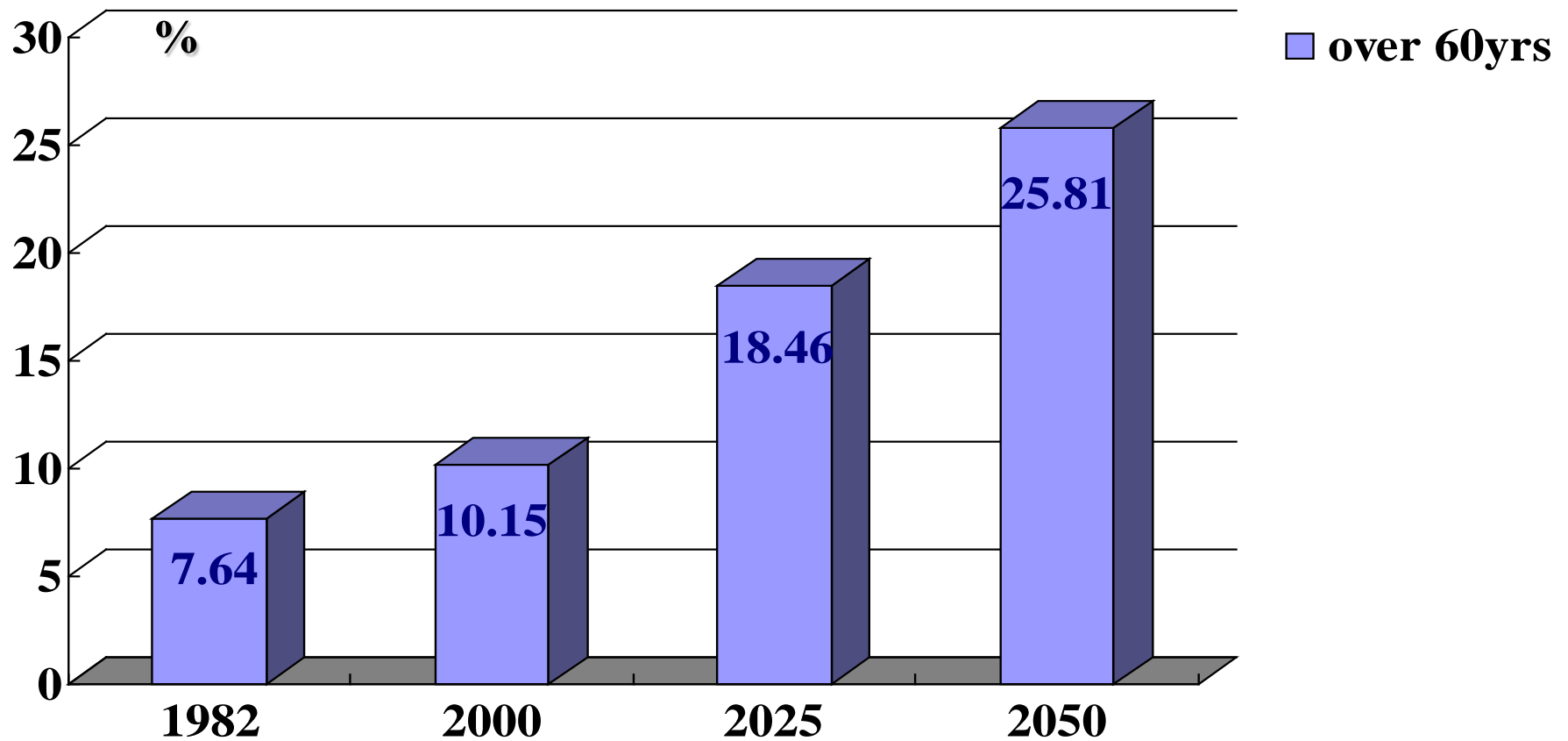


Current Status of Dementia and Challenges in China

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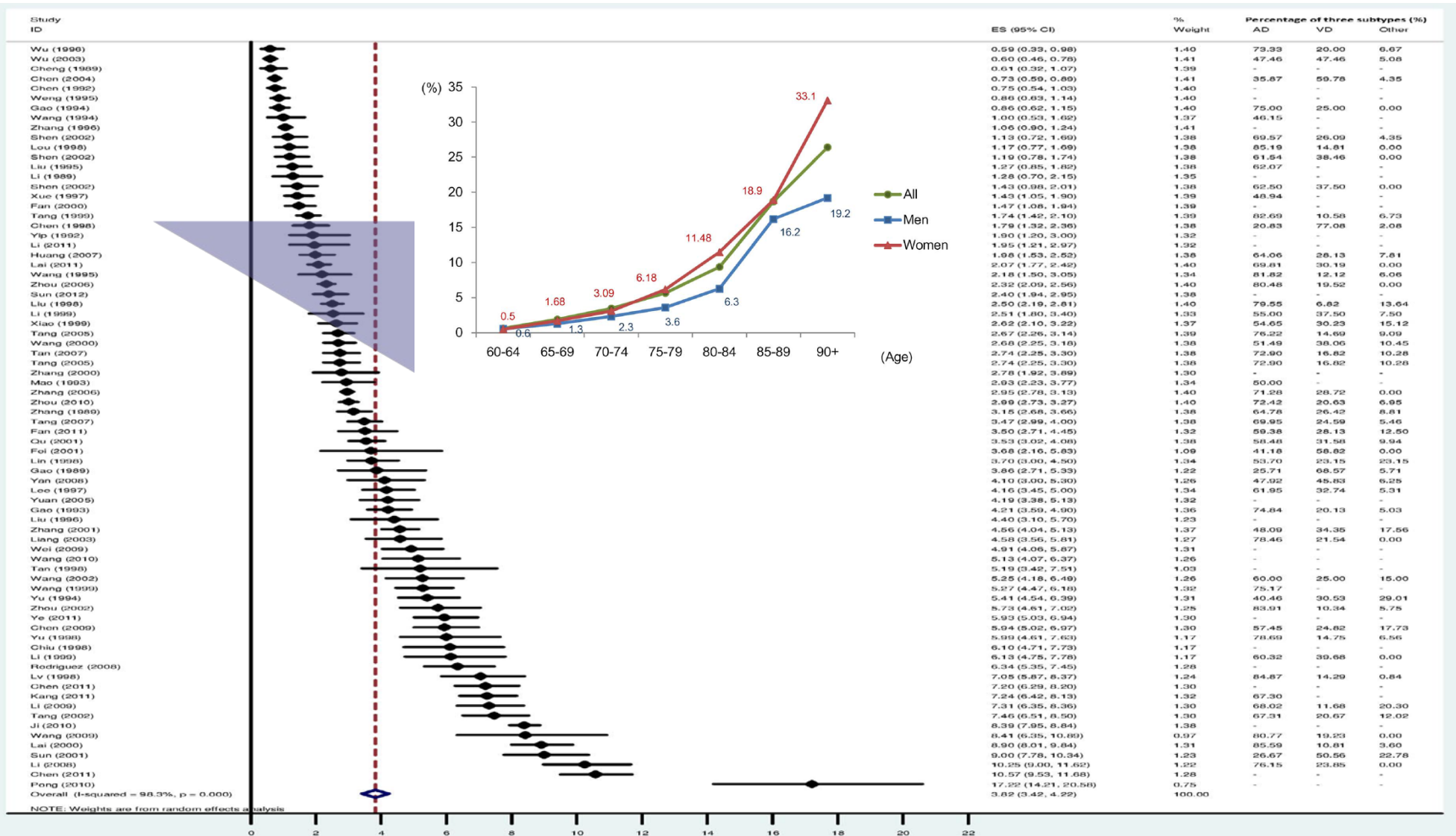
Population Ageing in China:

past, present and future



The Fifth National Population Survey, 2002

Dementia Prevalence in Chinese



From: **Dementia Subtypes in China: Prevalence in Beijing, Xian, Shanghai, and Chengdu**

Arch Neurol. 2005;62(3):447-453. doi:10.1001/archneur.62.3.447

3.5% (3.0%-3.9%) or 4.8% (after post hoc correction for negative screening errors) for older than 65

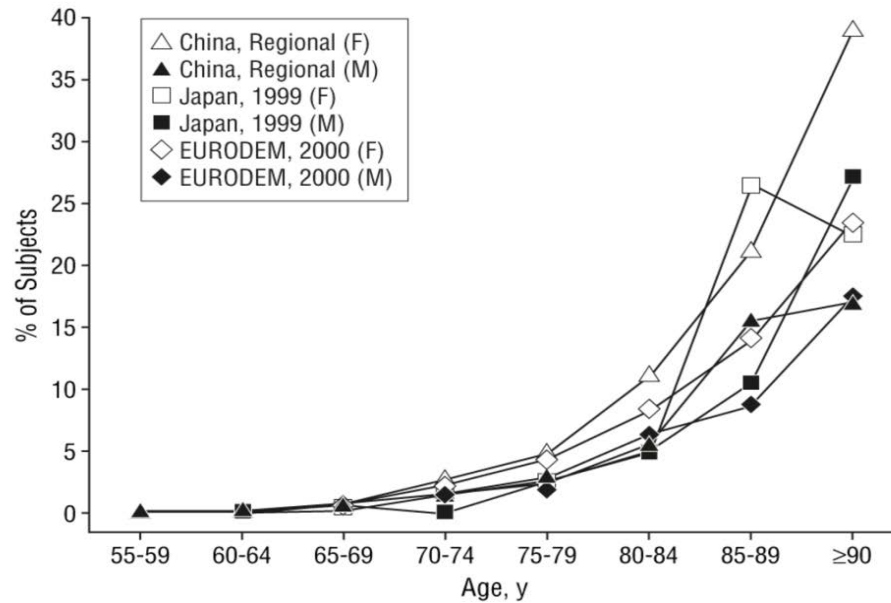
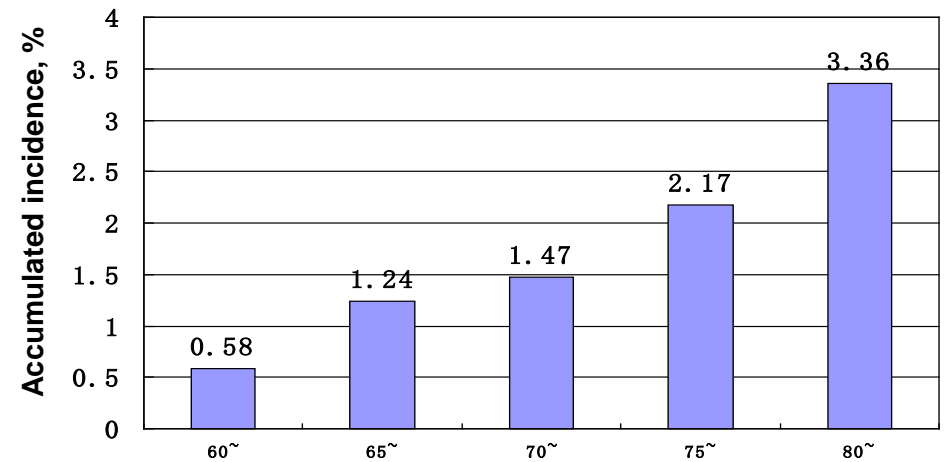
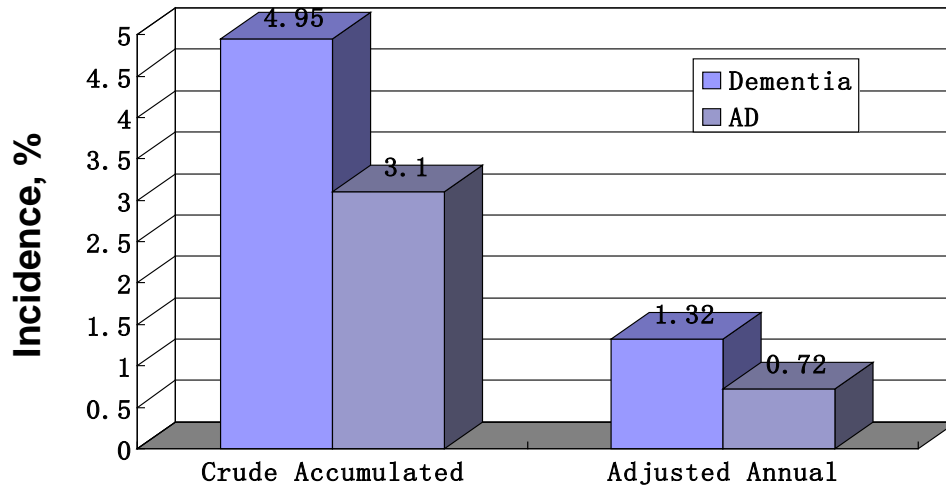


Figure Legend:

Age- and sex-specific prevalence of Alzheimer disease in China (present study) compared with east Asian (Japan, 1999) and Western (European Community Concerted Action on the Epidemiology and Prevention of Dementia Group [EURODEM], 2000) studies.

Incidence of Dementia and Alzheimer's Disease (1997-2000)



Estimated Number of Dementia Patients

Table 2. Estimated number of people with dementia in mainland China, Hong Kong and Taiwan (Based on DSM-IV).

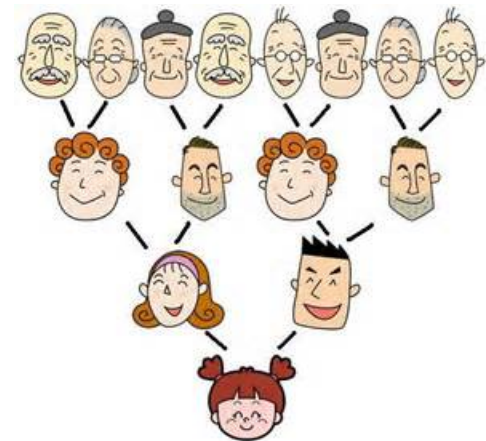
Area		Total population (million)	Elderly population ^a (60+ in mainland China; 65+ in Hong Kong and Taiwan, million)	Number of people with dementia (million)	Prevalence ^b (%, 95% CI)
Mainland China (age 60+) ^a .	North	563.8	73.4	3.76	5.1 (4.1, 6.1)
	Central	492.4	73.3	3.22	4.4 (3.2, 5.6)
	South	276.6	30.9	1.20	3.9 (2.3, 5.4)
	Total	1332.6	177.6	8.18	4.6 (3.4, 5.8)
Hong Kong (age 65+) ^a .		6.9	0.9	0.06	6.8 (3.8, 9.8)
Taiwan (age 65+) ^a .		23.2	2.5	0.15	5.7 (3.2, 8.2)
Total		1362.92	181	8.39	4.6 (3.4, 5.8)

Table 3. Projected number of people with dementia from 2012 to 2060 in mainland China, Hong Kong and Taiwan (Based on DSM-IV, unit: million).

	Current	2020	2030	2040	2050	2060
Mainland China (age 60+)	8.18	13.5	20.3	29.59	40.63	48.68
Hong Kong (age 65+)	0.06	0.09	0.13	0.20	0.29	0.32
Taiwan (age 65+)	0.15	0.21	0.32	0.49	0.66	0.71

Challenges China is Facing

- China is facing a new epidemic of unprecedented increase of population ageing and burden associated with dementia
- Societal costs will rise inexorably, driven by the increasing need for long term care
- Limited number of specialized dementia clinics
- Limited number of family doctors and GPs, & lack of specialized training on caring dementia patients
- Limited beds and nursing homes and experienced care takers
- Lack of specialized dementia nursing homes
- Change of family structure with 4:2:1 and even 8:4:2:1 families



Time for Action

■ Clinical care

- ✓ Promoting awareness of dementia in the community
- ✓ Establishing more dementia clinics & guideline
- ✓ Increased coverage of drugs & included in special schemes of insurance
- ✓ Building more specialized dementia nursing homes
- ✓ Establishing the integrated “Care and Nursing Combined Community Hospitals”
- ✓ Programs to train more GPs and care takers

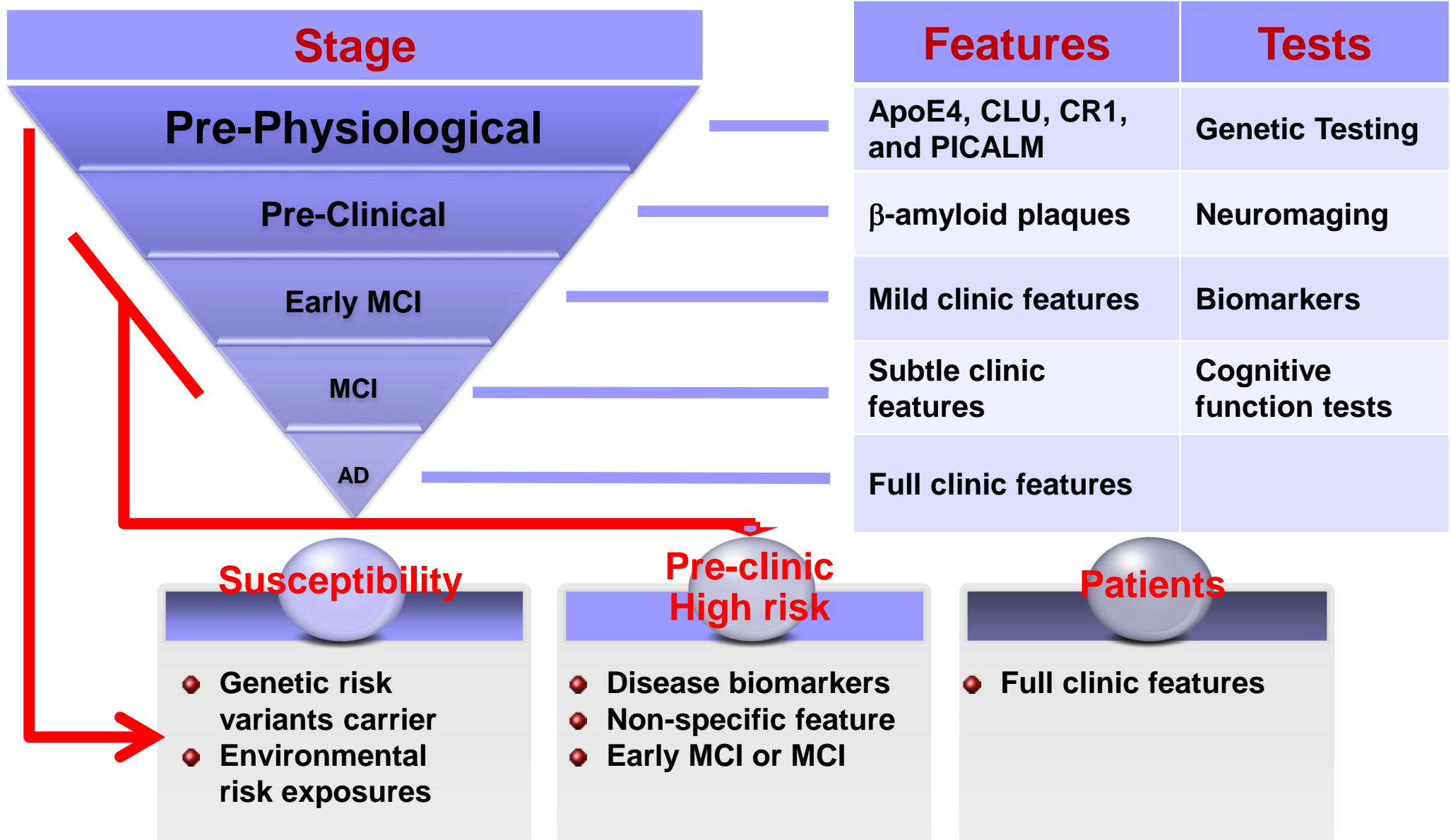
■ Social policy

- ✓ National Day on Dementia
- ✓ Enforcing laws on responsibility of caring elderly
- ✓ Promoting commercial insurance and increased investment on research and care

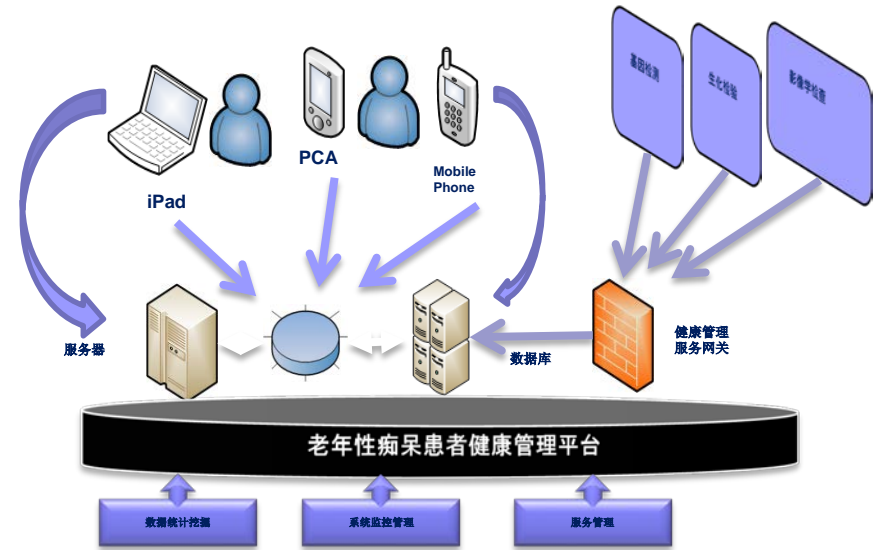
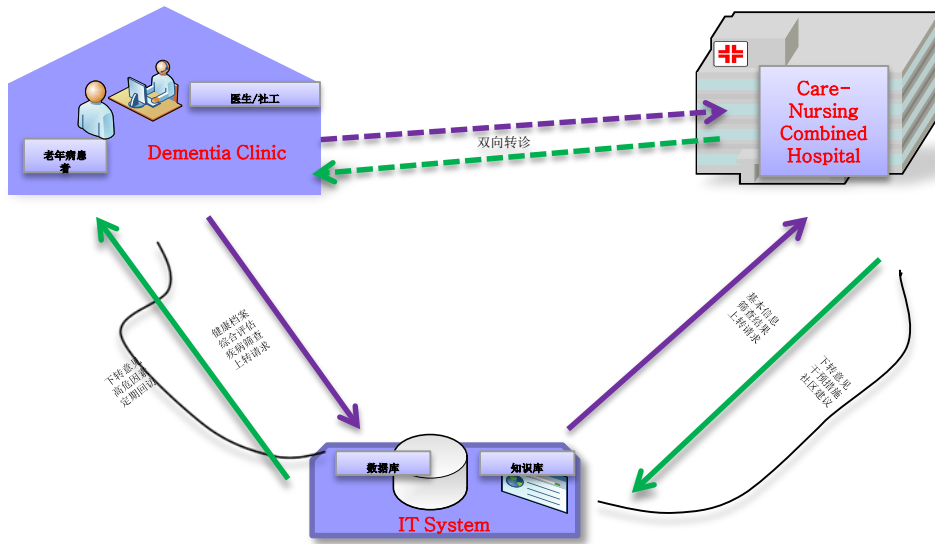
■ Prevention

- ✓ Promoting research for early diagnosis and intervention
- ✓ Comprehensive programs including community health and rehab centers, and community activities

Screening Programs and Dementia Clinic



Building Integrated Model for Care & Prevention





Thanks!