

ALZHEIMER'S AUSTRALIA RESEARCH LIMITED

ANNUAL REPORT 2010-11

**UNDERSTAND ALZHEIMER'S
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of the Alzheimer's Australia website
www.fightdementia.org.au

ACKNOWLEDGEMENT OF SUPPORT

Alzheimer's Australia Research (AAR) would like to thank the many individuals and organisations that support our annual Dementia Research Grants Program through donations, gifts and bequests to AAR and the Hazel Hawke Alzheimer's Research and Care Fund. Donations to the Hazel Hawke Alzheimer's Research and Care Fund are used to fund the Hazel Hawke Research Grant in Dementia Care, which is administered by AAR.

In particular, we would like to extend special thanks to the following entities:

Alzheimer's Australia National
The Alzheimer's Australia State and Territory Organisations
Buxton Group and the Epsilon Research Fund
Peter & Lyndy White Foundation
Resthaven Incorporated
The Rosemary Foundation for Memory Support Inc
The Sylvia & Charles Viertel Charitable Foundation

Our heartfelt thanks to our payroll giving partners and their employees:

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Dunn & Bradstreet
Suzanne Grae Corporation Pty Ltd
TRAVELEX LTD

We also would like to express our gratitude to the following individuals:

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Graham Hiley
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Peter Tyrer
Dorothy Howse
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Robert O'Connor
The Estate of Eva Violet Luxford
The Estate of Zdislaw Godula

We owe a great debt to Hazel Hawke and the commitment she has made to dementia research through the establishment of the Hazel Hawke Alzheimer's Research and Care Fund.

We are also grateful for the awareness activities of Sue Pieters-Hawke and her continuing support in advocating for people with dementia, their families and carers. Thank you also to Forget-Me-Not Girls: Andrea Britz, Sophie Pieters-Hawke, Tess Paul and Annabelle Boyd-Jones.

We would like to thank Peter Collett for his continued support.

Alzheimer's Australia Research would like to extend their thanks to Neville and Denise Odell for continuing to donate all the profits from the sales of their publications *Bowl 'em Over* and *A Tad More Grass* to research.

Profile photographs provided by the researchers. Other images supplied by David Elliott at Neuroscience Research Australia, Natasha Deters at Brain and Mind Research Institute, The Commonwealth Bank, and the Dementia Collaborative Research Centre.

Finally, Alzheimer's Australia Research would like to thank Dinusha Fernando and Katherine Bowditch for supporting the Board and the Panel during 2010–11.

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PURPOSE AND MISSION

MISSION STATEMENT

Alzheimer's Australia Research Ltd (AAR) aims to promote, disseminate and fund Australian research into dementia.

THE ROLE OF AAR

AAR supports the research effort in Australia through directly funding research, advocating for increased research spending, distributing research information and publicising research findings.

AAR actively encourages dementia-related research in Australia by providing annual grants in many areas of dementia research, including biomedical research and dementia care. In 2010–11, over \$700,000 was awarded by means of a number of competitive grant and scholarship rounds; the amount of funding available having grown rapidly in recent years with increased donations.

This annual research allocation accounts for approximately 5% of the total dementia research funding nationally through the NHMRC, and has a focus on building capacity within the dementia research community.

WHY IS RESEARCH IMPORTANT?

Dementia research is crucial if we are to:

- reduce the number of people affected by dementia, and
- ensure that people with the condition have a better quality of life.

Most of our current knowledge of dementia has been discovered by researchers in the last 25 years. The next 25 years could yield significant progress in many areas of dementia research.

Latest figures predict that there will be around a million people with dementia by 2050. We must invest in dementia research now, to help combat the present and future impact of the dementia epidemic.

Australia has the potential and expertise to be a world leader in dementia research, but this cannot happen at the current level of investment. Greater investment in research may lead to the prevention or cure of dementia as well as improvements in dementia diagnosis, management and care.

SUPPORTING NEW RESEARCHERS

A key priority is to support emerging Australian researchers to undertake dementia research. AAR provides new investigator grants, postgraduate research scholarships, postdoctoral fellowships and travel grants to new researchers on a competitive basis.

RESEARCH COLLABORATIONS

AAR welcomes research collaborations and partnerships to promote Australian dementia research. In this financial year AAR has continued partnerships with the Sylvia and Charles Viertel Charitable Foundation, Rosemary Foundation, Resthaven Inc., and the Dementia Collaborative Research Centres (DCRCs) which are part of the Australian Government's Dementia Initiative – making dementia a National Health Priority.

DISTRIBUTING RESEARCH INFORMATION

AAR and Alzheimer's Australia work to increase the information available to consumers in order to further awareness of the importance of research and the quality of Australian dementia research, through initiatives such as the fortnightly Dementia News electronic newsletter that is funded by the DCRCs and the research section of the Alzheimer's Australia website. Providing the public with a reliable source of information about dementia research is a central role of AAR.

PROMOTING AUSTRALIAN DEMENTIA RESEARCH

AAR and Alzheimer's Australia aim to increase the profile of dementia research in Australia through publications, fundraising activities, media events and Dementia Awareness Month.



BOARD OF DIRECTORS

PROFESSOR HENRY BRODATY, CHAIRMAN

Professor Henry Brodaty is Professor of Ageing and Mental Health and Director of the Primary Dementia Collaborative Research Centre at the University of New South Wales. He is also Director, Aged Care Psychiatry and Head of the Memory Disorders Clinic, Prince of Wales Hospital. He has served on several New South Wales and Commonwealth committees related to ageing and dementia. Currently, he leads the NSW Dementia Policy Team which has prepared the NSW Dementia Services Plan 2011–2015 and is a member of the Commonwealth Minister for Ageing's Dementia Advisory Group. He is past chairman of Alzheimer's Disease International (ADI), representing over 70 national Alzheimer's Associations and is past president of Alzheimer's Australia and Alzheimer's Australia NSW. Professor Brodaty has authored over 300 papers in academic journals and several books and book chapters.

PROFESSOR JOHN MCKELLAR AM ED, VICE CHAIRMAN

Professor McKellar is currently the President of Alzheimer's Australia SA and is also a Director and Secretary of the Rosemary Foundation. Professor McKellar was awarded Member of the Order of Australia in the Queen's Birthday Honours list in 2008 for 'Service to people with dementia, particularly Alzheimer's, and their carers, through organisations that provide education, support services and funding for research'.

GORDON ROBINSON, TREASURER

Gordon has a business background with over 30 years in the consumer goods industry, including Australian and overseas CEO positions in South America and Europe. Gordon has been associated with Alzheimer's Australia for the past 15 years as past Victorian President and National Vice President.

GLENN REES, COMPANY SECRETARY

Glenn has worked at senior levels in the British and Australian public services. In Britain he worked as Private Secretary to senior Ministers in the Cabinet Office and in Economic Departments. In Australia since 1976, he has worked in program and policy areas including Prime Minister and Cabinet, Employment and Training, Aged Care, Disabilities, Housing and the Aboriginal and Torres Strait Islander Commission. He was Chair of the Nursing Homes and Hostels Review in 1986 and was involved in implementing the first wave of aged care reforms. Glenn has been Chief Executive Officer of Alzheimer's Australia since 2000, during which time dementia has been made a National Health Priority.

KAYE PRITCHARD

Kaye's husband David was diagnosed with frontotemporal dementia in 1998. Kaye is a past President of the Board of Alzheimer's Australia ACT and a current Board Member. Kaye has also represented Alzheimer's Australia ACT on the National Board of Alzheimer's Australia from 2001 to 2006. In October 2006, Kaye attended the Alzheimer's Disease International conference in Berlin and co-presented a paper on carer support. Kaye is currently the consumer representative on the Coordinating Committee of the Dementia Collaborative Research Centres and is also a member of the Ministerial Dementia Advisory Committee. As a member of the Board of Alzheimer's Australia Research, Kaye has a keen interest in helping others to understand what it is like living with dementia.

DR ROBERT YEOH

Dr Yeoh is a general practitioner with a special interest in dementia. He has been a member of the Board of Directors of Alzheimer's Australia NSW since 1994, holding positions of Vice President (1996–1998), President (1998–2000) and immediate past President (2001). Robert also held the position of National President of Alzheimer's Australia from 2000 to 2005. Dr Yeoh is a professional member of the Guardianship Tribunal and has been the NSW Delegate to Alzheimer's Australia 1995–2000 and Honorary Secretary of Alzheimer's Australia 1997–2000.

BOARD OF DIRECTORS

ANDREW WATT

Andrew Watt's father was diagnosed with younger onset Alzheimer's disease in 2002. Since then he has worked closely with both Alzheimer's Australia WA and Vic to raise awareness within both the Western Australian and Victorian communities. In 2007, Andrew was the opening speaker at the Alzheimer's national conference in Perth where he shared his personal journey with Alzheimer's disease. In 2009, Andrew was a steering committee member for the National Consumer Summit on Younger Onset Dementia. Andrew is currently undertaking a PhD within the University of Melbourne at the Bio21 Molecular Science and Biotechnology Institute where he is investigating blood-borne biomarkers of Alzheimer's disease.

JOHN MORRISON (from September 2010)

John Morrison is the Vice Chairman of Alzheimer's Australia NSW. He has served on the Board for many years, and was Honorary Treasurer from June 2003 to July 2006. John has experience as a consultant and practitioner in finance, secretarial practice, corporate governance and risk management.

DR SEAN MAHER (from January 2011)

Dr Sean Maher is a geriatrician at Sir Charles Gairdner Hospital's Department of Rehabilitation and Aged Care. He graduated from the University of Western Australia and is a Fellow of the Royal Australasian College of Physicians. He previously worked at Royal Perth Hospital in acute geriatric medicine as well as at Bentley Hospital in rehabilitation, conducting memory and falls clinics and working in the Aged Care Assessment Team. He is the Federal Secretary for the Australian and New Zealand Society for Geriatric Medicine (ANZSGM) and has been a Federal Councillor of the society since 2005. He has interests in delirium and dementia and coordinated the ANZSGM's Position Paper on delirium, as well as assisting to develop the WA Department of Health's Model of Care for Delirium and the Older Person. He is a senior lecturer in Geriatric Medicine at Edith Cowan University and is on the Board of Alzheimer's Australia WA.

DAVID SCARLETT (to November 2010)

David is a lawyer and brings to the board a valuable legal background. He serves on the Research Ethics Committee of the Royal North Shore Hospital overseeing the ethical aspects of medical research. The insights he gains from this voluntary work equip him to contribute on other aspects of the work of the organisation. David was a member of the Alzheimer's Australia NSW (AANSW) Board of Directors from 1998 and held the position of Vice President (2000–2002), President (2002–2004), Immediate Past President (2004–2005) and Director in 2006. David continues to represent AANSW on the Alzheimer's Australia Research Board.

ASSOCIATE PROFESSOR MARC BUDGE (to August 2010)

Associate Professor Budge is the Head of the Geriatric Medicine Unit, ANU Medical School; Director of Geriatric Medicine, Aged Care and Rehabilitation Services, ACT Health; President of Alzheimer's Australia; and Director of the Dementia Collaborative Research Centre Number 2 (Prevention, Early Intervention and Risk Reduction). He was formerly a clinician and MRC-funded Senior Research Fellow in the multi-disciplinary Oxford Project 'To Investigate Memory and Ageing' (OPTIMA) at the Radcliffe Infirmary (1996–2003, Oxford, UK). His role as collaborating investigator to the NIH-funded Maine-Syracuse (USA) longitudinal study of cognition and ageing continues.



SCIENTIFIC AND MEDICAL PANEL

Alzheimer's Australia Research have established a Scientific and Medical Panel chaired by Professor Henry Brodaty until 2010 and Professor Kaarin Anstey from 2011. The role of the Panel is to advise on research priorities and on the latest developments in dementia research worldwide, as well as to assist in the assessment of grant applications.

PROFESSOR KAARIN ANSTEY

Director, Ageing Research Unit
Centre for Mental Health Research
Australian National University

PROFESSOR LYNN CHENOWETH

Professor of Aged and Extended Care Nursing
University of Technology, Sydney
Director, Health and Ageing Research Unit
South Eastern Sydney-Illawarra Area Health Service, NSW

ASSOCIATE PROFESSOR PETER DODD

School of Chemistry and Molecular Biosciences
University of Queensland

PROFESSOR LEON FLICKER

Professor of Geriatric Medicine
Director, Western Australian Centre for Health and Ageing
University of Western Australia

PROFESSOR RHONDA NAY

Professor of Interdisciplinary Aged Care
La Trobe University

PROFESSOR JAMES VICKERS

Chair of Pathology
Head, School of Medicine
University of Tasmania

PROFESSOR RALPH MARTINS

(from January 2011)

Director of Centre of Excellence for Alzheimer's Disease
Research and Care
Foundation Chair of Ageing and Alzheimer's Disease
Edith Cowan University

PROFESSOR DAVID AMES

(from January 2011)

University of Melbourne Professor of Ageing and Health
Director National Ageing Research Institute
National Ageing Research Institute, Royal Melbourne Hospital

PROFESSOR HENRY BRODATY

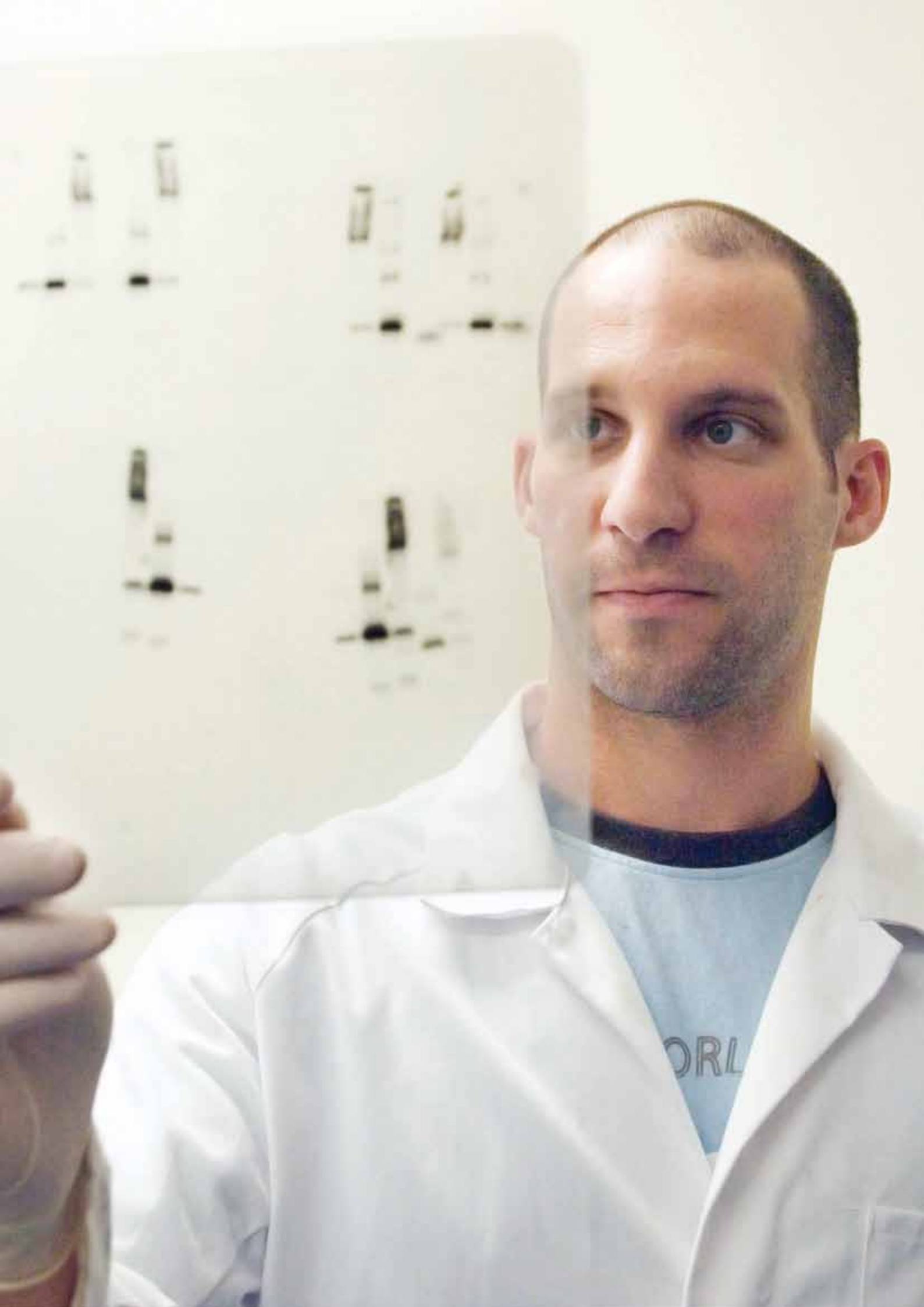
(to December 2010)

Professor of Psycho-geriatrics
University of New South Wales

PROFESSOR COLIN MASTERS

(to December 2010)

Laureate Professor, Department of Pathology
School of Medicine
University of Melbourne



CHAIRMAN'S REPORT



As I reflect on my years as a clinician and researcher, I am struck by how often in the last two decades I and others have predicted that a new dementia drug would reach the market within the next five years.

Even though our knowledge about dementia has increased enormously through research, the five-year horizon appears to recede as fast as we approach it. There are exciting possibilities but I am now more circumspect in making predictions. In the meantime there have been important developments in diagnostic tests and in re-conceptualisation of the nature of Alzheimer's disease.

It is worth a little reflection on how far we have come since 1906, when psychiatrist and neurologist, Dr Alois Alzheimer, described the features of what we now call Alzheimer's disease.

However there was no immediate road to Damascus in dispelling the myth that dementia is an inevitable part of ageing. In fact, the first step on the road was in 1968 when British researchers reported that what had been ignored as merely 'senile dementia' turned out to bear the same pathology as what Alzheimer had described decades earlier.

An explosion of scientific activity in Alzheimer's disease research was ignited in 1986 when William Summers and colleagues reported that a chemical, tacrine, which had earlier been developed in Melbourne and had long been used to reverse the effects of anaesthetics, had the potential to stem the progression of symptoms of Alzheimer's disease.

Although some of this excitement was dampened on more detailed examination of the research, these initial findings were the first to shift the global view of Alzheimer's from an inevitable by-product of ageing to a disease that could potentially be treated.

Australia has punched above its weight in the global dementia research field over the past three decades. Professor Colin Masters, an eminent Australian researcher and former member of AAR's Scientific and Medical Panel, identified the amyloid-protein over 25 years ago in partnership with Professor Beyreuther. The amyloid hypothesis remains the most prominent theory of Alzheimer's pathology today.

Professors Tony Jorm and Scott Henderson led the way in the 1980s in understanding the epidemiology of dementia.

In the field of imaging, the work today of Professor Chris Rowe in Melbourne is ground breaking, and may well lead to better diagnosis of the disease.

The work of Professor Kaarin Anstey at the ANU on prevention is important in helping a wider public to understand the significance of environmental risk factors that can be modified or managed with lifestyle changes.

Dementia care research has made significant progress, including my own work on the beneficial effects of well coordinated support for family carers.

Yet despite making progress in these areas of research, we still await a treatment that can modify the pathology or progression of the disease itself. What we have are four medications which have been on the market for over 10 years and which only treat the symptoms, not the underlying pathology.

It is only through research that new treatments, preventive strategies and better ways to care for people with dementia and support their families will be found. Grants such as those offered by AAR are an important way of attracting new scientists (including social and clinical scientists) to dementia research as a career.

Through my work at AAR, as former Chair of the Scientific and Medical Panel, and Chair of the Board of Directors, I have witnessed many promising researchers establish their careers with the help of our funding. These researchers are contributing to advancing the fight against dementia. More research funds will help us to recruit more to the fight and strengthen their arm.

A handwritten signature in black ink, appearing to read 'H Brodaty'.

Professor Henry Brodaty
Chairman

COMPANY SECRETARY'S REPORT



In early 2011, health and medical research was threatened with significant budget cuts in the 2011–12 federal budget. Thankfully, the federal government responded to public pressure and did not cut funding.

It was a stark reminder of the precarious nature of medical research funding in Australia.

Any funding cut would have set back the medical research industry, and less well resourced areas such as dementia would have been hard hit. As our focus is on capacity-building in dementia research, we rely upon government funding to support researchers to grow and continue their work.

The threat to government funding is another reminder of the importance of corporate and community support for dementia research.

In that context it is pleasing that in a difficult climate the value of the AAR grants program has increased substantially, and, for the first time in 2011, AAR is able to offer over \$1 million to fund dementia research.

Even more importantly, we expect to be able to sustain this growth in research funding over the next three years, with a target of \$3–5million by 2015.

This program in 2011 will provide 16 awards, including project grants, travel grants, awards and fellowships.

The 2010 program was also highly successful. We received 77 applications, and funded a total of 12 awards. Over 30 assessors, as well as our Scientific and Medical Panel, made expert recommendations.

AAR continues to work in partnership with philanthropic organisations to build our funding. In particular, we are very grateful for the ongoing support of Resthaven Inc. and Viertel Foundation, which have both renewed their support for AAR by continuing to name awards. These ongoing partnerships are integral to the stability of AAR.

AAR operates from the Alzheimer's Australia National Office in Canberra. In this way, AAR sits alongside active national advocacy for research and working with the National Health and Medical Research Council, and the Dementia Collaborative Research Centres.

The work of AAR would not be possible without the support of many. Firstly, I would like to acknowledge the support of over 30 members of the dementia research community who assisted by assessing applications. Their expertise and knowledge are invaluable.

I would like to thank the Scientific and Medical Panel for their valuable contribution and commitment. I would also like to thank the members of the Consumer Dementia Research Network for their support and contribution to the grants program in 2011.

Finally, I would like to express my gratitude to Dinusha Fernando, who looked after and nurtured AAR from December 2007 to January 2011 before moving on to postgraduate studies in neuropsychology. I would also like to welcome Katherine Bowditch, new manager of AAR from January 2011.

A handwritten signature in black ink that reads "Glenn Rees". The signature is written in a cursive, flowing style.

Glenn Rees
Company Secretary

A YEAR IN REVIEW: HIGHLIGHTS

FUNDRAISING AND EVENTS

Commonwealth Bank Community Seeds Fundraiser

AAR was chosen alongside six other charities to participate in the Commonwealth Bank Community Seeds Fundraiser. Facebook users were asked to vote for their favourite charity, and for every vote the Commonwealth Bank donated \$5 to that organisation. In total, over \$23,000 was raised for AAR which will be put towards a project grant in 2012.

To promote AAR as part of the fundraiser, the Commonwealth Bank recorded clips and profiles of AAR-funded researchers at the ANU and of group activities at Alzheimer's Australia ACT. Some of the images from this fundraiser can be seen on the front cover of the report.

Forget-me-not Girls Fundraiser

In September 2010, Sophie Pieters-Hawke (granddaughter of Hazel Hawke), Andrea Britz, Annabelle Boyd-Jones and Tess Paul held the first Forget-Me-Not fundraiser. Over 250 people attended the cocktail event in Sydney, and they raised more than \$26,000 for the Hazel Hawke Alzheimer's Research and Care Fund.

To recognise their efforts, the Forget-Me-Not Girls have been selected as Young Ambassadors for Alzheimer's Australia. They will represent and promote the issues that are faced by younger carers of people with dementia.

AAV-AAR joint fundraising event with Susan Greenfield and Ita Buttrose

AAR, in conjunction with Alzheimer's Australia VIC, presented an exclusive luncheon featuring Baroness Susan Greenfield and Alzheimer's Australia National President Ita Buttrose. Ita hosted the event, and the Baroness spoke to an enthralled audience of 80 on the topic *Is human nature about to change forever?* The event was an excellent opportunity to build networks amongst influential members of the Melbourne community.

NEW AWARDS AND PARTNERSHIPS

Viertel Foundation

In 2008, the Sylvia and Charles Viertel Charitable Foundation sponsored a number of postdoctoral fellowships. In 2011, the Viertel Foundation renewed their commitment to dementia research by offering a further three Viertel Foundation Postdoctoral Fellowships and two Viertel Postgraduate Scholarships over the next three years. The first of these awards have been advertised in the 2011 Dementia Grants Program.

Alzheimer's Australia Research is grateful to the Viertel Foundation for their ongoing support and commitment to Australian dementia research.

Resthaven Inc.

In June 2010, AAR entered into a new partnership with Resthaven Inc., a public benevolent aged care community service of the Uniting Church based in South Australia. *The Resthaven Inc. Postgraduate Research Scholarship – Quality in Dementia Care*, is offered in 2011 to support a doctoral student researching quality dementia care.

Resthaven Inc. renewed their support of AAR by making another donation to AAR in June 2011. The details of this award are yet to be determined with Resthaven, but will continue to reflect the shared interests of Resthaven Inc. and AAR.

AAR is grateful to Resthaven Inc. for their ongoing support and contribution to the future of dementia care research in Australia.

WORKING WITH CONSUMERS

Consumer Dementia Research Network

Over the past 12 months AAR has been working with the Alzheimer's Australia Consumer Dementia Research Network (CDRN) to begin focussing some of the research funding administered by AAR on issues of concern to people with dementia and their carers.

The CDRN was established in 2010 in collaboration with the Dementia Collaborative Research Centres (DCRCs) as part of the federal government's Dementia Initiative. In 2010–11, the CDRN has been working closely with AAR to increase consumer involvement



in the Dementia Grants Program, and nominated three areas of research as consumer priority areas. These were:

- dementia-specific respite
- community care for diverse groups, and
- effective programs to support the well-being and health of carers from diagnosis until after their caring roles end.

In 2011, AAR determined that at least one project grant would be directed to these nominated priority areas. Members of the CDRN have been involved in developing the grant application forms and assessing applications from a consumer perspective.

The contribution to assessment of grant applications by the CDRN will complement the rigorous external academic assessments, and provide the Panel with a more holistic view on the merits of each application, ensuring that the very best research is funded, both from an academic and a consumer perspective.

RESEARCH DISSEMINATION

One of the key priorities of AAR is to ensure that accurate and current knowledge about dementia research is shared with the wider community. This includes translating research into practice to ensure best practice care for people living with dementia. In close collaboration with Alzheimer's Australia, research dissemination has occurred through a number of avenues:

Dementia News

Dementia News is a fortnightly e-newsletter that provides a summary of the latest breakthroughs in dementia research. All articles are written in plain English and explain the most complex scientific breakthroughs in an in-depth yet understandable style. *Dementia News* presents an in-depth analysis of the truth behind news reports and links to further reading.

The newsletter is funded by the Dementia Collaborative Research Centres, and anyone interested can subscribe by emailing dementianews@alzheimers.org.au.

NHMRC Workshop

Alzheimer's Australia and the National Health and Medical Research Council (NHMRC) hosted a one-day workshop on 5 July 2011 titled: Translating Dementia Care Research into Better Practice. This workshop focussed on strategies and priorities for translating existing research evidence into improved dementia care practice across Australia.

The workshop involved a mix of presentations and small group workshops. Sessions included:

- Knowledge translation frameworks and strategies
- Successes and failures of knowledge translation in dementia care and other sectors
- Positioning consumers at the centre of knowledge translation activities, and
- Evidence-practice gaps, priorities and opportunities for dementia care knowledge translation in Australia.

The workshop was fully booked, and attendees included some of the most eminent service providers, researchers (many of whom have received funding from AAR), community organisations and policy makers, as well as members of the CDRN.

2010 DEMENTIA GRANTS PROGRAM

The 2010 Dementia Grants Program was a milestone year for AAR. It marked the 100th grant since the program commenced in 1999, and was also the largest year to date in terms of dollar value and number of awards. Seventy-seven applications were received for the 12 available awards. These applications were subject to external review and the successful award recipients were selected by the Scientific and Medical Panel, chaired in 2010 by Professor Henry Brodaty.

AAR continued to offer named awards, funded by the Rosemary Foundation, the Hazel Hawke Alzheimer's Research and Care Fund, and the Hunter Bequest.

A summary of grant recipients can be found in the following table. Full project summaries can be found on page 19.

Table 1. Summary of AAR Dementia Grants Program Recipients 2010

AAR Dementia Research Grants			
Name	University/Institution	Amount	Project Title
Mr Florian Gebhardt	The University of Queensland	\$21,000	Role of aberrant glutamate transporters in Alzheimer's disease
Dr Morgan Newman	The University of Adelaide	\$22,848	Definition of the critical region for truncation of Presenilin 1 which results in upregulation of γ -secretase activity
Miss Megan Steele	University of Western Sydney	\$25,000	Glutathione delivery of astrocytes to neurons as a target for therapeutic intervention in Alzheimer's disease
Dr Eneida Mioshi	Neuroscience Research Australia	\$22,000	Improving carers' coping skills in frontotemporal dementia
Dr Philippe Lacherez	The University of Queensland	\$21,000	Enhancing driving safety and self-awareness among older cognitively impaired drivers via functional assessment
Hunter Research Grant into the causes of Alzheimer's disease			
Dr Adele Vincent	Menzies Research Institute	\$22,048	Do calcium blocker drugs prevent Alzheimer's disease in a transgenic mouse model?
Hazel Hawke Research Grant in Dementia Care			
Dr Maria Kangas	Macquarie University	\$24,980	Treatment of anxiety and depression in distressed carers for persons with dementia-related disorders
Dr Karen Croot	University of Sydney	\$22,728	The right word at the right time: keeping communication going in progressive aphasia
AAR Postdoctoral Fellowship in Dementia (2 years)			
Dr Anna King	Menzies Research Institute	\$45,000pa	Myelin loss in Alzheimer's disease
Dr Robert Gasperini	Menzies Research Institute	\$45,000pa	The role of calcium in the progression of dementia
Rosemary Foundation Travel Grant			
Dr Rachel Carling-Jenkins	Monash University	\$15,000	Caring for people with Down syndrome and Alzheimer's disease: An international collaboration and training package development
AAR Postgraduate Scholarships (3 years)			
Ms Joanne Mihelcic	Monash University	\$30,000pa	The Storyline Project: Determining a therapeutic use for the personal archive in aged care and dementia
AAR/DCRC-CC Joint Postgraduate Research Scholarship (3 years)			
Ms Claudia Meyer	La Trobe University	\$30,000pa	Knowledge translation of falls prevention strategies in people with dementia and their carers: What works?
Ms Linda McAuliffe	La Trobe University	\$30,000pa	Stress and health in spouses of people with early-stage Alzheimer's disease: The effects of a memory training intervention

THE HAZEL HAWKE ALZHEIMER'S RESEARCH AND CARE FUND

BACKGROUND

The Hazel Hawke Alzheimer's Research and Care Fund was established in 2004 at the expressed wish of Hazel Hawke, who chose to make public the fact that she is living with Alzheimer's disease, in late 2003.

In 2004, Hazel's daughter Sue Pieters-Hawke co-authored a book with Hazel Flynn called *Hazel's Journey: A personal experience of Alzheimer's*. Money from each copy sold goes to the Hazel Hawke Alzheimer's Research and Care Fund.

HAZEL HAWKE RESEARCH GRANTS IN DEMENTIA CARE

An initial round of funding distributed \$172,500 to a number of care-related projects across Australia. For example, \$20,000 helped to develop further resources for carers in languages other than English.

Since that time, funds raised by the Hazel Hawke Research and Care Fund have been put towards individual research grants valued between \$10,000 and \$30,000.

Alzheimer's Australia Research is grateful for the ongoing support of Sue Pieters-Hawke, and more recently, Sophie Pieters-Hawke, Hazel's granddaughter, who has been involved in fundraising activities through the Forget-Me-Not Girls.

PROFILES OF 2010 GRANT RECIPIENTS

AAR DEMENTIA RESEARCH GRANTS

The AAR Dementia Research Grants are seeding grants for new researchers. They are awarded for research in a dementia-relevant area, including both biological and psychosocial research.



FLORIAN GEBHARDT

Associate Professor Peter Dodd
University of Queensland

Role of aberrant glutamate transporters in Alzheimer's disease

Examination of an Alzheimer's disease brain shows characteristic pathological features, including amyloid plaques, neurofibrillary tangles and major, but localised, cell death. The purpose of Mr Gebhardt's project is to study the mechanisms behind this cell death.

It has been hypothesised that excessive amounts of glutamate, an excitatory neurotransmitter, lead to cell death. Normally, extracellular glutamate levels are tightly controlled through the action of glutamate transporters. There is evidence that glutamate transport is damaged in AD. This study will examine where this aberrant transport occurs, to gain better insight into the consequences of excessive glutamate levels in the brain.



DR MORGAN NEWMAN

Dr Michael Lardelli
University of Adelaide

Definition of the critical region for truncation of Presenilin 1 which results in upregulation of γ -secretase activity

The small amyloid- β protein is toxic and forms clumps in the brains of people suffering Alzheimer's disease. Amyloid- β is 'cut' out from a larger protein, named APP, by the action of the Presenilin proteins. Changes in the Presenilins that alter amyloid- β production can cause Alzheimer's disease.

Zebrafish are small fish often found in home aquariums but also commonly used in medical research. Dr Newman will study their tiny, insect-like young to test the effects of changes in different regions of the Presenilin proteins. Understanding how such changes affect Presenilin function can help development of new therapies to fight Alzheimer's disease.



MEGAN STEELE

Associate Professor Gerald Münch, Dr Cindy Kersaitis,
Dr Gilles Guillemin
University of Western Sydney

Glutathione delivery of astrocytes to neurons as a target for therapeutic intervention in Alzheimer's disease

Astrocytes constitute over 50% of the total number of cells in the brain. They have an important role in providing neurons with the substances they require for energy metabolism, cell to cell communication and cellular defence against destructive free radicals and inflammatory factors. This project will investigate whether inflammation-stressed astrocytes neglect their neuron-supportive functions, particularly helping neurons in fighting off dangerous free radicals, thereby making neurons more vulnerable to cell death as seen in Alzheimer's disease. This research will provide a better understanding of the role astrocytes play in neuroprotection and in Alzheimer's disease and provide novel drugs for its treatment.



DR ENEIDA MIOSHI

Ms Colleen McKinnon, Professor John Hodges
Neuroscience Research Australia – NeuRA

Improving carers' coping skills in frontotemporal dementia

The caregivers of patients with all forms of dementia suffer from considerable distress. This is particularly true for the type of dementia which affects the frontal and temporal lobes of the brain, known as frontotemporal dementia.

Dr Mioshi aims to reduce stress and burden in caregivers of patients with frontotemporal dementia, the second most common cause of dementia, using a newly advocated structured psychoeducational approach, which has been successful in Alzheimer's disease. In this project, Dr Mioshi will measure stress, burden, mood and quality of life before and after the intervention. This will help in the production of self-help literature.

HUNTER RESEARCH GRANT INTO THE CAUSES OF ALZHEIMER'S DISEASE



DR PHILIPPE LACHEREZ

Professor Joanne Wood, Professor Kaarin Anstey
Queensland University of Technology

Enhancing driving safety and self-awareness among older cognitively impaired drivers via functional assessment

The objective of this study is to improve the driving safety of older adults with dementia, allowing them to drive safely for longer, thereby extending their independence and quality of life. This study will also identify those who are less safe, allowing them to reduce or cease driving.

The aim of this project is to ascertain how well older people with declining cognitive abilities are able to assess their own driving skills, and whether this understanding can be improved by providing them with objective information about their abilities. Giving older drivers clear feedback about their driving abilities should enable them to make more informed decisions about their driving practices.



DR ADELE VINCENT

Dr Robert Gasperini
Menzies Research Institute

Do calcium blocker drugs prevent Alzheimer's disease in a transgenic mouse model?

Alzheimer's disease is the leading cause of dementia in the elderly. Currently there is no cure. Alzheimer's disease is caused by the accumulation of amyloid protein in the brain, which is associated with progressive memory loss. Dr Vincent and colleagues have discovered that two drugs are able to prevent the damage that amyloid causes to nerve cells growing in culture dishes. These drugs will be tested in a mouse model of Alzheimer's disease. It is expected that these drugs will prevent memory decline in mice with Alzheimer's disease, and may therefore become important candidates for clinical trials in patients with Alzheimer's disease.

Over the past 14 years Dr Vincent has conducted research in various fields of neuroscience, including the olfactory system, spinal cord injury, neuroimmunology, neural development, stroke, and currently, Alzheimer's disease. She did her PhD at the University of Tasmania and postdoctoral research at the University of British Columbia, Vancouver, Canada.

HAZEL HAWKE RESEARCH GRANTS IN DEMENTIA CARE

The aim of these grants is to provide funding for research into dementia care. Funding is made available for these awards from the Hazel Hawke Alzheimer's Research Care Fund.



DR MARIA KANGAS

Professor Skye McDonald
Macquarie University

Treatment of anxiety and depression in distressed carers for persons with dementia-related disorders

Carers for persons with dementia are at risk of suffering from anxiety and depression. The aim of this study is to evaluate the effects of a new psychological therapy program for anxiety and depressive problems among adult carers for people with dementia. If this program is proven beneficial in enhancing the quality of life of carers, it will have a significant role in maintaining the well-being of carers. With the rapid ageing of the population, this research is timely in order to enhance the well-being of carers, and strengthen Australia's social and economic fabric.



DR KAREN CROOT

Professor Lyndsey Nickels, Ms Cathleen Taylor
University of Sydney

The right word at the right time: keeping communication going in progressive aphasia

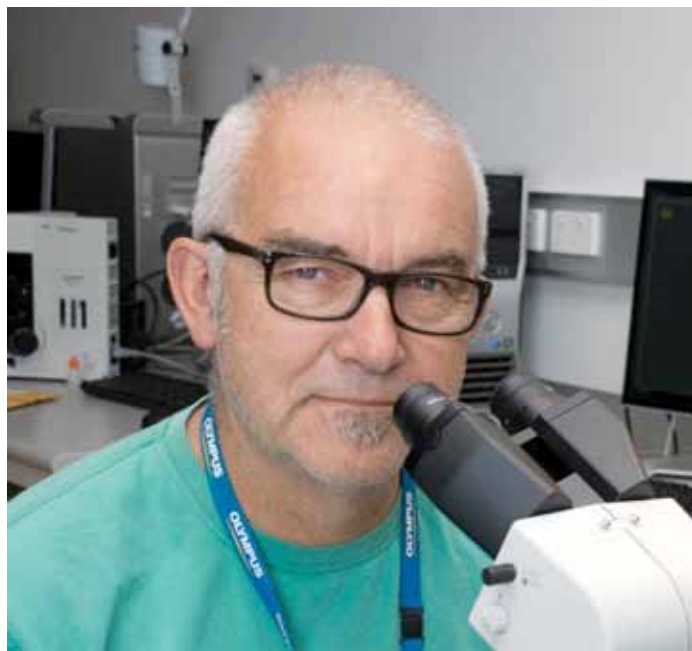
People with dementia have trouble retrieving, from their mental dictionary, the words they need to communicate. This study aims to treat the word-finding difficulties of people who have progressive aphasia, a worsening of language abilities over time caused by Alzheimer's disease or frontotemporal dementia.

Under the supervision of an experienced speech pathologist, participants will use a computer program at home to practise retrieving words that are personally relevant for them. This therapy is expected to improve participants' ability to use these important words in conversation, and to reveal factors associated with successful treatment of word-finding difficulties in different dementia types.

This project contributes to the establishment of a speech pathology management pathway for people with progressive aphasia in Australia and internationally. Establishing these services will help to ensure that families and healthcare services, in cooperation with people with progressive aphasia, understand the nature of the problems, facilitate communication skills, maximise communication opportunities, and optimise quality of life.

POSTDOCTORAL FELLOWSHIPS

AAR Postdoctoral Fellowships in dementia are offered to support PhD graduates undertaking research in an area related to dementia.



DR ROBERT GASPERINI

Professor David Small
Menzies Research Institute

The role of calcium in the progression of dementia

By 2030, almost half a million Australians will be suffering from dementia. Current research into treatments to prevent the dementias seen in Alzheimer's disease focus on the degenerative changes to neurons exposed to amyloid protein. It is known that alterations to calcium levels lead to cell death, leading to critical changes in brain circuitry that causes dementia. This project will examine the interaction between amyloid and calcium levels in brain cells.



DR ANNA KING

Dr Tracey Dickson
Menzies Research Institute

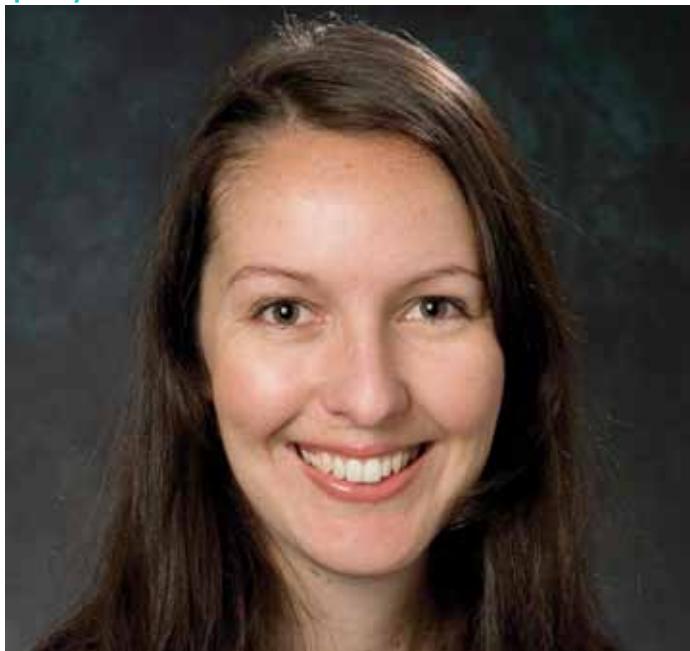
Myelin loss in Alzheimer's disease

Dementia is fast becoming a pressing public health issue as the population ages. Alzheimer's disease, the most common cause of dementia, is the result of toxic protein accumulations in the brain damaging the nerve cell processes. These processes are usually covered by a protective sheath but recently it has been shown that this sheath is lost in Alzheimer's disease. Using both human tissue and cell culture models, this project will investigate whether loss of the protective sheath is the cause of the damage to nerve cells. This may lead to novel therapeutic interventions directed at preventing the loss of the sheath.

Dr Anna King completed her honours degree at Durham University in the UK, before moving to Australia. She completed her PhD at the University of Tasmania. During her PhD and early postdoctoral career she developed a number of skills and techniques to use in the investigation of the vulnerability of nerve processes to damage in disease. Her work has identified the role of the cells surrounding the nerve processes to this damage. Recently, through work with the Wicking Dementia Research and Education Centre, Dr King has gained a particular interest in dementia research and using her skills to investigate the cause of nerve degeneration in this devastating condition.

AAR/DCRC-CC JOINT POSTGRADUATE RESEARCH SCHOLARSHIPS FOR RESEARCH FOCUSSED ON QUALITY IN DEMENTIA CARE

AAR and the Dementia Collaborative Research Centre – Carers and Consumers (DCRC-CC) offered two postgraduate scholarships to support PhD students undertaking research in areas relevant to the improvement of quality of life and quality of care in dementia.



LINDA MCAULIFFE

La Trobe University

Stress and health in spouses of people with early-stage Alzheimer's disease: The effects of a memory training intervention

The stress and burden caregivers experience when caring for a relative experiencing dementia can have serious negative effects on a caregiver's psychological and physical health. This includes an increased risk of developing depression, even in the early stages of the relative's dementia. This study will aim to investigate the factors that contribute to perceived stress in older people with a spouse who is experiencing memory difficulties. An expected outcome is that early training in the use of memory strategies will help increase feelings of control and improve quality of life in spouses of people experiencing memory difficulties.

Linda McAuliffe is a Research Officer at the Australian Centre for Evidence-Based Aged Care at La Trobe University, Melbourne, Australia. She is also a registered psychologist. Linda's research interests include the effects of dementia caregiving on psychological and physical health outcomes; pain assessment in older adults with dementia; and sexuality in the residential aged care setting. She has published several peer-reviewed journal articles and book chapters, and has presented research findings at conferences nationally and internationally.



CLAUDIA MEYER

La Trobe University

Knowledge translation of falls prevention strategies in people with dementia and their carers: What works?

People with dementia and their carers are entitled to quality care allowing them, in turn, to improve their quality of life. Preventing falls among those with dementia in the community is a clear part of the care continuum, given that falls and falls-related injuries are higher for those with dementia. The falls prevention message needs to be crafted and delivered in a manner that suits an individual's receptiveness to changing their behaviour. This project aims to find out which methods are most suitable for changing behaviours regarding falls prevention, carefully considering the individual needs of the person with dementia and their carer.

Claudia draws on her extensive physiotherapy clinical experience, together with her research experience, to address a key interest of bridging the knowledge gap between research and practice. She has both a personal and a professional interest in working with people with dementia and their carers, and feels privileged to be able to spend the next three years sharing their experiences, while completing her PhD.

AAR POSTGRADUATE SCHOLARSHIP IN DEMENTIA

This scholarship is offered by AAR to support a PhD student undertaking research in an area related to dementia.

ROSEMARY FOUNDATION TRAVEL GRANT

AAR provides travel grants, funded by the Rosemary Foundation, to learn about cutting-edge advances in international dementia research, showcase emerging Australian research, and build connections with the international scientific community.



JOANNE MIHELICIC

Monash University

The Storyline Project: Determining a therapeutic use for the personal archive in aged care and dementia

The Personal Archive is an electronic register of stories and images which represent autobiographical memories. Its purpose is to preserve personal memory and identity for the individual, family and carers. A grounded theory approach, in-depth interviews with people with early stage Alzheimer's disease, and a process for ongoing consent will be used to build their personal archive.

This research addresses the following questions:

- What do I want to tell myself and others when I can't remember?
- What do I want to take with me or tell others about me when I can't express that for myself anymore?
- What are the questions that need to be considered in the creation of this type of personal record so that they can be shared and managed?

Joanne Mihelcic's achievements for 2010 include presenting at high profile conferences across research disciplines. She has developed supportive relationships both nationally and internationally with researchers in medical disciplines who are also thinking about the use of information in the context of health and well-being.



DR RACHEL CARLING-JENKINS

Monash University

Caring for people with Down syndrome and Alzheimer's disease: An international collaboration and training package development

There is an increasing population of Australians with Down syndrome who are developing Alzheimer's disease. A lack of knowledge of this area has led to haphazard policies and inconsistent practice, as revealed in previous research conducted by myself and the team at my Centre (the Centre for Developmental Disability Health Victoria). In the UK however, many initiatives have been undertaken which have sought to demystify Alzheimer's disease in people with Down syndrome, approach care consistently and expertly, and contribute to the making of clear policy guidelines for care.

By undertaking a month's research in the UK, Dr Carling-Jenkins will have the opportunity to learn and observe these initiatives; and build relationships with UK experts with the potential to collaborate on comparative studies. As a result of this research, she will develop a training package for application in Australia which will equip carers working with people with Down syndrome and Alzheimer's disease.

PREVIOUS AWARD RECIPIENTS

A selection of continuing and recently completed projects from previous award recipients

AAR POSTDOCTORAL FELLOWSHIP IN DEMENTIA 2009



DR RENATE ZILKINS

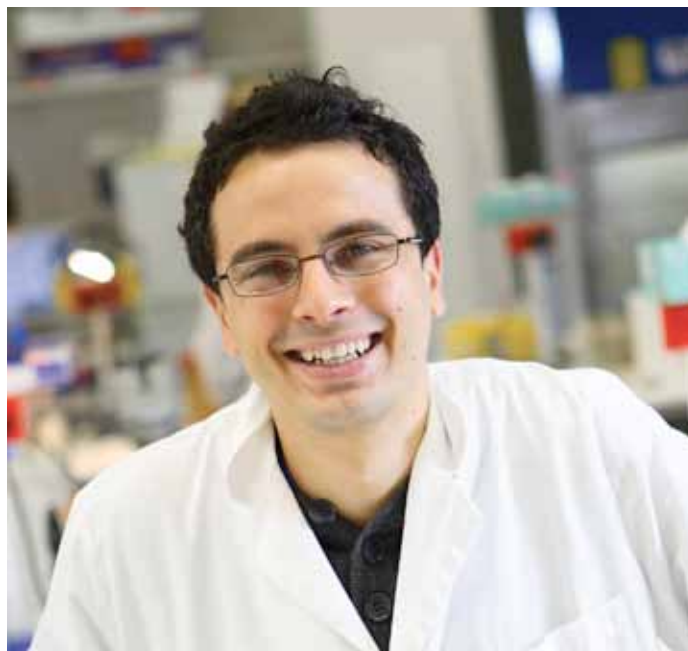
Curtin University

Medication and hospital use in Western Australians with Alzheimer's disease

Dr Zilkens and team identified dementia cases through WA health records including hospital (inpatient, emergency and outpatient mental health) and death records. Over 26,000 Western Australians with dementia documented between 2000 and 2009 have been age- and sex-matched to a person without dementia from the electoral roll.

Linked historical health records have been used to study whether a history of depression, diabetes and stroke are associated with an increased risk of developing dementia. The health records of patients from the date of diagnosis of dementia onwards will be used to study co-morbid mental health conditions in dementia patients requiring hospitalisation and outpatient management. The reasons for emergency department admissions and outcomes of those with dementia will be compared to those in the control group. The project will provide critical information for strategic sustainable healthcare planning and assist in the development of dementia-specific healthcare policies.

In 2011, Dr Zilkens has secured an NHMRC Project Grant valued at more than \$180,000 to continue her research on dementia at a population level.



DR JEROME STAAL

Investigating the critical early brain changes of Alzheimer's disease

Dr Staal has looked into developing reliable models that can allow his research group to clearly investigate the early stages of amyloid- plaque formation, which occurs prior to symptom onset but subsequently influences Alzheimer's disease progression. One model developed involves culturing explants of brain tissue on a membrane substrate that is capable of being observed continuously under a microscope. Soluble amyloid- is added to these brain tissue cultures and left for an extended period of time. Excitingly, Dr Staal discovered that insoluble plaques formed and more importantly, in a pattern that is similar to that seen in clinical cases of Alzheimer's disease. Dr Staal now has a platform to investigate in greater detail the early pathological changes that occur prior to disease symptom onset.

Dr Staal has published in several notable journals, including the *Journal of Neurotrauma* in 2011. He was also awarded the Tasmanian Young Tall Poppy of the Year (2010) from the Australian Academy for Science and has participated widely in community science talks.

Dr Staal has recently accepted a National Health and Medical Research Council CJ Martin Postdoctoral Fellowship. These prestigious fellowships are offered each year to a limited number of researchers of outstanding ability who wish to make biomedical research a significant component of their career. As part of this four-year fellowship, Dr Staal will be taking up a position with the National Institute of Health in Bethesda, USA. This is a fantastic opportunity and he is very excited at the prospects this will offer him. Jerome has relinquished his AAR fellowship to take up this award, and AAR is pleased to have supported such a promising researcher early in his career.

HAZEL HAWKE RESEARCH GRANT IN DEMENTIA CARE 2009

ROSEMARY FOUNDATION TRAVEL GRANT 2009



KAREN SULLIVAN

Professor Elizabeth Beattie, Dr Nigar Khawaja,
and Dr Gabriele Wilz
Queensland University of Technology

Good idea! The Dementia Carers' Healthy Thinking Project

The Dementia Carers' Healthy Thinking project is continuing towards its objective of developing a tool that may help identify negative thoughts.

Negative thoughts affect all of us from time to time, but sometimes they can become overwhelming. When negative thoughts become overwhelming they may affect our health or our ability to provide care for others, and they can lead to depression. Some negative thoughts can be changed; for example, with help we may be able to learn to view a situation differently. Thus it may be possible to turn negative thoughts into healthy thinking.

The aim of this project was to determine if Australian dementia carers, like carers of people with other conditions such as stroke, experience negative thoughts. Through an examination of the literature, and by analysis of focus group data, they have identified the main themes around which negative thoughts might emerge for dementia carers. Expert input into these themes has now been gathered, and the new measures will be trialled with carers in the next six months.



CATHLEEN TAYLOR

War Memorial Hospital

Improving communication in dementia: Identifying resources for Australian carer and patient programs

In some types of dementia, the ability to communicate is lost first. In others, communication breakdown accompanies other cognitive changes. This affects all parts of life: relationships, jobs, leisure and everyday activities. People can be helped with treatments and education. Families who understand their loved ones' communication problems are better able to maintain communication, and have a better quality of life. Excellent programs exist in the US and Cathleen Taylor visited three leading research centres that provide these types of programs, namely, Northwestern University in Chicago, the University of California, San Francisco and the Massachusetts General Hospital in Boston.

Ms Taylor also had many opportunities to talk with families about the positive benefits of education, support and appropriate tailored services for them and their loved ones. Through her observation and talking with expert researchers and clinicians, Ms Taylor is now better able to develop the services that are needed in Australia.

Ms Taylor also attended the major international conference on frontotemporal dementia. The scientific program and the innovative caregiver program afforded further opportunities for her to develop her skills as a clinician working with people with language impairment as part of dementia. Ms Taylor has a strong commitment to providing excellent speech and language interventions, education and support programs to this group of people and their families and to develop resources that can be used by other speech pathologists and healthcare providers across Australia. Following this study tour she is better equipped to achieve this.

AAR DEMENTIA RESEARCH GRANT 2008

SYLVIA AND CHARLES VIERTEL POST-GRADUATE RESEARCH SCHOLARSHIP IN DEMENTIA 2007



LENKA MUNOZ

Dr Alaina Ammit and Dr Gilles Guillemain
University of Sydney

Integrating chemistry and biology in the search for new therapeutics for Alzheimer's disease

Alzheimer's disease (AD) is characterised by a loss of synaptic plasticity and neuronal death, which manifest as loss of memory and cognitive function. Research has shown that unregulated, excessive activity of a protein called p38 MAPK is involved in these processes and significantly contributes to the manifestation of Alzheimer's disease. Thus, drugs that can switch off the activity of p38 MAPK protein are likely to slow down the progress of AD. The AAR grant allowed the research team to develop a unique assay that measures the strength by which a chemical compound (potential drug) binds to the p38 MAPK, and thus is a measure of p38 MAPK activity inhibition.

Using this assay Dr Munoz has collaborated with colleagues at prestigious Northwestern University (USA) on development of novel compounds that potently switch off the p38 MAPK protein and the most promising compounds are currently in further development as future drugs for AD. With the help of this grant and with this assay Dr Munoz and colleagues have established a novel drug discovery platform that guides us in our ongoing research to identify and develop new drugs against AD.



HOLLY YEATMAN

University of Melbourne and the Howard Florey Institute

The use of small molecule IRAP inhibitors for treating dementia in Alzheimer's disease

Insulin regulated aminopeptidase (IRAP) is an enzyme located in specific brain regions known to be important for memory formation. Miss Yeatman's laboratory has shown that blocking IRAP using a specific drug can improve memory in rats. She hypothesised that IRAP-blocking drugs might be useful in conditions such as Alzheimer's disease (AD), in which memory function is drastically impaired. The function of IRAP in AD could be different to its usual role; therefore the aim of her project was to explore the relationship between IRAP and changes in the brain caused by AD.

Miss Yeatman has looked in the brains of mice with AD-like symptoms and discovered that IRAP is found in a specific cell type restricted to regions heavily affected by the disease. These cells respond to toxic protein deposits in the brain, which are characteristic of Alzheimer's disease, by sealing off the area to limit spread of the damage. Chronic blockade of IRAP in these mice changed the profile of toxic protein deposits, although whether this resulted in improvements in behaviour is yet to be resolved.

Miss Yeatman has recently attended conferences in California and Paris, where she has given poster presentations.

JOINT AAR/DCRC POSTGRADUATE RESEARCH SCHOLARSHIP IN SOCIAL RESEARCH AND DEMENTIA 2006



EMILE WERDEN

University of Melbourne

Arbitrary associative learning as a candidate cognitive endophenotype for sporadic Alzheimer's disease

In order to take full advantage of current drug treatments for late-onset Alzheimer's disease (AD), physicians need a way to identify potential sufferers of the condition at the earliest possible stage. One way to do this is to study the cognitive profiles of healthy, middle-aged people who are at risk of developing AD, including children of people with AD and people who have the apolipoprotein $\epsilon 4$ gene.

The aim of Emile Werden's research project was to examine whether problems with a specific memory function, called arbitrary associative memory (AAM), are present in these groups. His project employed associative cued-recall tasks that are commonly used in the elderly and AD populations. He has also developed a series of associative recognition tasks, which, in theory, are suited to the early detection of dementia. Emile is currently in the middle stages of recruitment for his third and final study.

If problems with AAM are found in children of people with AD, this type of new learning, along with other cognitive and behavioural measures, might be used to screen for dementia in the elderly.



PATRICIA SHUTER

Queensland University of Technology

Predictors of complicated grief and health outcomes of family caregivers of people with dementia following bereavement

Some factors, including anticipatory and complicated grief, associated with the role of being a caregiver for a person with dementia, are known to contribute to risk of negative health outcomes prior to, and following, the death of the relative with dementia.

This PhD research project aimed to determine risk and protective factors for health outcomes of these caregivers. The research consisted of a qualitative scoping study and a prospective cohort follow-up study. The scoping study involved semi-structured interviews with family caregivers, and the results informed data collection for the second prospective cohort follow-up study. This study consisted of postal surveys administered prior to the death of the relative with dementia (pre-bereavement baseline), six weeks post-bereavement, and six months post-bereavement.

Results indicated that emotional and psychological issues present a greater health burden than day to day physical tasks of caregiving. Perceived subjective burden and anticipatory grief contributed significantly to caregiver health outcomes prior to bereavement. Post bereavement data analysis is currently underway.

The preliminary findings highlight a potential opportunity to develop targeted, preventive interventions to ameliorate the consequences of anticipatory grief and perceived subjective burden, both of which are amenable to intervention.

2011 DEMENTIA GRANTS PROGRAM

The 2011 Dementia Grants Program offered a wide range of research grants, including new investigator grants, travel grants, grants in dementia care, postgraduate research scholarships and postdoctoral fellowships. The grants and fellowships were advertised in February 2011 and applications closed mid-April 2011. After assessment by external expert reviewers, the successful applicants shall be chosen by the Scientific and Medical Panel and the AAR Board in August 2011. The scholarships round will open in September 2011 and selection will be made in December 2011. The awards offered in the 2011 Dementia Grants Program are listed below.

AAR DEMENTIA RESEARCH GRANTS

The AAR Dementia Research Grants are seeding grants for new researchers, valued at up to \$30,000, to be allocated for research in a dementia-relevant area. Grants are awarded for both biological and psychosocial research, and there are five grants available in 2011.

HAZEL HAWKE RESEARCH GRANTS IN DEMENTIA CARE

Two grants are offered in this category, which provides up to \$30,000 for research into dementia care. Suitable projects include research into carer support, best quality care practices, activities and non-pharmaceutical therapies for people with dementia, or any other aspect of dementia care research.

ROSEMARY FOUNDATION TRAVEL GRANT

AAR and the Rosemary Foundation are offering one travel grant valued at \$15,000 to enable an Australian researcher or clinician to travel overseas for a period of approximately one month, and learn new techniques and/or network with well-known international research teams at a hospital or university outside Australia.

AAR POSTDOCTORAL FELLOWSHIPS IN DEMENTIA

AAR is offering three postdoctoral fellowships valued at \$45,000 per annum each (matched by the applicant's institution) for two years, to support PhD graduates undertaking research in an area related to dementia.

VIERTEL FOUNDATION FELLOWSHIP IN DEMENTIA

The Viertel Foundation has provided the funding for one fellowship, valued at \$45,000 per annum (matched by the applicant's institution) for two years, to support PhD graduates undertaking research in an area related to dementia.

AAR POSTGRADUATE SCHOLARSHIP IN DEMENTIA

AAR is offering three postgraduate scholarships each valued at \$30,000 per annum for three years, to support a PhD student undertaking research in an area related to dementia.

VIERTEL FOUNDATION POSTGRADUATE SCHOLARSHIP IN DEMENTIA

The Viertel Foundation is supporting one postgraduate scholarship valued at \$30,000 per annum for three years, to support a PhD student undertaking research in an area related to dementia.

RESTHAVEN INC. POSTGRADUATE SCHOLARSHIP - QUALITY IN DEMENTIA CARE

Resthaven Inc. is supporting one postgraduate scholarship valued at \$30,000 per annum for three years, to support a PhD student undertaking research in an area related to quality in dementia care.



FINANCIAL REPORT

Alzheimer's Australia Research Ltd.
ABN 79 081 407 534
Financial Report

For the year ended 30 June 2011

Financial information was extracted from the audited financial statements of Alzheimer's Australia Research Ltd., for the year ended 30 June 2011 and is included here for information purposes only.

A full copy of Financial Statements, including Notes to the Financial Statements and the Audit Opinions, can be obtained free of charge on request from:

Alzheimer's Australia Research Ltd
1 Frewin place
Scullin ACT 2614

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF ALZHEIMER'S AUSTRALIA RESEARCH LIMITED

Report on the financial report

We have audited the accompanying financial report of Alzheimer's Australia Research Limited (the entity), which comprises the balance sheet as at 30 June 2011, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory notes and the directors' declaration.

Directors' responsibility for the financial report

The directors of the entity are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards - Reduced Disclosure Requirements and the *Corporations Act 2001* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor's responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
ALZHEIMER'S AUSTRALIA RESEARCH LIMITED
(CONTINUED)**

Independence

In conducting our audit, we have complied with the independence requirements of the *Corporations Act 2001*.

Auditor's opinion

In our opinion the financial report of Alzheimer's Australia Research Limited is in accordance with the *Corporations Act 2001*, including:

- (a) giving a true and fair view of the consolidated entity's financial position as at 30 June 2011 and of its performance for the year ended on that date; and
- (b) complying with Australian Accounting Standards – Reduced Disclosure Requirements and the *Corporations Regulations 2001*.

BUSINESS ADVISORY SERVICES

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INSOLVENCY SERVICES

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Shane Bellchambers, CA
Registered Company Auditor
PricewaterhouseCoopers

Dated this 4th day of November 2011
Canberra, ACT

ALZHEIMER'S AUSTRALIA RESEARCH LIMITED
ABN 79 081 407 534

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2011

	Note	2011 \$	2010 \$
Revenue	2	738,339	2,833,207
Employee benefits expense	3	(35,253)	(32,700)
Grants issued	3	(499,168)	(715,256)
Other expenses		(29,417)	(28,424)
		<hr/>	<hr/>
Profit for the year		174,501	2,056,827
Other comprehensive income		<hr/> -	<hr/> -
Total comprehensive income for the year		<hr/> 174,501	<hr/> 2,056,827

The accompanying notes form part of this financial report.

ALZHEIMER'S AUSTRALIA RESEARCH LIMITED
ABN 79 081 407 534

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2011

	Note	2011 \$	2010 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	4	1,557,620	1,559,464
Trade and other receivables	5	<u>61,132</u>	<u>17,893</u>
TOTAL CURRENT ASSETS		<u>1,618,752</u>	<u>1,577,357</u>
NON-CURRENT ASSETS	-		
Financial assets	6	<u>2,221,569</u>	<u>2,100,691</u>
TOTAL NON-CURRENT ASSETS		<u>2,221,569</u>	<u>2,100,691</u>
TOTAL ASSETS		<u>3,840,321</u>	<u>3,678,048</u>
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	7	24,986	13,862
Other current liabilities	8	<u>555</u>	<u>23,907</u>
TOTAL CURRENT LIABILITIES		<u>25,541</u>	<u>37,769</u>
TOTAL LIABILITIES		<u>25,541</u>	<u>37,769</u>
NET ASSETS		<u>3,814,780</u>	<u>3,640,279</u>
EQUITY			
Retained Earnings		<u>3,814,780</u>	<u>3,640,279</u>
TOTAL EQUITY		<u>3,814,780</u>	<u>3,640,279</u>

The accompanying notes form part of this financial report.

ALZHEIMER'S AUSTRALIA RESEARCH LIMITED
ABN 79 081 407 534

DIRECTORS' DECLARATION

The directors of the entity declare that:

1. The financial statements and notes, as set out on pages 6 to 19 are in accordance with the *Corporations Act 2001*, and:
 - a. comply with Australian Accounting Standards; and
 - b. give a true and fair view of the financial position as at 30 June 2011 and of the performance for the year ended on that date of the entity;
2. In the directors' opinion there are reasonable grounds to believe that the entity will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

Sign



Name

Glenn Rees

Date

2nd NOVEMBER 2011

Sign



Name

DAPHNE KAYE PRITCHARD

Date

2nd NOVEMBER 2011

