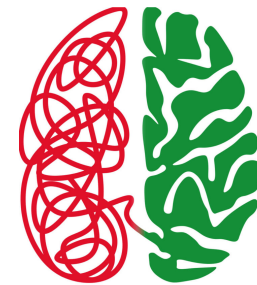


A systems-based model of cognitive decline

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**ALZHEIMER'S
PREVENTION:
NEW FRONTIERS**

THE LANCET

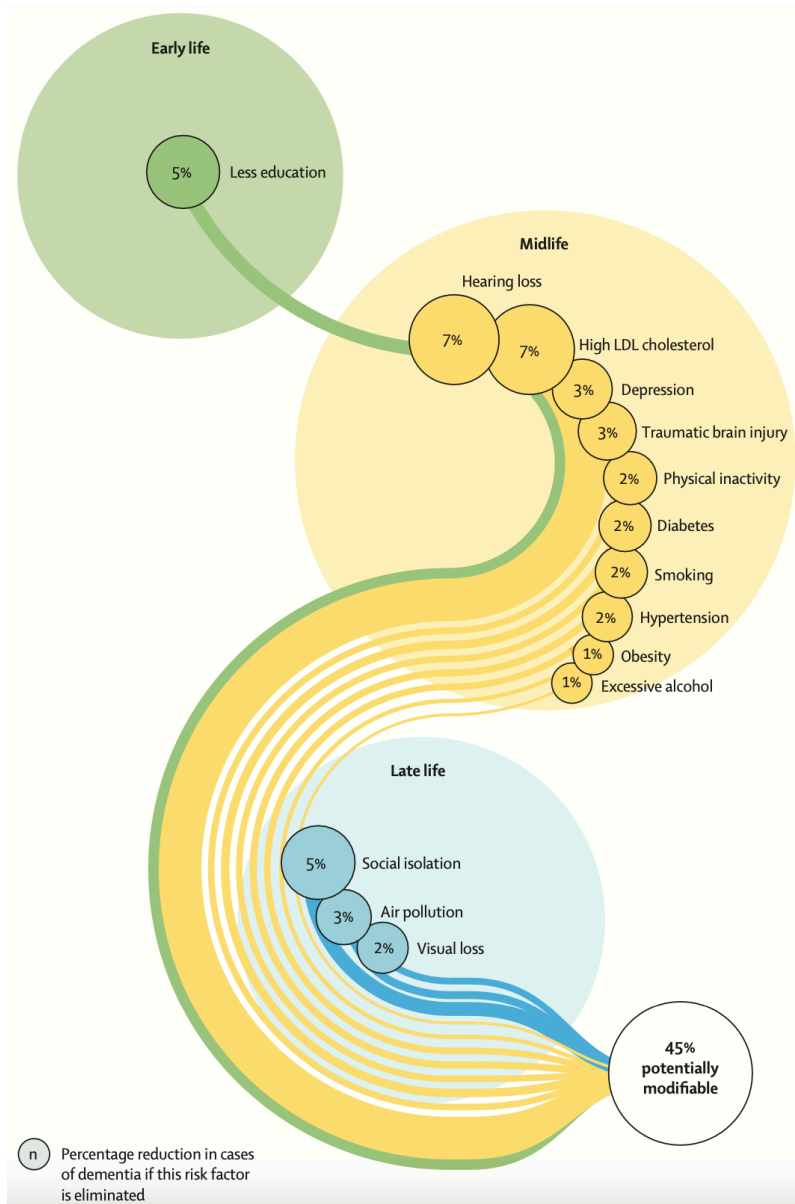
Volume 396 · Number 10 248 · Pages 361–446 · August 8–14, 2020

www.thelancet.com

“It is never too early and never too late in the life course for dementia prevention.”

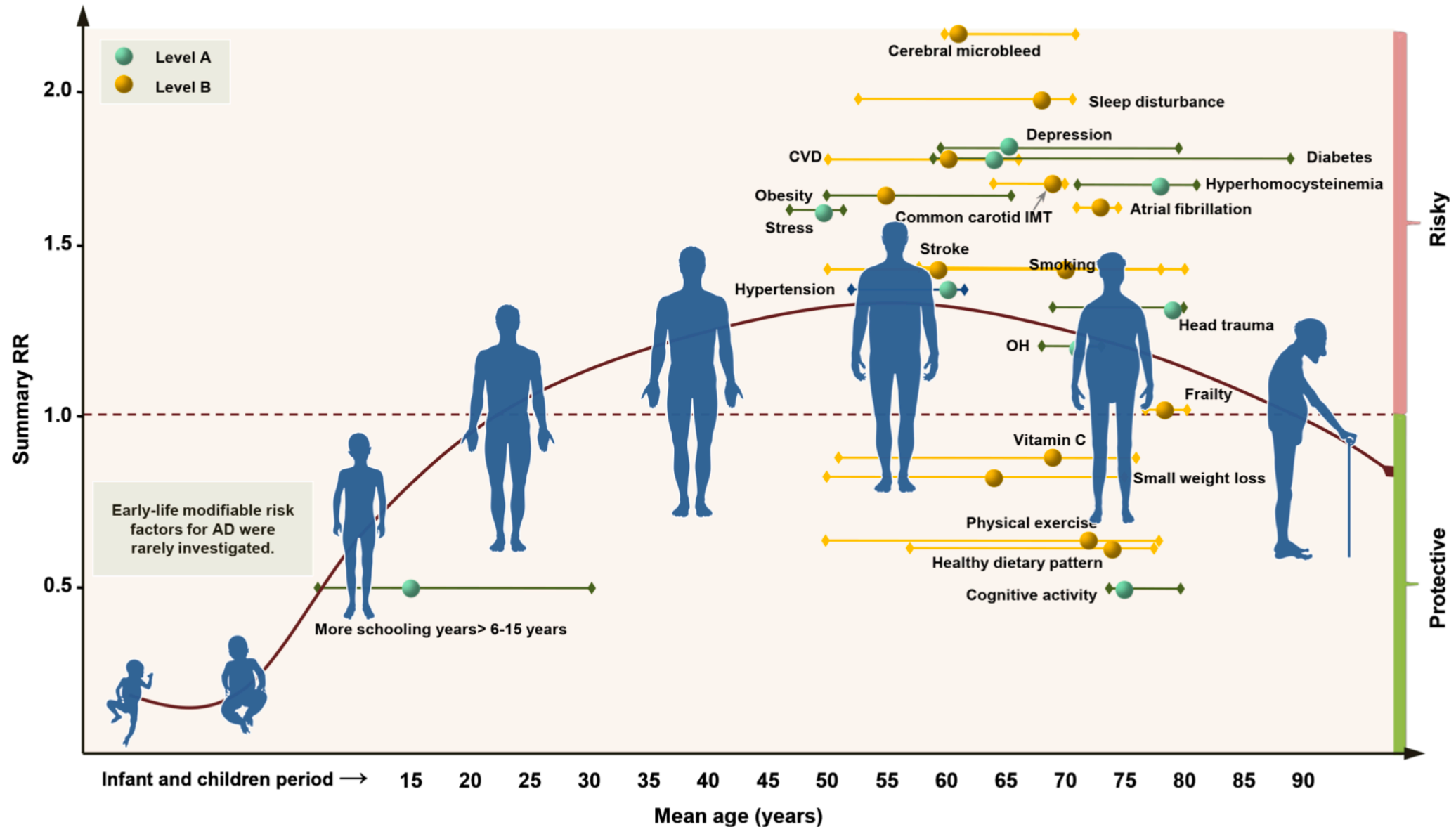
See The Lancet Commissions page 413

What factors contribute to dementia prevention?



- Lancet commission
 - 14 modifiable factors
 - Conservative estimate (45% of dementias)
- Missing risk factors include:
 - Sleep
 - Diet quality and nutrient status
 - Late life cognitive activity
 - Oral health
- Others estimate 47—73%
 - UK Biobank data

An increasing number of potentially modifiable risk factors



Dementia prevention – lists upon lists

Summary of Alzheimer's Prevention

- Exercise regularly
- Eat more plants, reduce saturated fats
- Keep blood pressure ~ 120/80
- Keep LDL cholesterol ~ 70 mg/dl
- Manage diabetes
- Identify and treat sleep apnea
- Avoid smoking
- Reduce or avoid alcohol
- Address mental health issues
- Minimize chances of head traumas
- Address social isolation
- Address hearing loss
- Keep a healthy weight
- Engage in lifelong, meaningful and complex cognitive activities

Risk factor	Relative risk ^a
Early life (age <45 years)	
Less education (primary school only)	1.6
Midlife (age 45–65 years)	
Hearing loss	1.9
Traumatic brain injury	1.8
Hypertension (>135–140/85–90) ^{59,c}	1.6
Alcohol consumption (>21 units per week)	1.2
Obesity (body-mass index ≥ 30)	1.6
Late life (age >65 years)	
Smoking	1.6
Depression	1.9
Social isolation	1.6
Physical inactivity	1.4
Diabetes	1.5
Air pollution	1.1

Dementia prevention – where to start?

- Prevailing opinion suggests most dementia may be preventable
- A large number of risk factors have been identified
- It's unclear how we implement those at the individual level
 - Relationships are assumed to be linear
 - We know this isn't the case
 - No hierarchy
 - No framework to understand how it all connects

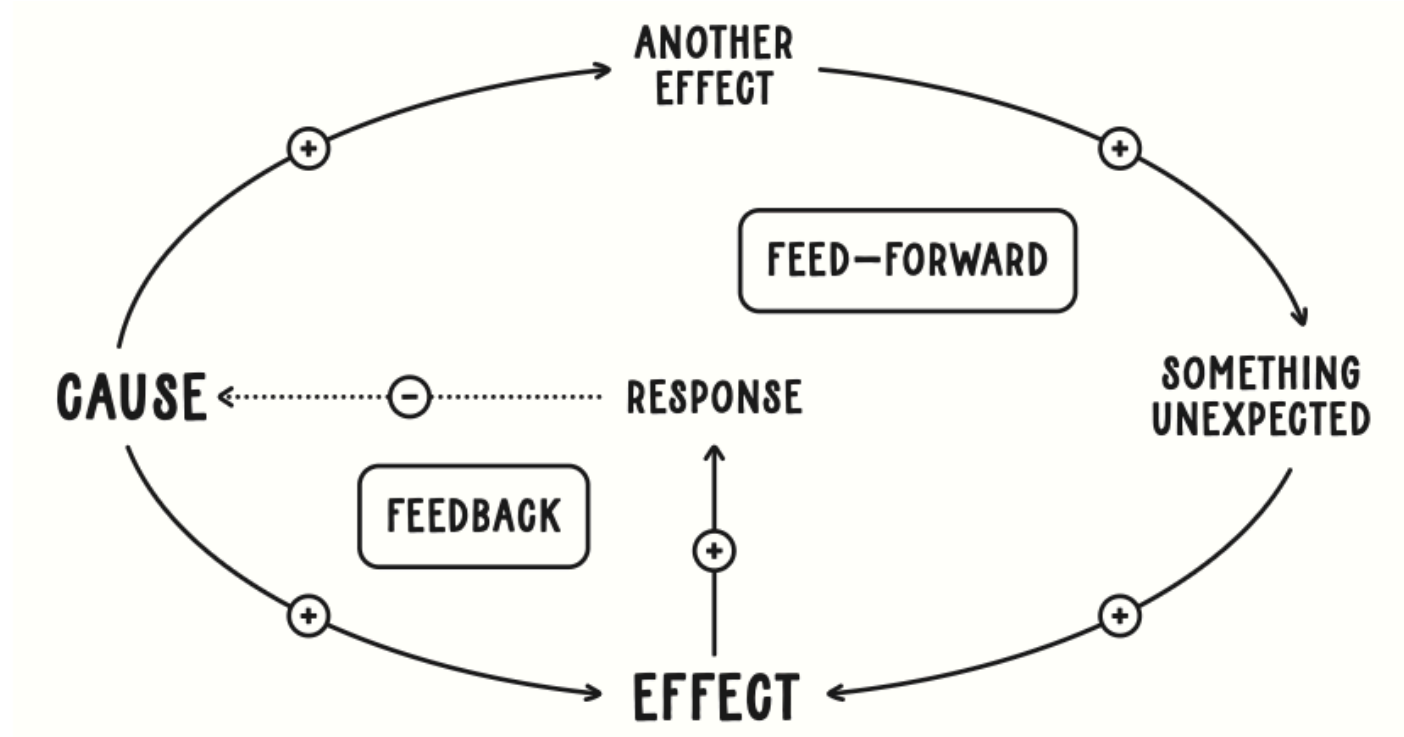
A (possible) solution!

The Demand-Driven Theory of Age-Related Cognitive Decline and Dementia

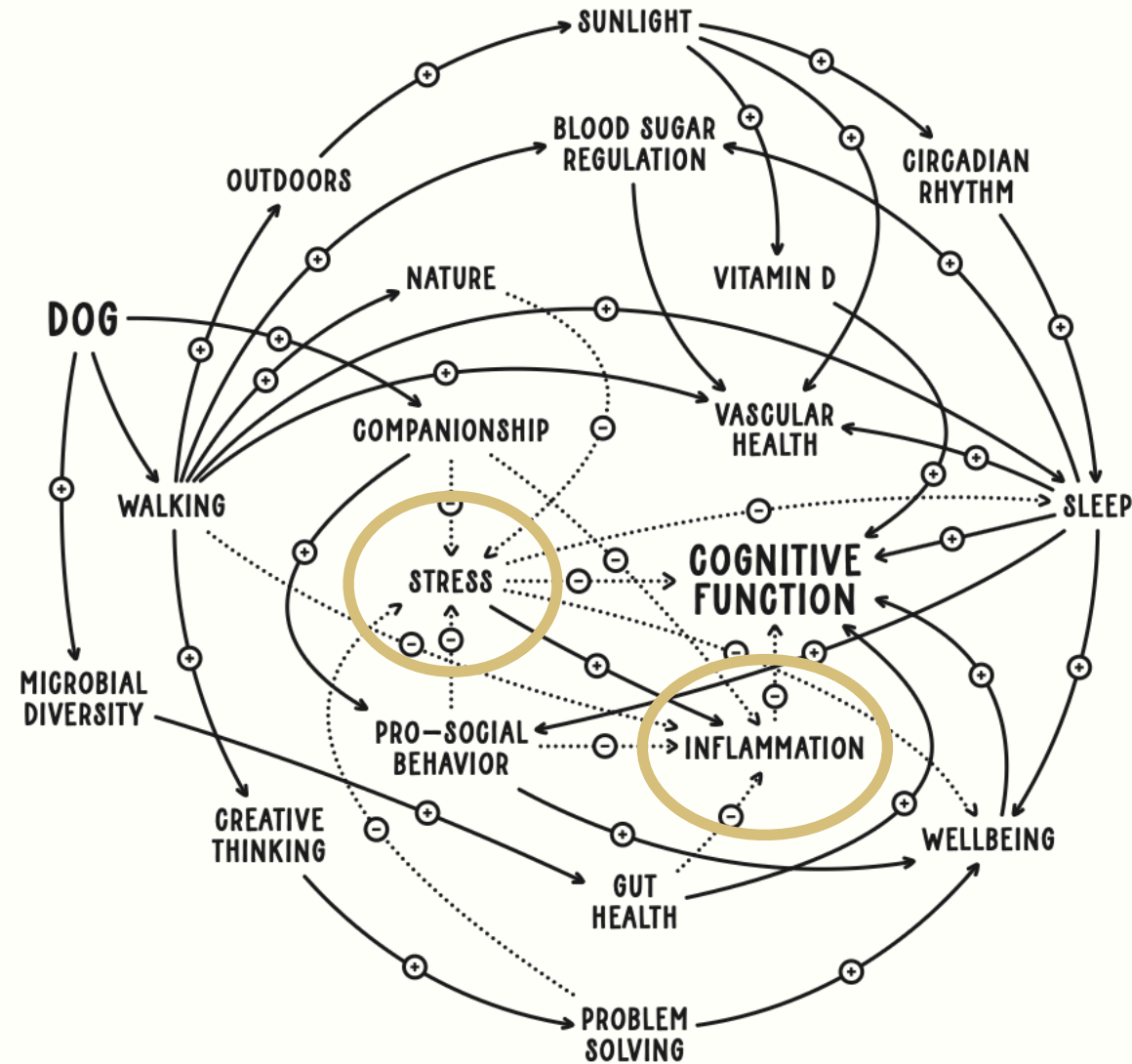
(DDToARCDD)

TL;DR - Why Your Brain Is Like Your Biceps

Taking a systems approach



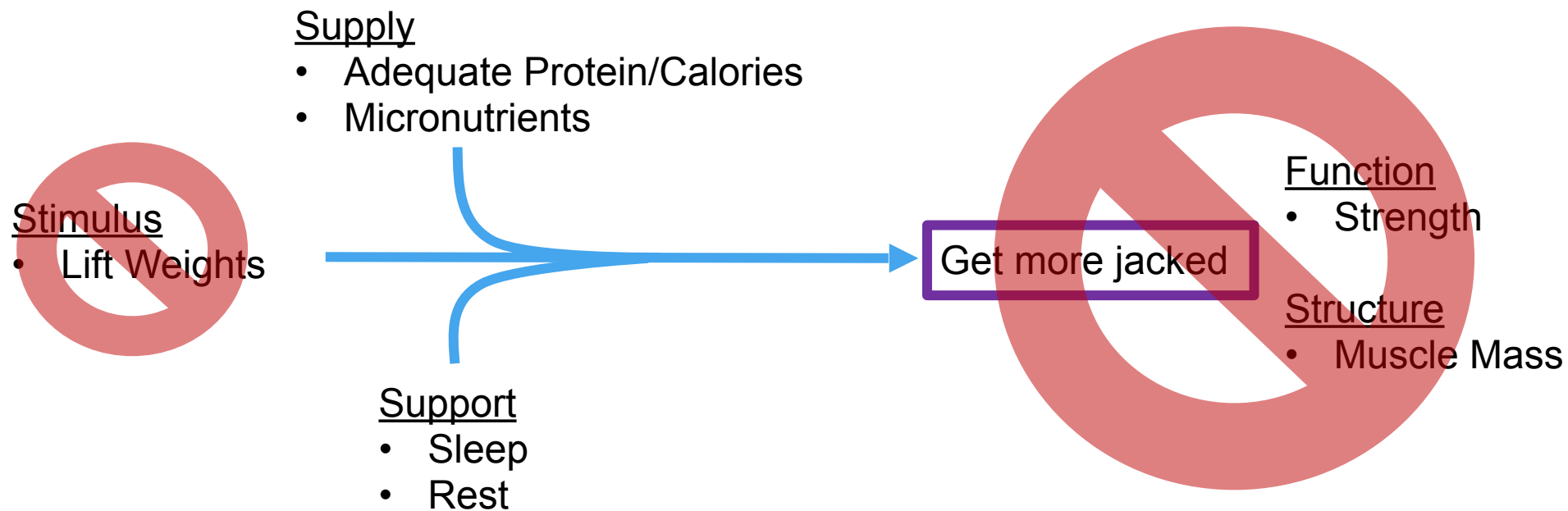
Finding common nodes of action



The 3 S Model

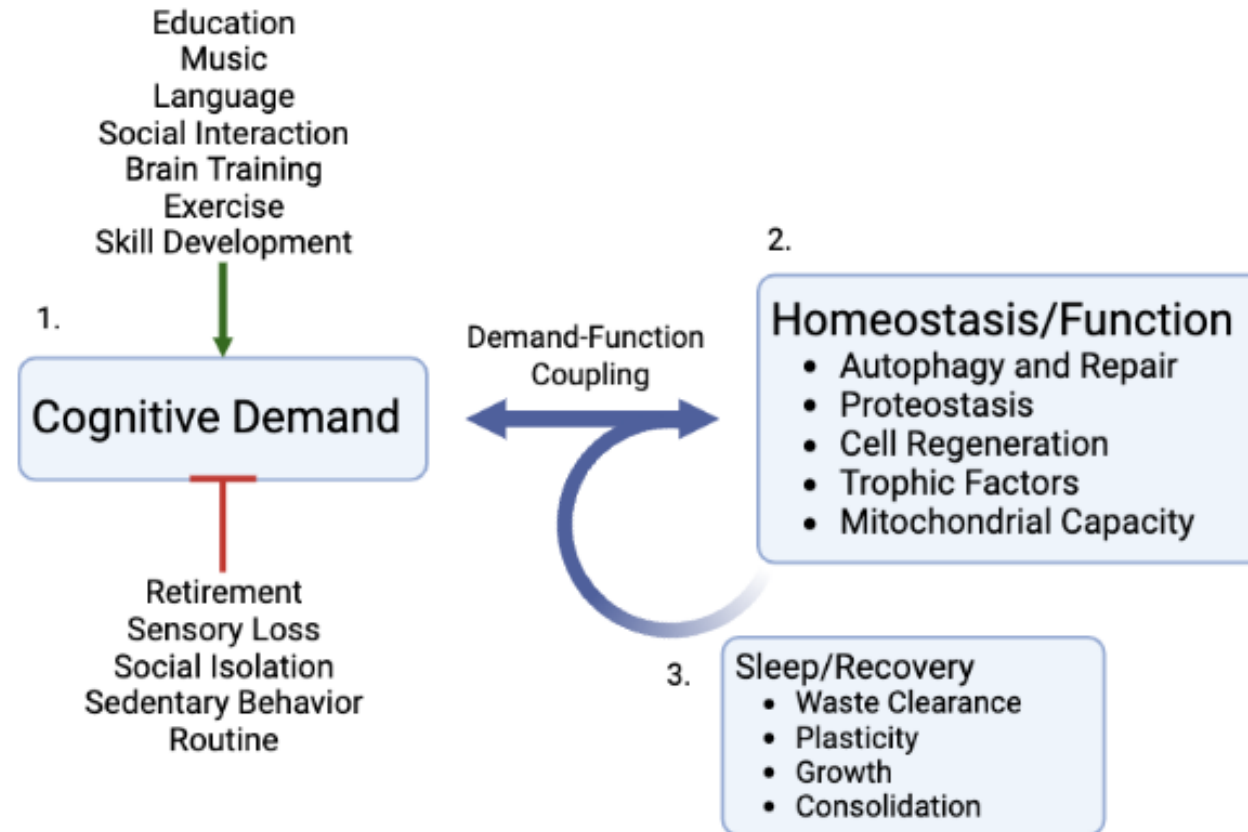
- Multiple interacting factors determine cognitive function
- Stimulus
 - Physical activity, cognitive, and social activity
- Supply
 - Vascular/metabolic health and nutrient status
- Support
 - Sleep/rest and trophic support, avoiding chronic stress/toxic exposures

A simplified model of building muscle

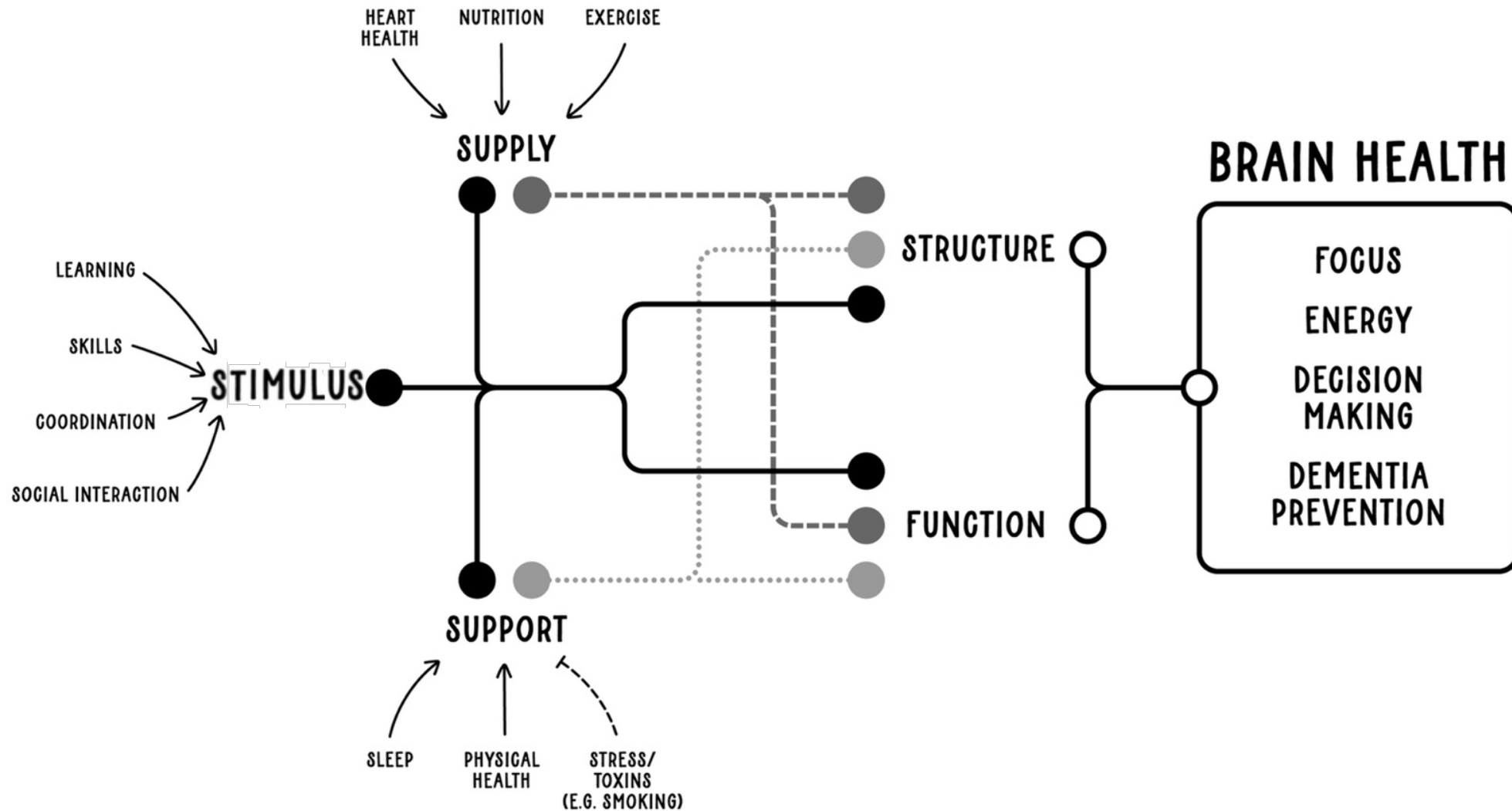


Demand-function coupling

- The function of a tissue is determined by the stimulus
 - Same as with exercise and fitness/strength
- Similar across all stages of life



The 3 S model of brain function



Summary

- Brain health is an interconnected system underpinned by:
 - How the brain is used and challenged
 - The supply of substrates to respond to inputs
 - Providing the environment that supports adaptation
 - How these factors work together improve brain structure and function
- The system is synergistic
 - Risk factors are not a list where everything has to be perfect
 - Small changes in a few areas can have a big overall impact
 - When you change *one* thing, you're changing many things

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