

THE INSIDE STORY[®]

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2011

**The first of the baby boomers will reach 65.
The beginning of soaring dementia rates?**

.....

If you thought diabetes was reaching epidemic proportions, you're right. But it looks like diabetes isn't the only black cloud on the horizon that could significantly affect plan member health and potentially cripple the Canadian economy. The incidence of dementia is predicted to skyrocket.

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An urgent call to action

As the first of the baby boomers reach 65 in 2011, the issue of dementia is hitting home—and workplaces. Since age is the primary risk factor for dementia, it will accelerate as the population ages and the baby boomers move through their senior years. It is unrealistic to cross our fingers and hope that a significant proportion of employees won't feel the impact; many will find themselves in the role of caregiver for aging parents suffering from dementia, and some may even experience the early symptoms of dementia themselves as the trend continues of staying in the workforce longer.

An urgent call to action is set to continue throughout 2011 and beyond as captured by the title of an Alzheimer's

Society report: *Rising Tide, The Impact of Dementia on Canada*. This report is the result of a two-year intensive project focused on understanding the impact of dementia on Canadians, and includes sections like "Why Canada must act". Dementia and Alzheimer's disease groups worldwide are urging us to take

notice and take action: "maintaining the status quo is not an option. We must take action today" ¹ as "dementia is fast becoming one of the world's biggest health challenges, with the soaring number of cases packing a financial wallop in both established and emerging economies." ²

Dementia: disorders that exhibit progressive deterioration of thinking ability and memory as the brain becomes damaged.

Alzheimer's disease: most common form of dementia — it is a progressive and degenerative brain disease where the cell to cell connections in the brain are lost and brain cells eventually die.

Recognizing the need to turn the tide of dementia



The facts are startling revealing the rising tide:

- By 2038:1 million Canadians are expected to have dementia if no intervention, representing approximately 2.8% of all Canadians and resulting in an annual economic cost of \$153 billion up from approximately \$15 billion in 2008.¹
- The average cost of caring for a person with dementia is \$32,865 annually In a high income country like Canada.²

Without action, experts agree that the "rising tide" of dementia will place an extreme strain on Canada's ability to provide essential health care services and community care, as well as patient and caregiver support services, potentially overwhelming Canada's health care system. In turn, the rising tide will place tremendous pressure on employees as they do their best to care for aging parents—with caregivers often suffering the effects of severe stress and even depression—not to mention possibly experiencing early onset of dementia issues themselves.

HELP PLAN MEMBERS TAKE NOTICE...

Take notice: *Encourage early diagnosis and prompt treatment*

Although there are currently no drugs that prevent or cure dementia or Alzheimer's disease, some drugs have been effective in slowing down deterioration or in some cases, enhancing the capabilities related to memory like the ability to focus. Accordingly, experts stress the importance of delaying decline through early diagnosis and prompt treatment as an effective way to prolong quality of life, especially independence. Educate plan members to take notice by learning the signs—so they can keep a close eye on aging family and friends, as well as their own memory skills.



Alzheimer's Disease—Know the signs...

Symptoms of Alzheimer's disease include loss of memory, difficulty with day-to-day tasks, and changes in mood and behaviour. To help you know what to look for, the Alzheimer Society of Canada developed a list of warning signs, for a complete listing visit the "10 Warning Signs" at <http://www.alzheimer.ca/english/disease/warningsigns.htm>.

Here's an excerpt:

■ **"Memory loss that affects day-to-day function:**

It's normal to occasionally forget appointments, colleagues' names or a friend's phone number and remember them later. A person with Alzheimer's disease may forget things more often and not remember them later, especially things that have happened more recently.

■ **Difficulty performing familiar tasks:** Busy people can be so distracted from time to time that they may leave the carrots on the stove and only remember to serve them at the end of a meal. A person with Alzheimer's disease may have trouble with tasks that have been familiar to them all their lives, such as preparing a meal.

■ **Disorientation of time and place:** It's normal to forget the day of the week or your destination -- for a moment. But a person with Alzheimer's disease can become lost on their own street, not knowing how they got there or how to get home.

■ **Poor or decreased judgment:** People may sometimes put off going to a doctor if they have an infection, but eventually seek medical attention. A person with Alzheimer's disease may have decreased judgment, for example not recognizing a medical problem that needs attention or wearing heavy clothing on a hot day.



Delaying the onset of dementia by two years:

= 30-year reduction in Total Economic Burden of \$219 billion
= 410,000 fewer prevalent cases¹

■ **Misplacing things:** Anyone can temporarily misplace a wallet or keys. A person with Alzheimer's disease may put things in inappropriate places: an iron in the freezer or a wristwatch in the sugar bowl.

■ **Changes in personality:** People's personalities can change somewhat with age. But a person with Alzheimer's disease can become confused, suspicious or withdrawn. Changes may also include apathy, fearfulness or acting out of character."

If you experience any of these symptoms or notice them in any of your loved ones, visit your family doctor to discuss your concerns.



TAKE ACTION!

Different disease. *Same critical prevention story.*

So what's it going to take for us to eat right and get active? If the threat of a heart attack or stroke, or losing toes or sight due to diabetes isn't enough—maybe losing our memory is what it will take? Maybe the fear of dementia is what we need to finally kick start us into action.

Getting active and eating right may help *everything*

Although not yet definitive as a direct prevention link, research suggests that exercise and healthy diet may be helpful in protecting plan member health against dementia. In addition, as is the case with most issues, we can't effectively help others until we help ourselves—adopting healthy lifestyle behaviours helps plan members cope with the stress related to caregiving for aging parents. As conveyed by Mario Masellis, a neurologist at the Sunnybrook Health Sciences Centre in Toronto, "The best bang for your buck to reduce the risk of developing this devastating disorder will be to maintain a regular exercise routine, a healthy diet, and be engaged in socially and mentally stimulating activities." ³



■ Refer plan members to the December Inside Story for a range of ideas for getting active and eating right, available at <http://www.greenshield.ca/English/CorporateOverview/Publications/InsideStory/>

Prevention, prevention, prevention: the message cannot be repeated enough

- To help prevent cardiovascular disease: eat right and get active.
- To help prevent diabetes: eat right and get active.
- To help prevent stroke: eat right and get active.

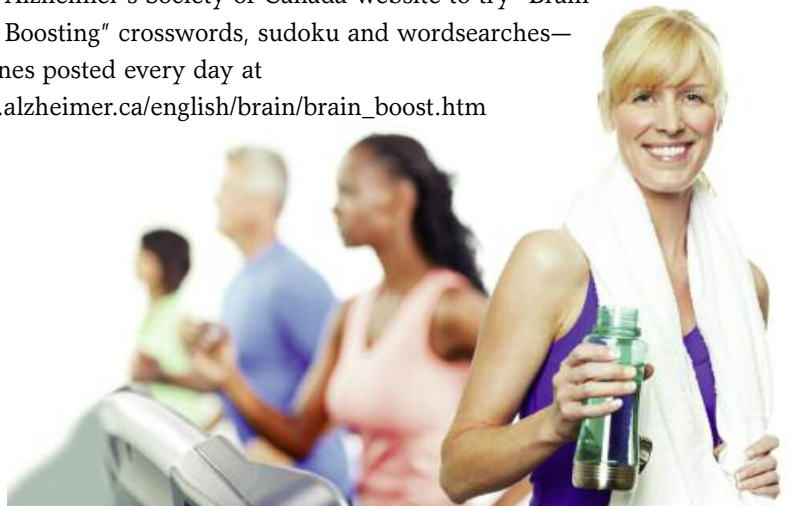
...and now, our best bet to help prevent dementia, you guessed it—eat right and get active.

Exercise our bodies—and our minds

Not only is research into the prevention of dementia taking a closer look at the importance of an active body, it is also looking into the role of an active mind. Similar to healthy eating and exercise, as of yet there is no definitive prevention link between keeping the mind active and keeping dementia at bay. However, just like other healthy lifestyles, keeping mentally fit enhances quality of life in a wide range of ways like broadening our knowledge base and creating opportunities to connect socially with others.



■ Suggest plan members visit the 'Healthy Brain' section of the Alzheimer's Society of Canada website to try "Brain-Boosting" crosswords, sudoku and wordsearches—with new ones posted every day at http://www.alzheimer.ca/english/brain/brain_boost.htm



Informal care (unpaid caregivers, usually family or friends):

2008: Canadians spent approximately 231 million hours on informal care

2038: expected to more than triple to reach 756 million hours by 2038¹

Pay attention to body, mind—and soul...

The experts also agree on the importance of psychological fitness because caregivers are more prone to illness and depression, even suicide—in fact 40 percent of family members caring for a loved one with dementia suffer from signs of mental distress.

Plan members who find themselves in the role of primary caregiver will need as much emotional and psychological support as possible given the toll taken by dementia's 'behavioural disturbances' is often more stressful than dealing with the physical aspect of caring for someone. As described in a Globe and Mail series on dementia, "Caregivers see loved ones fade away mentally and physically, and have to cope with ever-escalating

challenges such as wandering, insomnia, outbursts of violence, incontinence, hallucinations and loss of verbal and motor skills. Given the pressures, it is no wonder that caregivers have rates of depression and suicide far higher than those in the general population, as well as higher rates of physical illness and premature death – many spouses pass away soon after their partners." ⁵ Whether plan members are caring for a spouse with memory issues or for their aging parents, the productivity loss adds up both in terms of absenteeism and presenteeism.



- Suggest plan members contact their EAP to ask about adult and elder care management services – everything from advice regarding medical and social issues to arranging for the most appropriate care services. In addition, plan members can access a range of counselling services for themselves, so they are fortified with all the support they need.

2011: The year to take notice and take action

No more deaf ears—Help plan members hear the healthy living message loud and clear...

Looks like dementia is providing us with yet another catalyst for change. Maybe the fear of heart attack, stroke, diabetes—and now, add to the list, a failing memory and the possibility of dementia—will be the push we need. In 2011, it's time for us to shape up—both body and mind.



Sources:

¹ *Rising Tide, The Impact of Dementia on Canada*, Alzheimer Society of Canada, 2010

² *Alarming' rise in dementia comes with a crippling price tag*, André Picard, Globe and Mail, September 21, 2010, <http://www.theglobeandmail.com/life/health/dementia/alarming-rise-in-dementia-comes-with-a-crippling-price-tag/article1715781/>

³ *Why Canada needs a national strategy on dementia*, André Picard, Globe and Mail, September 17, 2010 <http://www.theglobeandmail.com/life/health/dementia/why-canada-needs-a-national-strategy-on-dementia/article1712700/page3/>

⁴, ⁵ *The caregiver: 'Like a frog in slowly boiling water'*, André Picard, Globe and Mail, September 20, 2010 <http://www.theglobeandmail.com/life/health/dementia/the-caregiver-like-a-frog-in-slowly-boiling-water/article1715793/>



FOCUS ON DRUGS

No magic pill—but drugs can often be an important piece of the Alzheimer's disease management puzzle



Like most conditions, there is no single remedy that will prevent or cure Alzheimer's disease. And also like most conditions, to most effectively treat Alzheimer's disease, it is typical to use a variety of approaches in combination—everything from drugs to lifestyle changes to emotional support. In terms of drugs currently available in Canada, some medications have proven successful in treating symptoms, specifically in slowing down the decline of issues related to memory, language and thought processes:

Treatments for Alzheimer's disease...		
Aricept™	■ also known as donepezil	How they work: There is a decrease of acetylcholine in the brains of people with Alzheimer's disease. These three drugs inhibit the enzyme that breaks down acetylcholine to increase the level of acetylcholine in the brain.
Exelon™	■ also known as rivastigmine	
Reminyl™	■ also known as galantamine hydrobromide	
Ebixa® (conditionally approved)	■ also known as memantine hydrochloride	How it works: <ul style="list-style-type: none"> ■ Glutamate is one of the brain's chemical messengers involved in the formation of memories and other nerve functions. ■ With Alzheimer's disease, glutamate leaks out of ailing nerve cells, reaching levels outside the cells that are toxic to the cells. ■ Ebixa prevents that excess glutamate from over-stimulating the brain's NMDA receptors (N-methyl-D-aspartate receptors), which respond to glutamate.

Unfortunately, although today's reality is that the causes of Alzheimer's disease are not yet fully understood and there is no cure, these drugs provide relief for Alzheimer's sufferers in many cases by enhancing focus and ability to concentrate. As is the situation with any medication, it's a process based on assessing how each individual takes to the medication options. The good news is that increasingly Alzheimer's disease is gaining attention. Collectively we need to take responsibility for this disease—working together we can continue to support new research and development, and if we identify the signs in those around us, it is our responsibility to encourage assessment to promote early diagnosis and treatment.

NEWS & EVENTS

Reminder: Quebec sales tax (QST) rate increase as of January 1, 2011

As part of Quebec's continued efforts to deal with the growing provincial budget deficit, the QST rate is increasing from 7.5% to 8.5% effective January 1, 2011. This will be followed by another 1% rate increase effective January 1, 2012 to bring the rate to 9.5%. The transitional rules require the new rate to apply to supplies where the invoice for the supply is dated on or after January 1, 2011.



The impact

The QST only applies to Administrative Services Only (ASO) accounts without stop loss coverage. The tax applies to administration fees and other related taxes on claims incurred in Quebec. The anticipated impact for plan sponsors is minimal.



e-service success stories — *This could be you...*

"It's all about saving time—for me that means having as much information as possible right at my fingertips. That's why Plan Member Online Services is my new 'best resource'. When I want to check out a benefit, I simply view my entire booklet online—everything from eligibility to complete details about each benefit—it's all right there."

Online access to your entire benefit booklet provides you with one comprehensive place to quickly and easily find everything you need. Simply sign in to Plan Member Online Services and click on 'View Benefit Booklet'.

Winner of the draw for a 'night out on the town'



Congratulations to **Sharanjit Sidhu**, of Ajax, ON, the winner of Green Shield Canada's monthly draw for gift certificates for a 'night out on the town'. Through this contest, one name will be drawn each month from plan members who have registered for Plan Member Online Services for that month. To learn more, visit greenshield.ca.

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