

Recent developments on dementia risk reduction*

Deborah Oliveira

**University of Nottingham, School of Medicine
Institute of Mental Health, United Kingdom.**

Individuals' lifestyle contributes to the risk of dementia and lack of physical exercises, lack of social interaction, poor diet, smoking and alcohol consumption are among the major risk factors. Researchers have developed interventions aimed at promoting mental and physical fitness via increased cognitive and physical activity and improving diet and health, but too little is known about possible benefits or levels of uptake. Implementation of life style changes depends on individual attitudes and little is known about what and how much older people are prepared to change in order to prevent dementia. If the factors associated with better attitudes towards change of life style can be predicted, more accurate interventions tailored to these specific issues can be developed in order to reduce the risk of dementia. This presentation will show preliminary data from a national UK survey that involved approximately 4,000 people aged 50+ without dementia. The study aimed to assess people's willingness to change their lifestyle to potentially reduce their risk of future dementia, as well as understand more about factors that might predict willingness to change. Sociodemographic and current lifestyle information was collected. Motivation to change lifestyle was assessed using the MCLHB-DRR scale and non-validated questions based on the current lifestyle profile (e.g. if the individual smoked, it was asked how much he/she would be willing to stop smoking). The data suggests important differences in gender and age in relation to motivation to change lifestyle. These will be discussed in detail in this presentation.

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the Institute of Mental Health, University of Nottingham. She is currently leading a national UK survey on dementia risk reduction funded by the Alzheimer Research UK and editing a book on this topic. Dr Oliveira completed her PhD in 2016, in which she developed and validated an age- and dementia-specific quality of life scale for use with older family carers – the DQoL-OC. apoptosis, which leads to neurodegenerative .