



IAGG Global Research Network on Health & Ageing Questionnaire for selection process

Name of the Centre: **Aging Research Center**
Key Investigator / Head of Department: **Laura Fratiglioni**
Phone:
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Description of the Centre:

a) Type of investigations:

- Basic Science / Fundamental
- Clinical Research
- Health Services Research
- Epidemiologic/Public Health Research
- Other

b) Themes investigated (please specify):

- Dementia
- Frailty
- Sarcopenia
- Other Neurodegenerative Disorders
- Geriatric Disorders
- Cardiovascular Risk Factors
- Metabolism
- Ageing research
- Genetics
- Gerontechnology
- Other

c) Number of investigators in ongoing positions:

- Less than 5
- to 10
- More than 10

d) Number of investigators funded by specific projects:

- 1 to 3
- 4 to 5
- More than 5

e) Does your Centre have a:

- Clinical affiliation
- Academic affiliation

f) Does your Centre have a basic sciences program? (Please specify topic)

- Yes
- No

If your Centre is affiliated to a Geriatric Department, please provide the following information:

a) Types of units:

- Acute Ward - **Number of beds: 0**
- Outpatient Ward - **Number of patients/year: 0**
- Community Care Unit - **Number of visits/year: 0**

- Day Hospital - **Number of places/day: 0**
- Geriatric Rehabilitation Unit - **Number of beds: 0**
- Long-Term Care - **Number of beds: 0**
- Special Units (stroke, memory, ortho-geriatric, psycho-geriatric) - **Number of beds: 0**

b) Number of staff in the Department:

Geriatric: **0**

Gerontology: **0**

Other: **0**

c) Does the Day Hospital have specialist services?

- Dementia / Memory
- Cardiovascular clinic
- Rehabilitation
- Falls assessment clinic
- Parkinson's disease clinic
- Other

d) Does your Geriatric Department already cooperate with supervising clinical trials?

- Yes
- No

Management of the Centre:

a) Is your Centre an existing national or government recognized medical research Centre?

- Yes
- No

b) Does the Centre receive funded grants? (Please specify source)

- Yes **Swedish Council for Working Life and Social Research, Swedish Research Council and others**
- No

c) Does the Centre collaborate with trials funded by pharmaceutical companies?

- Yes
- No

d) Will the Centre shortly begin investigation projects?

- Yes
- No

Indicate the three main publications over the last 2 years:

1/ Name of Journal: Neurology

Title of article: **Personality and lifestyle in relation to dementia incidence**

2/ Name of Journal: International Journal of Geriatric Psychiatry

Title of article: **Baseline leisure activity and cognition more than two decades later 3/**

3/ Name of Journal: Neurobiology of Aging

Title of article: **Dopamine D1 receptors and age differences in brain activation during working memory**

Please add short biographies (maximum 1 page) of the Key Investigators and Head of Department

Laura Fratiglioni Laura Fratiglioni is the Director of the Aging Research Center (ARC) and currently employed as a professor at the Karolinska Institutet. She is a medical doctor, specialized in both neurology and epidemiology. She has scientific, clinical and pedagogic commitments. Under her supervision, 13 PhD students and two postdocs have completed their studies since 1996. She is currently supervising four PhD students. She regularly serves as a reviewer for various clinical and epidemiological journals. Since 1996, as principal investigator, she has regularly received grants from several of the major research councils in Sweden. She has received several awards including: the Sohlberg's Nordic Prize in Gerontology (2010),

Sofiahemmet-Research and Education prize in dementia research (2010), the Karolinska Institutet Folksam prize in epidemiologic research (2009), the Luigi Amaducci Award from the Italian Neurological Association (2001), and has also been recognized by the Swedish Society of Medicine. She is the scientific coordinator of the Kungsholmen Project on Aging and Dementia, co-investigator for the project "Harmony: a twin study on dementia", and the principal investigator for the SNAC-Kungsholmen population study. Her scientific production has led to 262 articles in peer-reviewed journals, 13 book chapters and eight reports. Her major research field is the epidemiology of neurodegenerative diseases in the elderly. Specifically, Laura Fratiglioni and her group are involved in the following lines of research: "Risk factors for Alzheimer's disease and other dementias, including genetic, biological and environmental factors; "Natural history of the dementias; "Mild cognitive impairment and early detection of AD and VaD; "Multimorbidity and disability in the elderly. Her major contributions to the field of the epidemiology of aging are in the following areas: 1. Primary prevention of Alzheimer's disease. Approximately 24 million people around the world have dementia with the number projected to double every 20 years, of these patients with dementia 60% live in developing countries, with the proportion being predicted to rise to more than 70% by 2040. Laura and her colleagues have provided strong evidence supporting the role of the genetic background in all dementia subtypes and suggesting possible preventive strategies. Vascular factors, such as midlife hypertension, diabetes and cerebrovascular disease all contribute significantly to the development of dementia and Alzheimer's disease. Active engagement in mental, physical, and social activities may postpone the onset of dementia by providing a cognitive reserve. 2. Secondary prevention of dementia. Cognitive deficits can be observed up to ten years before a dementia diagnosis is made with a sharp decline being more evident in the final three years. Laura and her colleagues have validated the use of such early cognitive deficits as a predictive tool for incipient dementia in the general population but to date none of the proposed definitions has shown itself to be a sufficiently good predictor at the community level. This is mainly due to the fact that cognitive impairment is a common condition in the elderly population and has multiple causes. Anxiety symptoms may be a reliable predictor of progression to dementia. 3. Disability, multimorbidity and longevity. More than 50% of people over 75+ years of age are affected by multimorbidity. Low education increases the risk of multimorbidity, suggesting that unhealthy behaviours linked to educational level or SES early in life may still play a role in the health status of the very old. Disability and mortality are strongly related to multimorbidity, but a clear genetic influence in longevity is still present with different effects in men and women.