



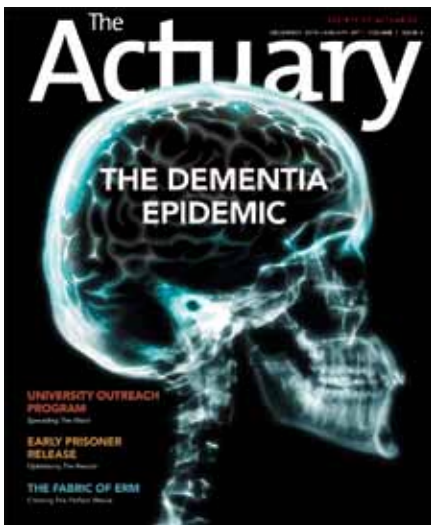
SOCIETY OF ACTUARIES

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# IS IT REALLY AN EPIDEMIC?



## DEAR EDITOR,

It was with great anticipation that I opened the Dec. 2010/Jan. 2011 issue of *The Actuary*. As an 80-year-old retired fellow of the Society of Actuaries, I was naturally very interested in learning more about dementia and Alzheimer's in particular. I was disappointed.

Aside from some aggregate statistics highlighting the growing numbers of victims and the observation that we

are seeing more sufferers at younger ages, there was virtually no information of the type one would expect to find in an actuarial publication.

For example, is the increasing incidence of the disease merely a function of an ageing population, or are age-specific morbidity and mortality rates from this cause on the increase? If the latter is the case, what is the pattern by age at onset? Furthermore, to what extent is the data influenced by more accurate diagnosis? Is there any evidence that lifestyle is a factor?

The above are only some of the more elementary questions that might have been discussed. Perhaps others can provide some answers.

This is a terrible disease, and the article dealt admirably with the sociological effects, but not the actuarial aspects. **A**

**Alan Richards, FSA, Carlsbad, Calif.**

**I THINK IT IS IMPORTANT** to distinguish Alzheimer's from other forms of age-related decline. Not everyone whose memory isn't as sharp as it once was has Alzheimer's Disease. Additionally, it is not clear to what extent substance abuse and hazardous materials exposure contributes to mental decline. What is striking about Alzheimer's Disease is the rapidity with which it can claim victims. Given that I myself have been subjected to bad medical advice, it wouldn't surprise me that the actual incidence rate of Alzheimer's is much lower and that many cases are a misdiagnosis. **A**

**Tim Cole, ASA, Perryopolis, Pa.**

**A FEW REMARKS ON THE DEMENTIA ARTICLE** in the recent Dec. 2010/Jan. 2011 issue of *The Actuary*.

First, a jarring phrase in the sidebar: "This accepting attitude has allowed governments to ignore their plight and happily accept the \$25 billion a year in unpaid labor."

Oh, heaven forbid that family members care for each other, when "the government" should have been picking up the tab. Oh my, we care for our autistic son when he should be institutionalized. How dare the state expect me to deal with him.

Now, clearly some people do need care beyond the physical (and mental) abilities of family members, but the fact that people with mental disabilities can be difficult to live with does not mean that it's the responsibility of "the government" to make the difficulties of life go away. I think those who colonized Canada may have thought this sentiment odd; one did not go to Canada for the harshness of life to be worn away in the swaddling embrace of the state. And certainly one did not expect someone else to take on the responsibility of caring for one's aging mother. It was a duty to do so.

But that's just a side issue, distracting from the main thrust of the article. It's not clear to me that senile dementia is actually an epidemic in normal terms. I tried to look around for some statistics on dementia incidence by age and sex, and came across many articles and abstracts. Here are a few:

<http://bit.ly/grzVWV>.

<http://bit.ly/ErCSO>.

<http://bit.ly/hTBEI5>.

It seems that the issue is that dementia incidence increases with increasing age. There seems to be sex-differentials in types of dementia (for some reason women have higher incidences of Alzheimer's Disease, but men have higher incidences of vascular dementia). But in general the reason you have more female dementia sufferers is that more women survive to older ages, and older people have a much higher incidence of dementia.

So it seems that this "epidemic" is just a part of the larger mortality trends we see impacting retirement systems: people are living longer, and there are consequences to that. Yes, there is early-onset Alzheimer's Disease, but that forms a small percentage of senility issues.

And while the author gives recommendations that suspiciously sound like it would help her own organization (how convenient that on *SOA.org*, I can click in the author bio and end up at her business' website), here is one of my own recommendations to help combat this issue: Get people to work longer. See <http://bit.ly/fidLNr>.

To quote the linked article: "Working beyond normal retirement age might help stave off dementia, scientists said today.

"Keeping the brain active later in life appears to reduce the chances of an early onset of Alzheimer's Disease, according to a study of 382 men with probable dementia. The researchers suggest a significant link between later retirement and delayed symptoms. ...

"The researchers found no link between education or employment and dementia risk, but found that those who retired

later prolonged their mental abilities above the threshold for dementia."

Of course, it can be that those who will have earlier dementia retire earlier due to mental difficulties, but given that life expectancy past the old "traditional" retirement ages has increased greatly over the past century, it's just good public policy in general to encourage people to work well past what used to be the age of decrepitude but is currently an age of still quite good productivity.

**It's not clear to me that senile dementia is actually an epidemic in normal terms. — Mary Pat Campbell**

Another recommendation is for people to have more babies right now. Because those caring for the elderly senile population when it swells over the next few decades due to demographic patterns already baked-in will be those born right now if they want strong, young backs to help physically.

Going back to my first point, while it has been considered the duty of family to take care of each other, due to dwindling fertility, and relatively high divorce rates, ultimately it will be non-family members providing a huge amount of care to the extent that these elderly will be cared for. So it would help if there are plenty of people to work in this sector.

Or perhaps Japan will have improved robotics so well that actual human beings will not be needed.

In any case, it doesn't help to look at this "dementia epidemic" as some discrete occurrence, as it is part of the same demographic issue currently roiling Europe and soon to hit North America as well (though our fertility rates haven't cratered as badly ... at least not yet).

I do understand that this author is not an actuary. But if we keep on pushing the concept of actuarial work as embracing risk management in a global sense, it does us no good to look at a problem as some isolated issue when it is part of a larger trend that is impacting so much. **A**

**Mary Pat Campbell, FSA, Croton Falls, N.Y.**