



# 10<sup>th</sup> Canadian Conference on Dementia

Québec City, Québec | October 3-5, 2019

At the Québec City Convention Centre



THURSDAY, OCTOBER 3, 2019

Time	Program Title
15:00–16:00	REGISTRATION
16:00-16:30	OPENING REMARKS
16:30-17:15	<p><b>An Overview of The U.S. Alzheimer’s Association Best Clinical Practices Workgroup AADx-CPG Multidisciplinary Guidelines for the Evaluation Cognitive Impairment and Alzheimer’s Disease and Related Dementias</b> <i>Alireza Atri</i></p> <p>This presentation will provide an overview of the aims, process and recommendations from the AADx-CPG Multidisciplinary Guidelines for the evaluation of cognitive impairment and dementia (CID) due to Alzheimer’s disease (AD) and related disorders. The AADx-CPG Multi-Disciplinary Guidelines are aimed to pertain to all clinical settings, primary, specialty and subspecialty care, and to provide guidance on the appropriate use of AD-related biomarkers. Aligned with rigorous processes for clinical guideline development, the AADx-CPG Workgroup utilized systematic evidence reviews and literature searches and a modified Delphi method to develop and grade recommendations for the CID evaluation process. The recommendations delineate utilization of tiers of assessments and tests based on individual presentation, risk factors and profile to: 1) Establish shared goals of the evaluation using a patient-centered and triadic relationship (patient-care partner-clinician); 2) Engage a 3-step diagnostic process involving detection of potential CID, delineation of the clinical syndrome, and establishing etiological diagnosis by investigating cause(s) and contributing factors; and 3) Appropriately educate, communicate diagnostic findings and implications to the patient and care partner, and to develop a shared care plan.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Explain the aims, process and rationale for the AADx-CPG Workgroup Multidisciplinary Guidelines recommendations for the evaluation of cognitive impairment, AD and related dementias</li> <li>2. Describe the individualized and tiered process for assessment and testing; the 3-step diagnostic process of detection, delineation of the clinical syndrome, and establishing the etiological diagnosis</li> <li>3. Discuss the specific AADx-CPG recommendations, including the roles and appropriate use of AD biomarkers to establish etiological diagnosis</li> </ol>
17:15-18:00	<p><b>Dementia Care in the Age of the Tech Enabled Consumer</b> <i>Ronald Riesenbach</i></p> <p>Three powerful and converging forces are revolutionizing the care of people with dementia: i) The pace of technology advancement; ii) the demographic changes in global populations and; iii) the increasing consumerization of healthcare. These relentless trends present formidable challenges to healthcare providers and health system administrators. At the same time, they also open unprecedented opportunities for innovation. This presentation will explore these forces and overview the successes (and failures) of some of the pioneering organizations who are leveraging these changes to develop new approaches to the care of older adults.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Describe the major forces driving change in seniors’ care across the globe</li> <li>2. Employ useful taxonomies to categorize the many technological interventions currently being experimented with in the market</li> <li>3. Critique the efficacy of current (and potentially future) technological interventions in home-based care of older adults</li> </ol>
18:00-19:00	<p><b>Championing Co-Researchers in Partnership with the File Hills Qu'Appelle Tribal Council</b> <i>Carrie Bourassa</i></p> <p>This research is funded by the Canadian Consortium on Neurodegeneration and Aging (CCNA). We have undertaken this research at the direction of the First Nations communities we serve within the File Hills Qu'Appelle Tribal Council (FHQTC) and the Community Research Advisory Committee (CRAC) that was created to</p>



guide this project and future projects. Morning Star Lodge is a Canada Foundation for Innovation funded Mentorship Lab that trains community and academic researchers in both Indigenous Research and Western methodologies. Elder Betty McKenna provides guidance and direction to the lab as an Elder and Pipe Carrier. We recently completed Phase I and are able to provide some preliminary results from the research that was directed by FHQTC. Moreover, this research was leveraged by other funding opportunities and has developed into a program of research. Elder Betty McKenna will discuss the role of spirituality in research and, in particular, dementia and aging research. Dr. Carrie Bourassa will present the innovative methodologies and results of the research.

#### Learning Objectives

1. Understand the importance of spirituality in Indigenous health research, particularly related to aging and dementia;
2. Identify innovative research and training practices that can be adapted/modelled
3. Identify and utilize the research results presented, particularly given the paucity of data relating to Indigenous people living with/experiencing dementia and/or aging in place.

19:00-21:00

**OPENING RECEPTION**



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FRIDAY, OCTOBER 4, 2019

Time	Program Title				
7:00–8:00	<b>BREAKFAST &amp; REGISTRATION</b>				
8:00-8:15	<b>OPENING REMARKS</b>				
8:15 – 8:45	<p><b>Cannabis and Dementia: Weeding out the evidence</b>  <i>Krista L. Lanctôt</i></p> <p>This presentation will discuss the rationale and recent data supporting the use of synthetic THC for agitation in dementia</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Be aware of the major cannabinoid receptors and their functions</li> <li>2. Know the strength of evidence supporting use in Alzheimer’s disease</li> <li>3. Describe new results on efficacy and safety of nabilone for treatment of agitation in dementia</li> </ol>				
8:45 – 9:30	<p><b>Medical Assistance in Dying Through the Lens of Dementia</b>  <i>Jocelyn Downie</i></p> <p>This presentation will provide an overview of the current legal status of medical assistance in dying with particular emphasis on requests for MAiD made in advance of loss of capacity. It will describe the current law reform initiatives aimed at permitting advance requests for MAiD. It will outline the main arguments for and against permitting advance requests for MAiD along the spectrum of proximity to the current eligibility criteria for MAiD.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Describe the legal status of requests of MAiD made in advance of loss of capacity</li> <li>2. Describe the current initiatives re: law reform about advance requests for MAiD in Canada</li> <li>3. Discuss the main features of the policy debate re: advance requests for MAiD in Canada</li> </ol>				
9:30 – 10:00	<p><b>The 5th Canadian Consensus Conference on the Diagnosis and Treatment of Dementia (CCDTD5): Impact on clinical practice</b>  <i>Serge Gauthier</i></p> <p>This presentation will summarize the highlights of the 5<sup>th</sup> Canadian Consensus Conference on the Diagnosis and Treatment of Dementia (CCDTD5) and link them with clinical practice</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. List the conclusions of the CCDTD5</li> <li>2. Describe the process of reaching such conclusions</li> <li>3. Discuss the implications for clinical practice</li> </ol>				
10:00–10:30	<b>MORNING BREAK, SPONSOR/EXHIBITOR &amp; POSTER VIEWING</b>				
10:30-12:00	<b>Parallel Sessions</b>				
	<table border="1"> <thead> <tr> <th>Session 1 - Services &amp; Systems</th> <th>Session 2 - Research Updates</th> </tr> </thead> <tbody> <tr> <td> <p>10:30-11:00</p> <p><b>Human Rights and Dementia: The First Canadian Charter of Rights for People with Dementia and Why it Matters</b>  <i>Marilyn Taylor &amp; Mary Schulz</i></p> <p>This presentation will focus on the development of the first Canadian Charter of Rights for people with dementia and how it can be used to improve practice. A member of the Alzheimer Society of Canada’s Advisory</p> </td> <td> <p><b>"What Do We Do Now for Dementia Pharmacology?"</b>  <i>Howard Chertkow</i></p> <p>Despite the strong theoretical basis for targeting amyloid in an effort to develop disease modifying therapy for AD, numerous anti-amyloid molecules have failed to make it to market. We will look at the amyloid story over the past three decades in an</p> </td> </tr> </tbody> </table>	Session 1 - Services & Systems	Session 2 - Research Updates	<p>10:30-11:00</p> <p><b>Human Rights and Dementia: The First Canadian Charter of Rights for People with Dementia and Why it Matters</b>  <i>Marilyn Taylor &amp; Mary Schulz</i></p> <p>This presentation will focus on the development of the first Canadian Charter of Rights for people with dementia and how it can be used to improve practice. A member of the Alzheimer Society of Canada’s Advisory</p>	<p><b>"What Do We Do Now for Dementia Pharmacology?"</b>  <i>Howard Chertkow</i></p> <p>Despite the strong theoretical basis for targeting amyloid in an effort to develop disease modifying therapy for AD, numerous anti-amyloid molecules have failed to make it to market. We will look at the amyloid story over the past three decades in an</p>
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Group of people with dementia will share her experience of how care and support can be improved, using the Charter as a guide.

### Learning Objectives

1. Understand why the Alzheimer Society of Canada's Advisory Group of people with dementia created the First Canadian Charter of Rights for people with dementia
2. Hear from Marilyn, a person living with dementia, how the principles of the Charter have – and have not – been put into practice from her lived experience
3. Learn practical ways that the Charter can improve their practice

attempt to understand what these failures mean. Is there still hope that anti-amyloid therapy will achieve success? Is the amyloid hypothesis dead? If so, what are the likeliest directions that will lead to successful disease modifying therapy in AD?

### Learning Objectives

1. Describe the status of current disease modifying drugs for Alzheimer Disease
2. Understand what the failure to date of anti-amyloid drugs means conceptually and practically
3. Understand future directions for development that might lead to treatment for AD

11:00-11:30

### **The Stake Holder Inclusion in Practice Change Project - Improving person-Centred Care during Mealtimes in LTC**

*Sienna Caspar*

This presentation will provide an overview of the stakeholder inclusion in practice change project—and project that successfully enabled the increased provision of person-centred care during mealtimes in a long-term care setting.

### Learning Objectives

1. List the key factors associated to the successful implementation of practice change in long-term care settings
2. Describe the FASCCI (Feasible and Sustainable Culture Change Initiative) model
3. Discuss the implications of using a model like the FASCCI for clinical practice in the continuing care sector

### **Intensive Blood Pressure Lowering for Preventing Dementia: Does it Work and Is It Safe?**

*Eric Smith*

In 2019, the SPRINT MIND trial investigators reported that intensive blood pressure lowering prevented a combined endpoint of MCI and dementia. The implications of this finding for clinical care and future research will be discussed.

### Learning Objectives

1. Understand the findings of the SPRINT MIND trial and their limitations
2. Describe the complex epidemiology of hypertension and dementia
3. Discuss whether aggressive blood pressure lowering is indicated in clinical practice, and in which patients

11:30-12:00

### **The Quality of Primary Care and Use of Services of People Living with Dementia**

*Isabelle Vedel*

This presentation will provide an overview of the quality of dementia primary care and use of healthcare services.

### Learning Objectives

1. Highlight the importance of an approach to dementia assessment and care in Primary Care
2. Describe the quality of dementia primary care in three Canadian provinces based on best practices (e.g. Consensus Guidelines)
3. Describe the use of services of persons living with dementia in three Canadian province
4. Discuss the implications for clinical practice

### **Combination Biomarkers to Guide Combination Therapeutics: Can we embrace complexity along the pathway to precision medicine in dementia**

*Sandra Black*

This session emphasizes the complexity and heterogeneity of the neurodegenerative disorders arising from the interplay of genetic and environmental factors that target different functional neural networks. We will focus on the neuroglialvascular unit, a fundamental concept for understanding how protein misfolding interacts with the microvasculature and innate immunity in a life-death struggle that plays out over many years enabled by population aging, and now detectable with multimodal biomarkers. Novel approaches currently underway, including repurposing trials, antibody therapies, and innovative delivery



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modalities such as Low Intensity Focused Ultrasound (LiFU) will be highlighted as we collectively struggle to fend of these unintended consequences of public health and personalized medicine successes in preventing/ treating cancer and cardiovascular diseases.

**Learning Objectives**

1. Acknowledge complexity and heterogeneity across the common dementias
2. Exemplify multimodal biomarkers that reflect this reality – fluid (proteomic, lipidomic, genomic), imaging (ocular and brain structure and function), cognitive/behavioural
3. Illustrate examples, in context of stage, including novel agents, repurposing drugs, and non-pharmacological approaches

**12:00-13:30 LUNCH BREAK, SPONSOR/EXHIBITOR & POSTER VIEWING**

**13:30-15:00 Parallel Sessions**

Session 3 - Clinical Care		Session 4 - Diagnosis & Treatment	
<p>13:30-14:00</p> <p><b>Optimizing Supportive End-of-Life Care for Frail Older Adults Living with Dementia in Long-Term-Care</b> <i>Jayna Holroyd-Leduc</i></p> <p>Over 80% of long-term-care residents are living with dementia, many of whom are frail and at the end stages of the disease. Meeting their care needs can be challenging within the long-term-care setting. This presentation will highlight these challenges and present evidence-based strategies to address them.</p> <p><b>Learning Objectives</b></p> <ol style="list-style-type: none"> <li>1. Describe the challenges faced within long-term-care to providing supportive end-of-life care among residents with dementia</li> <li>2. Understand evidence-based approaches to providing supportive end-of-life care in the long-term-care setting</li> </ol>	<p>13:30-14:00</p> <p><b>How to Investigate Neurocognitive Disorders in Primary Care</b> <i>Christian Bocti</i></p> <p>This presentation will review evidence-based recommendations for investigation of dementia in primary care based on the 2015 INESSS documents, but will also go beyond to the most recent data on biomarkers in clinical practice.</p> <p><b>Learning Objectives</b></p> <ol style="list-style-type: none"> <li>1. Explain the recommended blood tests in the assessment of cognitive disorders in primary care</li> <li>2. Summarize Canadian recommendations for brain imaging</li> <li>3. Explain the role of imaging and CSF biomarkers in clinical practice</li> </ol>		
<p>14:00-14:30</p> <p><b>Is history repeating itself? The case against antipsychotics in persons living with dementia</b> <i>Zahra Goodarzi &amp; Jennifer Watt</i></p> <p>Clinicians are discouraged from using antipsychotics in patients with dementia because of their potential associated risk of harm and prescribing trends suggest possible drug substitution, but there is little direct evidence to help patients, caregivers, and clinicians choose the safest and most efficacious treatment alternatives. Based on the results of recent network meta-analyses and observational studies, we will discuss the case against antipsychotics and why alternative pharmacological and non-pharmacological interventions</p>	<p>14:00-14:30</p> <p><b>It's All About the Approach</b> <i>David Tang-Wai</i></p> <p>This presentation will provide a clinical approach to the history, examination, and differential diagnoses of common and uncommon causes of dementia.</p> <p><b>Learning Objectives</b></p> <ol style="list-style-type: none"> <li>1. Determine the key features to obtain on history and examination to determine uncommon dementias</li> <li>2. Know the features of uncommon dementias</li> </ol>		





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may or may not be better

### Learning Objectives

1. Describe prescribing trends for treatments of the neuropsychiatric symptoms of dementia
2. Understand the comparative efficacy and safety of pharmacological and non-pharmacological treatments for the neuropsychiatric symptoms of dementia
3. Learn about a tool for facilitating shared decision-making with patients and caregivers that can describe multiple outcomes of efficacy and safety across pharmacological and non-pharmacological interventions

14:30-15:00

**The Impact of GAIN Interprofessional Teams: The development and rapid regional deployment of Geriatric Medicine supported model of seniors care with Nurse Practitioners as most responsible provider**  
*K. Jennifer Ingram & Stacey Hawkins*

This presentation will provide an overview of the Geriatric Assessment and Intervention Network (GAIN) Model of community-based, interprofessional, geriatric care. It will discuss the evolution, and rapid expansion of the teams. A summary of the current evidence and tools supporting the model will be discussed.

### Learning Objectives

1. Understand the GAIN model and approach in the community setting
2. Describe the current evidence and resources related to this approach, including preliminary findings from the ROSA-LHIN (CCNA Team 19) Extension Study
3. Discuss the implications of interprofessional models of dementia assessment and service delivery in the community

**Parkinsonism in Dementia: A clinical approach to diagnosis and management**

*Mario Masellis*

This presentation will provide an approach to dealing with parkinsonism in dementia, including diagnostic and management challenges.

### Learning Objectives

1. Identify clinical features of Parkinsonism in dementia
2. Develop an approach to diagnosis
3. Manage symptoms of Parkinsonism in dementia

15:00-15:30

**AFTERNOON BREAK, SPONSOR/EXHIBITOR & POSTER VIEWING**

15:30-16:15

**What Should we do to Prevent Dementia?**

*Gill Livingston*

This presentation will provide an overview of the evidence about the main potentially modifiable risk factors for dementia, and how they vary in the lifecourse they occur, including new currently unpublished evidence. It will discuss the concepts of communality and how this is important. It will discuss how these differ in low and middle income countries. Lastly it will cover a new economic model of costs and benefits of preventing dementia.

### Learning Objectives

1. Weigh up the evidence for potentially modifiable risk factors
2. Understand the implications of the life course model of risks for dementia
3. Summarize the economic case for tackling specific risk factors to prevent dementia

16:15-16:45

**Improving the Quality of Life and Care of Persons Living with Dementia and their Caregivers: Preparing for a**



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## Canadian dementia strategy

*Howard Bergman*

Recognizing the importance of developing and implementing an effective strategy to address this challenge, the Minister of Health of Canada, through the Public Health Agency of Canada, asked the Canadian Academy of Health Sciences (CAHS) to provide an evidence-informed and authoritative assessment on the state of knowledge to help advance federal priorities under the *National Strategy for Alzheimer's Disease and Other Dementias Act*. The CAHS panel published in January 2019 the report *Improving the quality of life and care of persons living with dementia* ([Click here](#)) This presentation will highlight the key findings of this report.

### Learning Objectives

1. Describe why dementia strategies are important
2. Summarize the key findings on improving the quality of life and care of persons living with dementia and their caregivers.

19:00-23:00

GALA DINNER



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SATURDAY, OCTOBER 5, 2019

Time	Program Title
7:00 – 8:00	<b>BREAKFAST &amp; REGISTRATION</b>
8:00-8:15	<b>OPENING REMARKS</b>
8:15-8:45	<b>Integrating Cognition and Behaviour in Dementia Detection</b> <i>Zahinoor Ismail</i>  This presentation will discuss early dementia detection in preclinical and prodromal phases. We will review the latest evidence on combining clinical and behavioural markers to capture an at-risk group for incident cognitive decline and dementia.  Learning Objectives 1. Distinguish between preclinical and prodromal dementia 2. Explore Subjective Cognitive Decline and Mild Behavioural Impairment as pre-dementia syndromes 3. Review the evidence on the interface of these syndromes in dementia risk assessment
8:45–9:45	<b>New and Notable - Oral Research Presentations</b>
9:45-11:00	<b>Concurrent Workshops – Session 1</b>
11:00–11:30	<b>MORNING BREAK, SPONSOR/EXHIBITOR &amp; POSTER VIEWING</b>
11:30–12:45	<b>Concurrent Workshops – Session 2</b>
12:45 – 13:45	<b>LUNCH BREAK, SPONSOR/EXHIBITOR &amp; POSTER VIEWING</b>
12:45 – 13:45	<b>Meet the Professor Session</b>
13:45 – 15:00	<b>Debate: Be it resolved that one third of dementia cases can be prevented within the next 25 years by non-pharmacological means</b> <i>Manuel Montero-Odasso - Opposing view</i> <i>Gill Livingston - Affirmative view</i>





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## WORKSHOPS FOR SATURDAY, OCTOBER 5, 2019

Workshop	Workshop Title		
<b>1A (AM only)</b> <b>French</b>	<p><b>Êtes-vous apte à évaluer l'inaptitude?</b>  <i>Elisabeth Azuelos</i></p> <p>Cette présentation vise à clarifier deux concepts distincts : l'aptitude à consentir à un soin, une aptitude spécifique, et l'aptitude à prendre soin de sa personne et à gérer ses biens, un concept plus global. Au terme de l'atelier, le médecin sera en mesure d'appliquer le processus à l'évaluation clinique de l'aptitude.</p> <p>Objectifs</p> <ol style="list-style-type: none"> <li>1. Aptitude à consentir à un soin</li> <li>2. Aptitude à prendre soin de sa personne et à gérer ses biens</li> <li>3. Décrire les différents régimes de protection au Québec</li> <li>4. Reconnaître les indications cliniques justifiant une évaluation de l'aptitude</li> <li>5. Appliquer le processus d'évaluation clinique de l'aptitude</li> </ol>		
<b>1B (PM only)</b> <b>French</b>	<p><b>L'organisation des Soins en Première Ligne: Une Approche Pratique pour Optimiser la Prise en Charge des TNC</b>  <i>Claude Patry</i></p> <p>Cette présentation démontrera l'organisation des soins en première ligne à travers les différents intervenants impliqués dans les TNC. Elle révisera les bonnes pratiques tirées du plan Alzheimer québécois et de son processus clinique.</p> <p>Objectifs</p> <ol style="list-style-type: none"> <li>1. Identifier les professionnels clés impliqués dans la prise en charge des TNC</li> <li>2. Clarifier le rôle des différents intervenants.</li> <li>3. Réviser le processus clinique</li> </ol>		
<b>2</b> <b>(English AM &amp; French PM)</b>	<table border="0"> <tr> <td> <p><b>English AM Presentation</b></p> <p><b>Major Neurocognitive Disorders Associated with Alcohol Abuse</b>  <i>Christian Bocti</i></p> <p>This presentation will provide an overview of the often under-recognized contribution of alcohol use on cognitive functions.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Differentiate the neurocognitive disorders that can be linked to alcohol</li> <li>2. Explain the pathophysiology of NCDs induced by alcohol</li> <li>3. Discuss the management of NCDs induced by alcohol</li> </ol> </td> <td> <p><b>French PM Presentation</b></p> <p><b>Troubles Neurocognitifs Induits par L'alcool</b>  <i>Christian Bocti</i></p> <p>Cette présentation donnera un aperçu de la contribution souvent méconnue de la consommation d'alcool sur les fonctions cognitives.</p> <p>Objectifs</p> <ol style="list-style-type: none"> <li>1. Différencier les divers troubles neurocognitifs pouvant être reliées à l'alcool</li> <li>2. Expliquer la pathophysiologie des TNC induits par l'alcool</li> <li>3. Discuter de la prise en charges des TNC induits par l'alcool</li> </ol> </td> </tr> </table>	<p><b>English AM Presentation</b></p> <p><b>Major Neurocognitive Disorders Associated with Alcohol Abuse</b>  <i>Christian Bocti</i></p> <p>This presentation will provide an overview of the often under-recognized contribution of alcohol use on cognitive functions.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Differentiate the neurocognitive disorders that can be linked to alcohol</li> <li>2. Explain the pathophysiology of NCDs induced by alcohol</li> <li>3. Discuss the management of NCDs induced by alcohol</li> </ol>	<p><b>French PM Presentation</b></p> <p><b>Troubles Neurocognitifs Induits par L'alcool</b>  <i>Christian Bocti</i></p> <p>Cette présentation donnera un aperçu de la contribution souvent méconnue de la consommation d'alcool sur les fonctions cognitives.</p> <p>Objectifs</p> <ol style="list-style-type: none"> <li>1. Différencier les divers troubles neurocognitifs pouvant être reliées à l'alcool</li> <li>2. Expliquer la pathophysiologie des TNC induits par l'alcool</li> <li>3. Discuter de la prise en charges des TNC induits par l'alcool</li> </ol>
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<b>3</b>	<p><b>Case Studies in Advance Requests for Medical Assistance in Dying in Canada</b>  <i>Jocelyn Downie</i></p> <p>Through the discussion of illustrative cases, this workshop will explore the legal, ethical, and clinical complexities of respecting requests for medical assistance in dying made in advance of loss of capacity.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Explain the legal status of requests of MAiD made in advance of loss of capacity</li> <li>2. Explain the current initiatives re: law reform about advance requests for MAiD in Canada</li> <li>3. Articulate the main arguments about the legal status of advance requests for MAiD in Canada</li> <li>4. Understand the clinical complexities associated with advance requests for MAiD</li> </ol>		



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<b>4</b>	<p><b>Dementia Research: Can big data help?</b> <i>Geoff Anderson</i></p> <p>This presentation will review the potential for using large data sets and advanced analytic techniques to study dementia. The presentation will focus on defining functional phenotypes and predicting trajectories.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"><li>1. Understand the basic principles around supervised and unsupervised learning</li><li>2. See the value in linking broad population-based data to deep risk factor, clinical and biological data</li></ol>
<b>5</b>	<p><b>When Artificial Intelligence Meets Radiology: Novel biomarkers for dementia prognosis</b> <i>Simon Ducharme</i></p> <p>Classical radiology has shown useful at detecting other causes than dementia to explain clinical symptoms. Current advances in image processing technologies, based on artificial intelligence and drawing on information from beyond radiology, are expanding this role by proposing biomarkers which are both specific and sensitive to future clinical decline. Grasp the future of our field in this riveting technological journey!</p> <p>Learning Objectives</p> <ol style="list-style-type: none"><li>1. Understand the current role of radiology in dementia diagnostic</li><li>2. Understand the limits of current radiological approaches and instruments</li><li>3. Learn about future developments in this sector</li></ol>
<b>6</b>	<p><b>Optimizing the Detection of Neuropsychiatric Symptoms in Persons Experiencing Dementia</b> <i>Zahra Goodarzi</i></p> <p>We will review the best evidence for the use of detection tools in for neuropsychiatric symptoms in persons experiencing dementia. In this discussion we will review the best available data on validity and accuracy. We will discuss the limitations and feasibility of use of the tools. And will cover evidence based strategies for tool implementation and use clinically.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"><li>1. Describe validated tools for the detection of neuropsychiatric symptoms (listed below) in persons experiencing dementia.<ul style="list-style-type: none"><li>• General Neuropsychiatric Tools</li><li>• Agitation/Aggression</li><li>• Depression</li><li>• Anxiety</li><li>• Apathy</li></ul></li><li>2. Review the available diagnostic accuracy information and limitations to the use of each tool.</li><li>3. Discuss the use of tools clinically, tool feasibility and how to integrate tools into practice.</li></ol>
<b>7</b>	<p><b>Assessment and Management of Neuropsychiatric Symptoms in Dementia: Evidence and Recent Advances</b> <i>Dallas Seitz &amp; Corinne Fischer</i></p> <p>This presentation will provide an overview of the latest evidence regarding epidemiology, risk factors and management of neuropsychiatric symptoms in dementia. This will include a discussion of evidence based pharmacological and non-pharmacological approaches. In addition, approaches to deprescribing will be discussed.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"><li>1. Review the epidemiology and factors associated with neuropsychiatric symptoms of dementia</li><li>2. Discuss approaches to the non-pharmacological management of dementia including recent advances in non-pharmacological treatments</li><li>3. Understand current evidence and recent developments in pharmacological management of neuropsychiatric symptoms including psychotropic deprescribing</li></ol>



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## 8 **Atypical Neurocognitive Disorders are not that Obscure Anymore...**

*Robert Laforce*

Advancements in cognitive screening tools, molecular biology and brain imaging have allowed earlier identification of atypical neurocognitive disorders. This presentation will provide an overview of the key diagnostic elements in AD variants, the frontotemporal dementia spectrum (i.e. primary progressive aphasia, behavioral and motor variants), and autoimmune encephalitis.

### Learning Objectives

1. Diagnose the main atypical neurocognitive syndromes
2. Disentangle key elements in history and physical exam
3. Use appropriate cognitive screening measures
4. Launch advanced biomarker investigations to help differential diagnosis

## 9 **The Neurological Examination for the Evaluation of Dementia**

*David Tang-Wai*

The neurological examination is one of the integral parts in the evaluation of any dementia. Given time restraints, this workshop will focus on three relevant aspects of the examination seen in many causes of dementias: examination of motor/reflexes, examination of parkinsonism, and examination of gait. These aspects of the examination are useful for the dementias due to cerebrovascular disease, frontotemporal dementias, and dementias with parkinsonism such as corticobasal degeneration, progressive supranuclear palsy, dementia with Lewy bodies).

### Learning Objectives

1. Perform a motor and reflex examination to determine the presence of upper and lower motor neuron signs
2. Detect the various signs of parkinsonism on the neurological examination.
3. Perform an assessment of gait

## 10 **Beyond Cognitive Enhancers: Practical tips to optimize medications for persons with dementia in primary care**

*Linda Lee & Tejal Patel*

Because persons with dementia face particular challenges with medication use such as adherence, use of potentially inappropriate medications, disease-drug interactions and polypharmacy, optimizing pharmacotherapy is an important task for the primary care clinician. This workshop focuses on a practical approach to medication management in the cognitively-impaired older adult.

### Learning Objectives

1. Describe ways to detect and manage medication non-adherence
2. Describe ways to optimize use of appropriate medications and minimize use of problematic medications in persons with dementia
  - De-prescribe medications with potential cognitive adverse effects
  - Review appropriate targets for hypertension and glycemic control
  - Ensure appropriate monitoring of persons on cognitive enhancers

## 11 **Driving Assessment in People with Dementia**

*Gary Naglie*

This workshop will discuss dementia-related driving risks, guidelines on driving and dementia, strategies for assessing fitness to drive, and issues related to delivering the news about driving cessation. Participants will have an opportunity to interactively discuss approaches to common challenges that arise when addressing the topic of fitness to drive in persons with dementia.

### Learning Objectives

1. Understand dementia-related driving risks.
2. Appreciate existing guidelines and limitations of evidence in this area.
3. Develop a practical approach to driving assessment and to supporting people after driving cessation.



**MEET THE PROFESSOR FOR SATURDAY, OCTOBER 5, 2019**

Session	Meet the Professor Topics and Facilitators
1	<p><b>ATN Framework for AD Diagnosis</b>  <i>Serge Gauthier</i></p> <p>The ATN classification is intended for observational and interventional research in AD, not for routine clinical care. Nevertheless, it will influence the way practicing neurologists use biomarkers in the investigation of patients with dementia. Case vignettes will be used to illustrate applications to clinical practice.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Describe the new « ATN » research classification of Alzheimer’s disease</li> <li>2. Discuss its limitations considering the comorbidities associated with Alzheimer’s disease</li> <li>3. Give examples using case studies of the potential use of such a classification in clinical practice</li> </ol>
2	<p><b>Publishing Your Findings – a guide for junior authors</b>  <i>Eric Smith</i></p> <p>Attendees will learn how to evaluate the scientific priority and likelihood of publication for a project, how to organize and prepare a scientific manuscript, and strategies for responding to reviewers.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Evaluate the scientific priority of a project using the FINER criteria.</li> <li>2. Prepare a scientific manuscript.</li> <li>3. Develop strategies to respond to common reviewer criticisms.</li> </ol>
3	<p><b>Cannabis: an open discussion of use in dementia</b>  <i>Krista Lanctot</i></p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Have an open discussion of specific questions submitted by participants</li> <li>2. Possible questions include <ul style="list-style-type: none"> <li>• What do researchers know about the effects of cannabinoids on anxiety and cognition in those with Alzheimer’s disease?</li> <li>• What are the differences between synthetic cannabinoids, CBD oil and medical marijuana?</li> <li>• Has any research been done on how cannabinoids interact with prescription medications?</li> <li>• What are the most pressing questions for research on cannabis?</li> </ul> </li> </ol>
4	<p><b>Death Café</b>  <i>Jocelyn Downie</i></p> <p>Come and talk about MAiD, especially as it relates to dementia. Jocelyn Downie will answer questions and, in the absence of questions, lead a facilitated discussion about the legal and ethical issues associated with MAiD for persons with dementia.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Understand the current law with respect to MAiD and dementia</li> <li>2. Have the audience's questions about MAiD answered</li> <li>3. Explore the audience's views about MAiD for persons with dementia - under what circumstances is it currently permitted? Under what circumstances might it be permitted in the future?</li> </ol>



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<p><b>5</b></p>	<p><b>Attend this Session to Increase your Grant Success Rate</b>  <i>Nalini Sen</i></p> <p>Come and learn first-hand from one of leading funders in dementia research who has offered grants and awards for over 30 years. Some of the topics that will be covered will include tips to writing a successful proposal, expectations within the peer review process and what funders really want. Obtaining research funding for grants and awards is becoming increasingly competition-spend time to learn how you can improve your success rate!</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Learn from the various experiences of the speaker on provincial, national and international boards</li> <li>2. Revisit your usual grant structure</li> <li>3. Become more critical of your own writing</li> </ol>	
<p><b>6</b> French</p>	<p><b>Managing complex Behavioral and Psychological Symptoms of Dementia</b>  <i>Marie-Andrée Bruneau</i></p> <p>This presentation will provide an overview of the evaluation and management of complex BPSD based on cases discussions.</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. List the most common BPSD.</li> <li>2. Describe the evaluation algorithm in the presence of BPSD.</li> <li>3. Implement appropriate non-pharmacological and pharmacological interventions for BPSD.</li> </ol>	<p><b>La prise en charge de Symptômes Comportementaux et Psychologiques de la Démence (SCPD) complexes</b>  <i>Marie-Andrée Bruneau</i></p> <p>Cette présentation proposera un algorithme d'évaluation et de prise en charge de SCPD via la discussion de cas complexes.</p> <p>Objectifs</p> <ol style="list-style-type: none"> <li>1. Énumérer les principaux SCPD</li> <li>2. écrire l'algorithme d'évaluation des SCPD</li> <li>3. Appliquer des stratégies d'interventions non-pharmacologiques et pharmacologiques appropriées en présence de SCPD.</li> </ol>
<p><b>7</b></p>	<p><b>Is Mindfulness a Panacea for Managing Depressive Symptoms in Older People at Risk of Cognitive Decline?</b>  <i>Carol Hudon</i></p> <p>This presentation will provide an overview of mindfulness (and other non-pharmacological approaches) to manage depressive symptoms</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Provide preliminary evidence that mindfulness can alleviate depressive symptoms in older adults with mild cognitive impairment</li> <li>2. Compare the effect of mindfulness to other non-pharmacological approaches to manage depressive symptoms.</li> </ol>	
<p><b>8</b></p>	<p><b>Getting Ahead in the Era of Network Science</b>  <i>Sandra Black</i></p> <p>This workshop will give a brief overview of networks addressing issues in dementia and stroke, internationally, nationally, and provincially. The challenge and opportunities of network science and team science will be frankly discussed particularly in relation to career paths for young investigators. The old norms for promotion through the ranks will need to change and acknowledge that contributions to team efforts that may require self sacrifice in individual goals may be necessary for the greater good. However, in this context, how does individual achievement get recognized?</p> <p>Learning Objectives</p> <ol style="list-style-type: none"> <li>1. Review the projections on global dementia and WHO initiatives.</li> <li>2. Appreciate the emerging demand for network science, Big Data and how it is changing our Small World.</li> <li>3. Understand the Canadian context and these acronyms: G7, OECD, COEN, ADNI, CLSA, CAHHM, CAIN, CCNA, CPSR,OBI, ONDRI, TDRA</li> </ol>	





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## 9 Genetic and Sporadic Forms of Dementia: Case records from Sunnybrook

*Mario Masellis*

This presentation will provide illustrative case examples of both genetic and sporadic forms of dementia and discuss a diagnostic approach.

### Learning Objectives

1. Contrast clinical features associated with genetic and sporadic forms of dementia
2. Develop an approach to appropriate diagnosis