# Late Breaking Risk Reduction Research Findings from AAIC

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1





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**Biological underpinnings** 

Learnings in recruitment and care science
Diversification of the clinical trial pipeline
Growing understanding of health disparities
Treatment updates and growing understanding of ARIA
Diagnosis and staging criteria across neurodegeneration
Advances in tools for detection/diagnosis –progress in blood
And ... A growing understanding of contributions to risk across life

3



Improving Public Health Action on Brain Health:
A Public Health Center of Excellence Workshop
on How to Effect Change
Friday, July 26, 2024
9:00 a.m.-4:00 p.m.

- Overview of the Evidence on the Behaviors We Need to Change (Keynote)
- Behavioral Economics and Public Health Prevention
- Effective Communications for Public Health Prevention
- Opportunities for Public Health Practice (Discussion)

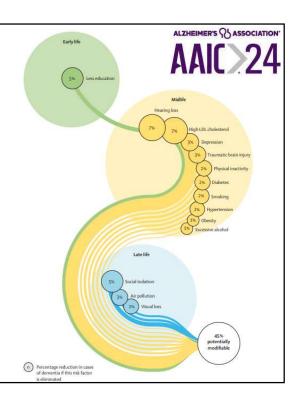
The Public Health Center of Excellence on Dementia Risk Reduction is made possible by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services as part of a financial assistance

# THE LANCET

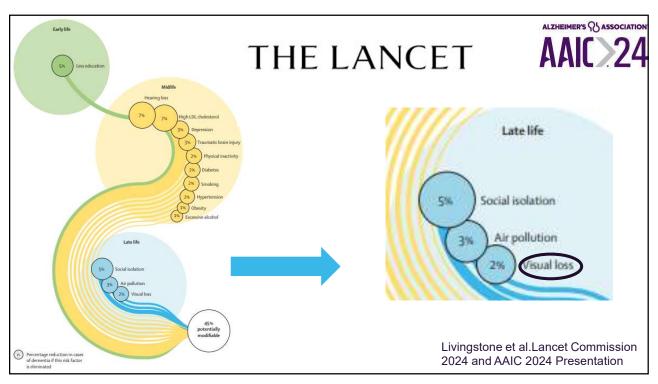
### **Presented at AAIC**

Suggests 14 modifiable risk factors, if eliminated, would have impact on nearly half (45%) of all dementia

Livingstone et al. Lancet Commission 2024 and AAIC 2024 Presentation



5



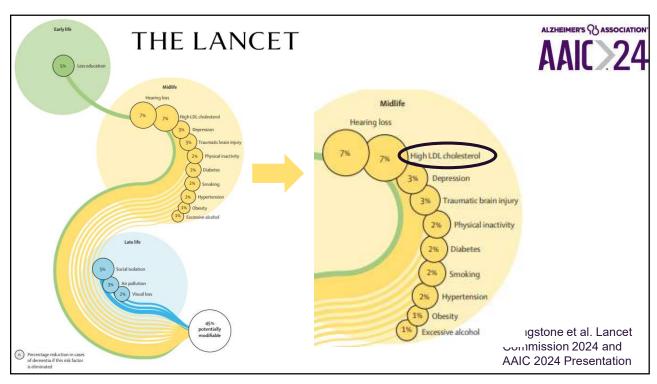


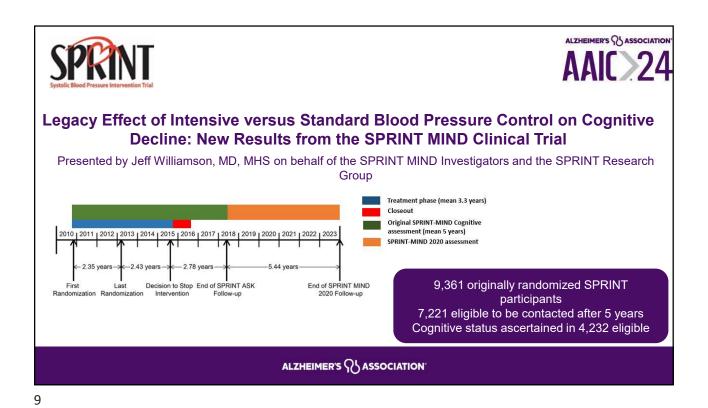
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- Wildfire smoke may be hazardous to brain health, according to a 10-year study of more than 1.2 million southern Californians.
- Exposure to wildfire smoke increases risk of being diagnosed with dementia more than other forms of air pollution.
- Risk of exposure to fine particulate matter (PM<sub>2.5</sub>) air pollution is much more pronounced from wildfire smoke than when it comes from other sources, such as motor vehicles and factories.

7





SPRINT

AAIC 24

Conclusion: Among ambulatory adults with hypertension and elevated cardiovascular risk, 3.3 years of treatment to an intensive SBP goal of < 120 mm Hg vs < 140 mm Hg results in <u>statistically significant risk</u> reduction of at least 7 years for adjudicated:

- MCI and MCI or probable dementia (composite outcome)
- But not for probable dementia alone



# Commentary on The Lancet Commission



Kivipelto et al. Lancet 2024

- Estimates of population attributable risk requires assumptions such as risk factors can be eliminated and are causal.



- Investment in multi-domain risk reduction research and strategies is needed to provide effective, sustainable and equitable prevention programs.
- Diet may be an important factor in addition to the factors identified; it is actively being incorporated into multidomain approaches.
- Multinational, multidisciplinary initiatives provide opportunities to accelerate the evidence base.

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11

# CAN WHAT YOU EAT CHANGE YOUR BRAIN? Eating too much processed red meat may increase dementia risk, according to new research unveiled at #AAIC24. About 2 servings a week of processed red meat is associated with a 14% higher risk of dementia than those who eat less than about three servings a month.

## Links with Diet and Risk

- Eating about two servings per week of processed red meat raises the risk of dementia by 14% compared to those who eat >1 serving a week.
  - Processed red meat includes salami, pepperoni, hot dogs, sausage
- Swapping a serving of processed red meat for a serving of nuts, beans or tofu every day may lower the risk of dementia by 20%.
- Included 130,000+ people, followed for up to 43 years from studies of medical professionals.

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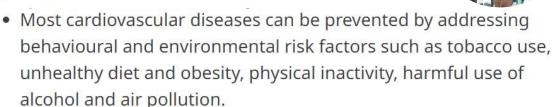
13

# How do we define a disease?

Example: Cardiovascular disease







• It is important to detect cardiovascular disease as early as possible so that management with counselling and medicines can begin.

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