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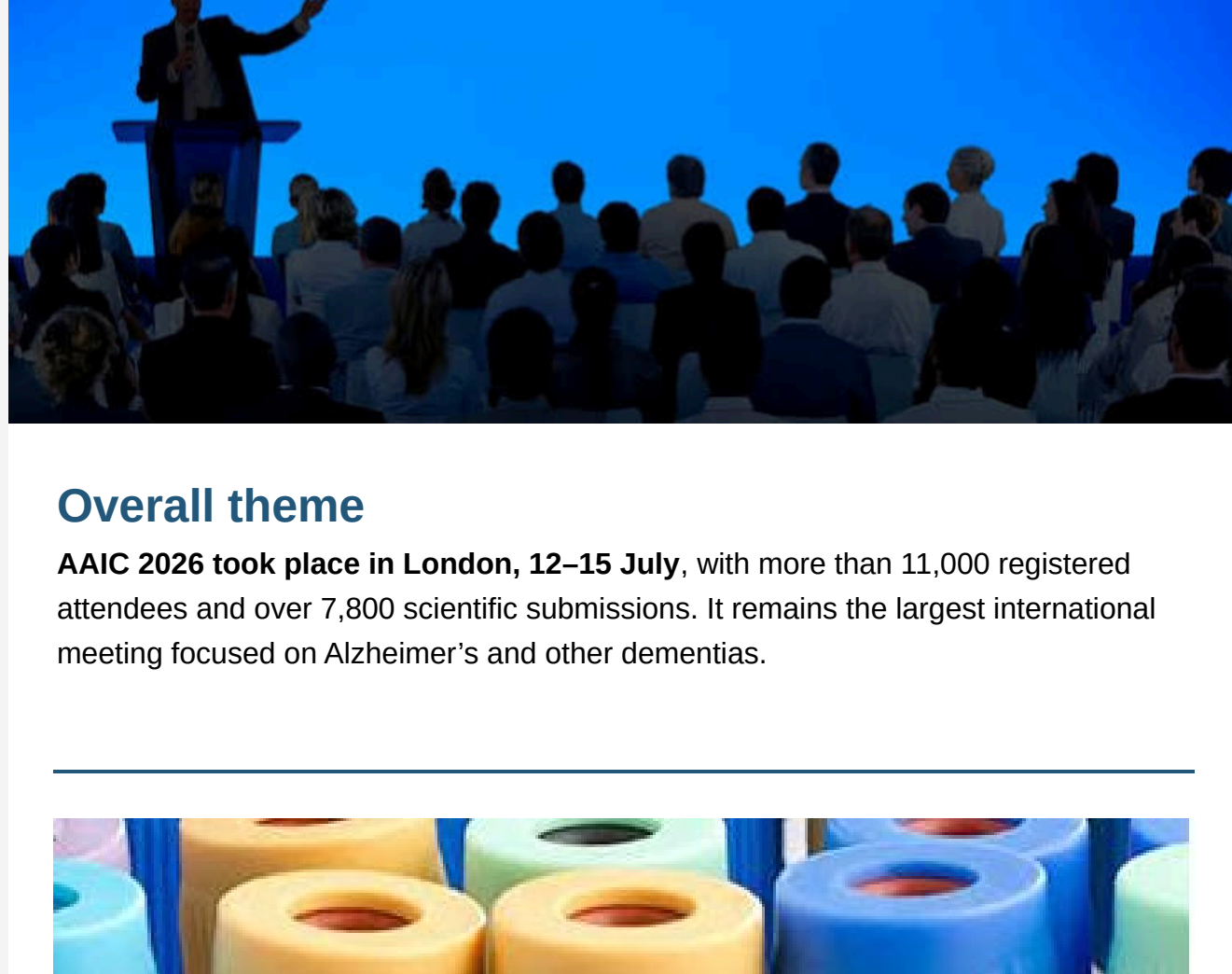


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Highlights from AAIC

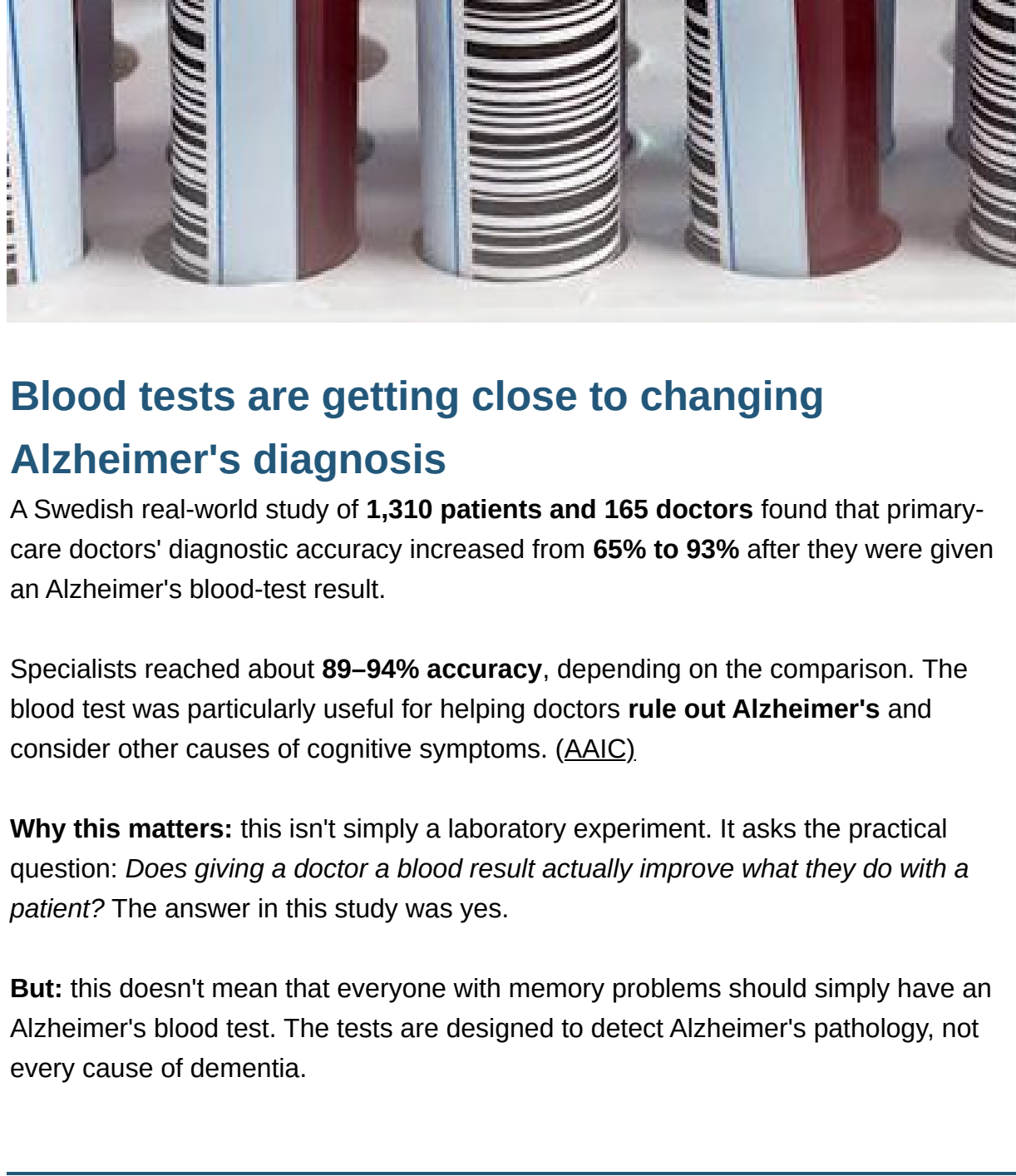
July/August 2026

Quick fire round up



Overall theme

AAIC 2026 took place in London, 12–15 July, with more than 11,000 registered attendees and over 7,800 scientific submissions. It remains the largest international meeting focused on Alzheimer's and other dementias.



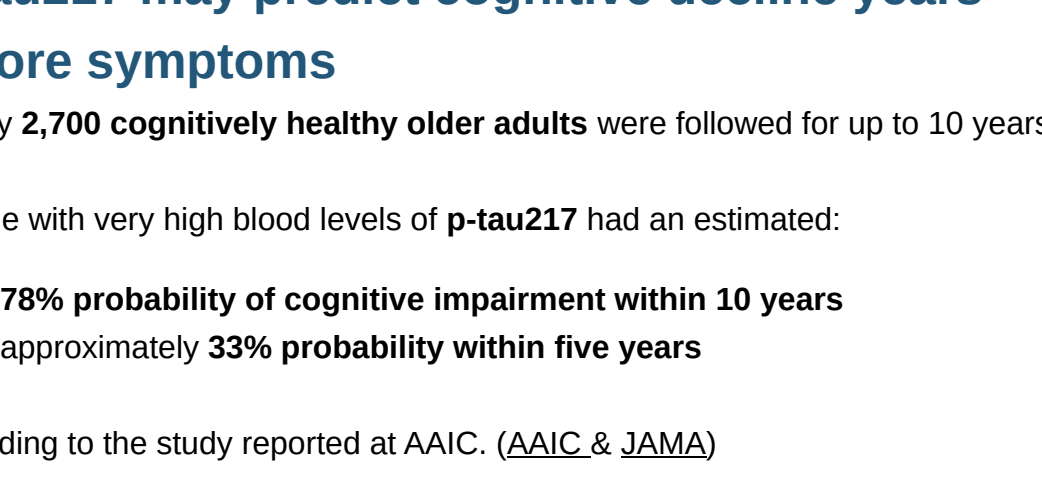
Blood tests are getting close to changing Alzheimer's diagnosis

A Swedish real-world study of **1,310 patients** and **165 doctors** found that primary-care doctors' diagnostic accuracy increased from **65% to 93%** after they were given an Alzheimer's blood-test result.

Specialists reached about **89–94% accuracy**, depending on the comparison. The blood test was particularly useful for helping doctors **rule out Alzheimer's** and consider other causes of cognitive symptoms. (AAIC)

Why this matters: this isn't simply a laboratory experiment. It asks the practical question: Does giving a doctor a blood result *actually improve what they do* with a patient? The answer in this study was yes.

But: this doesn't mean that everyone with memory problems should simply have an Alzheimer's blood test. The tests are designed to detect Alzheimer's pathology, not every cause of dementia.



p-tau217 may predict cognitive decline years before symptoms

Nearly **2,700 cognitively healthy older adults** were followed for up to 10 years.

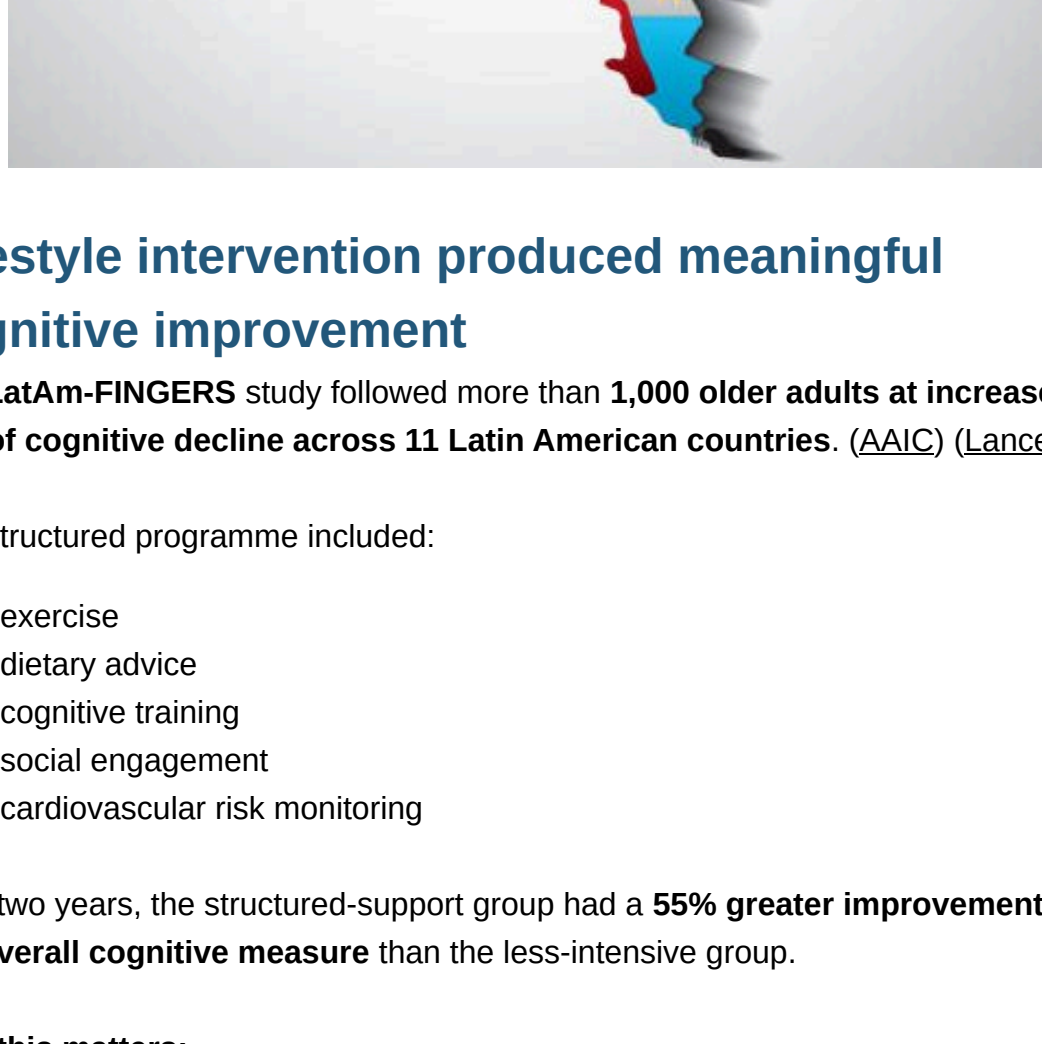
People with very high blood levels of **p-tau217** had an estimated:

- **78% probability of cognitive impairment within 10 years**
- **approximately 33% probability within five years**

according to the study reported at AAIC. (AAIC & JAMA)

It suggests we may eventually be able to identify Alzheimer's biological risk **before someone notices a memory problem**.

Important caveat: this is risk prediction, not certainty, and the researchers say it isn't ready for routine screening of healthy people.



Lifestyle intervention produced meaningful cognitive improvement

The **LatAm-FINGERS** study followed more than **1,000 older adults** at **increased risk of cognitive decline across 11 Latin American countries**. (AAIC) (Lancet)

The structured programme included:

- exercise
- dietary advice
- cognitive training
- social engagement
- cardiovascular risk monitoring

After two years, the structured-support group had a **55% greater improvement in the overall cognitive measure** than the less-intensive group.

Why this matters:

This is particularly interesting because it

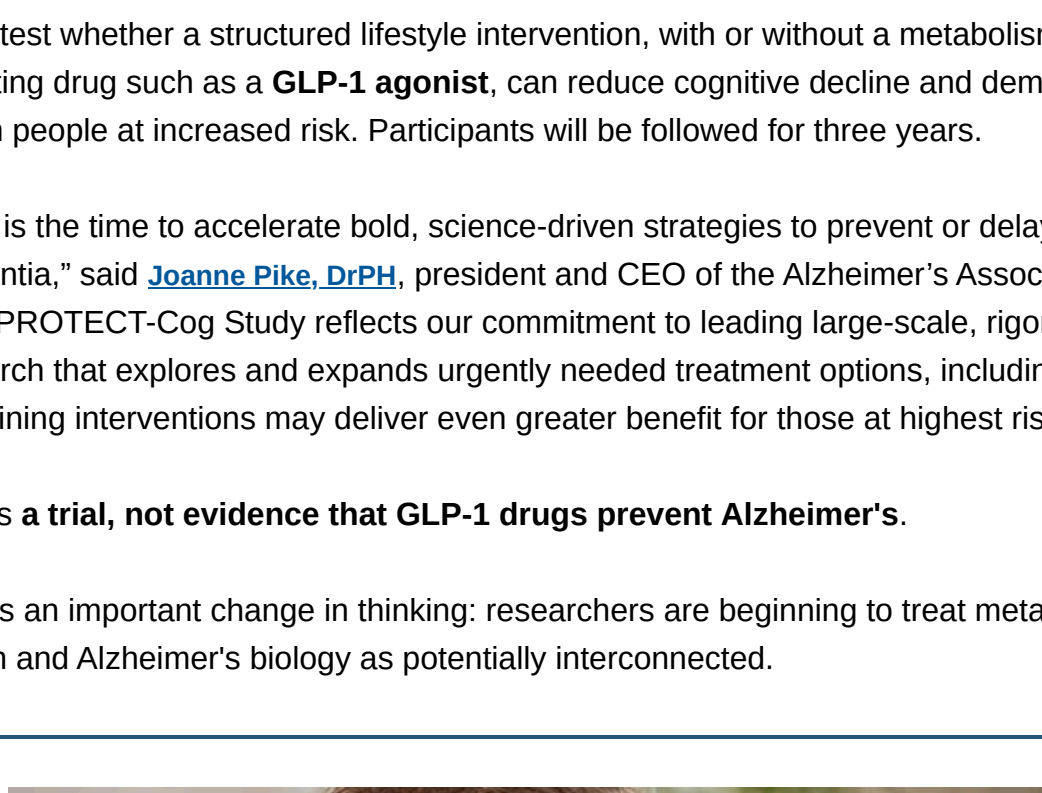
- supports the idea that dementia prevention isn't necessarily about one intervention. Several modest changes may work together.
- dementia research has historically been disproportionately concentrated in high-income Western countries. This demonstrates that a structured prevention programme can be adapted across **11 Latin American countries** is useful scientifically and from a public-health perspective.

One of the interesting aspects of LatAm-FINGERS wasn't just what participants did. It was **how the programme was delivered**.

The more intensive group received coaching, supervised activities and group meetings, whereas the comparison group largely received advice and periodic education. The more supported group had the greater cognitive improvement.

That raises an interesting question for future prevention programmes:

Is giving someone advice enough, or does successful dementia prevention require ongoing support and accountability? Social support appears to be an important component of lifestyle intervention



A major new prevention trial will combine lifestyle intervention with a GLP-1-type drug

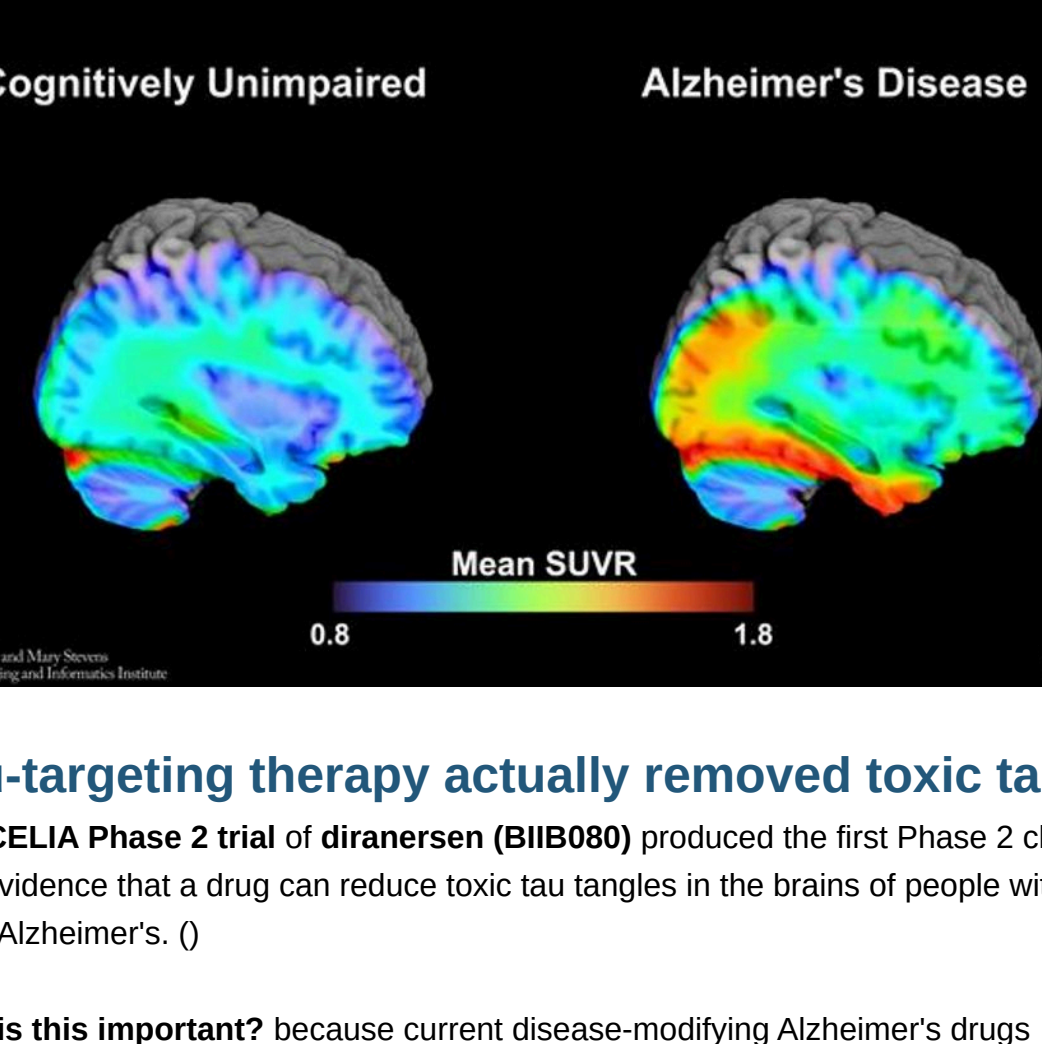
The Alzheimer's Association announced the **\$100 million PROTECT-Cog trial** at AAIC. (AAIC)

It will test whether a structured lifestyle intervention, with or without a metabolism-targeting drug such as a **GLP-1 agonist**, can reduce cognitive decline and dementia risk in people at increased risk. Participants will be followed for three years.

"Now is the time to accelerate bold, science-driven strategies to prevent or delay dementia," said [Joanne Pike, DrPH](#), president and CEO of the Alzheimer's Association. "The PROTECT-Cog Study reflects our commitment to leading large-scale, rigorous research that explores and expands urgently needed treatment options, including how combining interventions may deliver even greater benefit for those at highest risk."

This is a **trial, not evidence that GLP-1 drugs prevent Alzheimer's**.

But it's an important change in thinking: researchers are beginning to treat metabolic health and Alzheimer's biology as potentially interconnected.



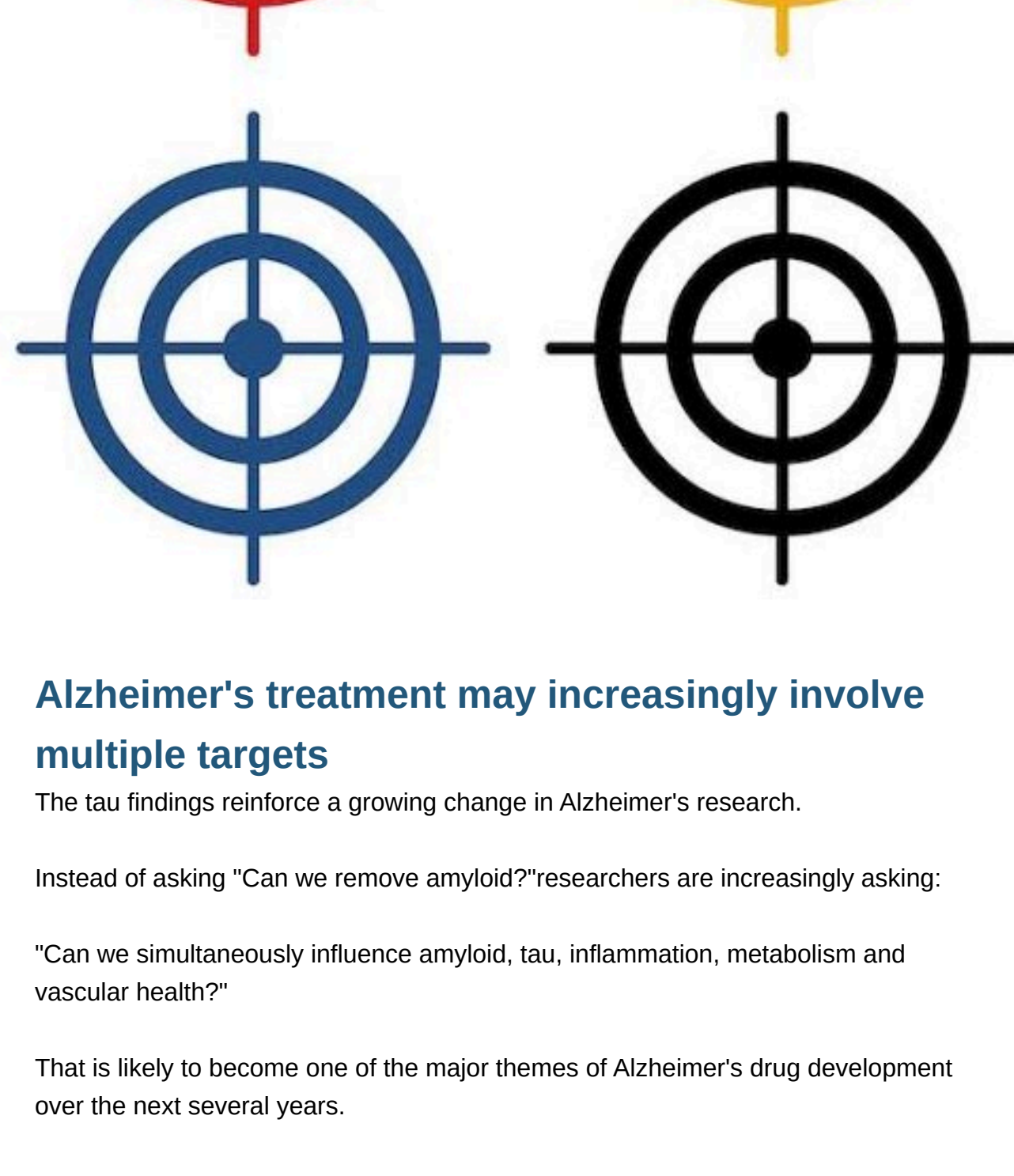
Tau-targeting therapy actually removed toxic tau

The **CELIx Phase 2 trial of dianersen (BIBB090)** produced the first Phase 2 clinical-trial evidence that a drug can reduce toxic tau tangles in the brains of people with early Alzheimer's. ()

Why is this important? because current disease-modifying Alzheimer's drugs primarily target **amyloid**.

However it is important to note that: **Reducing tau is not the same thing as proving that patients get better**.

The cognitive results weren't definitive enough to establish clinical effectiveness, and the drug remains investigational. Biogen plans to take it into Phase 3.



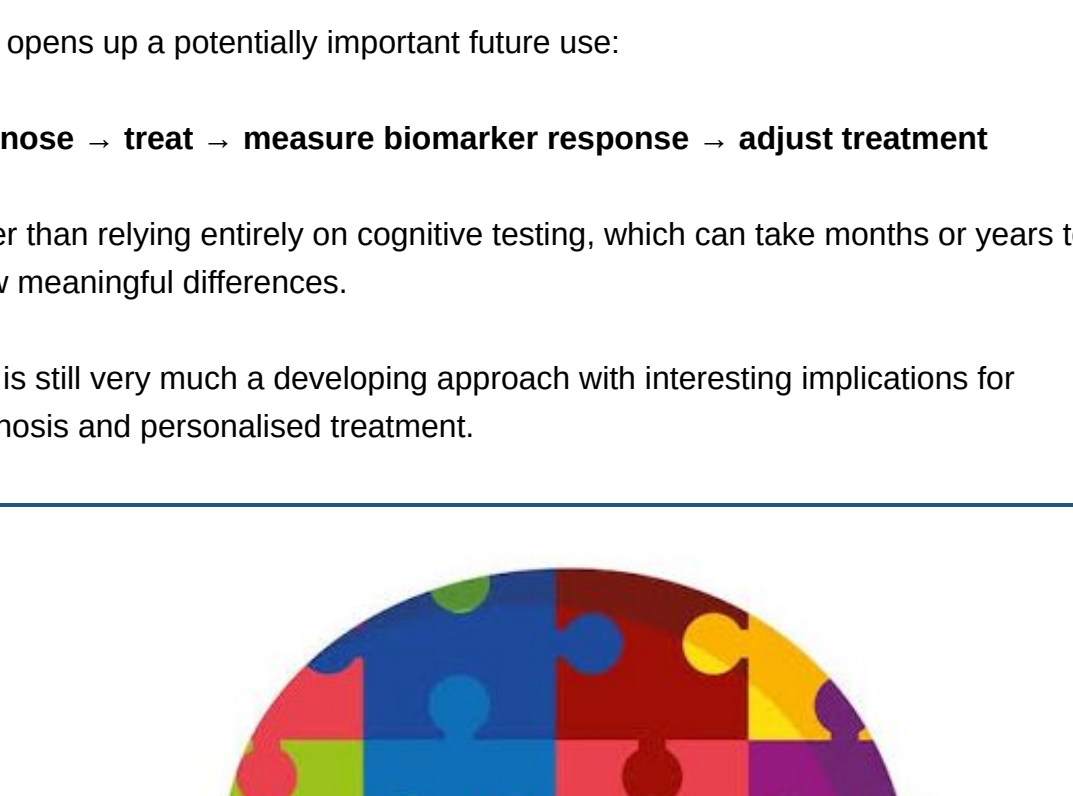
Alzheimer's treatment may increasingly involve multiple targets

The tau findings reinforce a growing change in Alzheimer's research.

Instead of asking "Can we remove amyloid?" researchers are increasingly asking:

"Can we simultaneously influence amyloid, tau, inflammation, metabolism and vascular health?"

That is likely to become one of the major themes of Alzheimer's drug development over the next several years.



Blood biomarkers may eventually monitor whether treatment is working

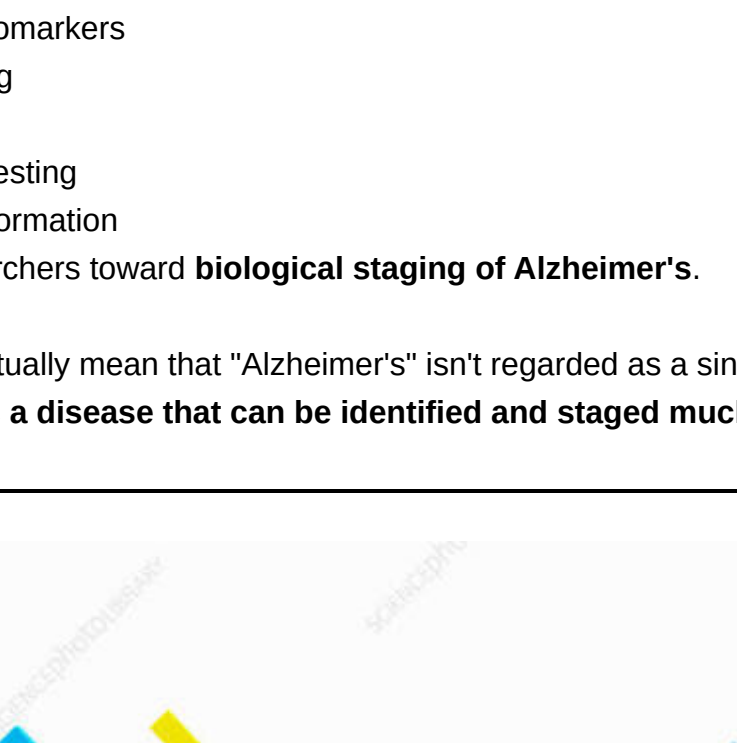
Research presented at AAIC is increasingly showing that biomarkers such as **p-tau217** changed in response to Alzheimer's treatment.

That opens up a potentially important future use:

diagnose -- treat -- measure biomarker response -- adjust treatment

rather than relying entirely on cognitive testing, which can take months or years to show meaningful differences.

This is still very much a developing approach with interesting implications for diagnosis and personalised treatment.



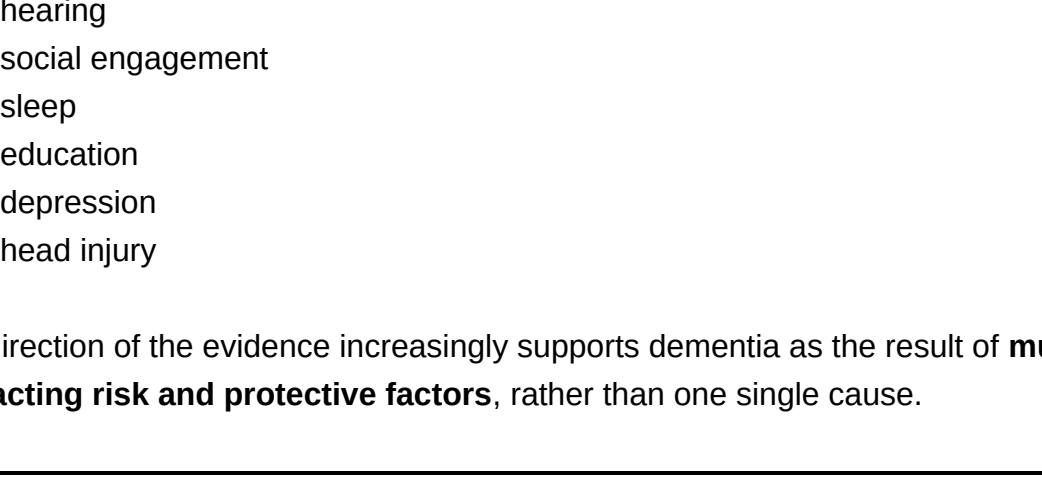
Earlier disease detection is becoming much more sophisticated

The combination of:

- p-tau217
- amyloid biomarkers
- tau imaging
- MRI
- cognitive testing
- genetic information

is moving researchers toward **biological staging of Alzheimer's**.

That could eventually mean that "Alzheimer's" isn't regarded as a single point-in-time diagnosis but as **a disease that can be identified and staged much earlier**.



Summary themes

The "dementia risk" picture is becoming increasingly **multidimensional**

AAIC contained a large amount of research on factors including:

- blood pressure
- diabetes
- obesity/metabolic health
- physical activity
- hearing
- social engagement
- sleep
- education
- depression
- head injury

The direction of the evidence increasingly supports dementia as the result of **multiple interacting risk and protective factors**, rather than one single cause.



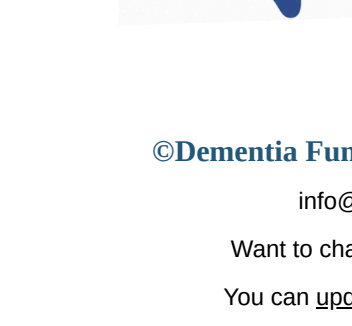
We'd love to hear from you

Thank you for signing up for our newsletter, we hope that you will also [join us](#) and become a member of our forum, if you haven't already.

We are in the formative stages of this project and would love to hear your thoughts and feedback about the site, the content, the news and the members forum.

Do you know of anyone who wants to support research projects in the dementia scene? Do you have suggestions for content, contacts or ideas that can help us bring more money into dementia research.

If so, please email me at info@dementiafundersnetwork.org



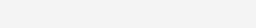
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Dementia Funders Network

The Dementia Funders' Network is an independent group of individuals and organisations who support dementia research around the world.

The network will enable funders to work together to ensure their donations have greatest impact and focus. Our overall mission is to encourage more money to be invested in dementia research. [Find out more here](#).

We hope to achieve that by providing a collaborative forum where members can share and discuss dementia projects that need financial help, find potential co-donors and keep up to date with the latest dementia research to inform considered decisions about financial investments. [Join us today](#) and help make a difference in dementia.



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