Dear Friends and Family,

I write this letter to you from the King David Hotel in Jerusalem. Our extended family has spent 12 days touring Israel in celebration of my daughter Jackie's Bat Mitzvah. This entire trip has been an emotionally powerful experience. To know and understand the vast history of this region as the birthplace of the world's religions; to witness the growth and infrastructure that has been accomplished since the state of Israel was born only 56 years ago; to be aware of the extreme conflict but experience only the beautifully layered community — all of this has made our trip an awesome one for all 18 of us. A Gelfand family 'Chai'.

Just before departing on this trip — Marshall and I sat with the Alzheimer's Association and made some important decisions about the future of The Judy Fund and the areas that we choose to support with our funds. As you read throughout this edition of our newsletter, over the past four years we have collectively donated over \$3 million to a range of research grants lead by doctors and scientists from all across the map. Our funds have granted money to a range of projects: the most promising neurological work lead by the top research professionals in the field; establishing a new national model of best-case practices for Alzheimer's institutional care; building local programs in the Coachella Valley to support Alzheimer's care in this region. We have followed

the Alzheimer's Association's lead and chosen to fund the dual mission of care and cure.

Today we embark on a new path.

We have made the decision to spend our time and our money to support public policy work for Alzheimer's disease. Simply, we must become better advocates for this disease with the lawmakers of this land. Our federal government in conjunction with its

government in conjunction with its health partner, The National Institute of Health (NIH), fund much of the world's research that result in the medical breakthroughs which lead to drug therapies and treatments for mankind's most daunting diseases — cancer, heart disease, AIDS. Alzheimer's is quickly joining that list — a disease that knows no bounds if left unchecked. Our most powerful research granting machine must turn its attention on finding a cure for Alzheimer's disease. This will only happen if an army of voices call for change.

Friday
November 16th
Renaissance Esmeralda
Resort and Spa
Indian Wells, CA

Indian Wells, CA

A Judy Fund Gala

See page 3 for details



At The Judy Fund, our small part to lead the way will be in the form of the first 'Judy Fund Challenge Grant'. We have proposed to the world of Alzheimer's philanthropists (the good news is that this list is a growing one) a challenge: match the \$230,000 that The Judy Fund is earmarking towards advocacy work. If our challenge is met, we will have amassed the single largest private donation to public policy advocacy for Alzheimer's disease that has been made to date. We have witnessed this technique of 'challenge grants' work well in other categories of Alzheimer funding. It is now time to focus our efforts on the people who will influence how research funding gets spent!

We hope that you will hear the call to this challenge and join us by supporting The Judy Fund. For as many great nations have proven—the only road to success and independence is the journey of soldiers united in a common mission for change.

Elizabeth Gelfand Stearns



On Advocacy Day, Alzheimer's advocates gather on the steps of the California State Capitol Building in Sacramento, CA to carry their message directly to state legislators.

The 19th Annual Alzheimer's Association Public Policy Forum in Washington, D.C., March 18-20, saw hundreds of advocates storm Capitol Hill to meet with legislators and participate in a Senate hearing on Alzheimer's disease. The Forum brings together advocates—family members, physicians, caregivers and researchers from across the country—to meet with legislators who are responsible for deciding how much federal funding Alzheimer research and programs receive.

Your voice and your story can make an impact in reaching out to our elected representatives in both Sacramento and Washington D.C. For more information or to find out how you can join this effort, please contact Barbra McLendon at (323) 930-6290.

Advocate Profile: George-Ann Hyams

One Victory in a Long Battle



MOST ADVOCATES, NO MATTER THEIR CAUSE OR PASSION, know that change can be slow in coming. Few expect substantial results from a single afternoon of effort. Yet George-Ann Hyams of Los Angeles had the satisfaction of seeing \$1 million in Alzheimer funding restored to the federal budget as a direct result of her actions.

As part of the 2006 Alzheimer's Association Public Policy Forum, Hyams spent an afternoon last June visiting members of Congress. Hyams and the other Forum attendees shared their personal experiences with the disease, and then pressed the representatives and senators for funding for Alzheimer research and programs.

Toward the end of the day, Hyams' group met with an aide to Rep. Maxine Waters. The aide acknowledged that budgets were tight and it would be tough to grant all that the advocates were seeking. Instead, she inquired, "is there anything that's smaller that we can do?"

George-Ann told her about Safe Return, a nationwide identification, support and enrollment program that provides assistance when a person with Alzheimer's or dementia wanders and becomes lost. Safe Return has united more than 11,000 wanderers with their families over the last 10 years, yet funding for the program had been eliminated from the 2007 federal budget.

"We said, 'we need someone to step up and be a hero," George-Ann recalled.

A few weeks later, it became clear that Waters had received and taken that message to heart; for the congresswoman was instrumental in restoring funding and increasing the Safe Return budget from \$840,000 to \$1 million.

Though that's an impressive return on one-day of advocacy, George-Ann is no overnight sensation. In truth, George-Ann has been a dedicated Alzheimer's advocate since soon after her mother was diagnosed with the disease 10 years ago. In the beginning, though, George-Ann admits her motivation was deeply personal.

"I honestly believed I could find an answer to make her well," George-Ann said, recalling how she traveled the world gathering information on new therapies, and then fought for access to those treatments.

But over the years, as she grew to accept her mother's diagnosis, George-Ann said her focus shifted to advocating for all people suffering from the disease; and that meant lobbying. George-Ann credits her involvement with the Association, and the Forum specifically, for this transformation. In fact, the impact of her first Forum still resonates today—seven Forums later.

"Something happened the first year I went that has continually given me the courage to keep going," she said.

Indeed, George-Ann now devotes herself nearly full-time to Alzheimer advocacy.

"We're on the verge of a national health crisis," she said, citing the growing numbers of people with early-onset and the 16 million baby boomers who will be diagnosed in coming years. "I'm trying to let everybody know that the way you prepare America to deal with this crisis is by giving money for research right now."

Hyams realizes that to caregivers, taking on the additional role of advocate or heading to Washington, D.C. for a few days may sound intimidating and overwhelming. But, speaking as a caregiver herself, she believes these are just the people who will benefit the most.

"If you never take a few days out of your life to attend the Forum and be part of a community of people with the same purpose, you will be at home and these will be just the same days you have each week," she said. "If you go to the Forum and to the Hill, you will actually change your life forever and you will see a larger purpose in all you do."

2007

Progress and Hope in Alzheimer Science

The Alzheimer's Association International Conference on Alzheimer's Disease and Related Disorders (ICAD)

The Alzheimer's Association 10th International Conference on Alzheimer's Disease and Related Disorders (ICAD) attracted more than 5,000 scientists, breaking previous attendance records and solidifying its position as the premier global event in dementia research and treatment. Over five days in July

in Madrid, more than 2,100 scientific sessions offered state of-the-art insights into the basic biology of dementia, strategies to translate new knowledge into targets for next-generation therapies and latest findings on the emerging field of prevention. ICAD coverage in print, online and broadcast news generated more than 142 million media impressions worldwide, raising awareness of Alzheimer's and highlighting the Association's pivotal role in supporting the science that will solve the mystery of this devastating disease.

Headline-generating ICAD news included several reports strengthening the connection between insulin resistance, Type 2 diabetes and dementia. One study found borderline diabetes increases dementia risk almost 70 percent. Another concluded that among Type 2 diabetics, those with the poorest blood sugar control have the greatest dementia risk. Several preliminary reports hinted that the thiazolidinediones (TZDs) might help treat Alzheimer's disease or prevent it from developing. TZDs are Type 2 diabetes drugs that help the body's cells respond to insulin more effectively. This improved insulin response, in turn, aids better use of blood sugar to fuel essential cellular work. To provide more robust evidence about the possible benefit of TZDs, GlaxoSmithKline in 2006 launched a large Phase III clinical trial of extended release rosiglitazone in combination with cholinesterase inhibitors as a treatment for mild-to moderate Alzheimer's disease. The Alzheimer's Association 2006 grant portfolio includes an award to ICAD opening plenary speaker Monique Breteler, M.D., Ph.D., to help clarify the relationship between metabolic syndrome, insulin resistance and cognitive health. Breteler, an internationally renowned epidemiologist, will explore these issues as part of the Rotterdam Study, which has been collecting biochemical, genetic and autopsy data on more than 8,000 volunteers since 1990.

In another attention-grabbing ICAD session, Harvard scientist Lee Goldstein, M.D., Ph.D., reported that changes in the lens of the eye detectable by a brief, non-invasive laser pulse might reliably indicate the earliest stages of beta-amyloid buildup. Beta-amyloid has emerged as a prime suspect in brain cell destruction. Ability to monitor levels could provide a better way to monitor disease progression and response to beta-amyloid-targeting drugs. Goldstein's ICAD report earned him an invitation to appear as a keynote speaker at the 14,000-member Optical Society of America's October 2006 annual meeting. His work is supported by the Alzheimer's Association through the generosity of Rally for Research.

Also closely watched was an ICAD report on a new strategy for administering rivastigmine (Exelon®) via a skin patch. Rivastigmine is a cholinesterase inhibitor now approved by the U.S. Food and Drug Administration (FDA) in pill form to treat mild-to-moderate Alzheimer's disease. The ICAD study showed the skin patch offered participants with moderate Alzheimer's disease greater benefit than a placebo in memory, ability to carry out daily activities and overall function. In addition, more than 70 percent of study caregivers preferred the skin patch over



the currently available pill. The patch was also less likely to cause nausea and vomiting, common side effects in this class of drugs.

More Younger Individuals Than Expected Have Alzheimer's

The June 2006 Alzheimer's Association report, Early-Onset Dementia: A National Challenge, A Future Crisis, based on data from the Health and Retirement Study (HRS), a large, nationally representative survey, and findings from several other studies, the Alzheimer's

Association estimates there are between 220,000 and 640,000 Americans age 55 to 64 with early onset Alzheimer's and other dementias. Additional research is needed to develop a more exact figure, but this evidence-based first estimate indicates many more Americans are affected by dementia in late middle age than is generally acknowledged. Younger individuals with Alzheimer's face special challenges, such as difficulty getting an accurate diagnosis because the cause of their symptoms is so unexpected; coping with how their symptoms and diagnosis affect their jobs and families, which often include children still living at home; and inadequate services and support, since most of these programs are geared to older adults. To better understand these challenges, the Alzheimer's Association in 2006 convened a new advisory group of early-onset individuals. Their input will help us better understand their experience, and develop strategies and programs to meet their unique needs.

Progress in Next-Generation Treatments

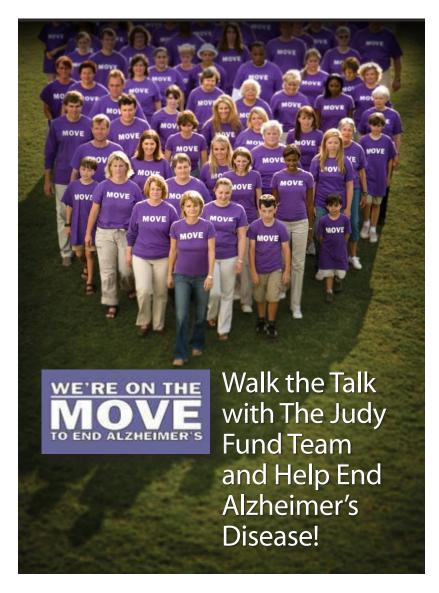
The year 2006 was the 10th anniversary of FDA approval of donepezil (Aricept®), the first drug specifically approved to treat Alzheimer symptoms. Donepezil is now one of five approved Alzheimer drugs, and progress is accelerating in developing and testing additional treatments that could be the first to delay or possibly stop the progression of underlying disease processes. To help fuel this progress, the Alzheimer's Association Research Roundtable in 2006 hosted two meetings where members and invited guests convened to address important issues in drug discovery and development. The April meeting explored the most promising experimental treatment approaches aimed at targets other than beta-amyloid, and the November event focused on cognitive health economics and the real-world value of dementia treatments.

To ensure that promising treatments become available as quickly as possible, Alzheimer's Association senior management and science and policy staff met with then acting FDA Commissioner Andrew von Eschenbach to discuss strategies to facilitate expedient review of investigational Alzheimer drugs. In response to Association requests, the FDA established an intra-agency Neurology Working Group to better address new products to diagnose and treat Alzheimer's and other neurological disorders. The FDA also agreed to appoint to the appropriate panels both an individual with Alzheimer's disease and a caregiver to broaden the review process to reflect their unique perspectives.

Caregiver Support Improves Life, Delays Nursing Home Care, Saves Money

Many caregivers prefer to keep their loved ones home as long as possible: A 2006 study by Mary Mittelman, M.D., Ph.D., suggests that intensive, proactive counseling for people caring for a spouse with Alzheimer's disease improved

...Continued on page 4



he Judy Fund Team will be on the MOVE to end Alzheimer's at the 15th Annual Los Angeles Memory Walk on November 4, 2007. For the first time ever, Memory Walk in L.A. will be taking the talk to end Alzheimer's disease literally to the streets — moving to its new course on the streets of exciting downtown Los Angeles! The new route, which begins and ends at the recently revitalized Water Court at California Plaza, will take walkers past Disney Hall, the L.A. Library and many other historic sites, as well as some of the city's brandnew top destinations.

Embracing multi-generational women and men who stand in support of the legacy of family, The Judy Fund Team challenges everyone to join in and help draw needed support to the cause! Memory Walk is about creating a public presence, rallying the community to raise both awareness and funds to support impacted families and advance innovative research. Along with taking ACTION to end Alzheimer's, participants will enjoy entertainment, refreshments and the Champions Health and Well-Being Expo, while being cheered on by celebrities such as Shelley Fabares, Peter Gallagher and many others.

Through the generosity of sponsors and thousands of individuals — including company teams, Alzheimer's families and caregivers — participants will raise more than \$500,000 as Alzheimer's CHAMPIONS in our fight. To join The Judy Fund Team, email Elizabeth Gelfand Stearns at lizdawn3@earthlink.net and take action to move the mission forward!

Progress and Hope...continued from page 2

coping skills, and reduced stress levels and likelihood of developing depression. On average, the counseling delayed the need for nursing home care by 18 months, translating to an average savings of about \$90,000 for each family. This study was supported in part by an Alzheimer's Association grant, through the generosity of the Zenith Fellows. Although this study dramatically demonstrates the power of appropriate support and services, most individuals with Alzheimer's eventually need more day-to-day assistance than families can provide. With its multi-year Campaign for Quality Residential Care, the Alzheimer's Association has taken the lead in developing evidence-based, consensus-driven standards to make life in nursing homes and assisted living as good as possible. In September 2006, the Association released Phase 2 of its Dementia Care Practice Guidelines detailing best practices in preventing falls, avoiding use of restraints and protecting residents from wandering. The Phase 2 practice guidelines were announced at the 14th Annual Alzheimer's Association Dementia Care Conference, the premier educational event for professional care providers. The Alzheimer's Association in June also launched CareFinder™, an online resource that takes users through a step-by-step personalized assessment to help them identify the best care options to meet their individual needs.

Alzheimer's Association Awards Its Largest Grant Portfolio

To sustain the momentum driving recent progress in Alzheimer research, treatment and care, the Alzheimer's Association in July 2006 announced its largest research grant portfolio ever. Awards included about \$21 million to 96 projects ranked highest in a field of 644 applicants through a rigorous peer review process. The 2006 portfolio also included the Association's largest single grant in its history: a \$2.1 million award to add a study arm focusing on positron emission tomography (PET) scans using Pittsburgh compound B (PIB) to the Alzheimer's Disease Neuroimaging Initiative (ADNI). ADNI is a multi-year effort to standardize brain imaging procedures and to determine whether imaging or laboratory tests can offer improved strategies to diagnose Alzheimer's and monitor response to experimental treatments. As always, key goals of the Alzheimer's Association research program are to move the field forward and help shape the science agenda; sustain a robust pipeline of novel ideas; and provide funds to attract talented young investigators to dementia research.

Federal Funding Slips Drastically

According to new data from the National Center for Health Statistics, Alzheimer's disease is now the seventh leading cause of death in America. In February 2007, the President released his proposed 2008 federal budget. Once again, the President proposed a decrease in National Institutes of Health Alzheimer's research funding of \$1 million. Still debating their version of the federal budget, Congress has presently given a recommendation increasing federal funding for Alzheimer research by only 2 percent in the 2008 budget – a total of \$16 million above current spending. This is a far cry from the Association's goal of a \$125 million increase and does not even keep up with research inflation. Congress has restored funding for all of the Alzheimer's care programs at 2007 levels. Given the slow pace of budget negotiations in Washington, we now anticipate it will be Fall before the House and Senate finalize their versions of the budget.

Severe health and economic consequences face our nation if we fail to meet the challenge of Alzheimer's disease. A report in the April 22, 2006 Lancet dramatically demonstrates the short-sightedness of giving medical research short shrift in our national priorities. The study, one of the first to systematically analyze the health and economic impact of publicly funded research, found the ten-year return on investment in clinical trial funding was 4,600 percent. New discoveries emerging from just eight of these trials were responsible for an estimated additional 470,000 healthy years of life. The study analyzed research funded by the National Institute of Neurological Disorders and Stroke, one of the U.S. National Institutes of Health.



Remembering Judy

Sister of My Heart

By Marsha Ozer

Pure veryone who knew Judy has a wonderful story about her. Our sisterhood started with a story that Judy loved to tell me from time to time. Our mothers were sisters and the closest of friends. When I was born, Judy was five years old. She came along on the car ride to bring me home from the hospital

to the apartment building where we all lived. When she first held me, she decided at that moment that I was going to be the sister that she didn't have.

Throughout our childhood Judy regarded me as her little sister, including me wherever she went. Whether it was skating, swimming, taking piano lessons or dancing. Even if I protested she'd say "You can do it"! She was fun to be with, extraordinarily loving and we always felt connected by a very strong bond.

One summer, when I was

fourteen, my family rented a beach house in Atlantic Beach. Judy was supposed to visit for a few days, and ended up staying for the entire summer, sharing my room. Many nights she would come in late and wake me up to tell me about her date or to laugh at something that had happened. That summer we made a pact with each other that when we got married, I would be her maid of honor and she would be mine and there would be no one else, because we were "sisters of the heart". After that late summer night, we never talked about it again until years later when Judy married Marshall. Marshall had many attendants, and Judy had only me. When I married Marty, he had many attendants, I had only Judy.

In 1974 Judy and Marshall moved their family to the west coast. I was expecting my fourth child and I found it difficult to accept how far apart we would be from each other for the first time in our lives. During her drive across the country, she called me from nearly every stop to see how I was doing. The connection never stopped. We visited often and sent our children for coast to coast visits, all in order to keep the family connection strong.

When my mother passed away, Judy and Marshall flew back to New York to be with me. As a comfort to myself I prepared many of my mother's old recipes. No one knew why I made those particular dishes to put out at the shiva. Judy, who by then was slipping away from us, came into the kitchen and said to me, "That's Aunt Rose's

meatloaf" with a knowing hug. As always, she understood.

During my visits to California, we would walk along the beach in Malibu. While Judy could not recall what had happened only hours before, she was able to clearly reminisce about our yesterdays. It was a special time for us. Sharing past secrets we hadn't discussed in years or never had spoken about, it was a connection to our youth and our lives together.

"When I married Marty, he had many attendants, I had *only* Judy."



It's impossible to put into words the memories of a lifetime. The one thing that is easy to convey is the love, admiration and caring that I had for Judy. She was the embodiment of a truly special person who had the ability not only to show her love of life and family and friends, but to share herself with them.

There is not a day that goes by that I don't miss her. I am blessed that Judy was such an integral part of my life. She truly was the "sister of my heart".

Marsha Ozer and Judy Gelfand were first cousins. As only children, they were both lucky enough to live with their parents in the same apartment building in Queens, New York throughout their young lives. Their childhood is rich with fond memories of their times together.

Marsha is married for 46 years to her husband Marty and they live in New York and Florida. They have four children: Ivy, Tracey, Jennifer and Jeffrey and seven grandchildren. Raising her family in Kings Point, New York, Marsha's door was always open (literally) to her extended family and friends. Marsha still makes her mother's delicious meatloaf.



November 12, 2006, Rancho Mirage, CA

he Coachella Valley sparkled with more than the usual evening stars the night of November 12, 2006, as its philanthropic community gathered at the annual *Memories A Judy Fund Gala* at Rancho Las Palmas Marriott Resort and Spa. Emceed for a second year in a row by Monty Hall, this inspiring event draws together an influential network of supporters, who spend the evening celebrating the lives of loved ones taken by Alzheimer's disease.

Once again Hall struck the perfect chord, eliciting laughter and enjoyment through his touching reminiscences of the honored families and friends yet inspirational in calling all to continue the fight to end the disease through philanthropic good works.

The elegant black-tie event was attended by longtime supporters of The Judy Fund and the Alzheimer's Association in order to recognize and honor the meaningful work of local community members. Noted philanthropist Jackie Lee Houston returned in her role as the evening's Honorary Chair to lend her considerable influence to ensure the evening's success. A highlight of the evening was when Director James Burke spoke of his moving experience while directing the 2006 film Aurora Borealis. Donald Sutherland delivered a critically acclaimed performance of a grandfather dying of Alzheimer's disease.

Those honored this year included Marilyn Swift Tennity for her extensive philanthropic commitment as the recipient of the 2006 Judy Gelfand Community Service Award. Her contributions to the Coachella Valley and beyond serve as an inspiring example of extending one's vision and impact to truly change the world for the better.

Memories A Judy Fund Gala

has come to represent the best of philanthropy in the Coachella Valley: a memorable evening that features first class entertainment along with keeping a sharp focus on the energy, time and money that are going into the fight against Alzheimer's disease.

Marshall M. Gelfand

In addition, Marjorie Victor received the 2006 Maureen Reagan Caregiver Award paying tribute to the tireless dedication and loving care she provided to her husband, Harold, as he battled Alzheimer's disease, until his passing in September 2005.

The evening continued its successful tradition of raising important funds and awareness for the Alzheimer's Association, bringing in nearly \$400,000 this year. Of these funds, 40 percent is allocated for national research projects designated by the Judy Fund and 60 percent is designated to support local programs and services, including the new Alzheimer's Association/USC Memory Assessment Center, housed at Eisenhower Medical Center. This groundbreaking partnership was announced at the Gala and this past July was opened for business to serve the community bringing much needed Alzheimer's-related medical and care services not previously available to the Coachella Valley communities.

Along with the honoring of philanthropic community leaders, the Gala offered dancing to the big band sounds of the Pat Rizzo Orchestra, complemented by special guest performer Mike Costley.

Anticipation is high for a fabulous and even more successful 2007 *Memories* A Judy Fund Gala, set for November 16, 2007, once again uniting the community in the fight against Alzheimer's disease.

As we enter our fourth year in collaboration with the Alzheimer's Association's Coachella Valley regional office, we are so pleased that our community continues to support this event which raises record funds each year. Judy Gelfand's ultimate legacy to this community is reflected in the high level of treatment, care, and outreach for the patients and families of those suffering with Alzheimer's disease here in the Desert.

Thank you all for making that possible.

Elizabeth Gelfand Stearns



Michael Smith, Marjorie Victor, Pat Kaplan Edie Keller, Marilyn Swift Tennity, Marshall Gelfand and Elizabeth Gelfand Stearns



The Alzheimer's Association is deeply grateful to the following individuals, families, companies, and organizations who have so generously supported the founding and growth of The Judy Fund.

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The Judy Fund Strengthens the Ranks of the Zenith Society



Dr. George Perry, 2007 Zenith Award Recipient

he year 2005 was pivotal for The Judy Fund as it marked the first time that the Fund's revenue had reached the \$1 million mark elevating it to the Alzheimer's Association's Zenith Society—a nationwide community of philanthropists determined to change the course of Alzheimer's disease by funding research projects with special promise to advance the field. A key role for its members is annually selecting which peer-reviewed research projects will receive Zenith grants – among the most prestigious awards supporting Alzheimer's research with the greatest disease-altering potential. To date, The Judy Fund has reached more than \$3 million in support of Alzheimer's research.

Gifts to The Judy Fund fully supported a Zenith award to Dr. Bruce Lamb in 2005 for his project examining the interrelation of genetics, high-cholesterol and Alzheimer's disease, followed by a 2006 Zenith award to Dr. Ramon Diaz-Arrastia and his investigation into the potential for vitamin B12 and folic acid to prevent progression of mild cognitive impairment into Alzheimer's.

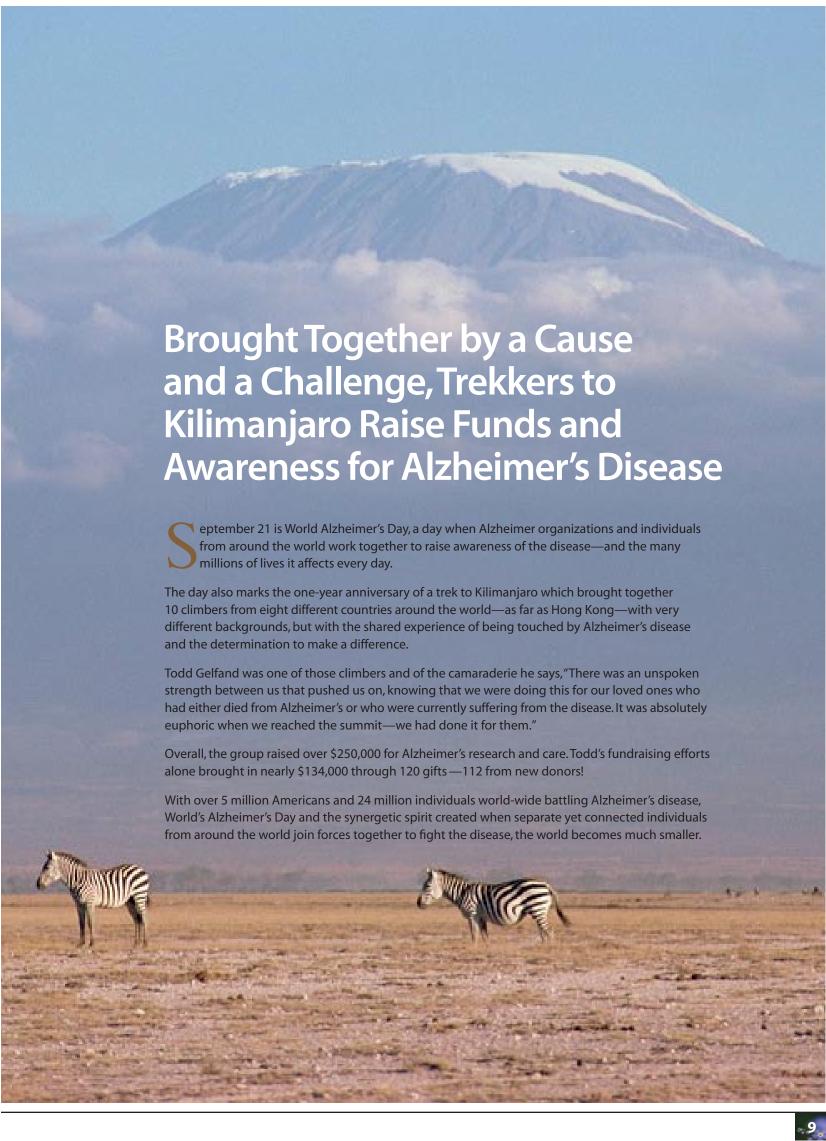
As announced at the Zenith meeting in May 2007, Dr. George Perry, of Case Western Reserve University, is the most recent Zenith award recipient to be supported wholly by The Judy Fund. Dr. Perry's team has been studying the relationship between Alzheimer's disease and abnormal mitochondria—the cellular structures that produce energy for a cell. In Alzheimer's disease, abnormalities often occur in the mitochondria of nerve cells. These abnormalities lead to excessive production of free-radicals, which in turn often leads to the death of nerve cells and further brain degeneration. This study aims to learn how the accumulation of amyloid precursor protein or APP—the parent molecule of beta-amyloid (a prime culprit in Alzheimer's disease)—may induce the mitochondrial abnormalities that lead to the excessive release of free-radicals in the brain. Results from the study could lead to new therapeutic avenues in the treatment of Alzheimer's disease.

Another exciting outcome of the May Zenith meeting was the announcement of a challenge initiated by a current Zenith Society member who pledged to commit an additional \$1 million if three new or renewed Zenith donors were to come forward by December 31, which immediately resulted in a \$1 million pledge and new Zenith donor. This exhilarating momentum helped inspire the Gelfand family to announce a new \$375,000 challenge grant, over the next three years, to support national advocacy programs. In a time of decreased federal funding for Alzheimer's care and research, this designation expands The Judy Fund support to a key area of need and rallies our community to step forward to match this contribution on behalf of the advocacy efforts of the Association.

Commented Marshall Gelfand, "[Funding research] needs to be on the political radar screen so that Alzheimer's disease gets the level of attention and funds that other diseases such as cancer, AIDS and heart disease have had in order to make an impact on the coming generation."

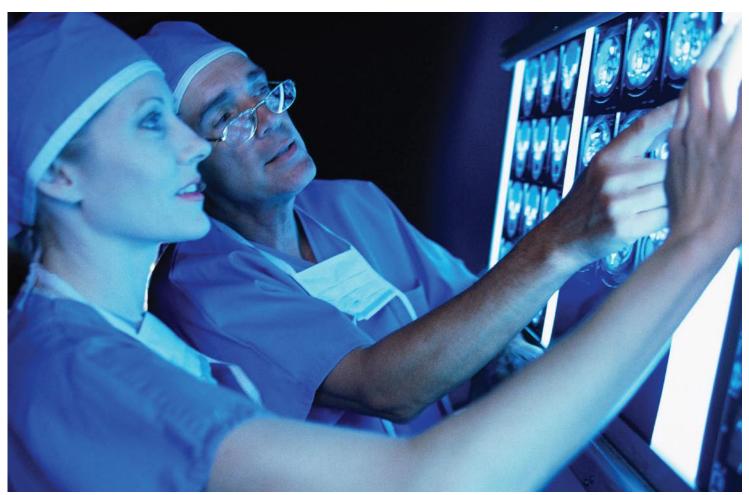
Through the commitment of its donors, The Judy Fund continues to be a powerful vehicle instrumental in sustaining ground-breaking investigations that carry the vision of a world without Alzheimer's disease.





2007 Dementia Prevention Conference

Emerging Treatments, Diagnostic Tools and Risk Management Strategies Could Transform the Clinical Landscape



t the June Alzheimer's Association International Conference on Prevention of Dementia held in Washington D.C., experts converged sharing with attendees breaking news on drug updates, identified tools to aid in early diagnosis and prevention strategies. This one-of-a-kind conference was designed for clinicians, researchers and policy advocates who want a dynamic forum to exchange knowledge about early diagnosis, treatment and possible prevention of Alzheimer's disease.

The world of Alzheimer's disease is constantly changing with emerging treatments, diagnostic tools and risk management tactics all with the potential to transform how we currently recognize and respond to the disease. This is a very exciting time for Alzheimer's research as scientists have finally been able to report through clinical data that there are drugs showing promise in the slowing or reversing of Alzheimer's symptoms. In addition, there are new advancements in the ability to diagnosis the disease earlier and monitor progress thereby offering greater control of the disease. Finally, prevention strategies have emerged suggesting there are ways to effectively intervene in the development of Alzheimer's disease.

Consumer health surveys consistently show that avoiding cognitive decline is a top concern of older adults. In 2011, 78 million American baby boomers begin turning 65, reaching the age when risk for Alzheimer's disease rises sharply. Expectations and values among this historically activist group will drive a growing demand for health care that encompasses cognitive well-being and provides access to the best available information and interventions.

Several drugs that may slow or stop progression of the disease have reached Phase III clinical trials. Phase III is the final stage in a three-part human testing sequence mandated by the Food and Drug Administration (FDA) to demonstrate safety and effectiveness of a new drug.

The first convincing clinical data showing that Alzheimer's can be slowed or stopped will spur further drug development. This proof-of-concept data will also accelerate the search for biological markers that can detect the disease in its earliest stages and monitor effectiveness of experimental drugs. The quest for biomarkers is already under way, with current efforts focusing on brain imaging, signature proteins in spinal fluid or blood, or characteristic patterns in protein or gene expression profiles.

The Treatment Horizon

The next-generation treatments most advanced in clinical testing target beta-amyloid, a protein fragment considered a prime suspect in Alzheimer's disease. According to a leading theory, all individuals produce beta-amyloid, but those who develop Alzheimer's generate abnormally large quantities or have reduced ability to clear it from the brain. The "chemically sticky" fragments build up into the plaques considered one pathological hallmark of the disease, and trigger a cascade of other abnormalities contributing to cognitive decline.

Prevention Conference sessions provided updates on the following amyloid-targeting experimental drugs:

- **Alzhemed** blocks aggregation of beta-amyloid into plaques. It is the first anti-amyloid drug to complete a Phase III clinical trial and results were highly anticipated. Conference attendees were disappointed however to learn that no results were yet available because unusually high data variations among trial sites invalidated the statistical model. The developer is working with the FDA to develop a new model and trial results could be announced soon.
- Flurizan reduces beta-amyloid by changing the activity of an enzyme involved in its production. A conference session reported results of a 12-month follow-on study to a year-long Phase II trial. After 24 months of treatment, patients in the mildest Alzheimer stages who received the highest drug dose showed significant stabilization or improvement in cognition and overall function. Two large Phase III studies are now under way.
- LY450139 blocks activity of the same amyloid-generating enzyme as Flurizan. The latest Phase II results showed LY450139 decreased beta-amyloid levels in both blood and spinal fluid. A Phase III trial will be launched in 2008.

Prevention Conference sessions also highlighted experimental drugs targeting other mechanisms besides beta-amyloid production:

- **Dimebon** is an antihistamine developed in Russia with data from a 12-month Russian Phase II study directed by two prominent American clinical trialists showing significant benefit in cognition, global function, and behavior. A U.S. Phase III trial is under consideration.
- **Ketasyn** may correct metabolic deficiencies in the Alzheimer brain by providing ketone bodies, an alternate energy source for declining cells that have lost the ability to use glucose. Phase II studies suggest Ketasyn improves memory in people with Alzheimer's who do not have a common risk gene for the disease. A Phase III study is being considered.
- Avandia is currently FDA-approved for Type 2 diabetes, and under investigation in several Phase III trials for its potential to improve brain glucose utilization. A conference session reviewed recent data linking Avandia to an increased risk of heart attack and stroke. An FDA panel will convene to review Avandia's safety. Results could have implications both for Avandia's future as a diabetes drug and an investigational Alzheimer's agent.
- **Lipitor** is being tested as a treatment for mild-to-moderate Alzheimer's in a large Phase III study under way at 97 sites in 10 countries, with results expected in 2008. The drug may impactAlzheimer's disease through several mechanisms, including general benefit for brain blood vessels and anti-inflammatory effects as well as possibly influence beta-amyloid production.



Improved Diagnosis and Monitoring

As demonstrated by early-stage data on Alzhemed, Flurizan, and other trials reported elsewhere, evidence suggests that drugs aimed at fundamental Alzheimer pathology may work best when taken as early as possible. The current mainstay of Alzheimer diagnosis is cognitive evaluation, often with the mini-mental status examination (MMSE). The MMSE is imprecise and insensitive to the first signs of cognitive change. Extensive neuropsychiatric test batteries can detect

more subtle deficits, but they are not a practical alternative in general practice as they are time-consuming, and unpopular with patients.

Better approaches to diagnosis and monitoring are clearly needed. Two of the most promising avenues are brain imaging and biomarkers in spinal fluid or blood.

A packed Prevention Conference session brought attendees up to date on the Alzheimer's Disease Neuroimaging Initiative (ADNI). This nationwide study aims to standardize brain imaging protocols for cognitive change and validate their usefulness in early diagnosis and monitoring. Both magnetic resonance imaging (MRI) and positron emission tomography (PET) are under investigation. ADNI is also collecting blood and spinal fluid samples to explore the accuracy of biomarkers.

It is unlikely any imaging technology or biomarker will be widely accepted until ADNI results are available in about five years. In the meantime, individual investigators and companies continue to report promising results with specific approaches. Conference sessions highlighted biomarker strategies focusing on signature proteins in cerebrospinal fluid, signature proteins in blood and "Biomarker barcodes" in blood, which focus on multi-component protein or gene expression profiles in which no single element is predictive, but a characteristic pattern may distinguish people at increased risk or in the earliest stages of Alzheimer's.

Emerging Prevention Strategies

Early Alzheimer trial data and experience with other diseases suggest primary prevention may be the most effective intervention. A conference keynote address by Julie Gerberding, M.D., M.P.H., director of the Centers for Disease Control and Prevention (CDC), highlighted these leading potentially modifiable risk factors for cognitive decline:

- Physical inactivity
- Cardiovascular risk factors, including elevated blood pressure and cholesterol, insulin resistance and Type 2 diabetes, smoking, and excess weight
- Psychosocial issues (engagement, anxiety, sense of control over life)

The CDC has launched The Healthy Brain Initiative, a first-ever road map to make cognitive well-being part of our overall national public health goals. CDC will collaborate with the Alzheimer's Association to develop a pilot community-level intervention program over the next few years.

Memories, Like the co red memories Of the way we were The Judy Fund Care and Cure with the Alzheimer's Association ave to one another Scattered pictures, Of the smiles i For the way we MemoryWalk uple then? Or has time re-written Los Angeles, CA lizdawn3@earthlink.net 16 Memories Could we? Memories. **A Judy Fund Gala** every line? If we had the chance **Renaissance Esmeralda Resort & Spa Indian Wells, CA** 760-328-3542 may be beautiful and yet What's hoose to forget So it's the laughter MemoryWalk We will remembe Coachella Valley, CA y we were... The way we were... 760-328-3542 16 Advocacy Day Memories, Like the red memories Of the way we were Sacramento, CA 323-930-6290 ve to one another Scattered pictures, Of the smiles i 12-14 Public Policy Forum Washington, DC 323-930-6290 For the way we en? Or has time re-written

The Alzheimer's Association is deeply grateful to the family, friends, business colleagues and corporations who have so generously supported the founding and growth of The Judy Fund. Marshall M. Gelfand and his family established The Judy Fund in 2003 in loving memory of his wife, Judy Gelfand. Since its inception, this family fund has raised more than \$3 million in support of the Alzheimer's Association to help prevent this disease from striking future generations. Your support has enabled The Judy Fund to finance various vital research grants, including the Association's flagship grant, the Pioneer Award in 2004. Thank you for joining the Gelfand family in helping to advance the Alzheimer's Association's mission.

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