

Alzheimer University a great success



Participants from Cuba and Noreen Siba, one of the workshop leaders at the Alzheimer University

'It was great indeed to participate at the workshop and we are still recollecting the splendid time spent in London. Our work is going well. We have just had a meeting to plan strategic activities for the future' said Tatjana Solodkaya from Belarus, a participant of the Alzheimer University.

The Alzheimer University was piloted at the end of April in London. 16 delegates from Cuba, Czech Republic, Greece, Belarus, Dominican Republic, Turkey, Colombia and Ecuador were sponsored by ADI to attend the two day course which was held at the national office of the Alzheimer's Disease Society. The course was a series of practical workshops aimed at giving participants the tools to strengthen the work of their associations. The workshops were followed by visits to branches of the Alzheimer Disease Society in London, giving delegates the opportunity to see first hand the services and support groups run by these branches. The course built new friendships and links between ADI members.

ADI now plans to develop the course further and produce a written manual which will be made available to all members.

The Alzheimer University put to work

The Athens Alzheimer Caregivers Association has made great strides since attending the Alzheimer University course in London two months ago.

£40,000 has been awarded jointly to the Association and the Hellenic Association of Gerontology and Geriatrics under the 'Alzheimer's Network' programme funded by the European Commission. The programme aims to educate medical professionals in the recognition of dementia and to encourage the foundation of new carers associations and support groups in all major cities in Greece. Nellie Lecca-Marcati, participant of the recent Alzheimer University course says, 'This means teaching others the know-how we very successfully learned during the Alzheimer University course'.

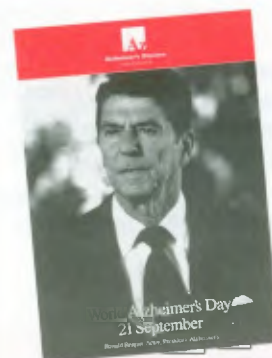
World Alzheimer's Day

21 September 1998

There are nearly 18 million people worldwide who have dementia, and this figure will nearly double to 34 million by the year 2025. Through its members ADI is committed to raising awareness about dementia and its impact on families. Building on the success of last year's campaign, ADI has developed a special logo for World Alzheimer's Day this year. Designed by Gareth Mapp of Lambie-Nairn, one of the leading design consultancies in the UK, the logo will be used on all promotional materials. ADI is providing a tool kit to members to help them organise awareness activities in their own countries. A special bulletin with an emphasis on the regional prevalence of dementia will be printed in English and Spanish and sent to all members along with badges, posters and postcards.



**Alzheimer's Disease
International**



The new World Alzheimer's Day logo and one of the posters

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ANNOUNCEMENTS

CONFERENCES

1998

July 18-23

6th International Conference on Alzheimer's Disease and Related Disorders

Amsterdam, the Netherlands
Tel: +31 20 5040 202
Fax: +31 20 5040 225
Email: alzh98@congreg.nl
Web: www.congreg.com/alz98/

July 26-29

7th National Alzheimer's Disease Education Conference

Creating opportunities, making connections
Indiana, USA
Tel: +1 312 335 5790

September 13-18

Aging 2000

A comprehensive approach to mental health
Munich, Germany
Tel: +49 30 23 82 69 00/13/20
Fax: +49 30 23 82 69 40
Email: ipa@kit.de
Web: www.kit.de

September 19-25

3rd Congress of the European Federation of Neurological Societies

Sevilla, Spain
Tel: +34 5 422 61 60
Fax: +34 5 422 80 70
Email: viajes.tavora@unida.com

September 24-27

Alzheimer's Disease International 14th International Conference

Dementia the Global Challenge
Cochin, India
Tel: +91 488 522939
Fax: +91 488 522347
Email: alzheimr@md2.vsnl.net.in
Web: www.alzheimr.com

October 21-26

1998 Alzheimer's Association Annual Meeting

Chicago
Tel: +1 312 335 5734

December 10-13

Which Way to Quality?

4th international conference on long term care case management
San Diego, USA
Tel: +1 415 974 9600
Fax: +1 415 974 0300
Email: info@asa.asaging.org
Web: www.asaging.org

1999

June 30-2 July

A Meeting of Minds

9th Alzheimer Europe meeting and Alzheimer's Disease Society 20th anniversary conference
London, UK
Tel: +44 171 306 0606
Fax: +44 171 306 0808
Email: info@alzheimer.org.uk

July 5-7

Women's Health: The Nation's Gain

International conference with a special focus on older women in Asia
Singapore
Tel: +65 336 8855
Fax: +65 336 3613
Email: dmc@kenair.com.sg

August 15-20

Challenges for the New Millennium: Professional, Cultural and Regional Diversity

9th congress of the International Psychogeriatric Association
Vancouver, Canada
Tel: +1 604 681 5226
Fax: +1 604 681 2503
Email: congress@venuewest.com

September 7-11

4th Congress of the European Federation of Neurological Societies

Lisbon, Portugal
Tel: +351 1 847 25 77
Fax: +351 1 847 37 46
Email: efnscongress99@mail.telepac.pt

International directions

ELIZABETH RIMMER, SECRETARY GENERAL



The Alzheimer University was a big, exciting step forward for us. It really did exceed our expectations and the feedback has been so positive. One of our core aims is to strengthen the work of our members and encourage new Alzheimer associations – the Alzheimer University will become an important part of how we do this.

We have been busy getting ready for World Alzheimer's Day. The aim is to get as many people as possible worldwide to recognise that dementia is a global issue and impacts on millions of people, families and communities. Our message this year is optimistic: although there is no cure for Alzheimer's disease, there is help and hope – help from Alzheimer associations and hope in research efforts.

We are only a few months away from the conference, I look forward to seeing you in Cochin for what promises to be a unique experience.

September 16-18

Alzheimer's Disease International 15th International Conference

Dementia, challenge of our time, creating hope for the new millennium
Johannesburg, South Africa
Tel: +27 21 762 8600
Fax: +27 21 762 8606
Email: globcon@iafrica.com

on caregivers and improve quality of life for the person with Alzheimer's disease.
£29.00 Jessica Kingsley Publishers (for UK and European distribution)
Tel: +44 171 833 2307
Fax: +44 171 837 2917
Rest of world:
Paul H. Brooks Publishing, USA
Tel: +1 410 337 9580
Fax: +1 410 337 8539

PUBLICATIONS

Alzheimer's at your fingertips

by Harry Cayton, Dr Nori Graham and Dr James Warner. Questions asked by real people about Alzheimer's disease and other forms of dementia are answered in a straightforward way in this new guide. £11.95 plus postage. Class Publishing, London, UK
Tel: +44 171 371 2119
Fax: +44 171 371 2878

Interventions for Alzheimer's Disease

by Ruth M. Tappen. New reference that brings together the best practices that can reduce stresses

Developing Support Groups for Individuals with Early-Stage Alzheimer's Disease

by Robyn Yale. Practical step-by-step guidelines for developing and administering effective support groups. £23.00, publishers same as above.

A funny thing happened on the way to the nursing home

by Jim Connor
Described as 'a different handbook for carers' written from personal experience and aimed at carers and professionals. \$14.95
BookBound Publishing, NSW
Australia (contact Alzheimer's Association, NSW)

Global Perspective

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Mailing list

If you would like to receive this newsletter, please give the Secretariat your details. There is no charge, but donations are always welcome.

Send us your comments

If you have any comments about or items for the newsletter (we are particularly keen to hear from carers) please contact the Secretariat.

Put your requests for help in Members' Forum

Member countries requiring help or information are asked to put their requests in writing for inclusion in Global Perspective.



Our Granddad

Three children from New Zealand talk about their grandfather, who has dementia

Emma

My name is Emma and I am 7 years old. My Granddad has Alzheimer's which means that he can't remember much and he makes a lot of silly mistakes. On Sunday when the whole family go to Granny and Granddad's house for lunch I think some people are very mean to him. When we're eating lunch my Granny gets mad with him by keeping on asking him things like, 'Who put that wine glass on the table?' I think that it's mean because she knows that he has Alzheimer's and that he can't remember anything. I think she should say very calmly, 'You put it there because you didn't know what else to do with it'.

Another mean thing is when my Uncle won't sit next to my Granddad because Granddad does lots of silly things and always reads the words on my Uncle's t-shirt about 11 times during lunch.

When I use my Granddad's computer golf game on Sunday Granddad always asks Granny why



I'm using it. She always says, 'She always uses it and you don't remember how to use it anyway'. I think she should just say, 'it's a golf game that you often let Emma play'. I think Granddad feels sad when people do this sort of thing. It isn't fair that he should feel sad. We should treat him very nicely like we do to normal people.

Andrew

My name is Andrew. I'm 10 years old. Granddad is very silly because he always looks at t-shirts and

asks what the words mean. People get mad with him because usually the words don't mean anything.

He gets confused about who Granny is - he thinks she isn't his wife, and he thinks my Mum is not his daughter. He never calls us by our real names. He gets grumpy if anyone touches anything he thinks is precious even if it isn't at all precious.

I don't think people treat Granddad very well just because he has Alzheimer's and forgets everything. People should treat him like they treat everyone else because he is still a person.

Matthew

I am 5 years old and I am called Matthew but my Granddad never calls me that. He calls me 'Andrew' or 'Junior' or some other stupid thing. My Granddad has got Alzheimer's that makes it so he can't remember much. I think it's not good because he calls me stupid things instead of 'Matthew'.

EUROCARE RESEARCH COLLABORATION

Spouses caring for older people with dementia

The Eurocare consortium was initiated by researchers at the Institute of Psychiatry, University of London, in response to the EC DGV call in 1996 for proposals for research concerning actions for people suffering from neurodegenerative diseases.

Fewer than half the spouse carers received formal support

Twenty husbands and wives of elderly people with Alzheimer's disease were interviewed in each of fourteen European countries. The individual and joint impact of coping with dementia, material assistance and social support was explored in relation to measures of carer burden and mental health.

Fewer than half the spouse carers received formal support in looking after the partner with dementia. Only 30% belonged to any kind of support group for older people. About half the carers interviewed received assistance from family and friends. On average, family members helped for 5.33 hours per week. Financial dissatisfaction emerged as a key component of carer burden and 61% stated that they had additional expenses because of their spouse's dementia, although far fewer received financial assistance. Passive behavioural problems were more burdensome than active behavioural problems. Older carers felt less burdened. The carer's psychological well-being was not independently associated

with feelings of burden in this sample, but burden was greater when other people were seen by the carer to react negatively to the person with dementia. This finding has important implications for health and social policy, indicating that public education about

Only 30% belonged to any kind of support group for older people

Alzheimer's disease may improve the situation of carers. The full report will be available after circulation to all collaborators.

JOANNA MURRAY AND
JUSTINE SCHNEIDER
DEPARTMENT OF EPIDEMIOLOGY
INSTITUTE OF PSYCHIATRY



Members' Forum

UK: ENGLAND AND WALES



Harry Cayton and Anne Robinson cutting the Alzheimer's Helpline celebration cake

Alzheimer's Helpline launched

'When my family and I desperately needed help and support, the Alzheimer's Disease Society were there on the end of a phone giving me the advice and information that we needed to get through a really difficult time.'

With these words, Anne Robinson, TV presenter, officially launched the national Alzheimer's Helpline on Wednesday 22 April. She spoke of her mother who had Alzheimer's disease. Anne first called the Society ten years ago. 'The Alzheimer's Disease Society saved my life,' she said.

Vice chairperson Marjorie Stone welcomed guests, who included supporters of the Society from business, the Department of Health and Parliament. Guests were addressed by Andrew Beynon, a carer from South West London, Anne Robinson and Harry Cayton, executive director of the Society. Harry Cayton paid tribute to those whose support enabled the development of the Alzheimer's Helpline. The official launch followed a television broad-

cast by GMTV on the morning of 22 April. GMTV showed a moving film about Andrew Beynon and his father who has Alzheimer's disease. Andrew talked about his experience of some of the practical and emotional problems that can occur when caring for someone with dementia.

Presenters in the studio then interviewed Andrew and Clive Evers, director of information and education, through a live link to the Society's national office in London.

Helpline operators were immediately inundated with calls. Steve Milton, manager of the helpline, said: 'we are really pleased that the launch of the helpline has made such an impact in such a short time. We know that there are thousands of people who could be helped by the Society. I hope that we will be able to reach many more through the national helpline.'

The Alzheimer's Helpline responded to over 1,200 enquiries in the week following its official launch.

UK: NORTHERN IRELAND



Eric Waller and Darwin Templeton, from the Freemasons of Ireland, with Cathy Hunter and Colette McGory, of Alzheimer's Disease Society, Northern Ireland

Dementia Helpline

In April 1997 the Alzheimer's Disease Society, Belfast Branch, with the financial support of the Freemasons of Ireland, the National Lottery Charities Board and the North and West Belfast Trust, launched a Dementia Helpline based in the regional office in Belfast, Northern Ireland. It has proved to be a resounding success and a vital source of information, advice and emotional support to carers and people with dementia all over the province.

There are around 15,000 people

with dementia in Northern Ireland, mostly cared for by relatives – sometimes for 24 hours a day. Living with someone with dementia can make one feel frustrated, helpless and hopeless.

This is where the Dementia Helpline comes in. It is staffed by trained advisors every weekday who are skilled in dealing with the many problems that can arise throughout the caring process. They can give comprehensive information on the various support services available (statutory, voluntary and private), caring strategies and methods (for example, coping with challenging behaviour), anti-dementia drugs, and on legal and financial issues. They can offer constructive advice to help a carer make choices and decisions about their situation. Perhaps most importantly, the staff are there to listen and give emotional support to the stressed and often isolated carer in a strictly confidential and professional way.

The helpline has received around 2,000 calls in its first year from both carers and professionals, and is gaining recognition throughout Northern Ireland for its extensive knowledge and personal standard of service.

CANADA



Celebrating success: 20 years of providing help and hope to Canadians



The Alzheimer Society of Canada is celebrating its 20th anniversary as a national organization. In 1978, with 45 people in attendance, the Society was founded. The first bank account was opened with an initial deposit of \$100. A lot has happened since then.

To mark this significant event, the Society made the theme of its annual national conference 'Celebrating Success.' Held in April

in Vancouver, British Columbia, the conference drew 500 people from across the country. The concurrent program was based on a very successful call for papers. One of the highlights was the interactive play 'Who Will Speak for Emily?' dealing with end-of-life issues.

The Plenary sessions covered various topics. 'Beyond Primary Caregiving' explored the effect of Alzheimer's disease on the family unit. 'The New Frontier', looked at the ethical issues associated with the introduction of Alzheimer drugs. The Lyons Lecture, our showcase plenary, saw the leader of the New Democratic Party of Canada, Alexa McDonough, share her family's experience with Alzheimer's disease. It also saw the launch of the new video resource for family caregivers 'The Alzheimer Journey.'

To make the celebration complete, our finale was a birthday party. Media celebrity Dale Goldhawk took us on a journey from 1978 to the present looking at the many accomplishments of the society. Included in the milestones were the establishment of a peer review research program in 1989, the hosting of the ADI conference in 1993 and the publication of the ethical guidelines in 1997. The session also included reflections of a person with Alzheimer's disease, family caregivers, a society volunteer and a researcher. The celebration closed with the sharing of dreams. Dr Patrick McGeer said his dream was to have a cure found on the centenary of the discovery of Alzheimer's disease (2006). Mike Crowe, an individual living with Alzheimer's disease, said he shared Dr McGeer's dream, but he would prefer that the cure be found sooner. The party was topped off with birthday cake and singing.

This conference was a time to pay tribute to the strength of the individuals and families who live or have lived with Alzheimer's disease, the dedication of the professionals who support them and the growth and the success of the Alzheimer Society in Canada over the years - it truly was a celebration.

NEWS UPDATE



Finland Congratulations to the Alzheimer Society of Finland who won first prize in a national competition of all conferences held in Finland last year, for the brochures and publicity materials they produced for the ADI conference in Helsinki.

Argentina ALMA officially opened their new offices. Dr Carlos Mangone cut the ribbon.



Guatemala ERMITA are about to move into their first office. The space has been generously donated by the dean of the Systems Engineering and Computer Sciences Faculty of the Francisco Marroqun University Guatemala.



The Netherlands held their annual meeting on 28 March 1998. This successful event was attended by over 500 delegates from all parts of the Netherlands (Karla Peijs and Harry Crielaars are pictured above). Dr Nori Graham and Elizabeth Rimmer of ADI also attended.

Puerto Rico The Association held a public seminar on April 19 about the coordination of services for people with dementia.

Become an associate member of Alzheimer's Disease International

Individuals and organisations can become associate members and receive the newsletter and notice of events and publications

I wish to become an associate member of Alzheimer's Disease International

Name

Address

Much of ADI's funding is provided by our member countries. However, national associations have enormous demands on their limited resources, so ADI continues to rely on donations from individuals and organisations. There is no fixed subscription for the newsletter, all donations are welcome. (Member countries and officers of ADI receive the newsletter free.)

I enclose payment of £10/\$15 £25/\$40 £50/\$75 Other

Payment can be made by cheque or banker's draft in either US dollars or Sterling, to Alzheimer's Disease International, 45/46 Lower Marsh, London SE1 7RG

Forming sister links in the Asian region

Established in 1982, the Alzheimer's Association New South Wales (NSW) is headquartered in Sydney, Australia. The Association has grown substantially and continues to expand its support services for people with dementia and their carers, and health and age care professionals.

With its award-winning Internet site and visits by representatives from other Alzheimer's Associations throughout the world and vice versa, the NSW Association now has several global links.

To assist ADI in facilitating the development of Alzheimer Associations in the Asian region, the NSW Association has made formal contact with several Asian countries, exchanging information and knowledge.

The most formal 'link' between Australia and Asia is the NSW's Association's contact with colleagues in Hong Kong. In February 1998, Joan Simms, Chief

Executive of the NSW Association, was invited to deliver a speech about raising dementia awareness to the Dementia Forum organised by the Hong Kong Elderly Commission.

Whilst on her Hong Kong visit, Miss Simms toured several facilities closely linked with the Hong Kong Alzheimer's Disease and Brain Failure Association (ADA). According to Miss Simms, 'Besides the opportunity to share our experience in raising awareness of dementia, the visit provided the opportunity for me to have dialogue about the work of our two associations.'

Dr C S Yu, Chairman of Hong Kong ADA wrote to the NSW Alzheimer's Association saying, 'We will treasure our joining hands with your Association and the union together to race against time. By linking hands and becoming sister organisations, we will surely have much benefit of information and resource interchange.'



Joan Simms with Dr Yu

The Alzheimer's Association NSW was a signatory to the ADI Charter on World Alzheimer's Day 1997. This charter asks that 'we join the other members of the ADI federation in calling on the people of the world to take up this baton and unite in the race against time'. Forming strong links with other countries in our region is an important step in this process.

Emerging Alzheimer associations

Trinidad and Tobago

The Alzheimer's Disease Programme was launched in October 1996 as a project of The Soroptimist Club of Port of Spain with a seminar entitled 'Alzheimer's Disease, the affected person and the caregiver'. In 1997, awareness of the disease was heightened as a result of activities for World Alzheimer's Day on 21 September, which took the form of press releases and radio interviews. Since then, many people have sought assistance, as demonstrated by the attendance of 150 participants at the annual seminar/workshop on 8 November entitled: Understanding and Living with Alzheimer's. The follow-up to this has included monthly two hour sessions for two groups of caregivers for a period of three months. These caregivers are the core of the support group and meet fortnightly. Other activities undertaken were: a seminar in Tobago, television interviews and an awareness presentation with a video called 'The many faces of Alzheimer's' to a women's church group.

Topics covered included: Alzheimer's disease, an overview; signs and symptoms; emotional impact on caregivers and patients; financial implications/management; legal aspects; nutrition; use of medication; and safety in the home. Lectures, discussions, video



Committee member and carer Tessa Gopaul leads a discussion group in Trinidad

presentations and plenary sessions were the methods used. The programme facilitators were mainly club members and included physicians, psychiatrists, psychologists, attorneys, pharmacists, geriatric and psychiatric social workers and caregivers.

There is now a greater awareness of the disease and caregivers have the opportunity to share experiences with one another. We have high hopes for the rapid expansion of the programme and the formation of an Alzheimer's society in the near future.

MRS NORMA INNISS, CO-ORDINATOR

PERSPECTIVE FROM INDIA

Dementia and the care giving family

DR VIJAY CHANDRA
DIRECTOR, CENTRE FOR AGEING RESEARCH,
NEW DELHI, INDIA

Historical notes

Historically India has been a rural agricultural society generating a stable system where all family members were taken care of from birth to death. The 'caste system' has also had a strong tradition and provided security. Families within a caste were engaged in the same profession, eg trading or priests, and the family job was essentially perpetuated from father to son. Traditionally a 'joint family system' prevailed. This consisted of several generations living together often with multiple families of each generation, enabling the burden of caring for the elderly to be shared.

Cognitive decline with age is well recognized in ancient Indian culture. A term 'Smriti Bhransh' was described in Ayurvedic literature around 800 BC implying 'loss of memory'. Even a treatment for this condition was described. A term used in the Indian language to describe cognitive impairment translates literally as 'turned 60.' and is used to describe patients who begin to exhibit signs of cognitive decline, no matter what their age. This phrase has been part of the language for centuries, indicating that our ancestors considered cognitive impairment to be a part of ageing, not a disease.

Attitudes of lay people towards ageing

There is a casual approach to impairment in old age. It is rationalised as 'normal' and as a result elderly patients are rarely taken to a doctor for decline in cognitive function.

Evolution of society

The repeated dividing of land over generations now means that many rural farmers are unable to grow enough crops to feed their families and have been forced to sell their land and migrate to urban areas to look for jobs. They can only find low-paid unskilled work giving barely enough money to survive on. Older members of the family are left behind in villages with no physical or monetary means to care for them.

Life expectancy in developing countries including India has been increasing, leading to the problems and illnesses of old age emerging as major social and medical issues. There are few models available to families on how to handle these changes and as many physicians trained in the past have never seen illnesses such as dementia, they are unable to diagnose and treat it.

The joint family system has come under stress, resulting in one or two carers carrying the burden of caring for the elderly rather than it being shared by multiple members as in the past.

Awareness of Alzheimer's disease in the community

The loss of ability to form new memory, which is often the first sign of Alzheimer's disease (AD), is commonly dismissed with the explanation of 'an age factor' and is not enough to convince a family to bring a patient to a doctor. Even if the patient were to be taken to a doctor, most general physicians have limited experience of dementia and therefore are rarely able to make a diagnosis.

The results of prevalence surveys of dementia in the community are often biased for two reasons: existing screening instruments used are incapable of identifying mild/early cases of AD; moderate and severe cases of AD have high early mortality from other conditions, eg aspiration pneumonia, hip fracture. Data from developing countries may therefore seriously under-estimate the prevalence of AD and other dementias.

Expectations of the elderly

In the rural setting many behavioral and psychological manifestations of dementia such as repetition, forgetfulness, anxiety, agitation are of no concern to the family and are just ignored. Other symptoms such as wandering are easily tolerated as a neighbour will bring the person home.

Symptoms such as incontinence can have a devastating effect on the family. Urine and faeces are regarded as 'untouchable' and most family members find it extremely difficult to help clean an older relation. Sexual misbehaviour is completely unacceptable and will often precipitate violence against a patient.

Treatment and remedies

As patients with dementia are rarely brought to a physician's attention, many behavioral or functional disturbances go untreated.

There are a variety of medications sold as 'cerebral activators' which have unproven efficacy, but are often used by physicians for want of a better alternative. Folk remedies are still practiced in some remote areas.

Management and care

In India most patients with AD are cared for at home by family members and domestic workers. Although well meaning, such carers often do not understand the process of dementia and the intricacies of caring for a person with dementia. There are almost no community workers who are specially trained to deal with dementia, and no facilities for respite care. There are very few neurologists, psychiatrists and geriatricians who have enough experience to manage these patients and counsel family members.

Patients will therefore continue to be cared for in their homes in the near future. Although it may be beneficial for the patient to remain in familiar surroundings, it is physically and psychologically difficult for the family. This complex issue remains to be recognized and addressed.



'Race against time' campaign organised last year by Alzheimer Italia in Milan for World Alzheimer's Day. For details of this year's World Alzheimer's Day, contact the ADI Secretariat

First regional ADI meeting of Latin American Alzheimer associations

'This first regional meeting of ADI Latin American members is a significant step in our history and shows how far we have come since 1984. Our Latin American members have always been strong and active supporters of ADI and of each other' said Dr Nori Graham, Chairman of ADI, in a message of support.

The meeting was held in Caracas, Venezuela, March 13-14 1998, and brought together ADI members from Puerto Rico, Chile, Mexico, Chile, Venezuela, Cuba and Brasil. The objective was to facilitate exchange of information and skills between the different Alzheimer associations in the region with a particular focus on prevalence of dementia, education of professionals, support groups, fundraising and carer support. Built into the meeting was plenty of time for group discussions and networking.

Plans are already under way for the next meeting, to be held in Mexico in 1999.



Some delegates to the Latin American meeting

A new drug for Alzheimer's disease

Rivastigmine (Exelon, manufactured by Novartis) was launched in the UK in June and is available in most of Europe.

Rivastigmine is a drug for people with mild to moderate Alzheimer's disease, it works like donepezil (Aricept) by preventing the breakdown of acetylcholine, a chemical involved in nerve cell communication in the brain. Rivastigmine is not a cure for Alzheimer's disease.

It is not possible to predict the potential benefits of any anti-dementia drug, but rivastigmine can slow down the progression of the symptoms of Alzheimer's disease in some people although it is not effective for everyone. For a factsheet about rivastigmine (produced by the Alzheimer's Disease Society, UK) please contact the Secretariat.

Alzheimer Europe conference Lucerne, Switzerland, May 7-9 1998

Keeping in touch

The Alzheimer Society of Switzerland were hosts to the 8th Alzheimer Europe conference in the beautiful city of Lucerne. Over 900 delegates from all over Europe attended and participated in a range of plenary sessions and workshops including telephone helplines, how to make language work, the human rights of people with dementia and training for professionals. The stimulating atmosphere and social events gave delegates the opportunity to network and make new friends and contributed to the resounding success of the meeting.



Gulustu Kaptanoglu, Turkey, enjoying the conference

14th International Conference of Alzheimer's Disease International

Dementia, the global challenge

Cochin, Kerala, September 24-27 1998

Reasons to attend:

- Lively and stimulating programme
- International speakers
- Delegates from over 40 countries expected
- Great networking opportunity
- Wonderful location



A very warm welcome awaits you in Cochin, for registration details please contact the conference secretariat alzheimer@md2.vsnl.net.in or fax: +91 488 523 801 or visit the conference website www.alzheimer.com