



Global action against dementia
Action mondiale contre la démence

Timely and appropriate prevention and care ***The French experience***

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Today in France older subjects are anxious about their memory

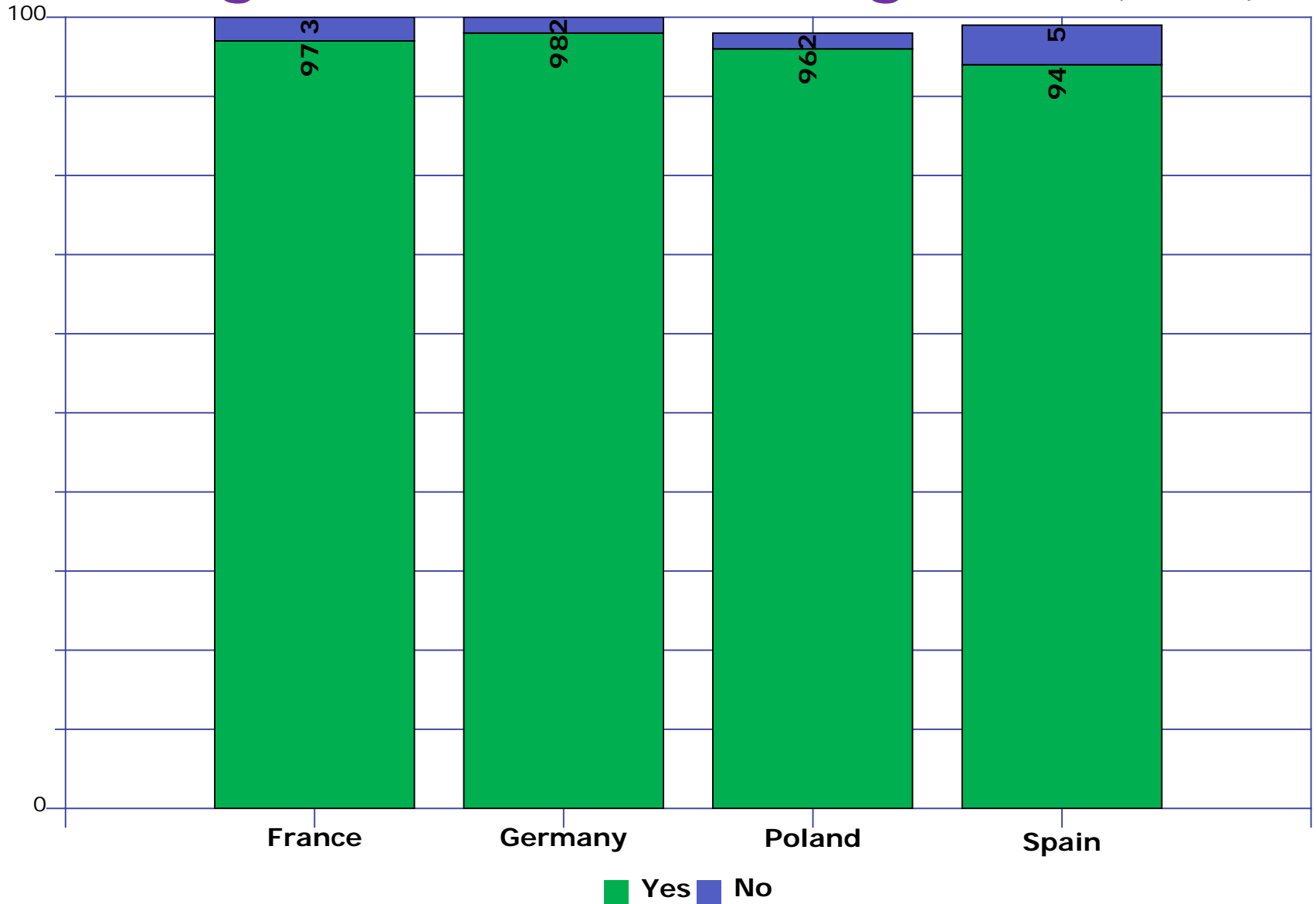
- memory complaints: almost the rule
- complaints not correlated with objective memory performance
- in most of the cases, complaints are related to attention disorders:
 - depressive mood
 - anxiety and professional stress
 - drugs
 - sleep disorders and sleep apneas
 - normal ageing

The 4 arguments put forward against an early diagnosis for AD

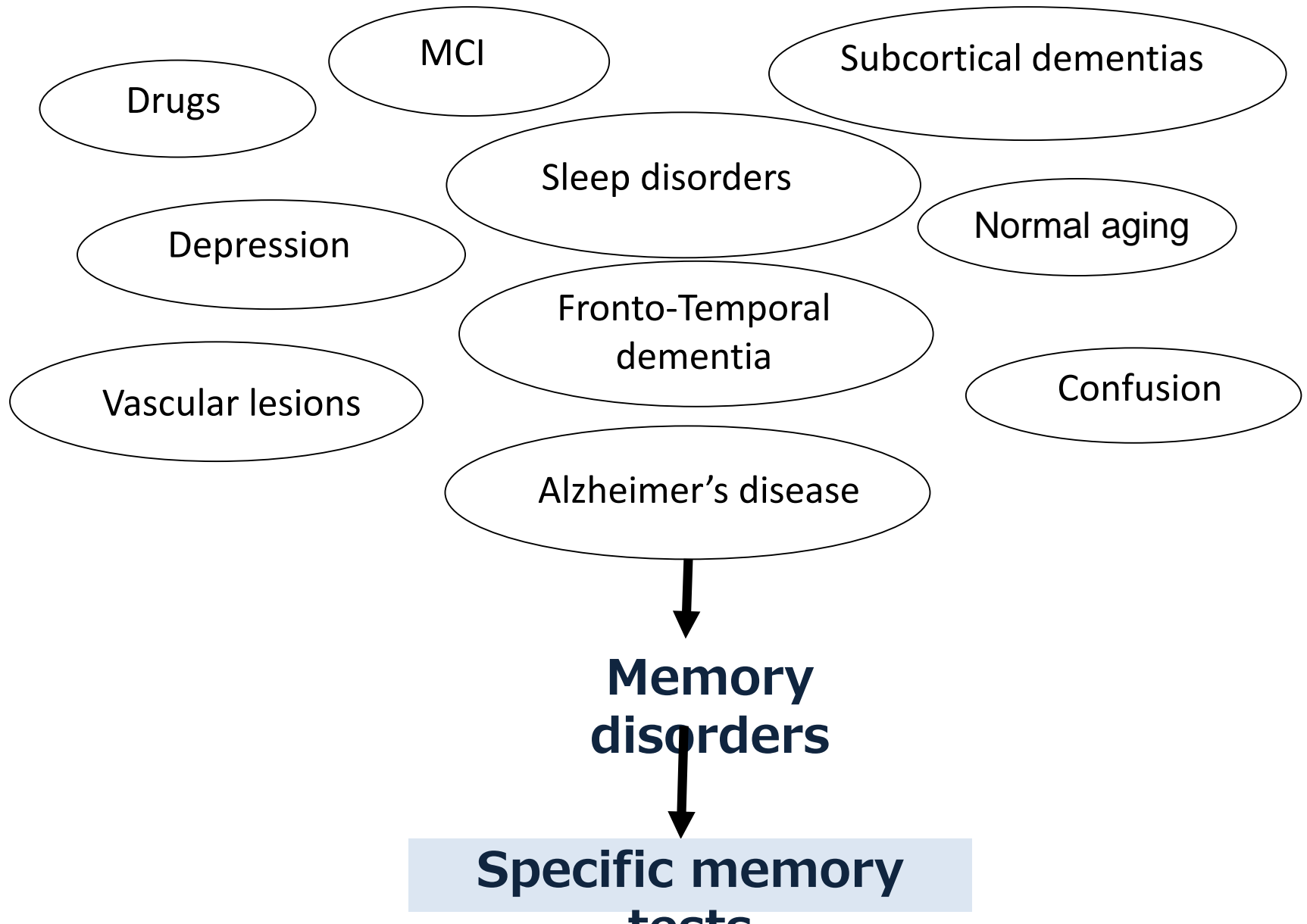
- 1) No desire to know
- 2) No certainty of diagnosis
- 3) Nothing to do for the patient
- 4) Risk of catastrophic reactions

~~No desire to know?~~

Willingness to receive diagnosis (self)



No certainty of diagnosis: Early diagnosis is difficult



The specific pattern of AD memory disorders can be identified with cueing

Alzheimer's disease = Storage deficit

Cueing

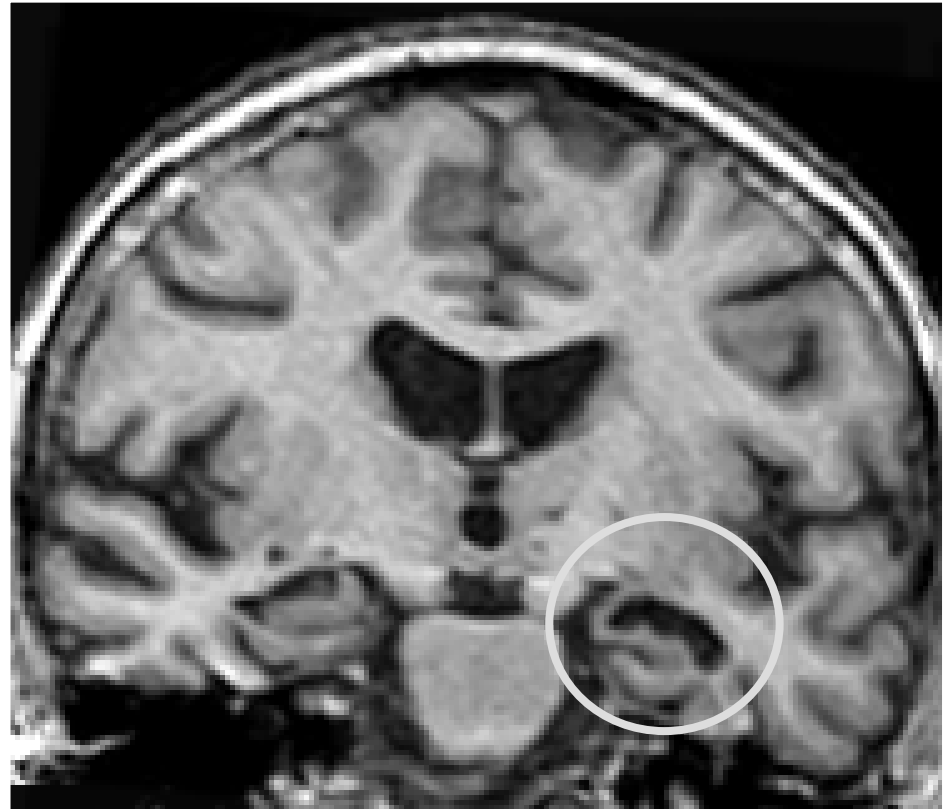
Other conditions = Retrieval deficit

Total recall is NOT normalized

Total recall is normalized

MRI is useful at the prodromal stage

- MRI excludes other causes (vascular, tumor, hydrocephalus...)
- MRI shows a precocious atrophy of the hippocampus



~~The diagnosis is more difficult at an early stage~~

'There is nothing to do'

Current available Non Pharmacological Treatment

- Cognitive stimulation is as effective on cognition as symptomatic drugs
- Cognitive rehabilitation
- Behavioral therapy applied by informal carers as co-therapists
- Support groups for informal carers improve quality of life
- Physical activity
- Multicomponent caregiver interventions
- Less evidence, still good: arts and musical therapy

Risk of catastrophic reactions

Disclosure of the diagnosis enables the patient to:

Recommendations for a timely diagnosis for AD

December 2000

Level 1: the GP

- identification and screening of patients with simple tools;
- orientation to level 2 for a more complete investigation;
- follow-up of patients in connection with the local network of professionals.

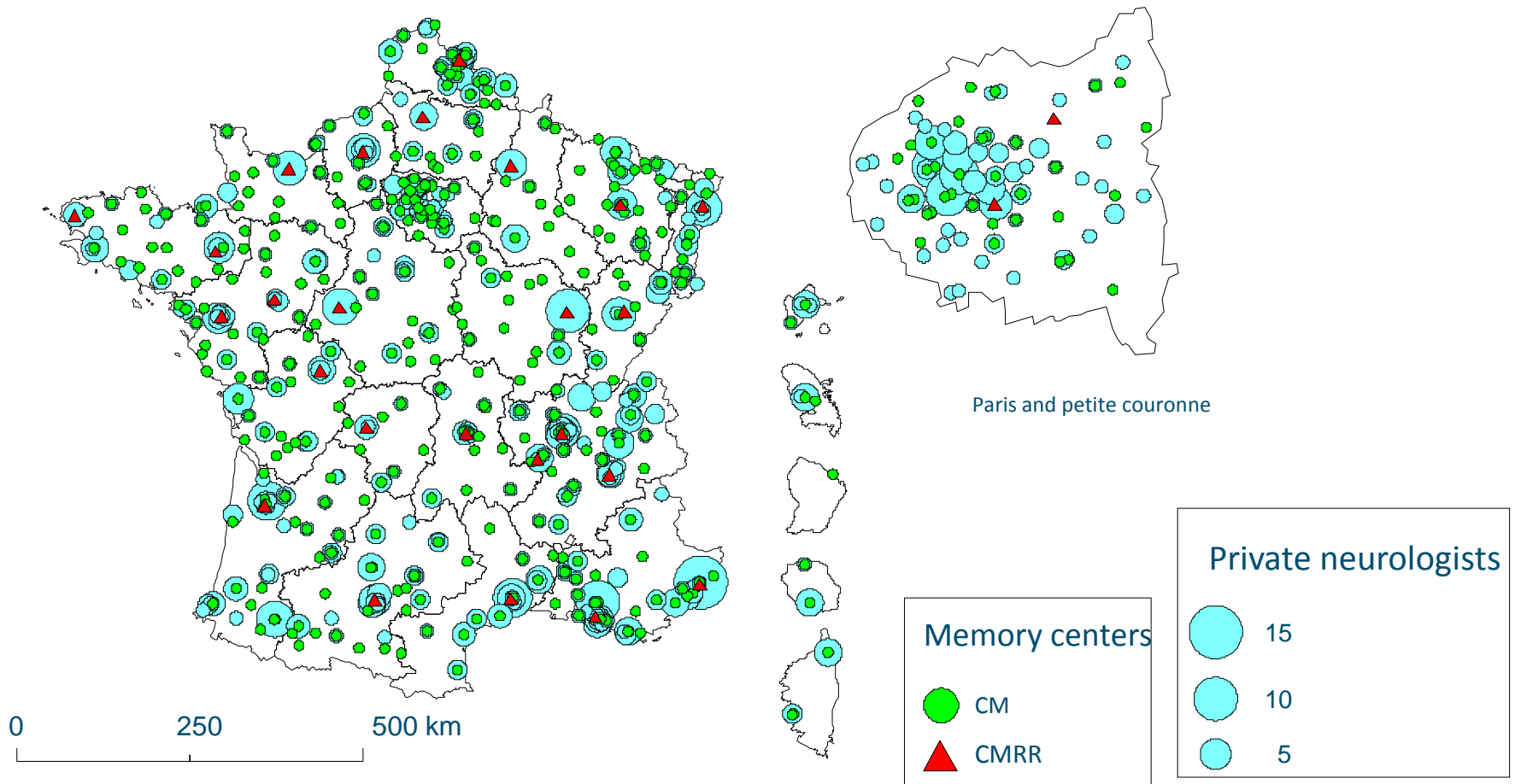
Level 2: the Memory Clinic or the Specialist (N,G,P)

- confirmation of the diagnosis based on a specialized neuropsychologic investigation and neuro-imaging ;
- therapeutic initiation.

Level 3: Regional Expert Centre (platform of resources)

- for complex diagnosis and Young-onset AD patients;
- for clinical research;
- for clinical trials mainly on disease modifier treatments.

The 3-level device in France



Source : DHOS 2009 & CNAM 2009



**L'ENGAGEMENT
DE TOUS**

Plan Maladies Neuro-Dégénératives

2015-2019