

Assessing Patient Journey in Alzheimer's Disease

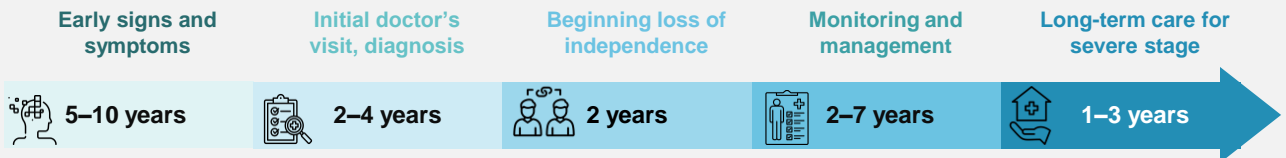
Effect Of Alzheimer's On Patients And Caregivers



Alzheimer's disease (AD) is a progressive neurodegenerative disease. Age is the most significant key factor in the onset of this disease. The number of people suffering from Alzheimer's increase with the aging population. About one in nine individuals (10.8%) aged 65 and above in the US have AD. In 2020, around 11 Mn people from the US held the caregiver's responsibility to a relative who suffered from AD. As a result, understanding the health-related quality of life and burden on the patient and caregiver becomes equally important.

PATIENT AND CAREGIVER JOURNEY

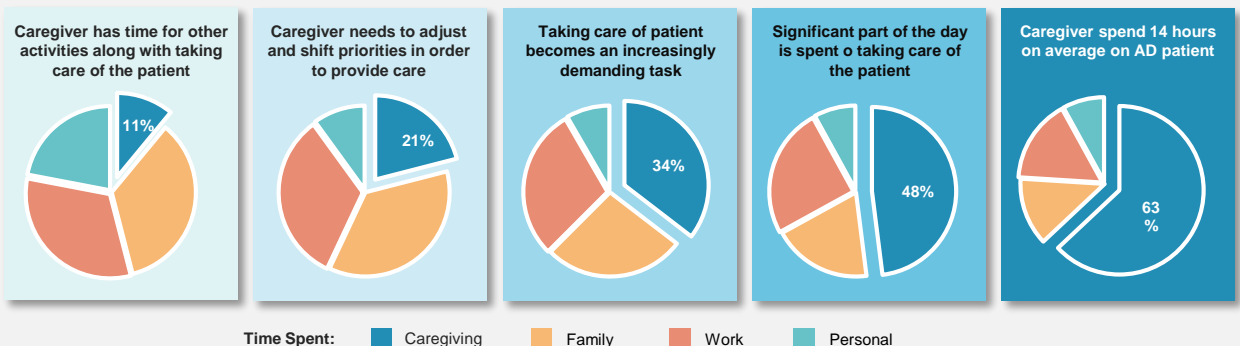
- In AD, the patient journey begins with early signs that are often mistaken for aging. As the disease progresses, dementia becomes more prominent, leading to increased dependence on the caregiver.
- Caregivers support cognitive function, ADLs, and behavior of Alzheimer's patients. As the disease worsens, caregivers spend more time with the patient.



PATIENT BURDEN

	Early signs and symptoms 5–10 years	Initial doctor's visit, diagnosis 2–4 years	Beginning loss of independence 2 years	Monitoring and management 2–7 years	Long-term care for severe stage 1–3 years
Patient Presentation	<ul style="list-style-type: none"> Can do most daily activities independently at this stage Memory loss of a recent event occurs Daily activities may take longer <p><i>Only 5–6% cases diagnosed at early stage</i></p>	<ul style="list-style-type: none"> Forgetting common items, Frustration on mis-diagnosis Emotional distress on diagnosis Changes in behavior and personality <p><i>~1/5 patients misdiagnosed</i></p>	<ul style="list-style-type: none"> Confuse words Difficulty in eating, sleep pattern changes Short attention span Assistance with some daily activities <p><i>~30% cases at moderate stage</i></p>	<ul style="list-style-type: none"> More care needed Aggressive resistance Inability to communicate Physical abilities decline <p><i>Patients' OOP spending at ~USD 87 Bn</i></p>	<ul style="list-style-type: none"> Caregiver required for daily basic care Delusions, agitations Heightened risk of wandering Loss of communication ability <p><i>AD ranks as 6th leading cause of death in US</i></p>
Emotional Need	<ul style="list-style-type: none"> Confusion about condition Negligence as signs of aging 	<ul style="list-style-type: none"> Anxiety on diagnosis Nervousness on screening 	<ul style="list-style-type: none"> Depression Agitation Attention deficit 	<ul style="list-style-type: none"> Anger Emotional distress Fatigue 	<ul style="list-style-type: none"> Amnesia Fear Unwillingness to cooperate Weariness
Unmet Needs	<ul style="list-style-type: none"> Patient unwilling to accept signs Ignorance of cognitive symptoms until they affect daily activities 	<ul style="list-style-type: none"> Lack of resources Affordability of tests Less accessibility to medical professionals Reluctance to accept condition 	<ul style="list-style-type: none"> Resistance to asking for care Unwillingness to accept treatment Lack of support for some patients 	<ul style="list-style-type: none"> Reduction in patient compliance High out-of-pocket (OOP) expense for treatment 	<ul style="list-style-type: none"> Becoming completely dependent on full-day care Lack of facilities and limited financing

CAREGIVER BURDEN



PATIENT BREAKPOINTS

Key Breakpoints	Representative Quotes
Delay in recognizing early signs and symptoms, confusing them with signs of aging	"I was recognizing changes in my own behavior like losing my ability to juggle multiple projects and remember important dates. I ignored these as signs of aging for the longest time."
Reluctance to initiate treatment	"I haven't talked to my doctor yet because I don't want prescription drugs to take to alleviate it. I don't want to be dependent on prescription drugs. I think I'm hesitant about taking any type of medication for this."
Lack of sufficient screening and its impact on misdiagnosis or delayed diagnosis of Alzheimer's	"At my doctor's office, they have a screening form that looks like it's for depression. If they had a screening form for forgetfulness, it might be easier to open the door for people if they have those issues. I would not want to take a drug for it, but I want to open up a discussion for it."
Overwhelming strain on caregivers due to endless medication and medical visits	"A never-ending round of medication and medical appointments that had seen my mother in the hospital for a total of three months. I had been at her bedside for 12 hours a day and more. Sometimes my mum didn't know who I was or where she was."

AD's poses challenges for patients and caregivers. Acknowledging patient burden and addressing emotional and medical needs through clinician support and patient advocacy can ease the journey from early symptoms to diagnosis and management.

Right from understanding key issues to advising you through the right set of insights and recommendations, Aranca Research, consolidation, and insightful analysis to aid in-depth understanding of therapy and effective decision-making

HOW CAN ARANCA HELP?

- 01 Patient Journey Mapping:** Pre- and post-diagnosis, field stories, and burdensome part of disease from patient and caregiver perspective
- 02 Disease Progression Modeling:** Parameters used in disease progression, disease and symptom progression
- 03 Patient Breakpoint Analysis:** Understanding key pain points in the patient journey from patient and caregiver perspective
- 04 Unmet Needs Mapping and QoL:** Disease progression, symptoms impacting QoL, daily activity impairment
- 05 Economic Burden and Unmet Need Analysis:** Impact of disease on patient's economic well-being and unmet needs analysis

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