Introduction

Dementia is the seventh leading cause of death, and a leading contributor to disability, worldwide (1). Over 55 million people live with dementia globally. The majority (61%) of people with dementia live in low- and middle-income countries and this number is expected to increase to approximately 78 million by 2030 (2). About 2.3 million people live with dementia in the Eastern Mediterranean Region (EMR), where it is the 14th leading cause of death (3).

Dementia places a tremendous economic burden on individuals, families and society. Globally, in 2019 alone, the estimated economic cost of dementia was US$ 1.3 trillion, equivalent to 1.5% of the global Gross Domestic Product (1,4). And in the EMR, it was US$ 31.2 billion in the same year. The global economic cost is expected to more than double by 2030, reaching US$ 2.8 trillion (1,4).

In 2017, the Seventieth World Health Assembly adopted the Global Action Plan on the Public Health Response to Dementia, 2017–2025, which aims to improve the lives of people with dementia, their carers and families, while decreasing the impact of dementia on communities and countries (5). It comprises 7 action areas: dementia as a public health priority; dementia awareness and friendliness; dementia risk reduction; dementia diagnosis, treatment, care and support; support for dementia carers; information systems for dementia; and dementia research and innovation. In September 2023, the WHO Regional Office for the Eastern Mediterranean Region, the Ministry of Public Health of Qatar and the WHO Collaborating Centre for Healthy Ageing and Dementia, Hamad Medical Corporation, Qatar, organized a workshop to review and expedite progress in the implementation of the global action plan in the EMR.

Summary of discussions

There is a lack of awareness about dementia as a public health problem in the EMR, resulting in stigmatization and causing barriers to diagnosis and care (1). The risk factors for dementia in the region are on a stable or upward trend. For example, 60% of adults in the region are overweight and physical inactivity remains high (6). Diabetes rates are stable, smoking rates are increasing, and air pollution is 8 times higher than the recommended PM2.5 levels (6).

Progress towards achieving the 2025 global action plan targets is limited; only 8 countries in the region contribute to the Global Dementia Observatory data platform, only 8 are implementing dementia risk reduction campaigns, only 1 has reported availability of dementia risk reduction guidelines, and only 37% of the countries provide support for dementia carers (7).

Recommendations

Participants recommended the following key actions for Member States and WHO:

For Member States

1. Integrate national dementia plans into existing mental health, elderly and disability care plans and adopt a holistic approach to the diagnosis, care and treatment of dementia with collaborations between the public, private and nongovernment sectors.
2. Raise awareness at community level to address stigma and misconceptions about dementia.
3. Invest in new dementia care technologies, such as biomarkers for screening and early diagnosis, and set up virtual geriatric clinics to increase access to care.

For WHO

1. Increase technical support to countries to implement the Global Action Plan on the Public Health Response to Dementia 2017–2025.
2. Facilitate regional workshops to exchange knowledge and lessons and to review progress at country level.
3. Support innovations and research that will provide evidence for policy- and decision-making on dementia care.
References


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