

POSITION STATEMENT ON ANTI-DEMENTIA MEDICATION FOR ALZHEIMER'S DISEASE BY SWISS STAKEHOLDERS

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The number of dementia patients in Switzerland continues to rise sharply. There is also an increase of statements and guidelines from experts and professional societies, scientific evidence and policy initiatives such as the 2014-2019 National Dementia Strategy, which addresses the effectiveness and quality of dementia treatment. Nevertheless, there are still parts of society questioning the efficacy and utility of, in particular, the medical treatment of dementia and even its very existence as a medical condition.

These voices have also led to skepticism at the level of some health authorities regarding the effectiveness of drugs in the treatment of dementia. For example, in France, the costs of officially approved anti-dementia drugs (medicines that can relieve various symptoms of Alzheimer's disease) are no longer reimbursed by health insurance. But given the recent failures in clinical drug research, the importance of available pharmacological treatments as well as psycho-social approaches available is again underlined.

This view and the associated consequences contradict all available facts and the current knowledge about diseases associated with dementia.

The present document represents the position of the relevant health care associations, clinical and research centers, research-supporting foundations and the association Alzheimer Switzerland.

Dementia is not part of normal aging but a disease developing more frequently in old age. The term dementia includes diseases of various causes, which are distinguished by decreased cognitive function, limitations of everyday activities, and behavioral disturbances (depression, apathy, irritability, insomnia, etc.). Causes of dementing diseases may be predominantly of a neurodegenerative (in particular Alzheimer's disease, dementia with Lewy bodies, frontotemporal dementia) or vascular nature (diseases of the small or large brain arteries). These conditions are listed in the International Classification and Diseases (ICD-10), which also provides the basis for reimbursement of the basic health care insurance (KVG/LAMal). Depending on the etiology of dementia, different treatment options are available, including four officially approved anti-dementia drugs. In order to achieve maximum benefit, early and accurate diagnosis is paramount.

All patients with dementia have the right to receive state-of-the-art treatments. Depending on the type of dementia, various pharmacologic and non-pharmacologic options are available, as described in numberless medical textbooks. Therapy with currently available anti-dementia drugs together with non-pharmacologic options, can improve cognitive deficits and behavioral disturbances, facilitate emotional stabilization, and help patients to remain in their social environment. Although not curative, currently available drugs have demonstrated efficacy to improve or stabilize cognitive symptoms for as long as 18 months. In recent years, the knowledge of the causes of Alzheimer's disease has expanded enormously, and new therapeutic approaches are being developed in preclinical and clinical research. For this reason, it is vital to continue investing in research to develop new pharmacological and non-pharmacological treatment options.

Early diagnosis and treatment of dementia is crucial. The number of patients suffering from dementia will continue to increase in the next few years, not least due to demographic changes (population aging). Early detection and treatment enables longer-term autonomy and stabilization at home, and

delays long-term nursing home placement. It thus reduces the burden on relatives and the societal costs of care. Early detection is also the prerequisite for patients to decide on their own treatment and care in the present and in their future (i.e. advanced care planning). For these reasons, patients with diagnosed dementia must be treated quickly according to Swiss and international guidelines. Treatment should include anti-dementia drugs in patients with Alzheimer's type dementia whenever not contraindicated.

More intense information, education, and counseling on dementia is necessary. Currently, a large part of dementia cases are not diagnosed or diagnosed too late, and only a fraction is treated adequately. To address this issue, enhanced awareness of the general population, counseling of the affected persons and their relatives, providing enhanced education to health care professionals and promoting networking among them must be placed at the forefront of the political agenda. Only in this way can an optimization of the efficiency and a reduction of the costs of care be achieved in the context of the currently available treatments. Denying treatment to patients in the early disease stage ultimately leads to higher health costs in the more severe later stages of the disease.

Media should provide a balanced and fair reporting of scientific discoveries on Alzheimer's and dementia. We understand and share the disappointment of the civil society at the inconsiderate use of premature scientific results on new drugs for Alzheimer's, often at very early development stages, or fake curative interventions. We also share the disappointment at the pessimism arising from the failures, one of which very recent, of drugs aimed at slowing the progression or preventing the development of the disease. Even the most successful drugs need between 5 and 10 years from evidence of efficacy in animal models to availability to patients. We advocate a cautious approach of media and scientists alike when delivering information on scientific discoveries in the Alzheimer's drug domain.

Drugs should be accompanied by listening, compassion, and understanding. Alzheimer's and related diseases hit the very core of humanity of a person, and what he/she represents for his/her dearest ones, friends, and colleagues. Patients with Alzheimer's and other dementing diseases have the right to be cared for by empathic, attentive, patient, and listening health care professionals. Far from being alternative, the biomedical and the psycho-social approaches enrich and complement each other, and the result is much more than the sum of the two.

All patients with dementia have the right to be treated. All citizens have the right to an accurate diagnosis and state-of-the-art treatment in case of illness. This also applies to persons with potential dementia and those who are difficult to reach or diagnose (for example, people with intellectual disabilities). Funds must continue to be assured to their pharmacologic and non-pharmacologic treatment, including accompanying counseling and care services.

All principles expressed above are also part of the National Dementia Strategy 2014-2019 of the Swiss Federal Government, and the Cantons, and are strongly endorsed by the signatories listed below.

The position statement is signed by Memory clinics and institutions. The published document is not supposed to mention individuals' names. These are provided solely to journalists as contacts for interviews.

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