

Memory and language tests can reliably reveal "hidden" early dementia, say UK experts.

Most dementias are missed for years as the symptoms can be elusive until considerable brain tissue is lost.

But doctors from Oxford found they were able to spot very early warning signs when they looked closely enough.

The findings in Neurology could help doctors diagnose dementia sooner, which is crucial since treatment is most effective when given early.

Over a span of 20 years, the researchers studied a group of 241 healthy elderly volunteers, giving them regular tests designed to measure their thinking or cognitive powers.

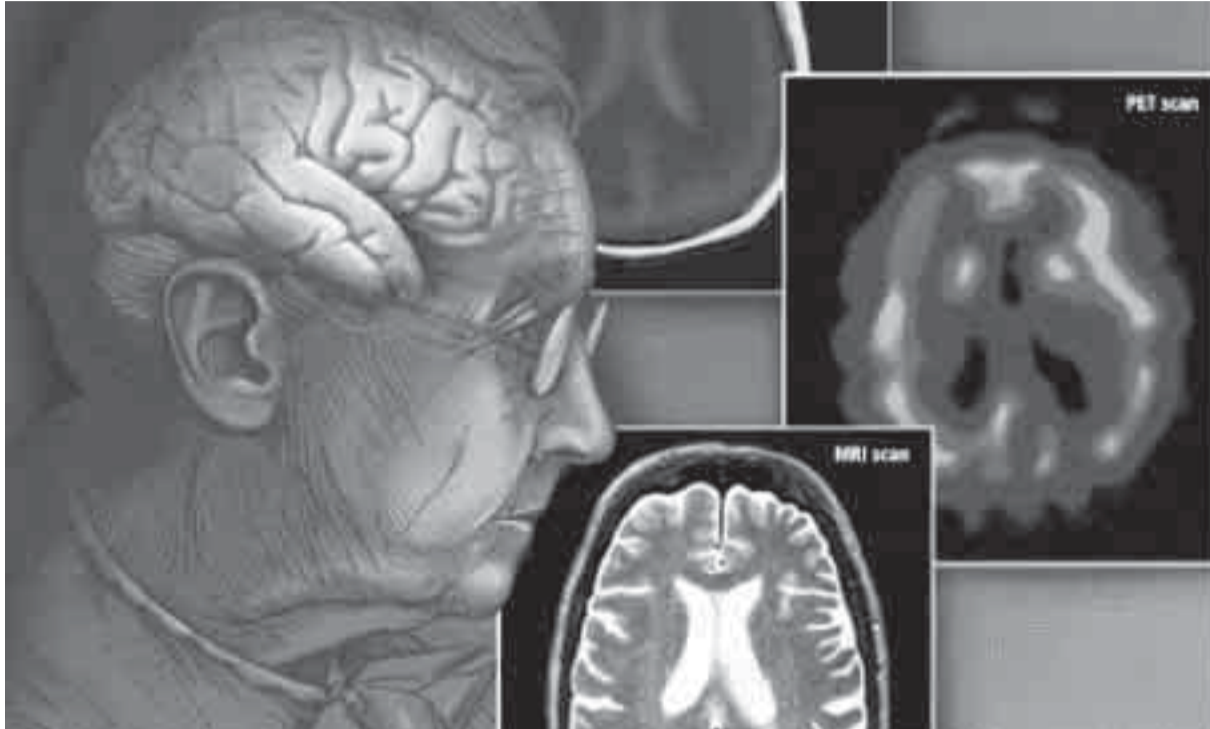
When they scrutinized the test results, the doctors found subtle clues that, in retrospect, hinted at ensuing impairment.

Specifically, the patients who went on to develop mild cognitive impairment or pre-dementia stumbled on tasks involving language expression, learning and recall.

For example, they had greater difficulty remembering the name for common objects or animals and explaining the meaning of a given word.

And those who were older and who scored lower on the language or memory tests tended to deteriorate more quickly.

# Memory test spots pre-dementia



Professor David Smith and his team say their findings fit with what we already know about dementia. Experts have noted that the early stages of dementia are associated with linguistic problems, such as word-finding difficulties.

Early literary works by authors who have later been diagnosed with Alzheimer's show similar changes in language use - simpler narratives and a smaller vocabulary.

Rebecca Wood of the Alzheimer's Research Trust said: "This significant long-term study shows how subtle, but measurable, problems with language or memory can predict when a healthy elderly person is likely to develop mild cognitive impairment, which frequently develops into dementia."

"Early intervention will be crucial for future dementia treatments. Being able to spot and measure the initial stages of dementia is a crucial challenge if we are to improve drug testing and lay the groundwork for prevention trials."

Latest work in Archives of General Psychiatry adds weight to the evidence that Alzheimer's dementia is at least partly inherited, and that being healthy in mid-life could help lower your risk of the disease.

Dutch researchers found that people with a parental history of Alzheimer's had higher blood pressure and indicators of arterial disease as well as different amounts of inflammatory proteins in their blood compared with those without a parental history of Alzheimer's.

(Source: BBC)

## Thyroid cancer a risk after childhood cancer

**NEW YORK (Reuters)** — Childhood cancer survivors are 18 times more likely to develop thyroid cancer than the general population, UK researchers report.

"Survival after childhood cancer has greatly improved over the last three decades with 5-year survival 75 percent during the 1990s compared to 25 percent during the 1960s in the United Kingdom," Dr. Ailiki J. Taylor, of the University of Birmingham, and colleagues note in the latest issue of the International Journal of Cancer.

Childhood cancer survivors are at an increased risk of "late effects" of treatment, including the development of second cancers.

To assess the risk of developing thyroid cancer, the researchers analyzed data from 17,980 patients who were enrolled in The British Childhood Cancer Survivor Study and had survived at least 5 years after diagnosis with a childhood cancer from 1940 to 1991.

During a median follow-up of 17.4 years per survivor, 50 cases of thyroid cancer were identified, compared to 2.8 expected in the general population.

Forty-four patients (88 percent) who developed thyroid cancer had received radiation therapy in or around the thyroid gland.

Patients treated radiation therapy for childhood cancer had a greater than fourfold increased risk of developing thyroid cancer, the researchers found.

"These results will be of use in counseling survivors of childhood cancer exposed to radiation in or around the thyroid area," Taylor and colleagues conclude.

## For people on dialysis, too thin can be risky

Dialysis patients with very low body fat are much more likely to die than other people on dialysis, even those with the highest levels of body fat, a new study has found.

Researchers measured body fat percentage in 671 dialysis patients in California. In the next five years, the death rate for people with less than 10 percent body fat was 2½ to three times higher than it was for those with body fat of 20 percent to 30 percent.

Further analysis confirmed a direct link between body fat and risk of death, the researchers reported.

"The higher the body fat, the greater the survival," Dr. Kamyar Kalantar-Zadeh, of the Los Angeles Biomedical Research Institute at Harbor-UCLA Medical Center, said in a news release from the American Society of Nephrology.

"Our study indicates that body fat may be protective in dialysis patients," he said. "The results add to the increasing number of reports about the 'obesity paradox' or 'reverse epidemiology' in patients with chronic kidney disease and other chronic diseases."

The obesity paradox refers to the fact that a higher body-mass index is associated with greater survival in dialysis patients.

The study was to be presented at the American Society of Nephrology's annual meeting in San Diego.

(Source: HealthDay News)

## Prevention of osteoporosis

After the age of about 30, bone thinning is a natural process and cannot be stopped completely. Whether you develop osteoporosis depends not only on the thickness of your bones early in life but also on your health, diet, and physical activity later in life.

The thicker your bones, the less likely the bones are to become thin enough to break. Young women in particular need to be aware of their risk for developing osteoporosis and take steps early to slow its progress and prevent complications.

Plentiful physical activity during the preteen and teen years increases bone mass and greatly reduces the risk of osteoporosis in adulthood. If you eat a diet adequate in calcium and vitamin D and exercise regularly early in life and then continue with these healthy habits, you may be able to delay or avoid osteoporosis.

Eat a nutritious diet that includes adequate amounts of calcium and vitamin D. Both are necessary for building healthy, strong bones. The recommended daily calcium intake for adults up to age 50 is 1,000 mg a day. Men and women age 50 and older need 1,200 mg of calcium each day. The recommended daily intake for vitamin D is 400 to 800 IU a day for adults up to age 50. If you are age 50 or older, the recommended amount is 800 to 1,000 IU of vitamin D a day. The best source of vitamin D is exposure to sunlight. Vitamin D is vital for calcium absorption in bones and to improve muscle strength. One study showed that vitamin D may reduce an older person's risk of falling by 22%.

Take supplements if you are not getting enough calcium and vitamin D in your diet. Most doctors suggest daily vitamin D supplements for children and teens, starting by age 2 months. Talk with your doctor about how much and what sources of vitamin D are right for you and your child.

Get regular exercise. Weight-bearing exercises, such as walking, jogging, stair climbing, dancing, or weight lifting, keep bones healthy by working the muscles and bones against gravity.

Don't smoke. Smoking puts you at a higher risk for developing osteoporosis and increases the rate of bone thinning after it starts.

After osteoporosis develops, getting enough calcium and vitamin D, along with other healthy habits, can slow the process and reduce the chances of bones breaking. It's common for a person's diet to supply only half the calcium the bones need, so you probably need to take supplements. Your bones need vitamin D to absorb calcium. One study showed that vitamin D may reduce an older person's risk of falling by 22%.

Research studies do not agree about whether calcium plus vitamin D supplements can prevent fractures. Some studies show that calcium and vitamin D supplements reduce the risk of fracture. But other studies show little effect of supplements on fracture risk.

The greatest benefit of supplements appears to be for people who have osteoporosis. Calcium and vitamin D supplements are recommended if you have been diagnosed with osteoporosis.

(Source: Webmd.com)

## One swine flu shot enough for pregnant women, two for kids

**WASHINGTON (AFP)** — A single dose of swine flu vaccine produces a robust immune response in pregnant women, one of the groups at high risk of dying from (A) H1N1 influenza, but young children need two shots, U.S. clinical trials have shown.

"The immune responses seen in healthy pregnant women are comparable to those seen in healthy adults at the same time point after a single vaccination, and the vaccine has been well tolerated," Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, said in a statement.

No safety issues were reported during the trials, which began on September 9 and tested 120 women, all in the second or third trimester of pregnancy.

Twenty-one days after they were given the swine flu vaccine, 92 percent of pregnant women who received a single 15-microgram dose and 96 percent of expectant mothers who were given one, 30-microgram dose showed a robust immune response, showed the initial results of the trials, which are still ongoing.

The findings of the trials back up recommendations made last week by the World Health Organization (WHO), that "adults -- including pregnant women -- and adolescents, beginning at 10 years old" be given a single swine flu shot.

Separate tests conducted in the United States have shown that children aged six months to 35 months and three to nine years should have two doses of the H1N1 vaccination, Fauci told reporters Monday.

"Those younger groups didn't have a good immune response eight to 10 days after receiving the first dose, and 21 days after that first dose, their response was still suboptimal -- 25 percent for the very young group and 55 percent for the intermediary group," Fauci told reporters.

"However, there was a very sharp increase in immune response after they received the second dose, such that 100 percent of the younger group and 94 percent of three- to nine-year-olds gave a robust immune response eight to 10 days after the second dose."

## First malaria vaccine 'ready in 3-5 years'

**NAIROBI (AFP)** — The most clinically advanced malaria vaccine so far should be ready for use in three to five years after Phase three trials began in May, researchers said Tuesday.

The vaccine -- known as the RTS,S -- is targeted to be at least 50 percent effective against the severe form of malaria and to last up to one year.

"We believe and hope that in three to five years from today we will be able to put the vaccine in use," Joe Cohen, the vaccine's co-inventor and a GlaxoSmithKline researcher told AFP.

Up to 16,000 children aged between six weeks to 17 months in seven African countries -- Burkina Faso, Ghana, Kenya, Malawi, Mozambique and Tanzania -- will be vaccinated.

"This is a tremendous moment in the fight against malaria and the culmination of more than two decades of research, including 10 years of clinical trials in Africa," said Cohen.

Malaria is the world's deadliest infectious disease. It kills around 900,000 people every year, mainly children under five in sub-Saharan Africa.

Phase three tests monitor safety and potential side effects and evaluate efficacy on a large scale.

Results of Phase 2 trials, which were announced last year, showed 53 percent efficacy against clinical malaria in young children.

That's where we want them to be," Fauci said.

The WHO has urged national authorities that have made children a priority for early vaccination to administer "one dose of vaccine to as many children as possible" while waiting for the results of studies to determine what the optimal dosage is for young kids.

Teenagers and young adults continue to account for the majority of cases of H1N1 flu around the world, "with rates of hospitalization highest in very young children," the WHO has said.

Up to 10 percent of swine flu patients require hospitalization, and up to a quarter of those have to be admitted to an intensive care unit, said the WHO.

"From seven-10 percent of all hospitalized patients are pregnant women in their second or third trimester of pregnancy. Pregnant women are 10 times more likely to need care in an intensive care unit when compared with the general population," the WHO said.

Since the outbreak of the new strain of H1N1 flu began in April, at least 100 pregnant women have been hospitalized in intensive care units in the United States and at least 28 expectant mothers have died of pandemic swine flu, according to the U.S. Centers for Disease Control and Prevention.

Pregnant women and mothers with young children have been turned away from flu vaccination clinics organized by state and county health authorities as vaccine supply has been far outstripped by demand.

Expectant mothers have to have the injectable form of the swine flu vaccine, which is made with killed H1N1 virus, and not the nasal spray, which is made with live, greatly weakened virus and is not advised for pregnant women, children under the age of two and people with chronic health conditions such as asthma.

The vaccine tested on the pregnant women in the United States did not contain the preservative thimerosal, which contains mercury, or an immune-boosting substance known as an adjuvant.



Image showing a pregnant woman, likely related to the swine flu vaccine study.