



9th International Conference on

ALZHEIMER'S DISEASE & DEMENTIA

October 16-18, 2017 | Rome, Italy

Keynote Forum

Day 1

Dementia 2017

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Zhicheng Xiao

Monash University, Australia

APP intracellular domain suppress neuronal differentiation through transcriptional regulation of mir663

Amyloid precursor protein (APP) is best known for its involvement in the pathogenesis of Alzheimer's disease. We have previously demonstrated that APP intracellular domain (AICD) regulates neurogenesis; however, the mechanisms underlying AICD-mediated regulation of neuronal differentiation are not yet fully characterized. Using genome-wide chromatin immunoprecipitation approaches, we found that AICD is specifically recruited to the regulatory regions of several microRNA genes, and acts as a transcriptional regulator for miR-663, miR-3648 and miR-3687 in human neural stem cells. Functional assays show that AICD negatively modulates neuronal differentiation through miR-663, a primate-specific microRNA. Microarray data further demonstrate that miR-663 suppresses the expression of multiple genes implicated in neurogenesis, including FBXL18 and CDK6. Our results indicate that AICD has a novel role in suppression of neuronal differentiation via transcriptional regulation of miR-663 in human neural stem cells.

Biography

Zhi-cheng Xiao received a Doctor of Natural Science Degree from Swiss Federal Institute of Technology, Zurich. He is current Professor in Monash University. He is the CEO & CFO of iNovaFarm, a premier Bio-Tech company. He has published more than 100 papers in reputed journals and serving as editorial board members of more than 10 journals.

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Mustafa Cankurtaran

Hacettepe University, Turkey

Masked hypertension is associated with cognitive decline in geriatric age

Background: Masked hypertension is described as high ambulatory blood pressure measurements (ABPM) where office blood pressure measurements are normal. Effect of hypertension on cognitive functions is well known. However, the effect of masked hypertension on cognitive functions is still unknown. The aim of this study is to examine the relationship between masked hypertension and cognitive functions.

Methods: One hundred-two normotensive patients admitted to the Geriatric Medicine outpatient clinic were included. Exclusion criteria were hypertension, dementia, major depression, and usage of antihypertensive medication. All patients underwent ABPM procedures and average daytime blood pressure, mean blood pressure at night and the 24-hours average blood pressure measurements were recorded. Comprehensive geriatric assessment tests and neuropsychological tests were administered. The diagnosis of masked hypertension was based on the definitions in the 2013 guideline of the European Society of Cardiology (ESC).

Results: 44 patients (43%) were diagnosed with masked hypertension. Patients with masked hypertension had significantly lower scores on Mini-Mental State Examination (MMSE) test, Quick Mild Cognitive Impairment Test (QMCI) and Categorical Fluency Test than the normotensive patients ($p = 0.011$; $p = 0.046$; and $p = 0.004$; respectively). Montreal Cognitive Assessment Scale (MOCA) test score was lower in masked hypertension, although this was not statistically significant.

Conclusions: This study shows that geriatric patients with masked hypertension, compared to normotensive patients have decreased cognitive functions. ABPM should be performed to normotensive geriatric patients for detecting possible masked hypertension and in patients with masked hypertension, cognitive assessment is essential to diagnose possible cognitive dysfunction at early stage.

Biography

Mustafa Cankurtaran is the head of the Geriatric Medicine Department in Hacettepe University. He received his medical degree at 1997 from Hacettepe University. He completed his Internal Medicine Residency in 2001 and Geriatric Medicine residency in 2004 at the same university. He is currently working as a lecturer and academician in Hacettepe University Department of Internal Medicine Division of Geriatric Medicine. He has published more than 50 papers in reputed journals. His special interest is in Alzheimer's disease, malnutrition, pain management, and other geriatric syndromes.

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David Truswell

PLIAS Resettlement, UK

The Dementia alliance for Culture and Ethnicity: A UK Call to Action on responding to the impact of Dementia in Black, Asian and minority ethnic communities

Statement of the Problem: The number of people living with dementia in Black, Asian and Minority ethnic communities in the UK is anticipated to increase seven fold in the period between 2011 and 2051. The age demography of migrant populations in the UK indicates that significant burden of the impact of this will fall on the larger, longest settled migrant communities (such as the Irish, African-Caribbean and South Asian). For the South Asian and African-Caribbean populations there is known higher risk of vascular dementia than for other minority ethnic communities. This will present a significant and large scale challenge for UK health services in urban areas.

Methodology & Theoretical Orientation: The Dementia Alliance for Culture and Ethnicity (DACE) is a grass roots initiative that grew out of a seminar held in the UK to explore the commonalities of experience of these communities. The seminar participants formed the Alliance and developed a Call to Action. Findings: The Call to Action sets out commonalities in the service experience and cultural stigma regarding dementia and recommends ways of responding to the challenges at the level of policy development, service provision and public education.

Conclusion & Significance: The Call to Action has now been endorsed in the UK's National Health Service 2020 Implementation Plan for Dementia. The Alliance believes that strategic and sustained investment in working with community groups is necessary to improve the understanding of dementia in Black, Asian and minority ethnic communities. It is only through this improved understanding that people from these communities will come forward for earlier diagnosis and treatment and participate in larger scale research studies. The presentation will highlight some examples of the work done by the Alliance to date.

Biography

David Truswell has worked in community based mental health services in the UK for over thirty years developing services for people with complex care needs and enduring mental health problems in a career spanning the UK voluntary sector, local authority services, and the NHS. From 2009 - 2011 he was the Dementia Implementation Lead for Commissioning Support for London, working with commissioners across London to improve dementia services. He is the Chair of the Dementia Alliance for Culture and Ethnicity, a grassroots alliance of dementia organizations. He recently left the NHS to set up some fresh thinking (somefreshthinking.com) an independent health sector change management consultancy. He is also an independent writer on dementia support and services for Black, Asian and minority ethnic communities.

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