ALZHEIMER'S DISEASE

There is currently no cure for Alzheimer's disease (AD), and safe and effective treatments are lacking. However, substantial NIH research investments in AD and related dementias have identified promising new ways to diagnose, treat, and possibly even prevent them.

ALZHEIMER'S DISEASE is the **most common**

cause of dementia among older adults.

ACT

for NIH



As the baby boomer generation ages, Alzheimer's disease and other dementias present one of the greatest health and economic threats to our nation.

5.8 million Americans are living with AD. (**By 2050**, that number is expected to be **nearly 14 million**.)



Every **65 seconds** someone in the U.S. is diagnosed with Alzheimer's disease.



Alzheimer's is the 6th leading cause of death in the U.S.



Treatments that delay the onset of Alzheimer's by five years would result in Medicare and Medicaid savings **of \$534 B**

in the first ten years, and \$3.1T over 25 years.



NIH funds ground-breaking basic and translational Alzheimer's research at major medical institutions across the country. It is also engaged in a precompetitive partnership called the **Accelerating Medicines Partnership - Alzheimer's Disease (AMP-AD),** through which it collaborates with a dozen biopharmaceutical and life sciences companies as well as several nonprofit organizations to identify and validate promising biological targets of the disease.

Additionally, the National Institute on Aging is currently supporting more than 230 active clinical trials on Alzheimer's disease and related dementias to accelerate the search for safe and effective treatments.

NIH-funded AD studies seek to answer:

- **Why** some people with memory problems develop Alzheimer's while others do not
- What genetic or protective factors affect the onset and progression of Alzheimer's disease
- Who is most at-risk of Alzheimer's and how they can benefit from tailored interventions and personalized treatments

Alzheimer's disease is the most expensive disease in the nation, costing more than either cancer or heart disease.

Sources: The Alzheimer's Association Facts and Figures Report (2020). Retrieved from www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.alz.org/media/Documents/alzheimers-facts-and-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letter (2019). Retrieved from www.nia.nih.gov/research/ang-figures.pdf; "Making the case to double NIH" The Cancer Letters" (2019). Retrieved from www.nia.nih.gov/res

This is a time of great promise in the quest to end Alzheimer's. But sustained funding increases for NIH are needed if we are to vanquish this debilitating condition and reduce future costs.