Dementia in China
Global Public Health Challenge

Global Patients Estimate
(Million People)

Source: Alzheimer’s Disease International
Released on September 21, 2009, World Alzheimer’s Day

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Greater Challenges in China

- 178 Million people 60+
- 10+ Million people May have dementia
- 22% of global elderly Population
- 75%+ Urban Patients Missed diagnosis

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Evolution

Prior to 1980
- No awareness of AD and dementia
- Dementia = Crazy
- No connection with Global AD Research

1980-1990
- Dementia draw attention
- Limited know-how about AD
- Start of intl. academic exchange
- Nascent Memory Disorder Clinic

1990-2000
- Dementia increase fast
- AD draw greater attention
- Nascent AD Academic Groups/NGO
- Engaged in global research and clinic trials

Today
- China becomes an aging society
- Incidence of dementia increased
- AD diagnosis/treatment available in Top-3 hospitals
- Intl. academic exchange increased
Clinical Capability

- At present, only the Top-3 hospitals can provide comprehensive diagnosis and treatment for AD patients.

  Total No. of Top-3 hospitals in China: **722**

  Source: China Ministry of Health

- Only a few hospitals established specialized Memory Disorder Clinic (estimated below 50).

- Serious shortage of experienced physicians. (estimated 300 nationwide)

- Community Health Service Centers do not have the ability to provide preliminary screening and special nursing for patients with cognitive disorder.
Care Providers

- Severe shortage of supply
  - Most of Senior Care Facilities cannot accept dementia patients.
  - A few nursing homes can accept late-stage patients.
- Currently China is short of 10 million caregivers for seniors with disability, not to mention the dementia care.
- Senior Housing has just started in China. Most of the facilities are independent living. No Alzheimer’s Care in the market.
- In-home care providers appeared in big cities like Beijing and Shanghai.
Government/Policy

- Low level of public health education
  - Often driven by public health emergency (SARS, influenza)
  - No state-level public health projects for prevention of Alzheimer’s Disease

- Less funding for AD research

- The 4 AD drugs approved by FDA have been in the Essential Medicine List since 2011.

- Dept. of Civil Affair and some local government started funding for caregiver training from 2010

- Encouraging private capital to invest private hospital and senior care facilities
Healthcare and Social Supporting

- Currently there is no social/commercial insurance programs related to dementia care
- No long-term care insurance in China
- Community service is lack of capability of dementia care
- NGO/NPO are small scale
Global pharmaceutical companies engaged in China AD market

- AD drug suppliers: Eisai, Lundbeck, Novartis, and Xian-Yanssen/Johnson & Johnson
- Clinical Trials: Pfizer, GlaxoSmithKline, Merck, Bristol-Myers Squibb...

Chinese scientists, whether they are overseas or domestic, are actively participating in global clinical research

- Pathogenesis
- Drug development
- Clinical trials
Domestic pharmaceutical companies’ performance

- Backward in general
- Some drugs entered Essential Medicine List but the effect is poor
- Lack of evidence-based research
- Some drugs enter into market as nutritional supplements. Over-exaggerated advertising and promotion lead to negative market impact
Patients and families

- High awareness of the phrase “Senile Dementia” along with misperceptions
  - Dementia = Normal aging
  - Dementia = Crazy

- More than 75% missed diagnosis in urban areas.

- A serious shortage of knowledge and skills to cope with dementia

- Give up medical and rehabilitation treatment, withdraw from social life

- Low quality of dementia care, and low quality of daily life
CHINA

記忆健康360工程

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