

# 16 million Americans could have Alzheimer's by 2050

BY EMMA ROSS  
THE ASSOCIATED PRESS

**LONDON** — The number of Americans with Alzheimer's disease could rise from 4.6 million today to 16 million by 2050, new research indicates.

The projections, presented recently at an international Alzheimer's conference in Stockholm, are slightly higher than those conducted 10 years ago, mostly because more people are expected to live beyond the age of 85 than were predicted to a decade ago.

Ten years ago, Dr. Denis Evans of the Rush Institute on Healthy Aging in Chicago used figures from the 1990 U.S. Census to estimate that 14 million Americans could be struck by Alzheimer's by 2050.

Now he has updated that projection with information from the 2000 U.S. Census. The latest study is a collaboration between Evan's team, other Chicago researchers and

the U.S. Centers for Disease Control and Prevention.

The forecast presented at the International Conference on Alzheimer's Disease and Related Disorders was based on a study of 6,158 people in Chicago and gives a low, medium and high estimate of how many people will probably have the disease within the next 50 years.

The estimate ranges from 11 million people on the low end to 16 million on the upper end. Unsurprisingly, the biggest surge will be among people aged 85 and older, Evans said.

Death rates in the United States have been declining, Evans said, and experts predict they will be half what they are now in 2050.

"The projected increase in numbers of people with Alzheimer's disease is not due only to the total number of people alive, but to the substantially increased survival of people

with the disease," said Evans.

Last year, the World Health Organization estimated there may be as many as 37 million people worldwide with dementia. Alzheimer's is the most common form of dementia.

Economists estimate that, in the United States alone, it costs at least \$100 billion a year to

look after people with Alzheimer's. A study last month estimated that U.S. businesses lose about \$61 billion a year because of employees who have to care for family members stricken with Alzheimer's.

"The study on Alzheimer's prevalence and those on the costs related to Alzheimer's

underscore the urgent need for more research into the causes, prevention and treatment of this devastating disease," said Stephen McConnell, interim president and chief executive officer of the Alzheimer's Association, who was not involved in the research.

He said the projections provide further evidence of a looming global crisis and that his organization is urging the U.S. Congress to increase federal funding of Alzheimer's research to \$1 billion a year.

"We must find the answers before these projections become a reality," McConnell said.

## St. Jude

from page C3

Hargrove, who received both his undergraduate and medical school degrees from the University of North Carolina at Chapel Hill, says family is one of the predominant reasons he chose his surgical specialty.

"I always wanted to be a surgeon, and this exciting area of surgery gives me maximum patient contact as I learn advanced surgical procedures," Hargrove explained. "It also allows me to get to know the patients and their families very well, which is extremely impor-

tant to me."

St. Jude's pediatric ophthalmic oncology training program is one of the most respected of its kind in the nation.

"We had over 60 applicants for this fellowship, all exceptionally qualified and dedicated ophthalmologists. Dr. Hargrove was our number one choice," said Haik, U.T.'s ophthalmology department chair who, along with Wilson, Fleming and Linder, is associated with St. Jude. "Once we met Roderick, we knew he was the best candidate for the position."

Hargrove is especially excited to work alongside physicians at St. Jude who specialize in

treatment of retinoblastoma and orbital cancers.

"Here at St. Jude, we treat a lot of patients with childhood eye cancers," said Hargrove. "Not only do I get to help save a child's life, but possibly preserve their sight and cosmetic appearance."

Hargrove arrived in Memphis this month from the State University of New York (SUNY), Downstate Medical Center in New York City, where he has been in ophthalmology residency training since 1999. He was Ophthalmology Resident of the Year in 2000-2001.

Before his residency at SUNY, Hargrove was a transi-

tion intern at Memphis' Methodist Central Hospital.

St. Jude Children's Research Hospital, in Memphis, Tenn., was founded by the late entertainer Danny Thomas. The hospital is an internationally recognized biomedical research center dedicated to finding cures for childhood catastrophic diseases. The hospital's work is supported through funds raised by ALSAC, St. Jude's fund-raising arm. ALSAC covers all costs not covered by insurance for medical treatment rendered at St. Jude Children's Research Hospital. Families without insurance are never asked to pay.

## HHS

from page C3

spend four hours or more watching television daily and only 27 percent of students in grades 9 through 12 engage in moderate physical activity at least 30 minutes a day on five or more days of the week. Three-quarters of overweight and obese tweens do not change their habits and remain overweight and obese in adulthood. Obesity and overweight has been linked to increased risks of cancer, heart disease, stroke and diabetes among adults.

The Journal of Physical Education, Recreation & Dance reported that according to a study published Dec. 12, 2001, in the Journal of the American Medical Association, the percentage of significantly overweight children in America increased at an epidemic rate from 1986 to 1998, especially among minorities. The percentage of overweight black and Latino children more than doubled during the study period, and the percentage of overweight non-Latino white children increased 50 percent.

The percentage of overweight black children increased from 8 percent in 1986 to 22 percent in 1998. (Overweight is defined as having a body-mass index greater than 95 percent of their peers when compared with growth data from the 1960s to 1980s.) The percentage of black children considered overweight and at-risk (with a body mass index higher than 85 percent of their peers) increased from 20 percent in 1986 to 38 percent in 1998, while the percentage of overweight and at-risk white children increased from 20 percent in 1986 to 29 percent in 1998.

Officials said reasons for the increase in childhood overweight include sedentary lifestyle (playing video games; using computers and watching television), poor nutrition (too much junk food), children living in poor and urban neighborhoods being forced by their parents to play indoors because of neighborhood safety concerns, and reduction in recreational sports programs for disadvantaged children in many cities.

The study published in the Journal of the American Medical Association drew its data from the National Longitudinal Survey of Youth, which involved a nationally representative sample of 8,270 children 4 to 12 years old.

The Los Angeles Times reported Dec. 11, 2001, that an even larger study, involving 1 million California students, showed that only 23 percent of the tested students are physically fit, according to The Journal of Physical Education, Recreation & Dance. And it showed a troubling discrepancy in fitness rates for different racial and ethnic groups. For example, among seventh-graders, only 19 percent of black students and 19 percent of Latino students were able to demonstrate a minimum level of physical fitness, compared with 32 percent of white students and 34 percent of Asian students. In the study, students in fifth, seventh and ninth grades were tested for fitness in such categories as strength, aerobic capacity and flexibility. One of the reasons given for the poor level of physical



File Photo

The U.S. surgeon general's office recommends that Americans accumulate at least 30 minutes (adults) or 60 minutes (children) of moderate physical activity most days of the week.

fitness was that too little time is devoted to physical education.

The U.S. surgeon general's office has offered these tips for how a parent can help an overweight child:

- General suggestions: Let your child know he or she is loved and appreciated whatever his or her weight. Focus on your child's health and positive qualities, not your child's weight. Try not to make your child feel different if he or she is overweight but focus on gradually changing your family's physical activity and eating habits. Be a good role model for your child. If your child sees you enjoying healthy foods and physical activity, he or she is more likely to do the same now and for the rest of his or her life. Realize that an appropriate goal for many overweight children is

to maintain current weight while growing normally in height.

- Physical activity suggestions: It is recommended that Americans accumulate at least 30 minutes (adults) or 60 minutes (children) of moderate physical activity most days of the week. Even greater amounts of physical activity may be necessary for the prevention of weight gain, for weight loss, or for sustaining weight loss. Plan family activities that provide everyone with exercise and enjoyment. Provide a safe environment for your children and their friends to play actively; encourage swimming, biking, skating, ball sports, and other fun activities. Reduce the amount of time you and your family spend in sedentary activities, such as watching TV or playing video games. Limit TV

time to less than two hours a day.

- Healthy eating suggestions: Follow the dietary guidelines for healthy eating ([www.health.gov/dietaryguide](http://www.health.gov/dietaryguide) lines). Guide your family's choices rather than dictate foods. Encourage your child to eat when hungry and to eat slowly. Eat meals together as a family as often as possible. Carefully cut down on the amount of fat and calories in your family's diet. Don't place your child on a restrictive diet. Avoid the use of food as a reward. Avoid withholding food as punishment. Children should be encouraged to drink water and to limit intake of beverages with added sugars, such as soft drinks, fruit juice

drinks, and sports drinks. Plan for healthy snacks.

Stock the refrigerator with fat-free or low-fat milk, fresh fruit, and vegetables instead of soft drinks or snacks that are high in fat, calories, or added sugars and low in essential nutrients. Aim to eat at least five servings of fruits and vegetables each day. Discourage eating meals or snacks while watching television. Eating a healthy breakfast is a good way to start the day and may be important in achieving and maintaining a healthy weight.

According to the President's Council on Physical Fitness and Sports, each pound of fat your body stores represents 3,500 calories of unused energy. In order to lose one pound, you would have to create a calorie deficit of 3,500 calories by either taking in 3,500 less calories over a period of time than you need or doing 3,500 calories worth of exercise. It is recommended that no more than two pounds (7,000 calories) be lost per

week for lasting weight loss.

Here are some examples of energy expended per hour for various activities: bicycling (5 mph) 174; canoeing (2.5 mph) 174; dancing (ballroom) 210; golf (two-some, carrying clubs) 324; horseback riding (sitting to trot) 246; light housework, cleaning, etc. 246; swimming (crawl, 20 yards/minute) 288; tennis (recreational doubles) 312; volleyball (recreational) 264; walking (2 mph) 198; aerobic dancing 546; basketball (recreational) 450; bicycling (13 mph) 612; circuit weight training 756; football (touch, vigorous) 498; ice skating (9 mph) 384; racquetball 588; roller skating (9 mph) 384; jogging (10-minute mile, 6 mph) 654; scrubbing floors 440; swimming (crawl, 45 yards/minute) 522; tennis (recreational singles) 450; cross-country skiing (5 mph) 690. Hourly estimates are based on values calculated for calories burned per minute for a 150-pound (68 kg) person.

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