Correspondence

The huge burden of dementia in Latin America

As mentioned in your Editorial,¹ dementia is having a huge social and economic effect in Latin American countries. The prevalence of dementia in people aged 65 years and older is about 7.1%.² As the population continues to age, about 7.6 million people in Latin America and the Caribbean are estimated to develop dementia by 2030.3 Latin America faces the same challenges in dealing with dementia as rich countries do, but with a much lower level of preparedness and relatively little awareness. For example, we have reported⁴ that, even among neurologists, a substantial number of practicing physicians that diagnose dementia will do so without providing a specific diagnosis of the dementia type.

National Plans Although for dementia are being developed in some Latin American countries, substantial challenges remain to provide an accurate diagnosis of dementia and achieve effective care. Inadequate knowledge of the differences between normal cognitive ageing and dementia, insufficient awareness of the importance of timely detection, and stigma towards mental health issues in general, but particularly about dementia, make it difficult for many people to obtain appropriate medical help. Dementia diagnoses and subsequent care and support necessitate costly services and infrastructures (eq, cognitive disorders clinics, multidisciplinary team work) that are often available only in select affluent urban areas. Another considerable challenge in some regions of Latin America is to diagnose dementia in people with low education and limited literacy skills. To cope with this situation, existing cognitive and functional tests must be adapted and relevant norms developed.

The escalating burden of dementia on health-care resources requires longterm national strategies. Translation of these strategies into operational plans, however, poses great challenges, particularly for countries with scarce resources. Indeed, for such plans to be effective and sustainable, interventions must focus not just on dementia but also on strengthening the health system overall.

Governments need National Plans that will: provide improved and prompt diagnosis of cognitive impairment; adapt existing health systems to the needs of individuals at risk of or with dementia; and provide support to their families and caregivers. Improved planning and coordination between public and private health providers will be essential. National Plans should also strengthen health services and community networks, intensify the capacity of health systems to promote healthy lifestyles, improve training for health professionals to detect and manage dementia and other forms of cognitive impairment, increase basic, clinical, epidemiological, and social research portfolios, and establish laws to protect the rights of people with dementia. Additional memory units in hospitals and outpatient clinics are clearly needed. Such services will enhance detection and diagnosis of dementia, particularly in individuals with complex presentations. Since most caregivers for patients with dementia are family members, services for families (eq, guidance, and practical assistance to solve social, economic, and legal difficulties associated with the disease) are obviously also necessary.



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