drug.
- It's the first new one in 17 years



PREVAGEN



- Apoaequorin is an ingredient in "Prevagen", which is marketed by Quincy Bioscience as a memory supplement.
-

