

Second World Dementia Council Meeting Communique

Following the agreement of our [Statement of Purpose](#), in May, we, the World Dementia Council (WDC), held our second meeting at the OECD, Paris on Wednesday 23rd July 2014 where we agreed to arrange our continuing work into three priority areas: Integrated development; Finance and incentives; and Open science. These priorities will incorporate work on treatment and care.

We will also continue to develop our thinking on public health and prevention. We are currently reviewing the evidence on the preventative science and will make decisions on further work in this area at our next meeting in October.

To make progress in each of three priority areas, and ultimately achieve our overarching goals to increase investment into dementia research and work towards a cure or disease modifying therapy by 2025, a number of work-streams are being taken forward. These are:

1. Integrated development

Despite considerable investment in dementia drugs and neuroscience, very few drugs have been approved. The need to enable a paradigm shift from treating symptoms to changing the underlying progression of the disease and identifying challenges and gaps in the development of disease-modifying treatments in Alzheimer's disease and other dementia is much needed.

The WDC will explore this from three related perspectives:

- i. Understanding the way in which clinical research is undertaken for dementia and identifying any gaps in research science.
- ii. Identifying research and development challenges in developing dementia drugs.
- iii. Working with key regulatory agencies in the context of the research gaps and development challenges to evaluate together what could be done to support the development process for dementia.

The work related to this approach of an Integrated Development pathway is being led by Raj Long, member of the World Dementia Council and Senior Regulatory Officer, Integrated Development, Global Health at the Bill & Melinda Gates Foundation and will be supported by key academic and research experts in dementia.

2. Finance and incentive mechanisms

The WDC has set out the need to respond to the relatively low investment in funding dementia innovation by exploring new types of funding product. The first stages of this work will be focused on different stages of the drug development process with the development of two models that could support early stage and late stage drug development respectively. Later work is likely to focus on care innovation and basic science.

The UK Government has engaged JP Morgan to help the WDC develop its proposals.

In a later phase of work, the Council will also examine how payment systems and other financial costs and incentives are impacting on investment decisions and how these could be adapted to accelerate the development pipeline whilst ensuring affordable access.

3. Open science

The WDC has highlighted the enormous potential of open science for sharing information and knowledge to accelerate progress in developing new treatments and care approaches, and avoiding wasteful duplication of effort.

This priority area will have a number of different workstreams building on current initiatives:

- i. **Information governance:** creating the right frameworks for use and exchange of information and knowledge, , including exploring the lessons to be learnt from the agreement of the Bermuda principles in respect of genomics.
- ii. **Data and practice:** building on existing international dementia research inventories and data-sets, looking for ways to join up big data globally and facilitate open access where possible.
- iii. **Engagement and advocacy:** deliver opportunities for new data such as social data to contribute to research and the open research agenda. At the same time, to facilitate support networks and amplify the voices of those with dementia and their carers.

Both WHO and OECD will be supporting the Council on elements of the open science work.

Public health/ prevention:

WDC member and President and CEO of Alzheimer's Association, Harry Johns, will lead an evidence review into existing research on risk factors. We will continue to explore how lifestyle relates to dementia risk and how to raise awareness in this area. The Council will then make decisions on its further work in this area.

Membership of the WDC

Since the 1st meeting the following have become members of the World Dementia Council:

- Daisy Acosta
- Philippe Amouyel
- Harry Johns
- Joel Menard
- Meera Pattabiraman

Key topics for the 3rd World Dementia Council meeting in October

At its October 2014 meeting the Council will:

- receive the work on financial models;
- consider the findings of commissioned research on lessons from other disease types;
- receive the conclusions from the France/Canada legacy event and consider implications for the forward work programme;
- receive a paper on innovation in dementia care and consider implications for the Japan legacy event and for the forward work programme;
- receive findings of the work led by Harry Johns on the state of evidence on prevention and consider implications for the forward work programme;
- receive a progress report on the work on integrated development; and
- consider options for taking forward the work of the Council beyond the final legacy event at the WHO in March 2015.

Engaging with the wider international community:

The Council noted the strong progress in developing excellent working relationships with key institutions such as the WHO, OECD and the European Commission. It expressed its desire to extend the current relationship with the G7 countries to the G20 and beyond.