Editorial

February proved to be particularly busy for the Alzheimer Europe Board and staff.

The Board of the organisation met in Brussels on 27 February and signed off the organisation’s financial accounts for 2011 and the report to the European Commission on the activities we undertook in 2011 in the framework of the operating grant we received. The Board also took the first steps towards the establishment of the Alzheimer Europe Foundation to support the organisation in diversifying its sources of income.

On 28 and 29 February, we organised a meeting with public affairs representatives of a number of our member organisations. The meeting served a dual purpose: it allowed us to inform our members and consult them on important EU initiatives, whilst at the same time organising an exchange on national dementia strategies and policies.

February was also an important month with regard to EU initiatives and projects in the dementia field:

1. The lunch debate organised by Alzheimer Europe in the European Parliament and hosted by Françoise Grossetête, MEP and Elisabeth Morin-Chartier, MEP was dedicated to the progress of the PharmaCog project which is supported by the Innovative Medicines Initiative and aims at speeding up the drug discovery process in the Alzheimer’s field.

2. The coordinators of the European Joint Action on dementia (ALCOVE – Alzheimer COoperation and Valuation in Europe) approached Alzheimer Europe to improve the collaboration between the respective organisations. As a first step, AE invited Dawn Brooker to represent ALCOVE at our public affairs meeting and it is envisaged to sign a memorandum of understanding in April.

3. Alzheimer Europe also participated in the launch meeting for the EU funded NILVAD project, a phase III clinical trial of nilvadipine as a possible treatment for mild to moderate Alzheimer’s disease.

4. Last, but not least, the Strategic Research Agenda of the Joint Programme in Neurodegenerative Disease Research was launched in February and Alzheimer Europe was invited to participate in the stakeholder round table organised at the launch meeting.

It is encouraging to see that our organisation is considered a key partner, but our involvement in this expanding number of EU initiatives and projects requires staff and financial resources. The funding we receive in the form of an operating grant from the European Commission is therefore essential.

We just finalised our applications for funding for 2013 and the new public health programme (2014-2020) is currently under discussion in the European Parliament. Both will be important decisions for the long-term financial viability of our organisation.

The latest edition of our Dementia in European Magazine was launched in February and we mailed out our report on the ethics of dementia research. Both publications are now available through the e-shop on our website.

Jean Georges
Executive Director
Alzheimer Europe

7 February: Alzheimer Europe staff visits a clinical research centre

On 7 February, Annette Dumas and Dianne Gove visited the clinical research site of the OLV hospital in Aalst, Belgium. This site carries out about 80 clinical trials of drugs and medical procedures per year. The visit was organised by Merck Sharp & Dohme.

The visit included presentations on research ethics, cardiology research and the latest techniques in the treatment of breast and brain tumours. There was also a live demonstration of robotic surgery, which is still relatively new in Europe.

27 February: Alzheimer Europe holds Board Meeting in Brussels

The Alzheimer Europe Board met in Brussels on 27 February. The Board discussed the following items:

• 2011 financial reports and 2012 budget
• approval for the creation of the Alzheimer Europe Foundation
• presentation of "The Ethics of Dementia Research" report
• progress of European projects
• collaboration with the ALCove project
• preparation for the 2013 Annual Conference in Vienna
• preparation for the European Parliament lunch debate on 28 February.

The next Board Meeting will take place on 25 June 2012.

28 February: "The Ethics of Dementia Research" report is now available on AE website

"The Ethics of Dementia Research" report, published in December 2011, is now available for sale on Alzheimer Europe’s website (see below).

This report provides a detailed discussion of the main ethical issues linked to carrying out dementia research in an ethical manner. It provides an overview of past and current ethical debates relating to dementia research and provides recommendations on a range of related issues. The report is intended for researchers, the people and bodies that fund research, ethics committees and national Alzheimer associations.

The report was produced by a working group headed by Dianne Gove, Information Officer at Alzheimer Europe. The authors are experienced in carrying out or participating in dementia research and also have professional expertise in the field of bioethics, the development of medical drugs, old age psychiatry, psychology, acute geriatrics, neurology, social studies and end-of-life care.

The Ethics of Dementia Research report can be purchased at:
www.alzheimer-europe.org/EN/Publications/Alzheimer-Europe-Reports

28 February: Latest issue of Dementia in Europe magazine is published

On 28 February, Alzheimer Europe published the latest Dementia in Europe magazine. The tenth issue features the following highlights:

• EU Commissioner Neelie Kroes talks about how the EU can help people with dementia and their carers
• Astrid Krag, Danish Health Minister, speaks about the health agenda of the EU presidency
• Mars di Bartolomeo, Health Minister of Luxembourg, discusses the development of the country’s national dementia plan
• Enda Connolly of the JPND Executive Board provides an update on the Joint Programming Initiative.

The magazine also provides coverage of Alzheimer Europe's 11th lunch debate at the European Parliament and news from our member organisations. A special section covers Alzheimer Europe's 21st Conference, which took place last year in Warsaw. Finally, there is a pictorial spread of our members’ activities during World Alzheimer’s Day on 21 September 2011.

Dementia in Europe magazine has a circulation of 3,500 subscribers and is available for sale.
www.alzheimer-europe.org/EN/Publications/Dementia-in-Europe-Magazines

28 February: Alzheimer Europe holds 12th lunch debate at the European Parliament

On 28 February, Alzheimer Europe held its 12th lunch debate at the European Parliament in Brussels. The event was hosted by Françoise Grossetête, MEP (France), who was represented by fellow MEP Elisabeth Morin-Chartier, also from France. The debate focused on efforts to speed up drug discovery for Alzheimer’s disease, specifically through the Innovative Medicines Initiative (IMI) and the PharmaCog project.

IMI is a programme to promote cooperation between the public and private sectors. It is jointly managed and funded by the European Commission and EFPIA, the European Federation of Pharmaceutical Industries and Associations. Dr. Elisabetta Vaudano, IMI Principal Scientific Manager, highlighted the need for innovation: the last drug approved for Alzheimer’s disease was memantine in 2003.

IMI aims to create new research tools, models and methodologies to bring the right drug to the right patient, at the right stage and at the right dose. This involves open, non-competitive collaboration of pharmaceutical companies in research projects such as the PharmaCog project.

The project’s activities were presented by Dr. Jill Richardson (GlaxoSmithKline, EFPIA Coordinator) and Dr. Alexandra Auffret (Université de Marseille, Academic Coordinator).

There are 30 partners in the five year project. They are developing tools to provide objective measures for:

- stratification of patient populations (diagnosis)
- classification of disease severity (surrogate endpoint)
- prediction of treatment outcome (risk factor)
- drug response (pharmacodynamics).

These tools will be used to meet the main project objectives. These include the development of models to improve the drug discovery process and also pharmaco-dynamic markers to support dose selection. In addition, the team aims to identify biomarkers of disease progression and patient stratification.

The final objective is to gain industry and regulatory acceptance of these models and markers.

The following Members of the European Parliament attended the debate: Heinz Becker (Austria), Frieda Brepoels (Belgium), Sean Kelly (Ireland), Astrid Lulling (Luxembourg) and Marina Yannakoudakis (UK).

Other participants included assistants to other MEPs, representatives from the European Commission, national policy makers, Alzheimer associations and pharmaceutical companies.

Impressions from Alzheimer Europe’s lunch debate
**28 February: Alzheimer Europe holds Public Affairs meeting in Brussels**

Alzheimer Europe held a Public Affairs meeting on 28-29 February in Brussels. The meeting drew a total of 17 people, including 12 representatives from national Alzheimer Associations (see below).

On the first day, Alzheimer Europe (AE) colleagues presented updates on the following topics:

- European developments: 2012 European Year of Active Aging, Health for Growth, Alliance for MRI and Horizon 2020
- Current status of Council of Europe activities and the Clinical Trial and Data Protection Directives
- Communications channels for AE members: Dementia in Europe magazine, Alzheimer Europe newsletter and website.

The second day began with an introduction to AE’s 2012 project on comparing national dementia strategies and policies. This was followed by a presentation on ALCOVE: the European Joint Action on Dementia, in which AE is a collaborator. Finally, there were presentations on dementia policies and strategies from the 12 countries represented at the meeting.

**Public Affairs meeting attendees:**

- **Austria:** Antonia Croy
- **Croatia:** Nino Mimica
- **Denmark:** Anne Arndal
- **Finland:** Sirpa Pietikäinen
- **France:** Judith Mollard
- **Ireland:** Caroline Collins
- **Italy:** Andrea Petrucci
- **Netherlands:** Julie Meerveld
- **Portugal:** Maria do Rosário Zincke dos Reis
- **Romania:** Maria Moglan
- **Slovenia:** Štefanija Lukic-Zlobec
- **United Kingdom:** Jim Pearson
- **ALCOVE:** Dawn Brooker

**NILOVAD**

**15 February: NILOVAD project team holds first meeting in Dublin**

The first NILOVAD project meeting took place on 15-16 February in Dublin. The five year project will conduct Phase III clinical trials of the drug Nilvadipine on some 500 people with mild to moderate Alzheimer’s disease in nine European countries. The trials will determine if Nilvadipine can improve memory and functioning, but also slow the rate of progression of Alzheimer’s disease.

The meeting was chaired by Brian Lawlor (Project Coordinator and Professor of Old Age Psychiatry at Trinity College Dublin) and drew 43 delegates from the 17 partners that will work on the project (see below). Attendees discussed all of the administrative and scientific aspects of the study and established key priorities and timelines. The clinical trials will begin in late 2012 at some 20 sites in France, Germany, Greece, Hungary, Ireland, Italy, the Netherlands, Sweden and the UK. Each trial will last for 18 months, with participants receiving treatment or placebo.

Nilvadipine is a calcium channel blocker that has been used for many years to treat hypertension. Laboratory research has shown that it blocks production of the amyloid protein that is thought to be central to the Alzheimer’s disease process. Amyloid is deposited as plaques in the brains of people with Alzheimer’s disease.

In Alzheimer’s mouse models, Nilvadipine was very effective at reducing development of amyloid plaques in the brain, increasing clearance of amyloid out of the brain and increasing cerebral blood flow. It also improved cognitive function in the mice.

These discoveries prompted a pilot clinical trial to determine whether Nilvadipine could be safely administered to humans with Alzheimer’s disease. The trial was successful and led directly to the current NILOVAD project, which will receive funding of up to EUR 6 million from the European Commission Seventh Framework Programme (FP7).

**NILOVAD project partners:**

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<th>Country</th>
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<td>France</td>
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<td>Germany</td>
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<td>Stichting Katholieke Universiteit</td>
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On 7 February (Aalst, Belgium) Annette and Dianne participated in the visit of the clinical trials site of Aalst Hospital organised by MSD.

On 7 February (Brussels, Belgium) Jean attended the launch of the Strategic Research Agenda of the Joint Programming on Neuro-degeneration.

On 10 February (Brussels, Belgium) Annette had lunch with Laszlo Benze, Health Attaché, Hungarian Permanent Representation.

On 15/16 February (Dublin, Ireland) Alex attended the first NILVAD project meeting.

On 22-25 February (Bucharest, Romania) Annette participated in the National Romanian conference organised by the Romanian Alzheimer Society (press conference, speech at the opening ceremony, presentation).


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**European Alzheimer’s Alliance**

**10 February 2012: Romanian MEP Sârbu joins the European Alzheimer’s Alliance**

On 10 February, MEP Daciana Octavia Sârbu, (Romania) joined the European Alzheimer’s Alliance. She is a member of the Group of the Progressive Alliance of Socialists and Democrats in the European Parliament. Ms Sârbu is a member of the Environment, Public Health and Food Safety Committee and a substitute of the Delegation to the EU-Ukraine Parliamentary Cooperation and Delegation for relations with India Committees.

**28 February: European Alzheimer’s Alliance participates in launch of EY 2012 in France**

Françoise Grossetête, MEP (France) and Chair of the European Alzheimer’s Alliance, took part in the launch of EY 2012, the European Year for Active Ageing and Solidarity between Generations. The launch took place on 28 February in Paris.

The four main themes of the European Year were debated at the meeting: active ageing and the labour market; ageing in good health and independent living; social participation and solidarity between generations.

Ms Grossetète was joined by: Marie-Anne Montchamp (Secretary of State in charge of Sociality and Social Cohesion), Anne Houtman (Head of the European Commission Representation in Paris), Nora Berra (Secretary of State in charge of Health), Claude Greff (Secretary of State in charge of Family) and Paola Testori Coggi (Director General of the Directorate-General for Health and Consumers of the European Commission) who all spoke at the meeting.

http://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=1214&furtheNews=yes

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**Members of the European Alzheimer’s Alliance**

Currently, the total number of Members of the European Union and all seven political groups in the European Parliament, Alzheimer Europe would like to thank the following MEPs for their continued support of the European Alzheimer’s Alliance:

**Austria:** Becker K. Heinz (EPP), Belgium: Brepoels Frieda (Greens/EFA), Ries Frédérique (ALDE), Staes Bart (Greens/EFA), Bulgaria: Parvanova Antonia (ALDE), Cyprus: Triantaphyllides Kytacas (GUE-NGL), Czech Republic: Cabnroch Milan (ECR), Kohlíček Jaromír (GUE/NGL), Roithova Zuzana (EPP).

**Denmark:** Christensen Ole (S&D), Rohde Jens (ALDE), Schaldemose Christel (S&D), Finland: Jaakonsaaari Liisa (S&D), Jaätteenmäki Anneli (ALDE), Pietikäinen Sirpa (EPP).

**France:** Audy Jean-Pierre (EPP), De Veyrac Christine (EPP), Griesbeck Nathalie (ALDE), Grossetête Françoise (EPP), Morin-Charterier Elisabeth (EPP), Germany: Niebler Angelika (EPP), Roth-Behrendt Dagmar (S&D), Ulmer Thomas (EPP), Weigberger Anja (EPP).

**Greece:** Chountis Nikolaos (GUE-NGL), Koppa Maria Eleini (S&D), Kratsa-Tsagarakopoulou Rodi (EPP), Ireland: Aylward Liam (ALDE), Childers Nessa (S&D), Crowley Brian (ALDE), McGuinness Mairead (EPP), Mitchell Gay (EPP).

**Italy:** Panzeri Pier Antonio (S&D), Toia Patrizia (S&D), Italy: Avellone Natale (EPP), Malaspina Carmen (ALDE), Mari Rosi (S&D), Tardano Anna (EPP).

**Lithuania:** Vilija Blinkeviciute (S&D), Poland: Lukacijewiska Elzbieta (EPP), Portugal: Carvalho Maria da Graça (EPP), Coelho Carlos (EPP), Matias Marisa (GUE-NGL), Romania: Antonescu Elena Oana (EPP), Sârbu Daciana Octavia (S&D).

**Slovakia:** Mikolásik Miroslav (EPP), Zaborska Anna (EPP), Slovenia: Peterle Alojz (EPP), United Kingdom: Ashworth Richard (ECR), Hall Fiona (ALDE), Lynne Lidia (ALDE), McAvan Linda (S&D), Moraes Claude (S&D), Simpson Brian (S&D), Taylor Keith (Greens/EFA), Vaughan Derek (S&D), Watson Graham (ALDE), Wilmott Glenis (S&D), Yamnakoudakis Marina (ECR).

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**European developments**

**16 February: European Commission presents White Paper on pensions**

On 16 February, the European Commission published a White Paper on adequate, safe and sustainable pensions. The paper looks at how the EU and the Member States can work to tackle the major challenges facing the EU pension systems and suggests some ways forward.

The suggestions include a better balance between time in work and time in retirement; pension rights when moving to another country; creating a better environment for people to save more; and ensuring that pension promises are kept and people get what they expect in retirement.

• create better opportunities for older workers by calling on the social partners to adapt work place and labour market practices and by using the European Social Fund to bring older workers into work.

• develop complementary private retirement schemes by encouraging social partners to develop such schemes and encourage Member States to optimise tax and other incentives.

• enhance the safety of supplementary pension schemes, including through a revision of the directive on Institutions for Occupational Retirement Provision (IORP) and better information for consumers.

• make supplementary pensions compatible with mobility, through legislation protecting the pension rights of mobile workers and by promoting the
establishment of pension tracking services across the EU.

- encourage Member States to promote longer working lives, by linking retirement age with life expectancy, restricting access to early retirement and closing the pension gap between men and women.
- continue to monitor the adequacy, sustainability and safety of pensions and support pension reforms in the Member States.


http://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=1194&fort h=News=yes

29 February: European Commission adopts a Communication on the European Innovation Partnership on Active and Healthy Ageing

On 29 February, the European Commission endorsed a four-year action plan for the European Innovation Partnership on Active and Healthy Ageing (EIP AHA). This Communication provides concrete steps to implement the five specific actions presented in the EIP AHA Strategic Implementation Plan.

The Commission’s Communication is the follow-up for implementation of the specific actions identified in the Strategic Implementation Plan that was presented in November 2011:

1. The launch of a first invitation for stakeholders to commit to specific actions on innovation in active and healthy ageing (http://ec.europa.eu/research/innovation-union/index_en.cfm?section=active-healthy-ageing&pg=commitment)

The deadline to express a commitment is 31 May 2012.

2. Establishing a “marketplace for innovative ideas” by April 2012. This will help stakeholders to find partners, share good practices and disseminate evidence (http://ec.europa.eu/research/innovation-union/index_en.cfm?section=active-healthy-ageing&pg=marketplace)

3. Aligning and effectively using EU funding instruments such as the Competitiveness and Innovation Programme (CIP), the 7th Framework Programme for research and the Health Programme

4. Addressing regulatory and standardization issues, e.g. by supporting the development of a new EU framework for interoperability testing, quality labelling and certification on e-Health.

In addition, there will be a conference in Brussels on 3 April 2012 to present the EIP AHA Strategic Implementation Plan. Finally, information will be provided on how to participate and contribute to the EIP AHA.

**Background:** Demographic ageing is one of the most serious challenges facing Europe today. The number of European citizens aged 65 and over will double over the next 50 years, from 87 million in 2010 to 148 million in 2060.

While the ageing of the population is a specific challenge for European care and social systems, it is also an opportunity to redesign these systems in the interest of patients, healthcare systems and the innovative industry.

The European Innovation Partnership on Active and Healthy Ageing was set up in February 2011 to respond to these challenges. In November 2011, it delivered a Strategic Implementation Plan (SIP) identifying priority areas and specific actions, for public authorities, businesses and civil society.

This initiative will improve elderly citizens’ lives, help them to contribute to society as they grow older, and reduce pressure on health and care systems - ultimately contributing to sustainable growth.

**Specific actions identified by the Strategic Implementation Plan**

- Specific Action A1: Prescription and adherence action at regional level
- Specific Action A2: Personalised health management, starting with a Falls Prevention Initiative
- Specific Action A3: Action for prevention of functional decline and frailty
- Specific Action B3: Replicating and tutoring integrated care for chronic diseases, including remote monitoring at regional level
- Specific Action C2: Development of interoperable independent living solutions, including guidelines for business models
- Specific Action D4: Innovation for Age friendly environments


**Policy Watch**

7 February: JPND launches joint strategy for European research

On 7 February, research leaders and stakeholders from across Europe gathered in Brussels for the launch of a European-wide strategy to coordinate and prioritise research aimed at tackling the enormous challenge of neurodegenerative diseases such as Alzheimer’s and Parkinson’s Disease. The EU Joint Programme in Neurodegenerative Disease Research (JPND) is the first of the European Joint Programming initiatives which are designed to address the “grand challenges” facing EU society in the coming years. These challenges are considered beyond the scope and resources of any one country to tackle.

Welcoming the JPND strategy, European Commissioner for Research, Innovation and Science, Máire Geoghegan-Quinn said: “I am delighted to welcome this common strategy, agreed under this unprecedented collaborative initiative in research, to channel participating countries’ scientific competencies, medical strengths and social approaches to tackle this important challenge. The JPND strategy can not only make research efforts more effective in the area of neurodegenerative diseases but
The goals of the European-wide strategy are: throughout the European Union”, he said. and that delivers economic and societal benefit neurodegenerative diseases and their families and carers, that improve the health and wellbeing of patients with neurodegenerative diseases over the coming decade in Europe”, says Professor Philippe Amouyel, Chair of the JPND Management Board. “The ultimate goal is to undertake research that can be translated into new interventions and societal challenges faced by EU society.

The strategy sets out the common vision of the 25 European countries involved, and provides a strategic approach to support world-class research that can exploit emerging scientific opportunities, confront barriers to progress, and provide new approaches to prevention, intervention and care.

“This common Research Strategy will guide research activity and investments in the field of neurodegenerative diseases over the coming decade in Europe”, says Professor Philippe Amouyel, Chair of the JPND Management Board. “The ultimate goal is to undertake research that can be translated into new interventions that improve the health and wellbeing of patients with neurodegenerative diseases and their families and carers, and that delivers economic and societal benefit throughout the European Union”, he said.

The goals of the European-wide strategy are:

1. to develop new treatments and preventive strategies
2. to improve health and social care approaches
3. to raise awareness and de-stigmatise Alzheimer’s and other neurodegenerative disorders
4. to alleviate the economic and social burden of these diseases.

JPND is working to implement these goals through:

• building capacity in excellent basic, clinical and healthcare/social research
• coordinating and aligning European and national research activities
• translating research evidence into clinical, social and public health practice
• partnering with industry, patient, carer and health service stakeholders, and decision makers.

The strategy is based on the recommendations of the JPND Scientific Advisory Board which constitutes fifteen of the very best scientists and physicians from the research areas related to neurodegenerative diseases. Extensive consultations with over 140 scientists and multiple stakeholder communities were also conducted and recommendations were validated through a broad public consultation. Research priorities identified in the strategy include investigating the origins of neurodegenerative disease; studying disease mechanisms and models; exploring disease definitions and diagnosis; developing therapies, preventive strategies and interventions; improving healthcare and social care.

“The recommendations outlined address the full spectrum of research and approaches that are required to achieve impact, and recognise the important role that other stakeholder groups including research funding agencies, patient and carer organisations and industry representatives have in delivering this agenda” says Professor Thomas Gasser, Chair of the JPND Scientific Advisory Board.

Identified JPND priorities will be addressed within the next ten years through a range of long-term, medium-to-large-scale, programmatic initiatives. In order to implement and deliver its strategy, JPND is recognising the importance of engagement and partnership with industry, patient and carer organisations, research funding agencies and the European Commission. Working Groups are already classifying priorities according to scale, impact, and agreed timelines, and it is expected that the first of the implementation initiatives will emerge during 2012.

www.neurodegenerationresearch.eu

28 February: Northern Ireland moves ahead on action plan for elderly people

On 28 February, the Commission on Dignity in Care in Northern Ireland released a report entitled “Delivering Dignity: securing dignity in care for older people in hospitals and care homes”.

The report recommends fundamental changes to the culture, leadership, management, staff development, clinical practice and service delivery of care homes and NHS hospitals to secure the dignified care that is the right of all older people. It aims to help hospitals and care homes identify how they need to change to deliver dignity for every person every time. It also sets out the changes that need to take place in the wider health and social care system to support hospitals and care homes in prioritising dignity in care.

This is a draft report for public consultation. The Commission will consult publicly until 27 March, with a view to publishing the final report before the summer. The Commission will then promote implementation of the recommendations through an action plan that asks health and social care leaders to prioritise improving dignity in care for older people.

The Commission on Dignity in Care is an independent body set up by the NHS Confederation, the Local Government Association and Age UK.

Members’ News

1 February: Maurice O’Connell is on the NILVAD Scientific Advisory Board

Maurice O’Connell, CEO of the Irish Alzheimer Society and Board Member of Alzheimer Europe, has been named to the Scientific Advisory Board of the NILVAD project. This project involves 17 partners that will conduct a Phase III clinical trial of the drug Nilvadipine for the treatment of mild to moderate Alzheimer’s disease.
The Scientific Advisory Board will conduct regular reviews of the scientific progress made by the working groups and will make recommendations to improve performance. Maurice will be joined on the board by Dr. Paul Aisen (University of California), Dr. Suzanne Hendrix (Pentara Corp.) and Prof Robin Jacoby (Oxford University).

NILVAD is funded by the European Commission within the 7th Framework Programme.

10 February: Polish Alzheimer’s Association wins prestigious award

On 10 February, the Polish minister of health awarded the Polish Alzheimer’s Association with the St. Kamil's Award. This yearly award is given to local organisations for remarkable achievements during the year. The minister cited the association for “its long lasting, comprehensive and tireless voluntary activities for the good of people with dementia and their families, and also for its significant contribution toward the development of the Alzheimer’s movement in Poland.” The award was accepted by Alicja Sadowska, head of the Polish Alzheimer’s Association and board member of Alzheimer Europe.

11 February: Greece promotes tango for healthy living

On 11 February, Alzheimer Hellas organised a tango evening in Thessaloniki. The event showcased the history of tango through the cinema and also highlighted the link between dance and its contribution to health: dancing is known to provide significant health benefits for the body and mind, including protection against dementia.

The event aimed to encourage people with Alzheimer’s disease, their carers and friends to have fun and take up activities that could help them to reduce the risk of developing dementia. The highlight of the evening was a live performance by two couples, of which both ladies are Alzheimer Hellas employees.

28 February: Mobile campaign raises funds via SMS in Spain

Fundación Alzheimer España has launched a mobile phone campaign to raise funds. Donors are requested to send an SMS with the message “AYUDA ALZHEIMER” to local number 28099.

The association will receive EUR 1.20 per message sent. Donations will contribute to activities such as training programmes for caregivers and events to raise awareness of Alzheimer’s disease.

Newsletter: February 2012

Science Watch

2 February: Cancer drug removes plaque from mouse models

Researchers from Case Western Reserve University in Ohio (USA) have found that a cancer drug called bexarotene helps the body increase its production of apolipoprotein E (ApoE), which acts to remove amyloid beta plaque from the brain.

The drug was given to three different mouse models showing early signs of Alzheimer’s disease. After one dose in young mice, the level of amyloid beta in the brain was “rapidly lowered” within six hours and a 25% reduction was sustained for 70 hours. In older mice with established amyloid plaques, seven days of treatment halved the number of plaques. The study showed that brain function improved after treatment, including nest building, maze performance and memory of electrical shocks.

Paige Cramer, the study’s lead author and a doctoral candidate at the university, said: “As a consequence of aging, the ability to clear plaque from the brain goes down, and we are able to enhance ApoE. The benefit of this drug is we are just facilitating or enhancing Mother Nature.”

The university is now planning a human trial.

2 February: Sodium channels affect cognitive decline in aging brains

Neuroscientists at the University of Bristol, led by Prof Andy Randall and Dr. Jon Brown, have found a mechanism that may cause cognitive decline during normal healthy aging.

The brain mainly uses electrical signals called action potentials to encode and convey information. In this study, researchers concentrated on the action potentials that are created in neurons of the hippocampus. They made recordings of electrical signals in order to track neuronal excitability, i.e. the ability to produce action potentials.

Results showed that aged neurons find it more difficult to generate action potentials – and that this reluctance is due to changes in the properties of sodium channels. Sodium channels are proteins which affect the creation of action potentials by controlling the flow of sodium ions into neurons.

Prof Randall, Professor in Applied Neurophysiology said: “Much of our work is about understanding dysfunctional electrical signalling in the diseased brain, in particular Alzheimer’s disease. We began to question, however, why even the healthy brain can slow down once you reach my age. Previous investigations elsewhere have described age-related changes in processes that are triggered by action potentials, but our findings are significant because they show that generating the action potential in the first place is harder work in aged brain cells.” This research project is funded by Pfizer.

www.neurobiolog yofaging.org/article/S0197-4580(11)00575-6/abstract
6 February: Tau oligomers are more toxic than entire tangles

Researchers from the University of Texas Medical Branch at Galveston (UTMB) have developed a new model of tau oligomer behaviour in human brain tissue. The scientists concentrated on the various steps between a single tau protein unit and a "complete" neurofibrillary tangle - assemblies of two or more tau proteins known as oligomers.

The team used an antibody called T22 (developed at UTMB) which is designed to bond only to tau oligomers - and not lone tau proteins or complete tangles. In some of the Alzheimer's brains examined by the team, tau oligomer levels were as much as four times as high as those found in age-matched control brains.

"What we discovered is that there are smaller structures that form before the neurofibrillary tangles, and they are much more toxic than the big structures," said Rakez Kayed, UTMB assistant professor. "And we established that they were toxic in real human brains, which is important to developing an effective therapy."

www.uta.edu/iasp/annotation.asp?powId=127681

7 February: Men who smoke are more likely to develop dementia

A new study from University College London, led by Dr. Severine Sabia, shows that men who smoke are more likely to develop dementia later in life.

The research team examined the association between smoking history and cognitive decline in the transition from midlife to old age. In the study, researchers analysed data using six assessments of smoking status over 25 years and three cognitive assessments over ten years. They made four key findings:

- smoking in men in associated with more rapid cognitive decline
- men who continued to smoke over the follow-up experienced greater decline
- men who quit smoking in the ten years preceding the first cognitive measure were still at risk of greater cognitive decline
- long-term ex-smokers did not show faster cognitive decline.

Dr. Sabia said: "Finally, our results show that the association between smoking and cognition, particularly at older ages, is likely to be underestimated owing to higher risk of death and dropout among smokers."

www.ncbi.nlm.nih.gov/pmc/articles/PMC2696613

6 February: Tau may be a catalyst in removing excess iron from neurons

Researchers at the University of Melbourne suggest that excess iron in the brain may be part of the age component of age-related neurodegenerative diseases such as Alzheimer's disease.

Iron accumulation is a normal human process that continues regardless of age. In a young brain, tau proteins help amyloid precursor proteins (APP) to reach the surface of neurons. At the surface, APP acts to remove excess iron from the cell. If tau is absent, APP cannot reach the surface, which in turn leads to mounting iron accumulation.

Prof Ashley Bush, leader of the study, believes that returning iron levels to normal should be therapeutic. The study - which was primarily done for Parkinson's disease - used tau knockout mice, i.e. mouse models with no tau proteins. At one year, the mouse brains weighed less than those found in age-matched control brains.

"What we discovered is that there are smaller structures that form before the neurofibrillary tangles, and they are much more toxic than the big structures," said Rakez Kayed, UTMB assistant professor. "And we established that they were toxic in real human brains, which is important to developing an effective therapy."

www.fasebj.org/content/early/2012/01/15/fj.11-199851

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10 February: Scientists establish link between beta-arrestin and short-term memory

Scientists at the University of California, Riverside have identified a new link between a protein called beta-arrestin and short-term memory. Beta-arrestin is active in the hippocampus, which is involved in learning and the formation of short-term memories. The protein is one of many "scaffolding proteins" which support synapses, the connections between neurons.

The formation of synapses is a continuous process: new experiences cause new connections to form, but old connections must disassemble to make way for the new ones. "In some pathological conditions such as Alzheimer's disease, loss of the old synaptic connections far exceeds the formation of new ones, resulting in overall loss of synapses and short-term memory loss," said Iryna Ethell, associate professor of biomedical sciences.

“Our work, done on mice, shows that if beta-arrestin is removed from neurons, this loss of synapses is prevented. But we also know that beta-arrestin is required for normal learning and memory; so a fine balance needs to be established.”

www.brainsfordementiaresearch.org.uk/
“A selective tuning of beta-arrestin activity is therefore necessary to partially reduce synapse disassembly,” said Crystal G. Pontrello, the first author of the research paper and a postdoctoral researcher in Ethell’s lab. “What you want, ideally, is the elimination of only some unused old synaptic connections so that there is room to make new connections. This balance could be easily achieved by pharmaceutical drugs in the future.”

www.pnas.org/content/early/2012/01/27/1118803109.abstract

11 February: New biomarker binds to both plaque and tangle deposits

Scientists at UCLA (University of California, Los Angeles) have created a chemical marker called FDDNP that binds to both plaque and tangle deposits, which can then be viewed using a positron emission tomography (PET) brain scan. Using this method, researchers are able to determine where in the brain the abnormal protein deposits are accumulating.

“We are finding that this may be a useful neuro-imaging marker that can detect changes early, before symptoms appear, and it may be helpful in tracking changes in the brain over time,” said Dr. Gary Small, Professor of Psychiatry at the Semel Institute for Neuroscience and Human Behavior.

The research team is also using the brain-imaging technique in clinical trials to help track new therapeutics for brain aging, such as curcumin. “Tracking the effectiveness of such treatments may help accelerate drug discovery efforts”, continued Dr. Small. “Because FDDNP appears to predict who will develop dementia, it may be particularly useful in tracking the effectiveness of interventions designed to delay the onset of dementia symptoms and eventually prevent the disease.”


15 February: Curcumin hinders formation of amyloid beta oligomers

Researchers at Linköping University (Sweden) have shown that curcumin prolongs life and enhances the activity of fruit flies with a nervous disorder similar to Alzheimer’s disease.

Five groups of fruit fly models were administered curcumin. They lived up to 75% longer and maintained their mobility longer than the flies that did not receive the substance. This was due to a decrease of oligomer production.

“The results confirm our belief that it is the oligomers that are most harmful to the nerve cells,” said Prof Per Hammarstrom. “We now see that small molecules in an animal model can influence the amyloid form. To our knowledge the encapsulation of oligomers is a new and exciting treatment strategy.”

www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0031424

16 February: EMA gives a positive opinion on ALS drug

On 16 February, the European Medicines Agency (EMA) issued a positive opinion on a drug for the treatment of amyotrophic lateral sclerosis (ALS).

The EMA’s Committee for Medicinal Products for Human Use (CHMP), on the basis of quality, safety and efficacy data submitted for the reference product Rilutek, considers there to be a favourable benefit-to-risk balance for Riluzole Zentiva and therefore recommends the granting of the marketing authorisation.

The EMA’s opinion has been forwarded to the European Commission, which is responsible for granting the final marketing authorisation.


Dementia in society

14 February: Grandson replaces Liliane Bettencourt on L’Oreal board

On 14 February, L’Oreal heiress Liliane Bettencourt was replaced by her grandson on the company board. Ms Bettencourt, who is 89 years old, is the daughter of the founder of L’Oreal and has been diagnosed with Alzheimer’s disease. Her net worth has been estimated at EUR 17 billion. In October 2010, she became a legal dependant of her daughter and grandsons.

New publications & resources

1 February: New website gives practical help to carers in France

A new French-language website for carers of elderly people launched in early February. It contains practical advice for helping the elderly, or those with reduced mobility, to go about their daily activities in their own home. This includes special sections for nutrition, bathing, mobility and what to do in case of accidents. There are information sheets on numerous ailments and also links to French care organisations.

www.madpa.fr
## AE Calendar 2012

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting</th>
<th>AE Representative</th>
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<tbody>
<tr>
<td>2 March</td>
<td>OECD interim review at the European Commission (Brussels, Belgium)</td>
<td>Alex</td>
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<tr>
<td>6 March</td>
<td>Meeting of the WeDo project (Brussels, Belgium)</td>
<td>Annette</td>
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<tr>
<td>8 March</td>
<td>Meeting of the Adi Board of Alzheimer’s Disease International (London, UK)</td>
<td>Heike</td>
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<tr>
<td>7 March</td>
<td>INTERDEM meetings (London, UK)</td>
<td>Dianne</td>
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<tr>
<td>8-10 March</td>
<td>ADI Conference (London, UK)</td>
<td>Heike and Dianne</td>
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<tr>
<td>8 March</td>
<td>Meeting of EFPIA Think Tank (Brussels, Belgium)</td>
<td>Annette</td>
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<tr>
<td>27 March</td>
<td>Joint meeting of Carers Interest Group/Age Intergroup in the EP on “2012 European Year of Active Ageing” (Brussels, Belgium)</td>
<td>Annette</td>
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<tr>
<td>22-23 March</td>
<td>ESA workshop on medicines for older people (London, UK)</td>
<td>Alex</td>
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<tr>
<td>16-17 April</td>
<td>First meeting of the European Working Group for People with Dementia (Glasgow, UK)</td>
<td>AE Working Group and AE staff</td>
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## Future Conferences

<table>
<thead>
<tr>
<th>Date</th>
<th>Meeting</th>
<th>Place</th>
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<tbody>
<tr>
<td>8 March 2012</td>
<td>CompanionAble Consortium, AAL Companion Robotics Institute Workshop Series - 7th Workshop, <a href="http://www.companionable.net">www.companionable.net</a></td>
<td>Brussels, Belgium</td>
</tr>
<tr>
<td>8-11 March 2012</td>
<td>6th World Congress on Controversies in Neurology (CONy), <a href="http://www.concentmed.com">www.concentmed.com</a></td>
<td>Vienna, Austria</td>
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<tr>
<td>16-17 April 2012</td>
<td>First meeting of the European Working Group for People with Dementia</td>
<td>Glasgow, Scotland</td>
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<tr>
<td>28 May-1 June 2012</td>
<td>5th Global Conference on ageing, <a href="http://www.brakproject.eu">www.brakproject.eu</a></td>
<td>Prague, Czech Republic</td>
</tr>
<tr>
<td>14-16 June 2012</td>
<td>6th Kuopio Alzheimer Symposium, <a href="http://www.uutliikunlaboratorio.org">www.uutliikunlaboratorio.org</a></td>
<td>Kuopio, Finland</td>
</tr>
<tr>
<td>12-13 July 2012</td>
<td>International Academy on Nutrition and Aging (IANA), <a href="http://www.iagg.info">www.iagg.info</a></td>
<td>Albuquerque, New Mexico</td>
</tr>
<tr>
<td>8-11 September 2012</td>
<td>18th Congress of the European Federation of Neurological Societies (EFNS), <a href="http://www.efns2012@kenees.com">efns2012@kenees.com</a></td>
<td>Stockholm, Sweden</td>
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<tr>
<td>4-6 October 2012</td>
<td>22nd Alzheimer Europe Conference “Changing perceptions, practice and policy”, <a href="http://www.alzheimer-europe.org/EN/Conferences">www.alzheimer-europe.org/EN/Conferences</a></td>
<td>Vienna, Austria</td>
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<tr>
<td>29-31 October 2012</td>
<td>5th Clinical Trials Conference on Alzheimer Disease (CTAD), <a href="http://www.ctad.fr">www.ctad.fr</a></td>
<td>Monte Carlo, Monaco</td>
</tr>
<tr>
<td>26-27 January 2013</td>
<td>5th European Neurological Conference on Clinical Practices/Neurovascular and Neurodegenerative Diseases, <a href="http://www.enccp.net">www.enccp.net</a></td>
<td>Krakow, Poland</td>
</tr>
<tr>
<td>6-10 March 2013</td>
<td>11th International Conference on Alzheimer’s and Parkinson’s Diseases, <a href="http://www.kenes.com/adpd">www.kenes.com/adpd</a></td>
<td>Florence, Italy</td>
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<tr>
<td>21-23 March 2013</td>
<td>57. Jahrestagung der Deutschen Gesellschaft für Klinische Neurophysiologie und Funktionelle Bildgebung (DGNK), <a href="http://www.dgkn-kongress.de">www.dgkn-kongress.de</a></td>
<td>Leipzig, Germany</td>
</tr>
<tr>
<td>20-23 March 2014</td>
<td>58. Jahrestagung der Deutschen Gesellschaft für Klinische Neurophysiologie und Funktionelle Bildgebung (DGNK), <a href="http://www.dgkn-kongress.de">www.dgkn-kongress.de</a></td>
<td>Berlin, Germany</td>
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The Alzheimer Europe newsletter arises from the 2012 Work Plan of Alzheimer Europe, which has received funding from the European Union in the framework of the Health Programme.