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Prevalence and meaning of dementia: how does it depend on the priority of decision makers?**Oleksandra Khudoba**

Lviv Regional Institute for Public Administration of the National Academy for Public Administration under the President of Ukraine Lviv, Ukraine

Statement of the Problem: Global efforts aimed at improving the health of the elderly are to ensure that the increase in life expectancy is not accompanied by an increase in morbidity. The process of aging should be accompanied by the preservation of both physical and mental efficiency for as long a period of time as possible, as well as the availability of services for older people in different needs. Aging of population is relevant for every country of the world, however only part of them consider dementia as one of the major problems determined by this demographic process. Dementia itself has a macroeconomic effect, which is a serious challenge for both health and social systems. Lack of awareness and stigma lead to limited access to treatment and receiving timely assistance in hospitals, putting a psychological pressure on the families. Hence only some advanced countries pose dementia as a national problem to deal with and their experience could be useful for those ones (including Ukraine), which want to create a supportive environment for maintaining the well-being of all age groups.

Findings: The importance of the dementia issues has almost reached the level of HIV epidemic consideration, hence the strengthening of epidemiological research may increase the evidence base for predicting the prevalence of dementia. The research of the influence of economic development on dementia counteraction shows that only half of the countries with the highest dementia death rates are represented by high-income countries, whereas almost half of the countries with income above the average level refer to the countries with the lowest rates. The highest dementia death rates are observed in all four groups of countries, divided according to their level of economic development based on the World Bank classification, but low rates are absent in poor countries. The lowest dementia death indicator as well as the highest one is recorded in highly developed countries. Life expectancy in the world has been increasing, leading to the rise in dementia prevalence. The research on the cause of death can provide valuable information about life expectancy and knowledge of what actually causes death can be valuable in the care of dementia patients, especially at the terminal stage. In the first group of countries with the lowest dementia death rates (Fig. 1), a quarter of countries have a high level of life expectancy (76.5 years or more) with high economic development. We assume that this situation can be explained by two options: it may be either a result of a high level of prevention programs, or a low level of diagnosis of dementia.

Conclusion and Significance: We found no correlation between prevalence of dementia, mortality from dementia, longevity of life or level of economic development and dementia policy. So we assume the development of dementia policy depends directly on the will and desire of policy makers. Ukraine is one of the biggest countries in Europe with ageing population and extremely low level of dementia awareness. The first step in developing dementia policy is to attract attention to dementia as a medical and social problem at the national level involving policy makers into the discussion. In launching this process, the role of NGOs is invaluable. It is important and necessary to use information from dementia studies to generate evidence-based policy. But excessive interpretation of results or careless analysis of key factors may overestimate the findings that can affect policy planning in not the best way, especially for countries with low economic development and limited resources. Excessive attention to the dementia epidemic can lead to misleading policy planning and can have unforeseen negative consequences for the health system. That is why Ukraine needs to learn from international experience.

Lesia.khudoba@gmail.com