## Type 1 Diabetes Identified as Possible Risk Factor for Dementia

It has long been known that type 2 diabetes is associated with a greater risk of dementia, and a recent Institute of Medicine report concluded that type 2 diabetes increases a person's risk of cognitive decline. But yesterday at the 2015 Alzheimer's Association International Conference (AAIC), we learned that type 1 diabetes may increase a person's risk as well.

In the first study of dementia in elderly individuals with type 1 diabetes – which followed the health histories of nearly a half million people over the age of 60 for a period of 12 years – researchers found people with type 1 diabetes were 83 percent more likely to get dementia compared with people who did not have type 1 diabetes, and 93 percent more likely than people without any form of diabetes. After adjusting for several cardiovascular conditions, the increased risk was still large (61 percent and 73 percent, respectively).

For public health, the significance of this study is less from the perspective of increased dementia risk, and more from the perspective of diabetes management among older Americans. Lead investigator Dr. Rachel Whitmer noted, "Since management of type 1 diabetes requires vigilance and constant self-care, cognitive impairment poses a particular threat to this vulnerable population."

Also at AAIC on Monday, the *Public Health Road Map* was the subject of a Featured Topic Session, with a specific focus on recent research related to certain *Road Map* action items. With regard to dementia and co-occurring chronic conditions (*Road Map* action item M-07), a systematic literature review led by Dr. Mark Snowden of the University of Washington found that dementia increases mortality, institutionalization, and functional impairment in persons with co-occurring chronic conditions. Examining data on older adults from the Health and Retirement

Study, Dr. Siran Koroukian of Case Western Reserve University reported that greater levels of cognitive impairment were strongly associated with more complex multi-morbidities. For example, 41.2 percent of individuals who had no cognitive impairment had at least one chronic condition, functional limitation, and geriatric syndrome (e.g. fall, delirium, incontinence). But, the rate was 80.5 percent among those with mild cognitive impairment, and 92.9 percent among those with moderate to severe cognitive impairment.

The *Road Map* session also included progress reports on projects related to the economics of dementia (*Road Map* action item M-05) and the development of culturally-appropriate strategies to increase awareness (*Road Map* action item E-01). Angela Deokar of the Healthy Aging Program at the Centers for Disease Control and Prevention (CDC) served as the panel discussant, helping to place the research work into context and highlight ways it will be useful in public health practice.

AAIC continues through Thursday.

## About the Alzheimer's Association International Conference (AAIC)

AAIC is the world's largest conference of its kind. Each year, thousands of researchers from around the world gather to report and discuss groundbreaking research and information on the cause, diagnosis, and treatment of Alzheimer's disease and other dementias. Each year, the Public Health sessions at AAIC offer the opportunity to hear the latest research on Alzheimer's disease prevention, risk factors for cognitive decline, epidemiology, and early detection. For more information, visit alz.org/aaic.

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