

December 6, 2024

Amber McCartney, PhD  
National Institute of Neurological Disorders and Stroke (NINDS)  
Email: [ADRDSummit2025@ninds.nih.gov](mailto:ADRDSummit2025@ninds.nih.gov)

**RE: Comment regarding Priorities and Progress in Alzheimer's Disease-Related Dementias (ADRD) Research**

Dear Dr. McCartney,

The Gerontological Society of America (GSA) appreciates the opportunity to offer comments on the Priorities and Progress in Alzheimer's Disease-Related Dementias (ADRD) Research as part of the [ADRD Summit 2022 Research Milestones](#) at the NINDS.

Our mission is to foster excellence, innovation, and collaboration to advance aging research, education, practice, and policy, and our vision is "meaningful lives as we age." GSA's 5,500 members include gerontologists, health professionals, behavioral & social scientists, biologists, demographers, economists, and many other disciplines. These experts study all facets of aging with a life-course orientation. The multidisciplinary nature of the GSA membership is a valued strength, enabling the Society to provide a 360-degree perspective on the issues facing our population as we age.

One of more than [40 Interest Groups, the GSA Alzheimer's Disease and Related Dementias Interest Group](#) is an interdisciplinary group of researchers, academics, clinicians, healthcare providers, program administrators, and policymakers focused on the important issues surrounding brain health and aging. This Interest Group promotes the collaboration of researchers and practitioners conducting basic or applied research on ADRD and the related dementias including Mild Cognitive Impairment (MCI).

The topic of brain health as an important aspect of overall health should be addressed with individuals across the life course. Raising the topic of brain health will help normalize attention to it, encourage individuals to be more aware of changes to their cognition or other brain health-related changes, and create an environment where individuals may feel more comfortable sharing their concerns. In our comments informing the National Institutes on Aging's (NIA) Strategic Directions for Research, [GSA encouraged NIA to continue its cutting-edge efforts](#) in how we understand the aging brain, such as continuing the foundational research that has been essential to the development of treatments for people living with ADRD.

In 2024, [GSA convened an expert advisory panel](#) which included academics, clinicians, medical doctors, social workers, and advocates to develop the [GSA KAER Toolkit for Brain Health](#). This evidence-based toolkit is a supportive document of practical approaches, educational resources, and validated clinical tools to help primary care teams implement the KAER framework in their initiatives related to brain health and timely detection of cognitive impairment. The content of the toolkit and selection of tools was developed with primary care teams as the principal audience. Medical educators and medical students may also find its contents useful. GSA recognizes that health care professionals outside the primary care setting also play a valuable role in detecting cognitive impairment. We have developed many other evidence-based tools, [which can be accessed at our GSA Learning Center](#).

Being that GSA is the largest and oldest interdisciplinary organization committed to studying the aging process, we appreciate the approaches to the [Prioritized Research Milestones and Success Criteria](#), including the focus on caregivers for those living with ADRD. We applaud NINDS for including caregiver support in its milestones and success criteria, notably, in milestones seeking to "implement and evaluate outcomes for effective dementia care programs that support persons living with dementia and their caregivers, including those of socially, ethnically, and racially diverse populations" and in success criteria that seeks to "continue to develop, update disseminate, and implement 'best practice' resources for AD/ADRD clinical research to increase engagement and retention of diverse patients and caregivers." **We encourage NINDS to continue to develop measures and research methods to understand the interactions within caregiving teams that include direct care workers and care partners.**

GSA also encourages milestones that integrate oral health markers as early indicators of cognitive decline. [Research indicates a correlation](#) between oral health status and the progression of ADRD (Qi & Wu, 2023). Revising milestones to include assessments of oral microbiota, inflammation levels, and masticatory function as part of regular ADRD research protocols could provide early detection benefits. The oral microbiome's potential role in modulating systemic inflammation and its neuroinflammatory impacts is a promising

area. Research should focus on longitudinal studies examining the shifts in oral microbiota composition and their correlation with ADRD progression. By advocating for the integration of oral health into ADRD research priorities, we can help address a critical gap in the field and ensure that dementia research takes a truly holistic approach to prevention, treatment, and care.

GSA applauds NINDS for its approach to health equity in research and addressing ADRD. Research shows that ADRD disproportionately impacts the health and financial security of women and certain minority groups. "From 2020 to 2060, the number of African Americans and Latinx [people] living with dementia will grow by nearly 200 percent and 440 percent, respectively, while prevalence among non-Hispanic Whites will increase by 69 percent. As the prevalence of dementia rises, so will the costs associated with dementia care. African Americans bear 1/3 of the costs associated with dementia. And the costs for Latinx living with Alzheimer's disease are expected to exceed \$100 billion by 2060. To mitigate these growing health and economic concerns, efforts to improve dementia care must put equity front and center." (Ahuja & Levy, 2021)

GSA appreciates the continued research approaches to health equity by addressing social determinants of health (SDOH). "While study of Structural and Social Determinants of Health (SSDoH) in ADRD research is gaining momentum, significant work remains, emphasized by three reasons. First, consideration of SSDoH may help mitigate disparities in groups that are disproportionately burdened by ADRD. Second, the focus on biology and behavior alone, without consideration of social and structural influences, places causes of disparity and onuses of risk reduction unilaterally on individuals without any recognition of the contributions of systems. Last, SSDoH exert influences essential to developing intervention models that are accessible and applicable to many populations." (Stites et al., 2021)

GSA appreciates the approaches to risk reduction and risk factors across the topics driving the milestones. **GSA encourages additional research by including milestones to reflect the two new risk factors for dementia as identified in a recently released Lancet study with Alzheimer's Disease International.** Research commissioned by The Lancet indicates that "45% of cases of dementia could potentially be delayed or reduced, marking a 5% increase from their 2020 findings. The updated study also identified two new risk factors, failing eyesight and elevated LDL cholesterol levels, bringing the total number of risk factors to 14. The study also indicated that addressing most risk factors in mid-life (18-65) had the greatest impact in delaying or preventing the onset of dementia later in life. In early life (0-18), less education was found to have the greatest impact, while social isolation, air pollution and vision loss were found to have a more significant impact on risk in late life (65+)." (*ADI - Lancet Commission Identifies Two New Risk Factors for Dementia and Suggests 45% of Cases Could Be Delayed or Reduced*, 2024)

Thank you for the opportunity to provide comments on the updates proposed to Priorities and Progress in Alzheimer's Disease-Related Dementias (ADRD) Research as part of the ADRD Summit 2022 Research Milestones. If you have any questions, please contact Patricia D'Antonio, Vice President of Policy and Professional Affairs at [pdantonio@geron.org](mailto:pdantonio@geron.org) or 202-587-5880, or Jordan Miles, Director of Policy at [jmiles@geron.org](mailto:jmiles@geron.org) or 202-587-5884.

Sincerely,



James C. Appleby, BPharm, MPH, ScD (Hon)  
Chief Executive Officer

#### References

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*ADI - Lancet Commission identifies two new risk factors for dementia and suggests 45% of cases could be delayed or reduced.* (2024). Alzint.org. <https://www.alzint.org/news-events/news/lancet-commission-identifies-two-new-risk-factors-for-dementia-and-suggests-45-of-cases-could-be-delayed-or-reduced/>