Dementia Leadership on the Global Stage:
Placing Dementia on the G20 Agenda & Beyond

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A Consensus Statement & Research Framework

Introduction

On March 21, 2019, leading Alzheimer’s researchers, government officials, biopharmaceutical industry executives and patient advocates from across the globe met at the University of Tokyo for the second annual Alzheimer’s Asian Scientific Roundtable. The meeting was convened by the University of Tokyo, Health and Global Policy Institute, The Global CEO Initiative on Alzheimer’s Disease (CEOi), and ResearchersAgainstAlzheimer’s, a global network of UsAgainstAlzheimer’s.

Dementia is already one of the most pressing public health emergencies and social, economic, and political crises of the 21st Century – with the potential to financially uproot millions of families, communities, and governments in the process. Today, 50 million people suffer from dementia around the world1 and the disease costs the global economy more than $1 trillion each year.2

Given its greying society, Japan has been forced to address age-related issues earlier than other countries. We applaud the Japanese government for making aging and dementia a theme of its G20 leadership in 2019 and a topic of conversation for this summer’s G20 Summit Meeting and this fall’s Health Ministers’ Meeting. And yet, to solve the world’s aging challenges, global governments must find a way to tackle Alzheimer’s and other dementias.

Dementia is a global challenge requiring a global response. A continuing global conversation is needed to develop the most effective strategies for preventing, deferring and treating the disease. And long-term, advances in Alzheimer’s treatments are only possible if we define and implement a global strategy for combatting the disease. It is time for researchers, academics, advocates, and government officials to partner at the regional, national, and global levels to find solutions to the barriers to advancing innovative treatments that will help millions of patients and families in need.

A Framework for G20 Action

1. **Urge nations to integrate a brain health standard of care into their healthcare systems.**

There is a notable absence in the global health conversation today of the ways consumers can proactively promote their brain health and brain performance and thereby mitigate the risk and timing of cognitive decline. The more that knowledge of evidence-based brain health practices can be integrated into medical management and consumer lifestyles, and the more researchers learn about the total continuum of the disease – from Mild Cognitive Impairment through dementia – the more society will be able to benefit from new risk reduction strategies, the detection of preventable cognitive decline, the timely diagnosis of dementia, and the widespread adoption, when available, of new disease-modifying treatments. We recommend three strategies in that regard:

- Healthcare professionals and consumers must incorporate brain health – a “check up from the neck up” – as a central piece of any routine office visit well in advance of suspected dementia;
- Researchers must investigate and confirm the science based risk reduction and prevention strategies necessary to stem the number of people living with the disease; and
- Policymakers, including those in G20 countries, must promote a lifespan approach to brain health and, in doing so, increase funding and incentives for the integration of risk reduction strategies in their healthcare systems.

2. **Increase the development of assessment tools, biomarkers and diagnostics to improve rates of timely, accurate and compassionate diagnosis of dementia globally and thereby accelerate the widespread adoption of innovative treatments by those with or at risk of the disease as they emerge in the next few years.**

Research has underscored the need to “shift left” to intervene earlier in the life course of the disease before patients begin to outwardly show symptoms. Unfortunately, most dementia patients are never diagnosed at that stage of the disease. As more countries look to promote brain health as a central piece of their national health strategies, new biomarkers and diagnostics have the potential to help:

- Scale detection and diagnosis efforts, as well as improve data collection and public health monitoring;
- Accelerate the development of new medicines by shortening clinical trials and reducing their cost; and
• Increase access to less-invasive, accurate, low cost and easy-to-use biomarker tools capable of use in low to middle income countries.

3. **Create linkages among regional clinical trial systems to build a global clinical trial support network.**

The low rate of global clinical trial participation remains a barrier to bringing new treatments to patients. This is due in part to difficulty recruiting patients at trial sites, inefficiencies and lack of capacity at clinical trial sites, the need for single IRB mechanisms, standardized contracts and processes, and an absence of national registries and trial-ready cohorts. Standing integrated national or regional networks of clinical trial sites are emerging in North America (e.g., The Global Alzheimer’s Platform), Europe (e.g., European Prevention of Alzheimer’s Dementia Consortium) and most recently in Japan under the leadership of The Japan Society for Dementia Research. Investments in and connections among these national or regional networks will:

• Boost knowledge sharing between researchers around the globe;
• Improve clinical trial capacity, efficiency and safety; and
• Spur development of innovative clinical trial platforms and trial designs to support global research.

4. **Launch a standing G20 Finance Ministers workgroup to address the costs to society and governments of dementia and discuss new finance mechanisms and public private partnerships.**

Despite the rapid pace of discovery, the Alzheimer’s space has been slow to bring public health interventions and new drugs to market. And the costs to families and governments of dementia are rising rapidly in most countries. Innovative risk reduction strategies and drug therapies are emerging which, in combination or alone, hold the prospect of reducing the prevalence of this costly disease, particularly its high-cost later stage. In light of the Finance Ministers meeting this June, the Japanese government should use this opportunity to launch the first of what would be an annual meeting where governments from around the globe share best practices in addressing the economic, health, and social challenges of an aging society. And at a time when patients and families are desperate for a means of prevention and treatment and healthcare systems hold no clear means of managing costs, the field must also look to:

• New international financing mechanisms for Alzheimer’s drug development to bring new treatments to market, including impact funds devoted to catalyzing investment in the space as well as dementia-specific global funds.
• Public-private partnerships to finance services for patients and families in need, such as the Japanese government’s Public-Private Joint Demonstration Platform, which aims to support the development of new products to assist those suffering from dementia.  

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In Closing

Japan is in a unique position to articulate a vision for how governments, businesses, and private citizens can address the Alzheimer’s and dementia crisis. As Prime Minister Abe and his cabinet finalize the agenda for the G20 Summit Meeting in June 2019 and Health Ministers’ Meeting in October 2019, we look to the Japanese government for guidance and leadership on crafting and implementing a global response to this disease. We urge Prime Minister Abe and his cabinet to lead on this issue by making Alzheimer’s and dementia a central pillar of its G20 work in 2019.

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