Risk and Protective Factors for Dementia Across the Lifespan

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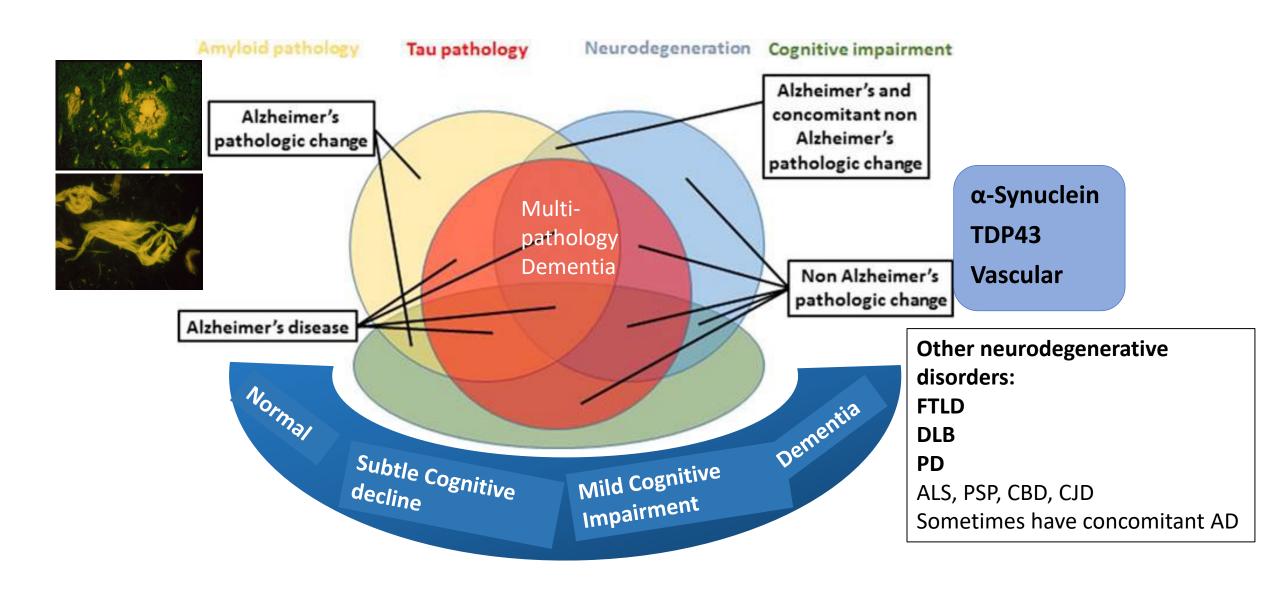


Disclosures

None

NIA-AA Research Framework: Towards a biological definition of Alzheimer's disease – A, T, N

Jack et al, Alzheimer's and Dementia, 2018



Progress toward understanding the pathogenesis of AD-multiple pathways lead to AD/ADRD

Proteostasis defects APP/Abeta Aging Genetics Mitochondria dysfunction APOE4 Oxidative stress Presenilin Epigenetic alterations Inflammation genes Genetics Aging **DNA** damage Endosomal genes Senescent cells Synaptic genes Immune surveillance Lipid metabolism genes **Environment** Toxins, Pollution, Heavy metals, Trauma, Infectious agents **Proteinopathy** Neurodegeneration Abeta Synapse damage Tau Neuronal loss Blood Synuclein Vascular damage TDP43 Inflammation

MCI/Dementia

Therapeutics

Diagnosis

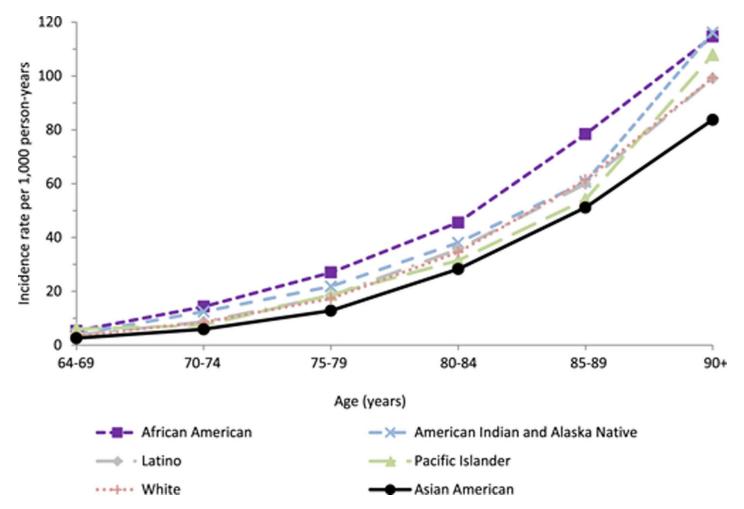
NIH National Ins

Accounts for

70% of the

variance

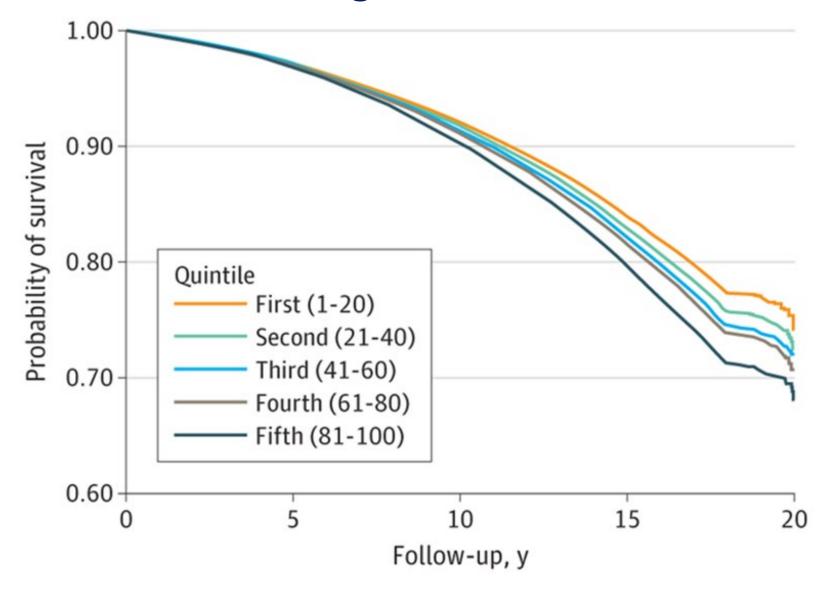
Dementia Incidence Varies Across Racial/Ethnic Groups



Dementia incidence rates per 1000 person-years by age and race-ethnicity, 2000–2013.

Mayeda et al., 2016. Inequalities in dementia incidence between six racial and ethnic groups over 14 years. Alzheimer's & Dementia.

Neighborhood Disadvantage Increases Risk of Dementia



The Lancet Commissions



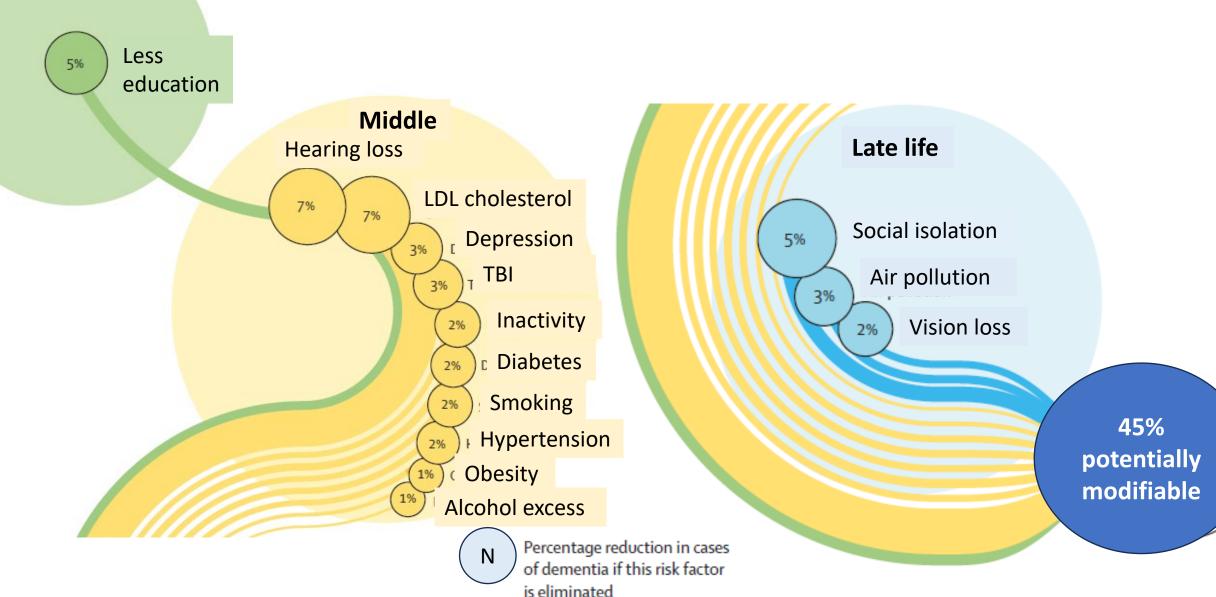


Dementia prevention, intervention, and care: 2024 report of the *Lancet* standing Commission

Gill Livingston, Jonathan Huntley, Kathy Y Liu, Sergi G Costafreda, Geir Selbæk, Suvarna Alladi, David Ames, Sube Banerjee, Alistair Burns, Carol Brayne, Nick C Fox, Cleusa P Ferri, Laura N Gitlin, Robert Howard, Helen C Kales, Mika Kivimäki, Eric B Larson, Noeline Nakasujja, Kenneth Rockwood, Quincy Samus, Kokoro Shirai, Archana Singh-Manoux, Lon S Schneider, Sebastian Walsh, Yao Yao, Andrew Sommerlad*, Naaheed Mukadam*

Early life

Population attributable fraction of potentially modifiable risk factors for dementia -Lancet Commission 2024



Insufficient or unclear data regarding risk

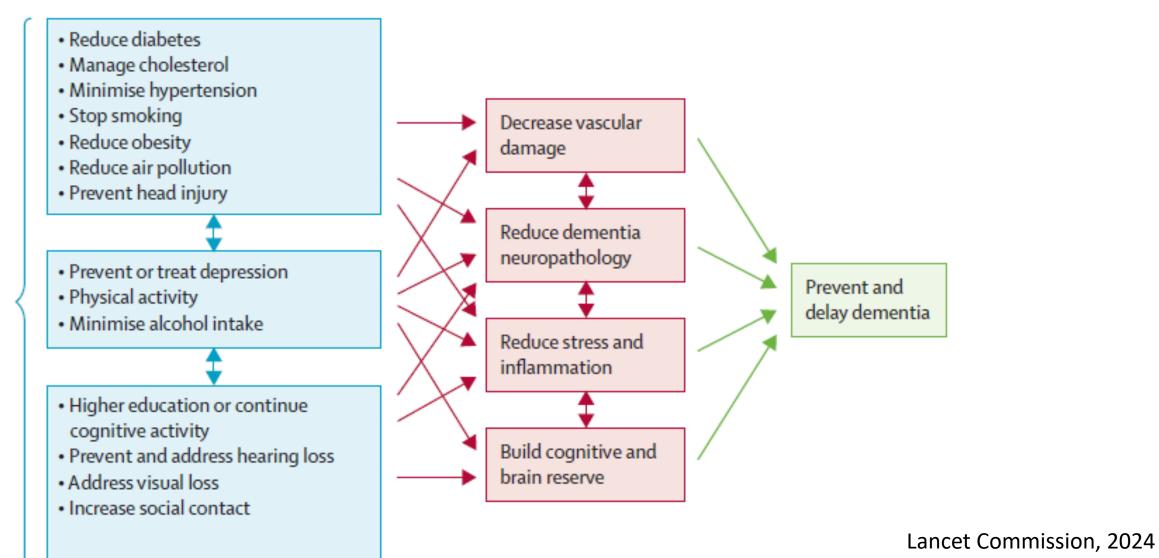
- Sleep
- Diet
- Inflammation or infection
- Major Psychiatric Disease
- PTSD
- Anxiety
- Hormone replacement therapy
- Multimorbidity and frailty

Can we modify these risk factors?

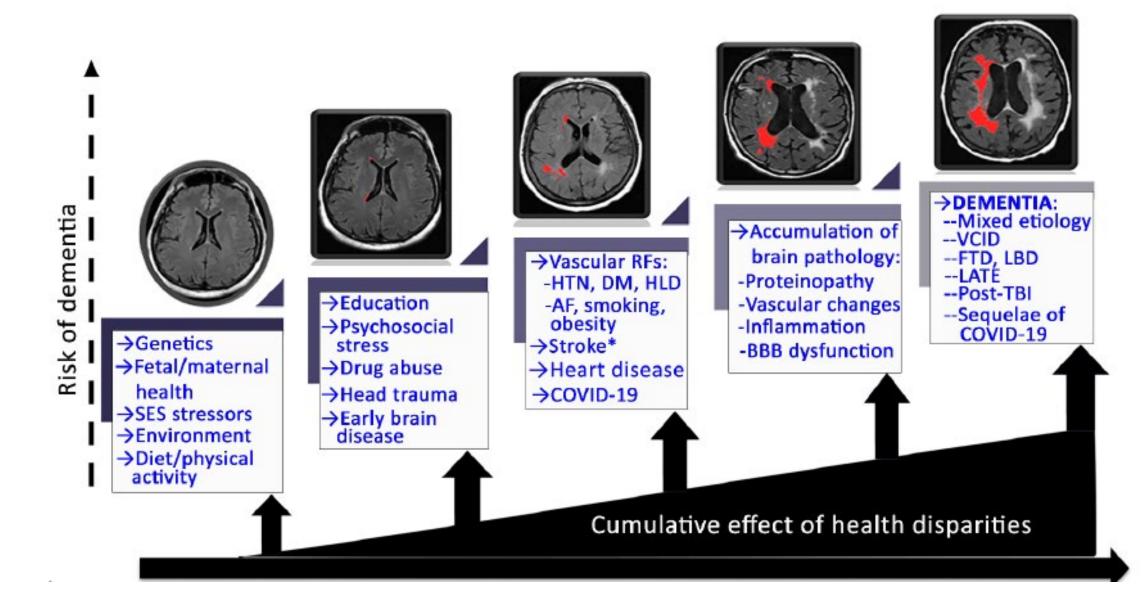
- Good quality education; midlife stimulation
- Hearing aids and decrease noise exposure
- Treat depression
- Helmets in contact sports and for cyclists
- Encourage exercise
- Reduce smoking

- Treat hypertension
- LDL cholesterol
- Healthy weight
- Reduce alcohol
- Age-friendly communities, decrease isolation
- Screen for vision loss and treat
- Reduce air pollution exposure

Potentially modifiable risk factors and possible mechanisms for protection from dementia



Health disparities may influence dementia risk



The Lancet Commission and different populations at risk

The Commission tried to assemble worldwide data, although the majority of data comes from well-educated White populations. Social determinants of health may vary among communities.

"There may be greater potential for modifying risk factors in low to middle income countries and among minoritized and lower socioeconomic groups."

Questionnaires and information we collect

- UDS 4.0 is a standardized assessment that all 34 ADRCs will be completing
- Questions about Social Determinants of Health are now included
 - Self-completed questionnaire
 - Will be administered to participants who are cognitively unimpaired
 - One-time assessment
 - Take about 10-15 minutes

Form A1a: SDOH

Purpose

- Collect data on social conditions of our participants
- Represent risk/protective factors beyond what can be gathered from ADI or other public databases

Constructs

- Section 1: Transportation
- Section 2: Financial Security
- Section 3: Social connections, activities, and environment
- Section 4: Experiences with healthcare system
- Section 5: Experiences of discrimination





Why a new form on SDOH?

Social Determinants of Health

conditions in the environments where people are born, live, learn, work, play, and age

Non-medical factors that influence health outcomes





