



TREATING NORMAL PRESSURE HYDROCEPHALUS AVOIDS DEMENTIA

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Alzheimer's? Parkinson's?
Or is it NPH?



What is Normal-Pressure Hydrocephalus?

“Hakim Trias”



Gait
impairment

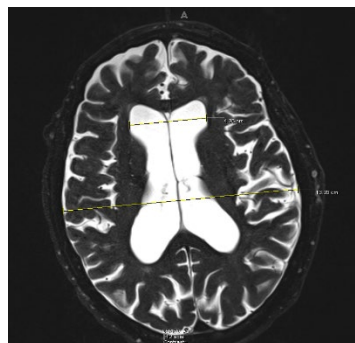


Urinary
incontinence



Dementia

+



Hydrocephalus: mean basal intracranial pressure normal or mildly elevated

Ventricular enlargement

80% of cases remain unrecognized and untreated  dependence on nursing care!

BUT:

**NPH can
be treated
with
ventriculo-
peritoneal
shunt**



System consists of a ventricular catheter, a reservoir and a hydrocephalus valve with catheter, leading unnecessary cerebrospinal fluid into abdomen

Low” risk 1h surgery

**Significant improvement in 81%* of patients
Chance of full healing increases
under early surgical treatment
with a shunt**

Challenges:

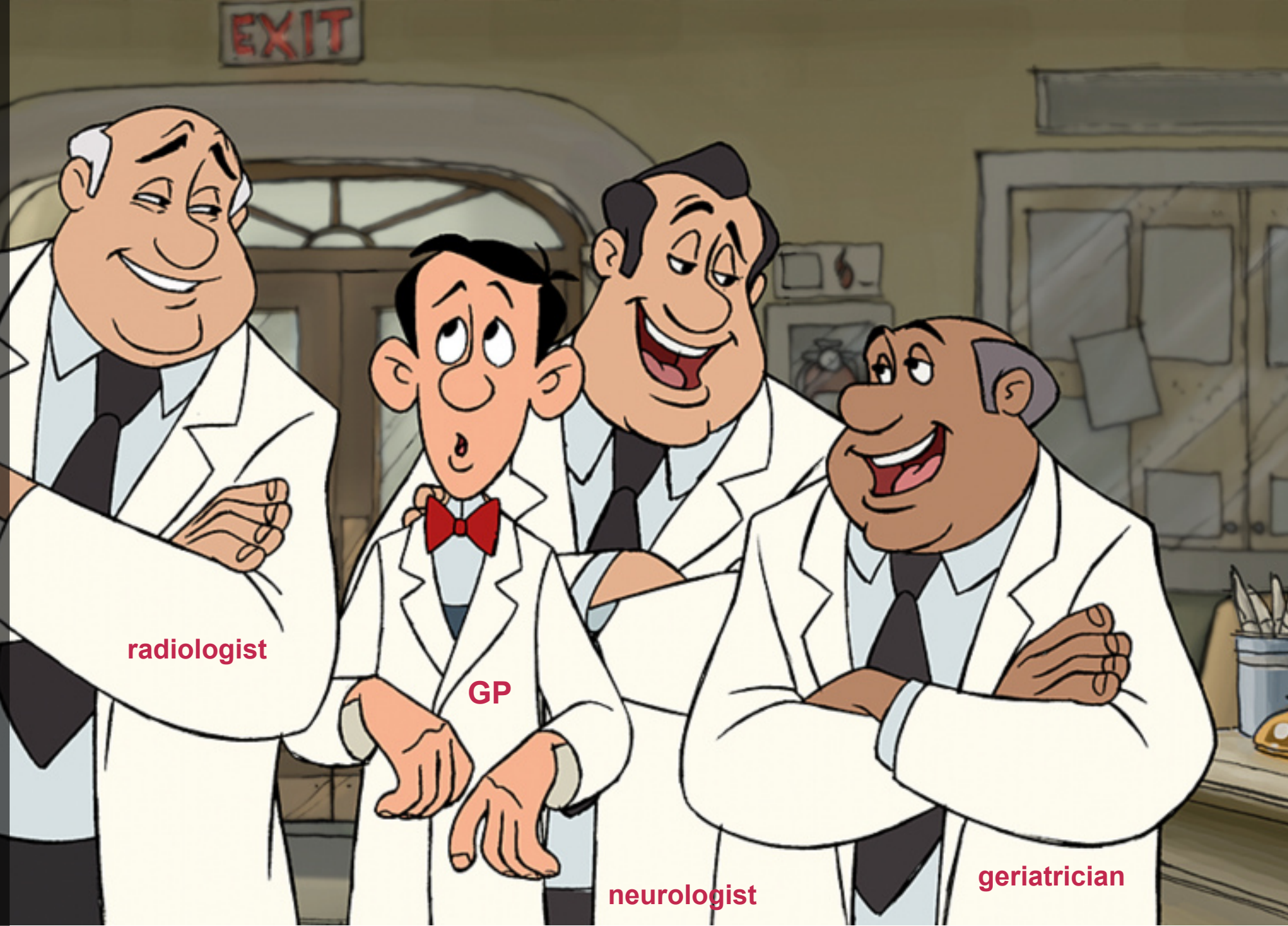
Medical

NPH is often not diagnosed

Organizational

GP as first contact is often not able to differentiate between NPH, Alzheimer and Parkinson

→ Many NPH patients never see a neurologist and are wrongly diagnosed with dementia



radiologist

GP

neurologist

geriatrician

NPH and associated issues

**NPH not diagnosed and treated can decrease cognitive abilities leading to dementia
Diagnosed too late, a well treatable disease leads to care dependency.******

NPH is the only neurological disease related to dementia which can be treated***

Only 10% to 20% of patients with NPH receive appropriate specialized treatment*

84% of patients seeing a neuro-surgeon had the first contact with a GP**

Only 6% of dementia patients have NPH*

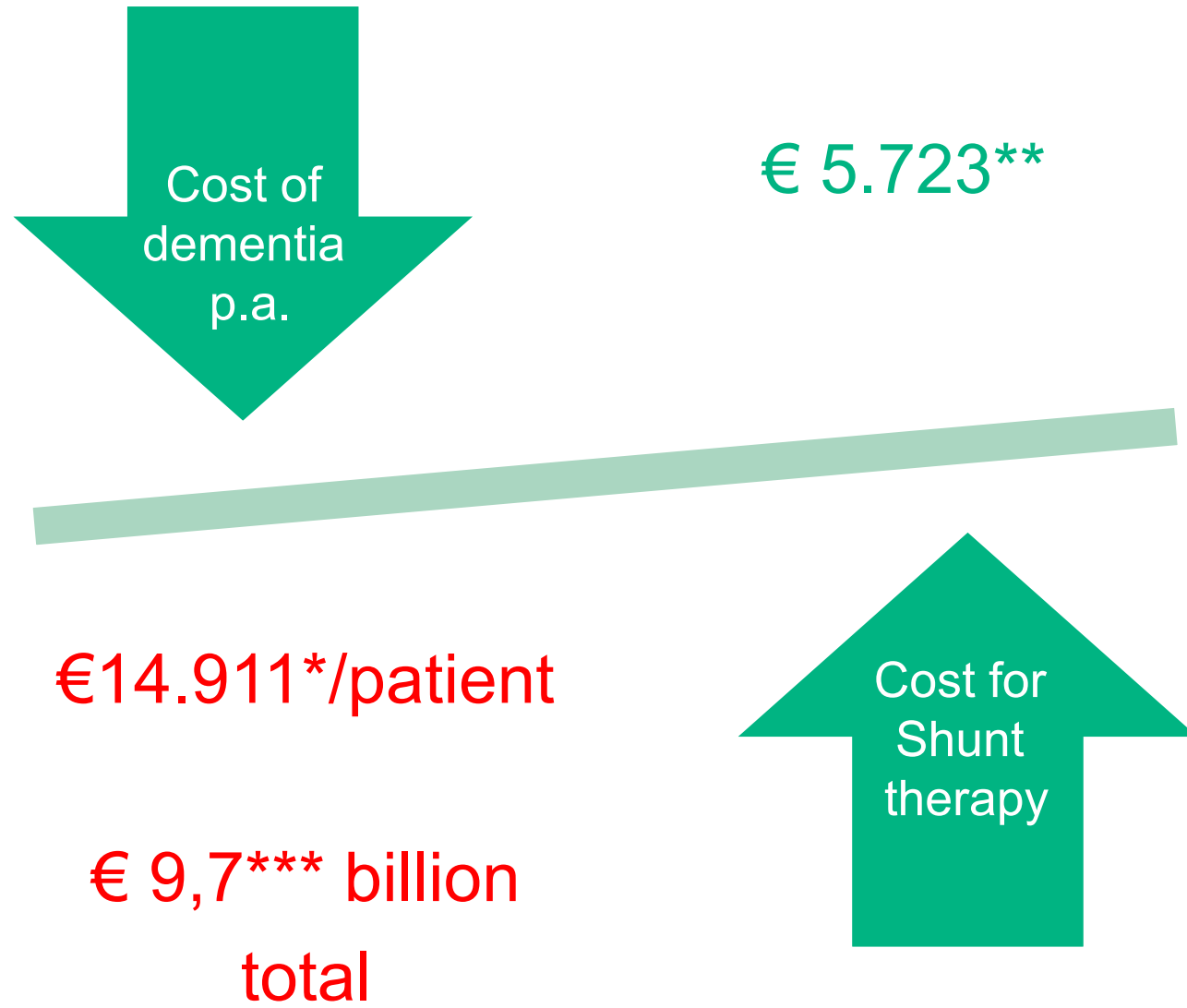
*Kiefer M, Unterberg A: The differential diagnosis and treatment of normal-pressure hydrocephalus., Dtsch Arztebl Int 2012; 109(1–2): 15–26.

** internal survey

***MEG VERREES, M.D., and WARREN R. SELMAN, M.D., Case Western Reserve University, Cleveland, Ohio, *American Family Physician*. 2004 Sep 15;70(6):1071-1078.

****Andrén K, Wikkelsø C, Tisell M, Hellström P., Natural course of idiopathic normal pressure hydrocephalus, *J Neurol Neurosurg Psychiatry*. 2014 Jul;85(7):806-10.
the effects of waiting for more than 6 months before surgery and to compare the outcome with that seen in patients who waited for less than 3 months.

The economic burden of dementia in Germany



*Ministry of Education and Research Germany;

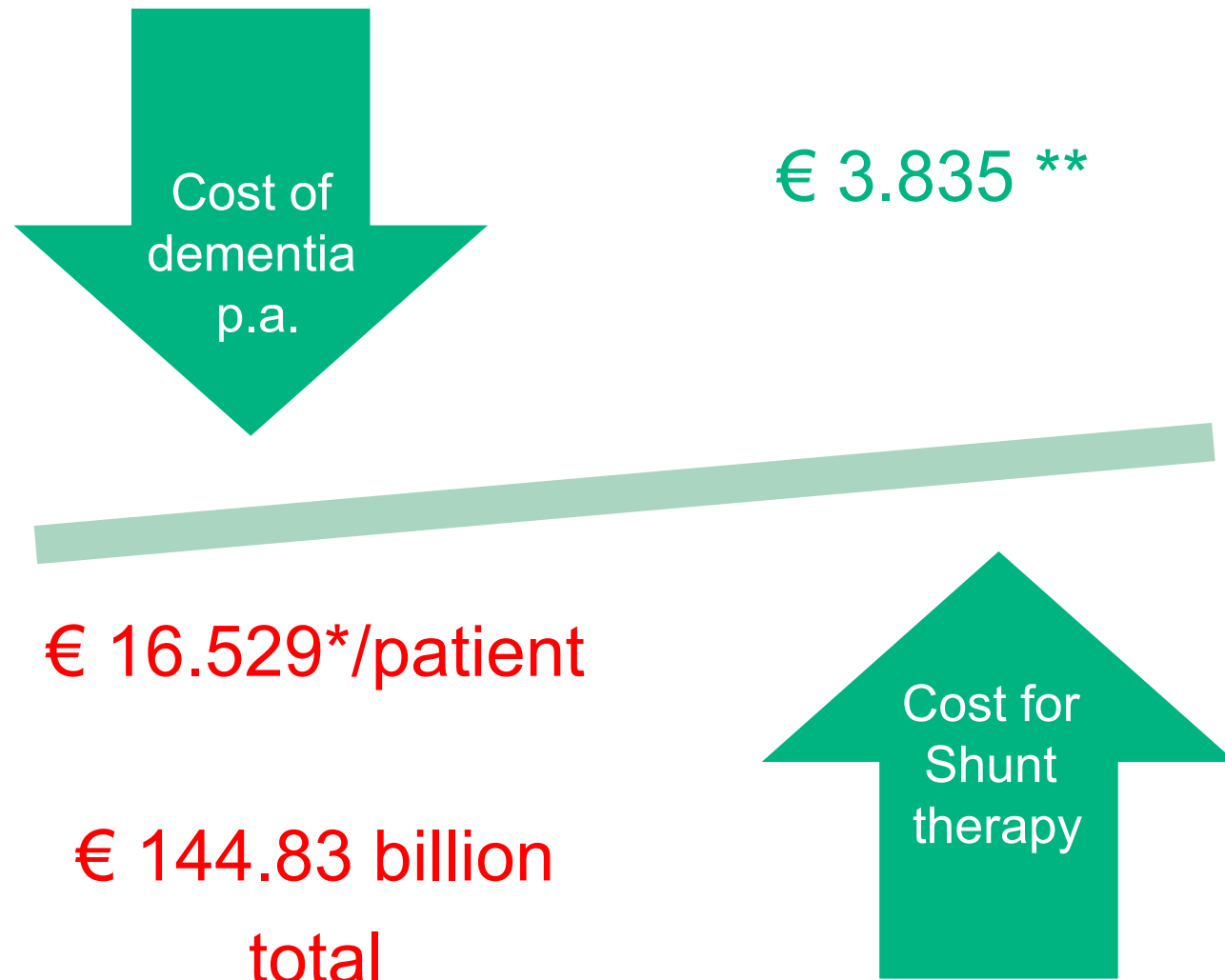
<https://www.gesundheitsforschung-bmbf.de/de/demenz-und-ihre-kosten-pflege-erfolgt-zunehmend-in-der-familie-3092.php> (accessed 11.10.2018)

**G-DRG Browser, accessed: 11.10.2018

***Amount of dementia patients * cost per patient; Source amount of dementia patients in Germany:

https://www.deutsche-alzheimer.de/fileadmin/alz/pdf/factsheets/infoblatt1_haeufigkeit_demenzkrankungen_dalzg.pdf (accessed 11.10.2018)

The economic burden of dementia in China



* Jia et. al. Alzheimer's & Dementia, The Journal of the Alzheimer's Association, 2018; Volume 14; Issue 4; pages 483-491; The cost of Alzheimer's disease in China and re-estimation of costs worldwide

**exemplary price from Hainan province for PROGAV implementation (price published 05.04.2017)

What needs to be done

Educating GPs to
correctly diagnose
NPH

Secure funding &
reimbursement of
shunt surgery

Strengthen
cooperation
between GPs and
neurologists to
enable early NPH
treatment

Create public
awareness for
NPH

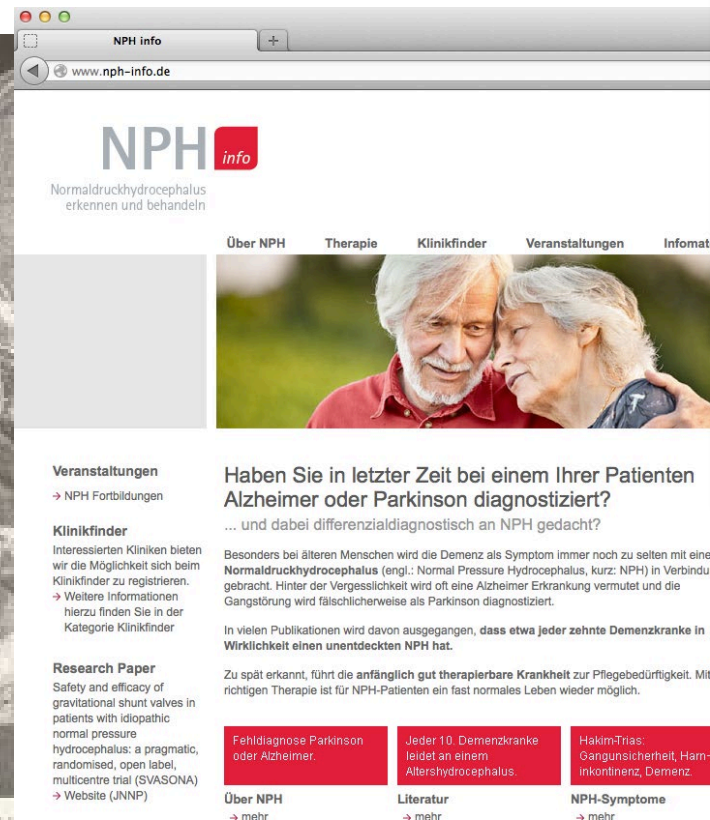


We have begun!

Press work



Online presence



Training & Education



Be prepared:
together we
can do more!

