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ABOUT THE FOUNDATION
DEMENTIA IN AUSTRALIA

Dementia is the second leading cause of death in Australia and investment in research will help minimise its impact in the future. More than 342,800 Australians are living with dementia. This number is expected to rise to 400,000 people before 2025. It is the single greatest cause of disability in older Australians (aged 65 years or older) and the third leading cause of disability burden overall.1

Researchers are working hard to find ways to delay, prevent and ultimately find a cure for dementia and to develop improved techniques to better support those living with dementia. The major barriers to the development of new interventions and treatments in Australia are the lack of research capacity, funding and infrastructure.

ABOUT US

Alzheimer’s Australia has been promoting dementia research, working with researchers and providing dementia research funding since its beginnings in the 1980s as a network of consumer support organisations.

The Alzheimer’s Australia Dementia Research Foundation (AADRF) provides research funding for Australian researchers who are exploring the causes, care, prevention and treatment for dementia.

The Foundation funds researchers across all stages of their careers, but maintains a particular focus on capacity building of new and early career researchers and students. All funding for the AADRF is donated by members of the public and by private and philanthropic organisations.

In the early days, Alzheimer’s Australia provided small grants to support new researchers, and in 2000, three $10,000 grants were awarded. This year the AADRF awarded $2.6 million worth of research grants, across 29 scholarships, fellowships and project grant awards. This was the largest allocation of funds made by the Foundation.

OUR PURPOSE

• To support innovative Australian research that offers the best hope of defeating dementia.
• To work with people with dementia to ensure that research reflects their concerns.
• To disseminate information about the progress of dementia research.

OUR WORK

The 2014 Dementia Grants Program provided competitive research funding worth approximately $2.6 million for project grants, travel grants, postgraduate scholarships and postdoctoral fellowships commencing in 2015. The recipients of research grant funding are integral to the future of dementia research in Australia.

Above all else, the AADRF and the dozens of researchers we support couldn’t do it without you, our supporters. All funding for the AADRF is donated by members of the public, private and philanthropic organisations. Some of our many supporters are featured in this Annual Report. We hope you enjoy their stories and we thank you for your continued support.

OUR GOVERNANCE STRUCTURE

The Foundation is governed by a Board of Directors and a Scientific Panel.

The AADRF Board of Directors are the major decision-making group for the Foundation. The Board is responsible for providing leadership and strategic direction, providing advice on funding opportunities, developing and providing oversight for the Foundation’s strategy, and advising on the operation and financial position of the AADRF. Scientia Professor Henry Brodaty has been the Chair of the Board of Directors for almost all of the thirty years since the formation of the Foundation in 1985.


The AADRF Scientific Panel is responsible for the provision of scientific input into the competitive grants rounds. The Panel is comprised of leading dementia researchers from across the country in the areas of biomedical and psychosocial sciences as well as two consumer representatives. The Scientific Panel provides advice on the competitive grant rounds, including the scientific merit of applications; makes recommendations for award winners; and advises on the breakdown of funding allocation. Professor James Vickers took up the position of Chair of the Scientific Panel in 2014.


The past year has been a very exciting one for the AADRF and for dementia research in Australia. This year the AADRF awarded $2.6 million worth of research grants, across 29 different scholarships, fellowships, and research projects. The 2014-2015 Dementia Grants Program attracted a record number of applications, with 122 applications received for the 29 awards available. The AADRF has been fortunate to receive support from increasing numbers of community fundraisers, industry partners, corporate donors, and charitable trusts. The AADRF has continued to work hard to maintain meaningful relationships with existing and new donors. Although the previous year was a successful one for the AADRF, the next year is shaping up to be even better with the appointment of Trevor Hickman in the position of Executive Manager Fundraising and Marketing. Trevor will be employed by Alzheimer’s Australia and we look forward to collaborating with him to give fundraising and marketing a national presence – something that the AADRF has not had before.

On the recommendation of members of the Foundation’s Scientific Panel, this year saw the addition of two members of the Alzheimer’s Australia Consumer Dementia Research Network onto the AADRF Scientific Panel. Ms Christine Bryden and Dr Jane Thompson provided an invaluable contribution to the discussion and deliberation on grant applications received by the Foundation, with a particular focus on consumer involvement. The AADRF would like to welcome them both and thank them for their input during their first year.

The AADRF would like to make a special note of thanks to our many external reviewers who assisted our Scientific Panel in their review and selection of the best researchers to receive our awards. Thanks also need to go to all of the Alzheimer’s Australia National Office staff, partners and supporters who have contributed over the past financial year for their continued collaboration and invaluable support.

Lastly, and most importantly, I would like to thank the Foundation’s supporters, generous people like yourself who continue to support the vital work of the Foundation, year after year.

Ms Kanupriya Hehir
BPsych (Hons) (ANU)
Manager, Alzheimer’s Australia Dementia Research Foundation
The AADRF has continued to be a major force in dementia research by promoting early career researchers and by funding projects. In 2014-2015 we provided $2.6 million in grants to fund 15 projects, nine post-doctoral fellowships, four doctoral scholarships and one travel fellowship.

Capacity building has always been the major focus of the AADRF. We reasoned that our best return on investment was to entice and support new researchers to focus their intelligence and energy into dementia. Many of our grantees have progressed to establish successful careers in dementia research with teams of their own.

The wellspring of our Foundation is the generosity of donors. While the AADRF is proud to have achieved its highest level of funding to date this year, the dollars available for future grant rounds will depend on philanthropy and donations received.

In 2015, funds from the government’s Boosting Dementia Research Initiative have started to roll out. We were delighted to see the Hon. Sussan Ley MP announce six Dementia Research Team Grants totalling over $35 million, as well as the establishment of the $50 million NHMRC National Institute for Dementia Research (NNIDR). We congratulate Alzheimer’s Australia President Professor Graeme Samuel on Alzheimer’s Australia’s success in being the successful applicant to lead the NNIDR. We look forward to complementing the work of the Institute and working with its director, Professor John McCallum to ensure an integrated approach to support dementia research in Australia.

I thank the members of our Board for their commitment and time, the staff of the AADRF and Alzheimer’s Australia for their support and professionalism and CEO, Carol Bennett for her support.

Scientia Professor Henry Brodaty, AO
Chair, AADRF Board of Directors
2014-2015 DEMENTIA GRANTS PROGRAM: OUR RESEARCHERS

Through the 2014-2015 AADRF Dementia Grants Program, 29 of Australia’s best and brightest early career dementia researchers shared in just over $2.6 million to conduct groundbreaking dementia research. This was the largest allocation of funds ever given out by the AADRF and included funding for projects and researchers looking at dementia risk reduction, diagnosis, treatment, cure and care.

2014-2015 GRANT BREAKDOWN

- Reducing Dementia Risk: 17%
- Dementia Diagnosis: 34%
- Developing Treatments For Dementia: 21%
- Dementia Care: 28%
Dr Smith was awarded a 2014 AADRF Postdoctoral Fellowship.

Project Title: Use of effort sense for exercise prescription in adults living with mild cognitive impairment

Project Snapshot: Early interventions when individuals are in a pre-mild cognitive impairment (MCI) or MCI state are critical to reduce dementia-related burdens in the community. There are established links between physical exercise and protection against dementia in healthy adults and a growing body of evidence indicating physical exercise also significantly reduces the progression to dementia in those living with MCI. There are challenges associated with the uptake and maintenance of sustainable exercise interventions in older adults living with MCI. Nearly 60% of individuals living with MCI are considered physically frail or insufficiently active and maintenance following a moderate-aerobic walking program is poor (<25%). Dr Smith’s group has shown, in young adults, that individually regulating exercise using effort sense, where the individual controls the intensity of exercise, is associated with enhanced physical (improvement in fitness) and psychological outcomes (i.e. individuals feel good). Recently it has also been shown that healthy, active older adults can regulate exercise with effort sense with positive outcomes. Dr Smith believes this will also be a successful exercise strategy in older adults living with MCI. She will initially explore the capacity for older adults living with MCI to use effort sense for exercise prescription (including the intensity in which they work and their psychological outcomes) and then investigate the impact of an intervention on cardiovascular outcomes, cognitive performance and explore the potential underlying physiological mechanisms. Findings will inform recommendations for perceptually regulated exercise training (PRET) to enhance cognition and well-being in older adults living with MCI.

Dr Mowszowski was awarded a 2014 AADRF Half Funded Postdoctoral Fellowship.

Project Title: Cognitive training for older adults ‘at risk’ of dementia and with early-stage neurodegenerative disease

Project Snapshot: The proportion of the population over the age of 60 years is expected to grow exponentially. As such, there is likely to be an associated increase in the number of people diagnosed and living with dementia syndromes such as Alzheimer’s disease, with increased requirements for healthcare and family support for these individuals. Early intervention strategies are urgently required for individuals with an increased risk of developing dementia or those with early-stage or mild forms of dementia. Cognitive Training (CT) is a non-drug treatment which has been shown to be effective for improving memory and wellbeing (e.g. mood, self-confidence etc.) in these groups. It is also safe, engaging and offers the opportunity for social interaction. Therefore, CT has enormous potential to improve cognition, quality of life and independence in older adults with early-stage or pre-clinical dementia, as well as reduce or delay reliance on family-members or healthcare services. However, further research is required to clarify optimal features of CT programs including the content, frequency and duration of the sessions, as well as comparing various methods of delivery (e.g. computer-based or paper-and-pencil exercises). Additionally, in order to translate research findings to healthcare or community settings, issues such as which individuals stand to benefit most and how long these benefits can last need to be clarified. This body of research aims to develop and evaluate new CT programs for older adults at risk of developing dementia or those with mild dementia; to clarify medical, lifestyle and clinical factors associated with improved memory and well-being; and to translate research findings to clinical and community settings.
Dr Buckley was awarded a 2014 AADRF Postdoctoral Fellowship.

**Project Title:** Investigating the effect of cognitive reserve on Alzheimer’s disease risk

Project Snapshot: Alzheimer’s disease is the third leading cause of death in the country, and currently has no cure. Any future treatments of Alzheimer’s disease are most likely to be effective if administered to cognitively normal individuals (those who perform normally on memory tests) who are at risk but do not yet have signs of the disease. Determining those who are at risk is a complex task that is not yet resolved. One way of identifying an individual’s risk is by gauging their level of memory concern. Individuals with a concern might detect a subtle change before performance on memory tests become abnormal. Greater levels of beta-amyloid (atypical clusters of protein fragments) in the brain has been associated with more severe memory concerns.

This relationship is subtle, suggesting that there might be other factors modifying their association. One possibility is cognitive reserve, or an individuals’ ability to compensate for the level of disease in their brain. Cognitive reserve might be achieved by harnessing alternative, disease-free brain regions to complete daily tasks. Individuals high in cognitive reserve tend to worry more about their memory, possibly because they have a better gauge of previous abilities. This reserve might manipulate the relationship between beta-amyloid and memory concerns. Dr Buckley predicts that in healthy older individuals who have higher cognitive reserve, there will be a stronger relationship between beta-amyloid and memory concerns. Results from this study will aid in the ability to identify at risk older adults who will benefit most from Alzheimer’s disease treatment trials.

Dr Ayton was awarded a 2014 AADRF Half Funded Postdoctoral Fellowship.

**Project Title:** Alzheimer’s tau protein: linking cardiovascular disease to neurodegeneration

Project Snapshot: Individuals who have elevated blood pressure during the middle portion of their lives (50-65) have a much greater chance of getting Alzheimer’s disease later in their life. The reason for this is not understood, but new preventative therapeutics might be possible if we discover what causes the association between mid-life elevation of blood pressure and risk for Alzheimer’s disease. Dr Ayton’s recent findings have shown that a protein called tau, which is known to be involved in the disease process, is changed in animals that have elevated blood pressure. He has also found that tau itself is important for the function of the heart. Dr Ayton now plans to investigate the cardiovascular aspects of Alzheimer’s disease using a variety of techniques and models. Research in this topic has been limited by the tendency of researches involved in Alzheimer’s disease not having the capabilities to explore the cardiovascular system, and vice versa. His research is uniquely placed to offer a clear insight into the cardiovascular aspects of Alzheimer’s disease, which could lead to new ways of treating people with the disease.
Dr Ying Lim was awarded a 2014 AADRF Postdoctoral Fellowship.

Project Title: An investigation of the mechanisms by which a specific gene protects against amyloid beta toxicity in healthy older adults

Project Snapshot: In cognitively healthy older adults the presence of abnormal levels of the amyloid beta protein can sometimes be seen. These levels may be associated with decline in memory and brain atrophy, but may not actually meet the clinical definition for Alzheimer’s disease. Dr Ying Lim’s project will focus on a gene known as ‘the brain-derived neurotrophic factor (BDNF) Val66Met gene’. It is suggested that people who carry two copies of this gene are at higher risk of developing Alzheimer’s disease.

However, Dr Ying Lim’s research will examine whether the BDNF gene may also be able to protect against amyloid beta toxicity in brain regions that are involved in language and executive function. In fact, her previous research has found that people who only carry one copy of the gene may actually be protected against the effects of amyloid beta toxicity.

To further understand how the BDNF gene may protect against amyloid-related decline in cognitive function, this study will also aim to examine whether BDNF affects the efficiency of brain networks in individuals at risk of Alzheimer’s disease. Finally, it will be important to compare the effects of BDNF with other protective factors (premorbid intelligence, years of education, occupational complexity) that have been also proposed to protect against amyloid-related decline in cognitive function.

Dr Brown was awarded a 2014 Rosemary Foundation Travel Award to travel to the Brain Aging and Cognitive Health Laboratory at the University of Pittsburgh.

Project Snapshot: Dr Brown will travel to the University of Pittsburgh to spend time training in the Brain Aging and Cognitive Health (BACH) laboratory. The BACH team is led by Associate Professor Kirk Erickson, an internationally renowned researcher with experience in healthy aging. Associate Professor Erickson’s research predominantly involves the investigation of the effect of lifestyle on measures of brain health, using various brain imaging techniques. His team have a strong track record in fMRI, and have produced a number of high-impact publications in the area. The primary aim of Dr Brown’s visit is to train in a brain imaging technique, known as functional magnetic resonance imaging (fMRI). This technique enables researchers to measure the activation of certain brain regions during cognitive tasks and to measure the connections between various brain regions. The ability to use the fMRI technique would add value to the studies conducted by Dr Brown where the structure and volume of the brain is evaluated and levels of the toxic protein amyloid are measured. In addition to learning this new brain scanning technique, Dr Brown’s visit to the BACH laboratory will enhance collaborations relating to the effect of lifestyle, in particular physical activity on risk of Alzheimer’s disease.
Dr Duffy was awarded a 2014 Alzheimer’s Australia NSW Project Grant.

Project Title: Evaluation of a 12-week combined psychoeducation and home-based exercise program on mood and wellbeing in older adults with early Alzheimer’s disease

Project Snapshot: With the prevalence of dementia expected to increase significantly by 2050, the need for strategies to slow cognitive decline and improve wellbeing and physical function in people with early stage Alzheimer’s disease are clear, and in this regard, individualised exercise programs have demonstrable promise. Evidence suggests that physical inactivity is associated with an increased risk of Alzheimer’s disease and indeed, exercise interventions have been shown to improve executive function and memory in people with mild cognitive impairment. However previous exercise programs have been associated with high levels of face-to-face contact, limiting their economic feasibility. This pilot randomised controlled trial aims to examine the effect of an individualised 12-week home-based exercise program combined with a structured motivation/psychoeducation program on mood, memory and quality of life as well as fitness, muscle strength and balance, in older people with early Alzheimer’s disease. Results will be compared to a control condition comprising a home-based workbook psychoeducation program. The outcomes of this study will be used to power larger, more rigorous randomized controlled trials and the preliminary results, if positive, could be easily translatable to current clinical practice.

Dr Lei was awarded a 2014 AADRF Project Grant.

Project Title: Tau protein and insulin signalling pathways: Implication to Alzheimer’s disease and diabetes

Project Snapshot: Alzheimer’s disease is the most common incurable neurological disorder, affecting over 200,000 Australians. Tau protein was identified in the 1980’s because it characteristically accumulates as microscopic tangles within brain cells (called neurons) in Alzheimer’s disease. However its function has remained uncertain. Dr Lei’s group recently reported that tau protein participates in brain protein transportation, where consequences of protein mislocalisation can be toxic. In the current proposal, Dr Lei aims to further investigate the function of tau in insulin signalling pathway, which also contributes to Alzheimer’s disease. The proposed research will facilitate understanding of the causes of Alzheimer’s disease, and may have implications in drug discovery.
Dr Kumfor was awarded a 2014 AADRF Postdoctoral Fellowship.

Project Title: Novel diagnostic markers in younger onset dementia: a multimodal assessment of emotion

Project Snapshot: Accurate and timely diagnosis of dementia is key to effective intervention and treatment. Younger onset dementia, which occurs before age 65, currently affects over 25,000 Australians. In the absence of any treatment or cure, and as the population ages, this number is predicted to triple by 2050. Alzheimer’s disease and frontotemporal dementia are the two most common dementia syndromes in this younger age bracket. Accurate diagnosis, however, is difficult because individuals with Alzheimer’s disease and frontotemporal dementia can show similar symptoms. Furthermore, current tests are poor at distinguishing between these potential diagnoses. During this fellowship, Dr Kumfor will develop new tests of emotional dysfunction and empathy. These are key features which distinguish frontotemporal dementia from Alzheimer’s disease. The findings will directly improve the ability to differentiate between these dementia syndromes. Identification of difficulties in emotional functioning is also crucial because of their potential impact on everyday life. Carers report increased loneliness, depression, stress and family disharmony. This is likely compounded by changes in emotion and empathy, as individuals have difficulty maintaining relationships and behaving appropriately in social situations. These changes result in the need for ongoing high-level care, in individuals who are otherwise physically healthy and often have young families. Understanding of the impact of emotional dysfunction is essential to identify carers most at risk of unsustainable levels of stress and burden. These findings are an important first step in the development of targeted intervention programs to improve the wellbeing and everyday life of patients and carers affected by younger onset dementia.

Dr Sohrabi was awarded a 2014 Cecilia Margaret Hudson Dementia Research Grant.

Project Title: Imaging the eye to diagnose pre-clinical Alzheimer’s disease

Project Snapshot: It is suggested that if Alzheimer’s disease is diagnosed at an earlier stage, preventive and ameliorative interventions can be utilised prior to irreversible changes in the brain. In Alzheimer’s disease, normal brain physiology is disrupted as many as two decades before clinical signs and symptoms. Preliminary studies have provided strong evidence of retinal changes in people with Alzheimer’s disease. Research by Dr Sohrabi and team have shown associations of retinal vascular parameters, pupil flash response and Alzheimer’s disease incidence. His project will investigate if ocular imaging using curcumin (from turmeric) as a tracer can detect retinal beta amyloid beta plaques in people who have preclinical and clinical Alzheimer’s disease diagnoses. Participants include cognitively normal individuals, mild cognitively impaired and people with Alzheimer’s disease. If this research provides clinical evidence to utilise retinal imaging as an accurate screening measure, it will create opportunities for accurately recruiting participants into drug trials and therefore, increasing our chances of delaying or preventing Alzheimer’s disease.
Dr Goldsworthy was awarded a 2014 AADRF Project Grant.

Project Title: Combined brain stimulation and recording techniques for the early diagnosis of Alzheimer’s disease

Project Snapshot: The early detection of patients with Alzheimer’s disease is key to more effective early intervention. Current biomarkers are typically expensive with limited widespread applicability, and are not suited for detecting the subtle changes in brain function that may occur during the earliest stages of the disease. Recent advances in non-invasive brain stimulation techniques have enabled researchers to directly probe brain function in conscious human subjects. Importantly, these techniques are pain-free and relatively inexpensive. Therefore, Dr Goldsworthy’s project aims to investigate whether these techniques might be used to identify markers of early brain dysfunction and cognitive decline in Alzheimer’s disease.

Dr Gupta was awarded a 2014 AADRF Project Grant.

Project Title: Investigating biochemical changes during familial Alzheimer’s disease progression

Project Snapshot: Alzheimer’s disease is a progressive neurodegenerative disorder characterised by the dying brain tissue with resultant loss of memory and behavioural changes. Currently, diagnosis of Alzheimer’s disease remains problematic as the main hallmark of the disease such as amyloid beta deposition and neurofibrillary tangles in the brain are uncovered only during post-mortem examination. Development of peripheral biomarkers for the early detection of Alzheimer’s disease would be a giant leap forward in allowing accurate, early diagnosis as well as regular monitoring of disease progression. Dr Gupta’s research will use familial forms of Alzheimer’s disease to detect and validate disease specific blood biomarkers.
Dr Anggono was awarded a 2014 AADRF Project Grant.

Project Title: Ubiquitinomic profiling of synaptic proteins in Alzheimer’s disease

Project Snapshot: Alzheimer’s disease manifests as a progressive loss in memory and cognition, which might be diagnosed only 15-20 years after the underlying pathology has been initiated. There is currently no cure, as the causes of Alzheimer’s disease remain poorly understood. Evidence suggests that the degree of cognitive decline in people with Alzheimer’s disease correlates with the loss of major proteins that regulate communication between nerve cells. Dr Anggono’s project will focus on a major cellular process that regulates protein degradation and determine all the neuronal proteins that undergo such modification in a model that mimics younger onset Alzheimer’s disease. The overall goal of this research proposal is to identify pathways for the development of new therapeutics, as well as novel biomarkers for the accurate diagnosis of Alzheimer’s disease at the earliest stage of disease.

Ms Harrington was awarded a 2014 AADRF Half Funded PhD Scholarship.

Project Title: The neuropsychiatric features of preclinical Alzheimer’s disease

Project Snapshot: Depression and Alzheimer’s disease have been observed to often present together in older individuals. There is some suggestion that depression may actually be an early symptom of Alzheimer’s disease, with depressed older individuals having been observed to have increased levels of amyloid-beta (a key pathological marker of Alzheimer’s disease) and to present with memory impairments. Furthermore, individuals with increased levels of amyloid-beta have been reported to be at increased risk of developing depression. Consequently, there is a need for both greater understanding of the relationship between depression and Alzheimer’s disease and also the development of protocols to differentiate these for use by clinicians and primary care physicians. Ms Harrington’s project aims to clarify this relationship by investigating the development of the two conditions in older adults over time and by considering biological factors that may be involved in the relationship. Additionally, her project will examine whether the presence of depression influences the course of Alzheimer’s disease. These investigations may help to improve understanding and recognition of the early stages of Alzheimer’s disease, and subsequently may then assist with the development of treatment for Alzheimer’s disease. Ms Harrington’s project will incorporate data from the Australian Imaging Biomarkers and Lifestyle (AIBL) study. The aim of the AIBL study is to understand the development of dementia and the identification of factors influencing its timing and occurrence. It includes detailed clinical and neuropsychological assessments which cover the main domains of cognitive function affected in Alzheimer’s disease, and includes amyloid beta imaging, health and lifestyle, and genetic measures.
Dr Southam was awarded a 2014 AADRF Half Funded Postdoctoral Fellowship.

Project Title: Are microglia the villains of amyloid beta toxicity in Alzheimer’s disease?

Project Snapshot: The brains of people with Alzheimer’s disease contain abnormal protein deposits, the main constituent of which is a small protein fragment known as amyloid beta. Amyloid beta is proposed to be toxic to neurons, however, despite 25 years of research, we are not much closer to understanding why or how. Recently some new clues have suggested that amyloid beta may not be solely toxic to the neurons as previously thought, but may instead interact with other cells of the brain (glia) resulting in secondary toxicity to neurons. With the latest findings in mind, the prime candidates for a proposed non-neuronal interaction are microglia. Microglia are the immune cells of the brain. Dr Southam knows that microglia are present around the amyloid deposits in Alzheimer’s disease, however, this was always assumed to occur in response to large accumulations of amyloid beta. Now, new evidence suggests that microglia may actually remove amyloid beta from the brain throughout life and this process is lost or made less effective in Alzheimer’s disease resulting in a large rise in the amount of amyloid beta, toxicity to neurons and formation of plaques. In this project Dr Southam aims to investigate microglia not only to better understand their normal interactions with amyloid beta, but to explore why microglia are not able to effectively remove amyloid beta from the Alzheimer’s disease brain. Furthermore, she will investigate whether microglial interactions with amyloid beta present a viable target for intervention.

Dr Ittner was awarded a 2014 AADRF Half Funded Postdoctoral Fellowship.

Project Title: A novel neuro-protective mechanism in Alzheimer’s disease

Project Snapshot: Alzheimer’s disease is characterised by loss of memory because of dying brain cells and brain atrophy. In addition, proteins deposit in the brain tissue forming amyloid plaques. The amyloid plaques contain short protein fragments that are toxic to brain cells, causing them to die, a process called ‘amyloid toxicity’. Recent discoveries have shown that the toxic signal of amyloid is caused by changes of brain cell molecules (i.e. components that make up the cell). However, it remains completely unknown whether there are also molecules that can inhibit or even block these toxic signals. During his fellowship, Dr Ittner will assess a novel molecule, which may protect brain cells from amyloid toxic signals. Dr Ittner aims at finding out how exactly this molecule protects brain cells from amyloid toxic signals. His project will close a gap in knowledge of protective components in brain cells and will provide part of the understanding needed to design new ways for treating Alzheimer’s disease.
Dr McCade was awarded a 2014 AADRF-Victoria Award.
Project Title: A therapeutic intervention in Alzheimer’s disease: Intranasal oxytocin administration to enhance emotion processing and reduce impact on caregivers
Project Snapshot: Research suggests that individuals with dementia are less accurate in their ability to recognise emotions such as anger, fear and sadness. This can have a devastating impact on the social behaviour of individuals with dementia and their social relationships. For example, poor emotion recognition abilities predicts increased impact amongst those caring for loved ones with dementia. Oxytocin is a hormone which has been found to improve emotion recognition ability and enhance trust. Dr McCade’s project is an intervention programme aimed at individuals with Alzheimer’s disease to improve the accuracy in their emotion recognition and also to reduce caregiver burden in their caregivers (i.e., family members/ significant others) via an intranasal administration of oxytocin over a one week period.

Dr Leung was awarded a 2014 AADRF Project Grant.
Project Title: Investigating the role of ‘oligodendrocytes’ in frontotemporal dementia
Project Snapshot: Frontotemporal dementia is characterised by dysfunction of nerve cells in specific areas of the brain, the frontal and temporal lobes of the cortex. Nerve cell dysfunction occurs when they fail to communicate properly with each other and eventually die. Nerve cells communicate via long processes called axons. The axons are supported by a protective sheath, myelin, which allows rapid conduction of signal and provides metabolic support for axons. Myelin is made by cells called ‘oligodendrocytes’. Recent studies have shown the presence of aggregates of a protein called TDP-43 in oligodendrocytes in the brain samples obtained from deceased people who had frontotemporal dementia, indicating that loss or dysfunction of these cells may be involved in the pathogenesis of frontotemporal dementia. Dr Leung knows from other diseases such as multiple sclerosis that dysfunction of oligodendrocytes and disruption of myelin can cause nerve cells to degenerate and disrupt communication between cells. In this study she will focus on understanding the role of oligodendrocytes in frontotemporal dementia and uncover the specific mechanisms that causes oligodendrocyte dysfunction which result in loss of nerve cell communication in frontotemporal dementia. By understanding how nerve cells and their support cells degenerate in frontotemporal dementia Dr Leung can work to provide new avenues for therapeutic intervention in this disease.
Ms Beales was awarded a 2014 AADRF Half Funded PhD Scholarship.

Project Title: Making the right connections: Working with people with dementia and their families to reduce word finding difficulties in everyday communication

Project Snapshot: A common difficulty experienced by people with dementia is the inability to find the right words when speaking. This results in feelings of severe frustration and often leads to withdrawal from social situations. Such difficulties are frequently felt just as acutely by family members. This study proposes to build on a highly successful pilot therapy program that has been shown to significantly improve the word finding abilities of people with one form of dementia, i.e. Primary Progressive Aphasia (PPA). The study proposes to further develop the novel intervention and carry out 20 intervention studies that involve 10 people with Alzheimer’s disease and 10 people with PPA. This intervention is unique in that it not only builds on knowledge that people with PPA and Alzheimer’s disease do retain the ability to learn/relearn words, but it extends to providing people with successful strategies to use in conversation and everyday speaking situations. The intervention is also tailored to the needs of the individual and works closely with family members to ensure they are well supported. As well as assisting the person with dementia and their families, this study will provide important information for speech pathologists and other health professionals on what aspects of therapy work best and for whom. It will also assist in developing a better understanding of how language breaks down in dementia and how we might minimise the negative social implications for both those with dementia and their families.

Dr Bharadwaj was awarded a 2014 AADRF Project Grant.

Project Title: Targeting ‘chaperone mediated autophagy’ to alleviate amyloid beta toxicity in Alzheimer’s disease

Project Snapshot: With ageing, the maintenance of protein quality control in cells diminishes, which is evident from the characteristic accumulation of aberrant proteins in late onset diseases, such as Alzheimer’s disease. Neurons are particularly vulnerable to such stresses, mainly due to their cell structure and inability to divide and dilute these toxins into newer cells. Toxic forms of the amyloid beta protein accumulate in the Alzheimer’s disease brain, triggering a set of events that lead to cell death that contributes to the clinical symptoms. Dr Bharadwaj’s previous work shows that activating the cell housekeeping system “autophagy” can help clear amyloid beta proteins and prevent cell damage. Although a very attractive therapeutic avenue, overactivation of this pathway can sometimes lead to undesirable effects and even cell death. Developing effective autophagy-based therapies without additional burden to the cell has therefore remained a challenge in Alzheimer’s disease. Dr Bharadwaj’s recent work has revealed “chaperone” controlled mechanisms that can carefully remove toxic amyloid beta with minimal side-effects to the cell. Stimulating chaperone functions is therefore a very attractive therapeutic avenue for Alzheimer’s disease, mainly due to its selectivity to toxic proteins and overall protective functions in the cell. This study will advance knowledge into the mechanisms of chaperones in reducing amyloid beta build-up and protect brain cells from dying in Alzheimer’s disease. Overall, findings from this research will also have benefit through identification of potent compounds that might provide the basis for effective anti-Alzheimer’s disease therapeutics.
Dr Ke was awarded a 2014 AADRF Project Grant.

Project Title: Developing a novel neuroprotective drug target for Alzheimer’s disease

Project Snapshot: Alzheimer’s disease is the most common form of dementia and the most common neurodegenerative condition in humans. Alzheimer’s disease is caused by increased levels of amyloid beta in the brain that forms plaques, leading to neuronal damage and loss. Dr Ke has found that removing a particular gene in the brain prevents memory deficits in an Alzheimer’s disease animal model. In this project, she will study the detailed mechanisms leading to brain deficits in Alzheimer’s disease and test a novel drug target for future therapeutic strategies. These studies will involve experiments with human brain tissue, animal models of Alzheimer’s disease and cultures of brain cells.

Dr Woodhouse was awarded a 2014 AADRF Postdoctoral Fellowship.

Project Title: Selectively vulnerable neurons in Alzheimer’s disease: functional and morphological changes in healthy ageing and early Alzheimer’s disease

Project Snapshot: The incidence of Alzheimer’s disease is highly correlated with ageing, and it is known that the altered behaviour of neurons play an important role in memory loss in healthy aging. In Alzheimer’s disease severe memory deficits are caused by the dysfunction and death of a select group of neurons, yet it is not understood why these particular neurons are susceptible. Dr Woodhouse’s fellowship will determine how the connections and activity of these vulnerable neurons are changed in healthy aging and early Alzheimer’s disease and aim to answer the following questions; a) Do neurons that are vulnerable in Alzheimer’s disease have a signature of changes in healthy ageing that might predispose them to be susceptible in Alzheimer’s disease?; b) Do these vulnerable neurons have a distinct set of changes in their connections and activity in early Alzheimer’s disease?; and c) Can we identify novel targets in these vulnerable neurons for the development of new therapeutics for Alzheimer’s disease?

This fellowship will significantly advance our knowledge by producing information essential for understanding how neurons function in healthy ageing and how this is altered in the group of vulnerable neurons in Alzheimer’s disease. Understanding the mechanisms underlying the selective vulnerability of this important group of neurons in Alzheimer’s disease will potentially lead to the development of new therapeutics for Alzheimer’s disease.
Mr Phipps was awarded a 2014 Petersen Family Foundation/AADRF Half Funded PhD Scholarship.

Project Title: The role of epigenetics in Alzheimer’s disease, using mice as a model species

Project Snapshot: Ageing causes cells to decline in both integrity and function. As such, the incidence of disorders such as Alzheimer’s disease, that affect the brain’s cells, increase with ageing. In healthy cells, genes are tightly regulated so that the correct combination of genes are switched on, or off, at the proper time to allow for learning and memory to occur. This is achieved by the addition or removal of small chemical residues on top of the DNA, and the study of these processes is known as epigenetics. Epigenetic marks on DNA can change during ageing, and diseases occur when this happens too quickly or in an uncontrolled way.

Proper epigenetic control must be maintained during ageing and Mr Phipps’ PhD project raises the possibility that epigenetic dysregulation plays an important role in Alzheimer’s disease progression. The overall aim of his PhD is to identify epigenetic alterations associated with Alzheimer’s disease. Preliminary data has revealed that epigenetic changes do occur in people with Alzheimer’s disease. However, existing knowledge of the epigenetic alterations in Alzheimer’s disease is extremely limited, highlighting that new knowledge in this area is critical.

At completion of Mr Phipps’ PhD, he will understand whether distinct epigenetic signatures are associated with different stages of disease in Alzheimer’s disease, and if epigenetic changes occur in specific cell types in the brain or are dependent on proximity to Alzheimer’s disease pathology. These findings will significantly advance the understanding of the role of epigenetic dysregulation in Alzheimer’s disease and could also identify new clinical treatments for people with Alzheimer’s disease.

Ms Handley was awarded a 2014 AADRF Half Funded PhD Scholarship.

Project Title: Changes in synaptic alterations and its impact on frontotemporal dementia

Project Snapshot: Frontotemporal dementia is a form of dementia affecting primarily the frontal and temporal part of the brain. It is the second most common form of dementia in people under the age of 65. TDP-43, a DNA processing protein, is one of the main proteins that have been identified to play a role in frontotemporal dementia. Synapses are specialised structures that allow neurons to communicate with each other. Changes in synapses can have serious effects on neurons and, if not controlled, can cause neuron death. TDP-43 has been shown to affect the number and maturation of synapses. It is feasible that an early disease-causing event in frontotemporal dementia may be changes to synapses. Ms Handley will determine how TDP-43 changes lead to specific pre and post synaptic alterations in vitro using primary neurons.
Dr Brennan-Horley was awarded a 2014 Alzheimer’s Australia NSW Project Grant.

Project Title: Geographic gerontology and dementia friendly environments: Illuminating perspectives of people with dementia and carers

Project Snapshot: This project is using computer-based mapping technologies to uncover features of ‘dementia-friendly’ social and physical environments. Researchers will utilise an innovative mixed methods approach to effectively engage people with dementia and their carers to map and explore the places and spaces where they spend their daily lives.

Dr Beilby was awarded a 2014 AADRF-Victoria Award.

Project Title: Development and use of a context-rich virtual learning environment for practicing interpersonal communication skills

Project Snapshot: Communication difficulties are some of the most significant challenges experienced by health professionals and family members when interacting with and caring for people with dementia. This study addresses the critical need for new, evidence-based communication training to support quality of care and to optimise quality of life outcomes for people living with dementia. It will evaluate the use and feasibility of a highly innovative virtual learning environment (VLE) that addresses the limitations of traditional training approaches.

Thirty adults, comprising a range of health professionals and family members who communicate with and care for people with dementia, will engage with a virtual resident (avatar) with dementia in a simulated, yet realistic communication exchange. This will provide a safe environment in which to practice communication facilitation techniques to improve communication and manage frustration and agitation in the person with dementia. The use of the avatar in the VLE allows for supported, repeated and realistic skills training. It is a practical way to practice strategies and improve communication techniques that can then be generalised and used in real-world contexts. The study will assess the feasibility of VLE use by health professionals and family members, evaluate whether improvements in interpersonal communication self-efficacy (confidence) and satisfaction occur, and whether the VLE is positively received by these communication partners. The findings will support future research that aims to embed the VLE into communication training packages and explore further application of this innovative technological approach to training in the field of dementia.
Dr Phillipson was awarded a 2014 Resthaven Inc. Dementia Research Award.

Project Title: The development and trial of an innovative community based Respite Action Intervention for carers of people with dementia

Project Snapshot: The provision of respite is consistently identified by carers of people with dementia as one of their critical unmet care needs. Despite this, the overall proportion of carers of people with dementia who use available respite and other support programs tends to be low. In Australia this is likely to be the result of numerous factors including informational, attitudinal and service-related barriers. The Respite Action Intervention for carers of people with Dementia (RAID) is an innovative multicomponent community intervention that will utilise education, social marketing, and state of the art technologies embedded in an interactive local services website to improve carer knowledge, attitudes and uptake of respite services to meet their need for ‘more than just a break’.

Dr Mortby was awarded a 2014 Hazel Hawke Research Grant in Dementia Care.

Project Title: Carer characteristics and behavioural and psychological symptoms of dementia: A pilot study

Project Snapshot: Many people diagnosed with dementia also experience behavioural problems (e.g. depression, aggression, sleep problems). These symptoms contribute significantly to higher levels of stress and poorer quality of life for both the person with dementia and their carer. While much research has focused on the negative effects of such symptoms on carer wellbeing, little is known about the effects of specific carer characteristics (e.g. caregiving styles, attitudes, behaviours or perceived stigma) on behavioural problems in people with dementia. This study is the first step in a larger research programme which will investigate the impact of carer characteristics on behavioural problems in people with dementia. This project proposes that specific carer characteristics influence caregiver and care-recipient interactions and contribute to behavioural problems in people with dementia. Taking a new approach this project will address the lack of research in this area and will provide a framework for a systematic investigation of the interaction effects between carer characteristics and behavioural problems in dementia. A better understanding of these interaction effects will help us better understand how carer characteristics can be used to reduce the personal, emotional, social and financial burden of behavioural issues in people with dementia.
Dr Ghapanchi was awarded a 2014 AADRF-Victoria Award.

Project Title: Improving quality of life for people with dementia: Development and evaluation of a 3D virtual world

Project Snapshot: 3D Virtual Worlds are graphical computer applications which can simulate the real life. Users can interact with these worlds via their own digital and graphical self-representations known as ‘avatars’. These worlds are accessible to users via Internet-connected personal computers. This technology enables people with lower mobility such as people with dementia to be able to experience things that they have experienced in their past life but are no longer able to experience very often due to their low mobility. For people living with dementia in long-term care, engagement in pleasurable activities and a feeling of control over their lives are essential for good quality of life, while depression is associated with poor quality of life. Consistent with this, when long-term care residents are actively engaged, they report improved quality of life and reduced depression. This project seeks to determine whether the use of 3D Virtual World technology by residents living with dementia in long-term care is meaningful and feasible, and if it can contribute to a higher quality of life for people with dementia.
FUNDRAISER AND SUPPORTER STORIES

The AADRF wishes to thank all of our supporters who have contributed this year to our work, through valuable awareness and fundraising activities. Every single dollar makes a difference to dementia research. Your partnership in our work is vital and we are extremely grateful for your assistance. Some stories illustrating the contributions made by our fundraisers are presented here.
DIANTHUS ‘MEMORIES’ - PLANTS MANAGEMENT AUSTRALIA CREATES FLOWER FOR DEMENTIA RESEARCH

In September 2014, Plants Management Australia launched the Dianthus ‘Memories’ flower to raise funds and awareness for dementia research.

The plants were sold through selected nurseries nationally to coincide with Dementia Awareness Month in September. Public response to the plant was overwhelming, resulting in almost $40,000 in sale proceeds being made to the AADRF.

Dianthus ‘Memories’ has a perfumed pure white bloom and shares many of the characteristics of the modern dianthus plant including long flowering, sturdy stems and dry tolerance. It is the perfect gift, performing equally well in garden beds, containers or long lasting cut flower displays.

The plant will be available for purchase in select retail outlets and nurseries nationally again in Spring 2015.

I COULDN'T THINK OF A BETTER WAY TO HONOUR A LOVED ONE THAN WITH A BEAUTIFUL FLOWER SUCH AS DIANTHUS MEMORIES. ITA BUTTROSE, ALZHEIMER’S AUSTRALIA NATIONAL AMBASSADOR

PORT OF BRISBANE STAFF SUPPORT THE FOUNDATION

Port of Brisbane chose the AADRF as its charity partner in 2014 as the result of a staff ballot. Over the course of the year, staff participated in a range of activities to support their amazing fundraising effort which resulted in close to $20,000 for the Foundation. Ben Fox, a researcher funded by the grants program of the Foundation spoke to staff at a morning tea about the research he is undertaking, which is focused on the benefits of physical exercise for people with dementia in aged care facilities. The presentation intrigued the Port of Brisbane staff, who asked many questions and were very appreciative of learning about how their donations are being put to good use.
WILL DURAND’S CARDBOARD HUT SLEEPOUT IN SUPPORT OF DEMENTIA RESEARCH

An email which warmed our hearts towards the end of 2014 was from the wonderful Will Durand, an eleven year old student from Tasmania. Will was undertaking a “What You Do Matters Challenge” at his school where each student was encouraged to design their own project that would have an impact on the community. Examples could be volunteering, participating in plays, joining sporting clubs, helping elderly neighbours or fundraising for a cause.

Will chose to fundraise for Alzheimer’s disease by sleeping out on a Saturday night in November 2014. He constructed his own cardboard hut to sleep in and was determined to complete his challenge, rain, hail or even snow!

Will chose to support the AADRF to honour his grandfather who had passed away with dementia at the age of 71 in August of 2014. Will told us: “My Grandfather (we called him Pa) passed away in early August in Sydney. He had run a successful business in Sydney for over 30 years and had to retire because he was so ill. He was never sick in his life and we all loved him a lot, so we were all very sad when he could no longer recognise us or laugh with us in his last few years. I’m looking forward to making the cardboard house and maybe having my dog Millie and my rabbit Mumford sleep out with me.”

The weather held out for Will and he slept outside as planned. His family and friends helped him to raise his target of $2,000.

We thank Will for his amazing effort and for undertaking his school challenge with such passion.

CAE TOLMAN – THE MARATHON ENGLISH CHANNEL SWIM

Meet Cae, the passionate marathon swimmer who embarked on a journey on 2 July 2015 that saw him achieve a personal goal, as well as raise crucial funds for the AADRF.

“While I could swim as a child I did not really swim much and only took to open water swimming 3 1/2 years ago. Since then I have grown to love marathon swimming and its challenges and have swum successively longer distances: Lake Argyle (WA) 10 km, Rottnest Channel (WA) 20 km, Palm Beach to Manly (NSW) 26 km,” Cae said.

Cae took his love for marathon swimming to a whole new level. On 2 July this year, he swam the English Channel, a total of 34 kms, from Shakespeare Beach near Dover to Cap Gris Nez, a point near Calais, to raise funds to support dementia research. He told us prior to the swim:

“If I succeed, and only 3 in 10 succeed, it should take me somewhere between 12 and 16 hours of constant swimming.”

“When I swim the water will be somewhere between 11 and 16 degrees Celsius – hoping for 16, planning for 12 – and as you can imagine, hypothermia is one of the main reasons not to succeed as English Channel rules forbid wet suits!”

Cae and his wife have been impacted by dementia which is what motivated him to undertake this challenge.

“Dementia robs people of their families, their dignity and their lives. My wife is currently going through a difficult situation with her mother’s deteriorating Alzheimer’s in the UK, with gaining access to support packages and the need to find long term residential care,” Cae said.

“Nearly everyone I talk to has been impacted in some way and I am very proud to support the research activities of Alzheimer’s Australia’s Dementia Research Foundation.”

Cae is now in training for his next swim in Hawaii in 2017.
MOLLY’S SONG – THE BIKE RIDE FROM MELBOURNE TO CANBERRA

Libby Day is a valued supporter of the AADRF.

Over the past six years Libby has organised events to raise funds and awareness for dementia research. Most of her events are held in the Noosa Shire of Queensland. However in 2014, Libby took her fundraising efforts to a new level – completing an eight day, 859km cycle from Melbourne to Canberra. Arriving in Canberra in September 2014, Libby was met by a group of her supporters as well as Members of Parliament (Mr Stephen Jones MP) who wanted to congratulate her on her efforts.

Libby works tirelessly to create special events that bring people together to celebrate and enjoy performances and fine food as well as to raise awareness and funds for dementia research. Her efforts have garnered more than $25,000 for dementia research, and she has ambitious plans to raise significant funds again in 2015.

Libby hosts her events in the name of “Molly’s Song” as a tribute to her mother who passed away with dementia in 2014. Molly loved music, and Libby has seen first-hand the wonderful impact that music has on people with dementia. Consequently, music and song are a focal point of Libby’s fundraising events.

G UP – THE 87KM RUN FROM AYR TO TOWNSVILLE

On August 30, 2014, Liz Ciranni, her family and many friends took to the highway to raise awareness and money for Alzheimer’s Australia Dementia Research Foundation. Their fundraising initiative is called ‘Running For A Cause’.

Liz’s granddad, known more affectionately as ‘G’ recently lost his battle with dementia after many years living with the disease. G was a prominent member of the community who ran the local pharmacy and loved his sports (including football and golf). He was in the thoughts of Liz and her team throughout their quest as they ran/walked from Ayr to Townsville – 87 kilometres, to represent G’s 87 years of life.

“This is really a tribute to granddad and the great life he led,” Liz told us.

Their run took place on Saturday August 30, 2014 the weekend before Dementia Awareness Month kicked off.

The team’s hope, from completing a kilometre for every year of G’s life, was to raise awareness about dementia, celebrate the ‘G’ Man and what he means to them, and raise money to be used to further research into dementia and Alzheimer’s disease.

During their fundraising initiative they ran a series of small community fundraising events such as themed community walks, chocolate drives, sausage sizzles and entertainment books, and topped it off with the big run.
ENHANCING THE PHYSICAL QUALITY OF THE RESIDENTIAL ENVIRONMENT FOR THOSE WITH DEMENTIA CAN ALSO MAKE A MASSIVE DIFFERENCE. THERE ARE WAYS TO MAKE AGED CARE FACILITIES MORE DEMENTIA-FRIENDLY, WITH THE RIGHT COLOURS, THE RIGHT DESIGN SPACES, THE GARDEN AREAS WHERE PEOPLE CAN GO OUTSIDE. ALL OF THOSE THINGS HELP CONTRIBUTE TO THE WELLBEING OF A PERSON WITH DEMENTIA. ITA BUTTROSE, ALZHEIMER’S AUSTRALIA NATIONAL AMBASSADOR
ABC NETWORK HIGHLIGHTS DEMENTIA RESEARCH DURING NATIONAL SCIENCE WEEK

During the 2014 National Science Week, the AADRF with the support of the Dementia Collaborative Research Centres, the ACT National Science Week Committee and Questacon, organised a dementia research panel discussion titled “Towards a World Without Dementia – Prevention, Cure and Care.”

Paul Barclay from ABC Radio National led the panel on a discussion of questions such as: How close are researchers to finding a cure for dementia? How can we reduce our risk of dementia? And where to next with dementia research?

Panellists included:

- Ms Ita Buttrose AO, OBE – Journalist, author and National Ambassador for Alzheimer’s Australia
- Scientia Professor Henry Brodaty AO – Co-Director, Centre for Healthy Brain Ageing and Director, Dementia Collaborative Research Centre, University of NSW
- Professor Kaarin Anstey – Director, Centre for Research on Ageing, Health and Wellbeing and Dementia Collaborative Research Centre, Australian National University
- Dr Zoe Terpening – Clinical Neuropsychologist, Brain and Mind Research Institute, The University of Sydney
- Ms Christine Bryden – Dementia advocate, author and living well with a diagnosis of dementia

The event was thoroughly enjoyed by a crowd nearing 200 people.

This event also had the media support of the Australian Broadcasting Corporation (ABC) who broadcasted the discussion on both ABC Radio National and ABC TV and featured the discussion via their online blog.

This publicity extended the reach of the panel discussion to over 300,000 Australians and we are very grateful to the ABC and in particular the Big Ideas program for their support and publicity of this event, and for helping the AADRF promote further awareness of this very important topic.

Those who missed the event can access it via the AADRF website: http://dementiaresearchfoundation.org.au/blog/readlistenwatch-abc-network-highlights-dementia-research
To celebrate science and the amazing work that our researchers do, the AADRF, along with researchers from the Australian National University, participated in a community science day in Canberra called Science in ACTion. This event was held in conjunction with National Science Week (16-24 August 2014).

Our website includes information about our past and present grant recipients, ways to support and fundraise for the Foundation, information about our annual grants program and options to participate in research studies via an online Research Participation Portal.

Our Dementia News, which provides multiple ways for people to learn about the latest dementia research, continued to enjoy great readership throughout the year. Along with a regularly updated research blog, the website featured fortnightly podcasts and a monthly video series with interviews with local and international dementia researchers, as well as some inspirational people raising awareness for dementia research. A special edition of Dementia News: The Wrap Up – 2014 showcased some of the most interesting and controversial topics from the year that was.

Increasing consumer participation in research is a key objective of the AADRF. Our Research Participation Portal allows researchers to submit information on their studies and consumers to search through a listing of research projects by state and territory. During 2014-2015, over 30 studies were listed on the Research Participation Portal.
CONGRATULATIONS

The AADRF supports Australia’s best and brightest new and early career dementia researchers.

Many of our grant recipients have gone on to achieve significant career and personal milestones in their fields. Postgraduate scholars have completed their PhDs, books and papers have been published, and prestigious fellowships, grants and roles have been obtained.

We congratulate all of our grant recipients on their achievements.
Dr Myles Minter has recently commenced a postdoctoral fellowship in the Department of Neurobiology at the University of Chicago. Dr Minter is researching the role of microbes that reside within the gastrointestinal tract, such as bacteria and fungi, in the exacerbation of Alzheimer’s disease.

Dr Minter was awarded an AADRF PhD Scholarship in 2011.

Dr Charles Malpas has commenced a postdoctoral position in the Developmental Imaging group at the Murdoch Children’s Research Institute. Dr Malpas is engaged in research investigating how the brain changes as children grow, with a particular focus on the differences between typically developing children and those with neuropsychiatric conditions. A large component of this research involves understanding how different brain imaging techniques can be used to study disorders across the lifespan. Dr Malpas will also be engaged in clinical work at the Royal Melbourne Hospital.

Dr Malpas received a Viertel Foundation PhD Scholarship in 2011.

Dr Moyra Mortby was the recipient of the prestigious New Investigator Award by the International Society to Advance Alzheimer’s Research and Treatment (ISTAART) and the Neuropsychiatric Syndromes (NPS) in Neurodegenerative disease Professional Interest Area (PIA). This award honours scientists who have the potential to make a significant contribution to treatment development for neuropsychiatric symptoms in neurodegenerative disease and are committed to a career in related research. She received the award at the Alzheimer’s Association International Conference (AAIC) in Washington D.C.

Dr Mortby was awarded the Hazel Hawke Research Grant in Dementia Care in 2014 and is currently an AADRF Postdoctoral Fellow.

Dr Scott Ayton had aspects of his research exploring the links between high iron levels in the brain and the risk of developing Alzheimer’s disease feature in a number of online news websites including ScienceAlert, New Scientist and News Medical. These resources have millions of followers globally.

Dr Ayton is currently receiving an AADRF Half-Postdoctoral Fellowship.

Dr Mojtaba Golzan is currently researching the role that changes in the small blood vessels of the eye have in predicting the onset of Alzheimer’s disease. This work may lead to the use of eye imaging technology as a relatively low-cost and non-invasive approach to the early detection of Alzheimer’s disease. Dr Golzan’s research featured at the 2015 Alzheimer’s Disease International (ADI) Conference in Perth and received extensive media coverage.

Dr Golzan was awarded an AADRF Post-doctoral Fellowship in 2013.
2014-2015 DEMENTIA GRANTS PROGRAM: OVERVIEW
<table>
<thead>
<tr>
<th>Grant Type</th>
<th>Grant Details</th>
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<tr>
<td>Alzheimer’s Australia Dementia Research Foundation Project Grants</td>
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<tr>
<td>Hazel Hawke Research Grant in Dementia Care</td>
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<td>Alzheimer’s Australia Dementia Research Foundation – Victoria Project</td>
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<td>Fellowships (x4)</td>
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<tr>
<td>Rosemary Foundation Travel Fellowship</td>
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<tr>
<td>Alzheimer’s Australia Dementia Research Foundation Half-funded PhD</td>
<td>Scholarships (x4)</td>
<td>$15,000 P.A. (FOR 3 YEARS)** + $2,500 P.A. RESEARCH EXPENSES***</td>
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**TOTAL (29 GRANTS)** $2,615,000

* The Alzheimer’s Australia Research Foundation – Victoria (AADRF-Vic) Awards share a common application process with the Dementia Grants Program, but are subject to eligibility criteria and assessment processes determined by the AADRF-Vic Board.

** Funding provided by Alzheimer’s Australia Dementia Research Foundation for half-funded Postdoctoral Fellowships and PhD Scholarships must be matched by the administering institution.

*** The $2,500 p.a. research expenses funding for half-funded PhD scholarships does not need to be matched by the institution.
OUR BOARD

SCIENTIA PROFESSOR HENRY BRODATY
AO MBBS MD DSC FRACP FRANZCP
CHAIR

Professor Henry Brodaty is Scientia Professor of Ageing and Mental Health, Director of
the Dementia Collaborative Research Centre, and co-Director of the Centre for Healthy
Brain Ageing, all at the University of New South Wales. He is Head of the Memory
Disorders Clinic and a consultant psychogeriatrician at the Prince of Wales Hospital.
Professor Brodaty established and has chaired the AADRF Board of Directors (or its
forerunner) for almost all of the thirty years since its formation in 1985.

PROFESSOR JOHN MCKELLAR
AM ED
VICE CHAIR

Professor John McKellar is a Director of the National Board of the Order of Australia
Association and Chairman of the SA Branch of the Association. He is also a Director and
Deputy Chair of the Rosemary Foundation. Professor McKellar has served on the AADRF
Board of Directors since 2004.

MR DAVID NATHAN
LLB BSC FAICD
TREASURER

David Nathan has a personal connection to Alzheimer’s disease, having supported his
father for 10 years until his death in 2012. From 2006 to 2013, David was CEO of Avant,
a large Australian indemnity insurer. He is currently Chief Executive Officer of DEN
Consulting. David has been a Director of AADRF since 2012.
MR NEIL SAMUEL

Neil Samuel is the Managing Director of Dryen Australia Pty. Ltd. Neil has served on numerous boards in the not for profit sector for many years, specialising in governance and finance. His passion for Alzheimer’s Australia was born out of family experience with dementia. Neil has served on the Board of Alzheimer’s Australia Victoria since 2003 and is the current Chair. He also serves on the Boards of Alzheimer’s Australia, Alzheimer’s Australia Dementia Research Foundation Victoria and in 2014 joined the Board of AADRF.

DOCTOR SEAN MAHER
MBBS FRACP

Dr. Sean Maher is a Geriatrician and Head of the Department of Rehabilitation and Aged Care at Sir Charles Gairdner Hospital. He is a senior lecturer in Geriatric Medicine at Edith Cowan University, an Honorary Research Fellow at Curtin University and a Medical Director on the Board of Alzheimer’s Australia WA. Dr. Maher has been on the AADRF Board of Directors since 2011.

DOCTOR ANDREW WATT
PHD GCALL BSC(HONS)

Dr. Andrew Watt is a Research Officer at the Florey Institute of Neuroscience and Mental Health and an Honorary Fellow at the University of Melbourne where he is investigating diagnostic and therapeutic approaches for Alzheimer’s disease and related dementias. Dr. Watt has worked closely with Alzheimer’s Disease International and Alzheimer’s Australia to raise awareness of the disease, since 2002 when his father was diagnosed with younger onset Alzheimer’s disease. Dr. Watt has been a Director of AADRF since 2010.
MR JOHN MORRISON  
BCOMM CPA CTA FAICD  
John Morrison was the Vice Chairman of Alzheimer’s Australia NSW having served on their Board of Directors from 2006 to 2014. Although no longer a director he remains a member of the Audit and Risk Management Committee and the Investment Advisory Committee for Alzheimer’s Australia NSW. He was Honorary Treasurer from June 2003 to July 2006. John Morrison is experienced as a consultant and practitioner in tax and finance, secretarial practice, corporate governance and risk management. He has been on the AADRF Board of Directors since 2010.

DOCTOR RON SINCLAIR  
MSC PHD  
Dr Ron Sinclair was a carer for his wife who passed away in 2006 from familial younger onset Alzheimer’s disease. Dr Sinclair’s father died with dementia in 2004 and he then cared for his step-mother who passed away from dementia in 2014. Dr Sinclair was a research biologist with the South Australian Government. Over the last 15 years, Dr Sinclair has been a member of the Carers Advisory and Advocacy Committee and a Board member of Alzheimer’s Australia South Australia and is now a consumer representative on Alzheimer’s Australia National Consumer Advisory Committee, the National Cross Cultural Dementia Network and the Consumer Dementia Research Network. He was previously a member of the Minister’s Dementia Advisory Group and is now on the Department of Social Services Consumer Gateway Advisory Group. He has been a Director of AADRF since 2013.

PROFESSOR KAARIN ANSTEY  
BA(HONS) PHD FASSA  
Professor Anstey is an Australian National University Public Policy Fellow and Director of the Centre for Research on Ageing, Health and Wellbeing. Her substantive research interests focus on the prevention of cognitive decline, the impact of cognitive impairment on everyday function, and dementia risk reduction. Professor Anstey leads the PATH Through Life study, a 16-year population-based study of three cohorts, including over 7000 adults, spanning early to late adulthood. Professor Anstey is also involved in several interventions to prevent cognitive decline and reduce the risk of dementia. She led the first online dementia risk reduction intervention and the development and validation of the first online risk assessment tool for Alzheimer’s disease that uses only self-report measures. Professor Anstey is a member of the NHMRC Knowledge Translation Faculty, Dementia Steering Group, and a member of the NHMRC Guidelines Adaptation Committee for Dealing with Cognitive and Related Functional Decline in Older People. Professor Anstey was previously the Chair of the AADRF Scientific Panel, and joined the AADRF Board of Directors in 2014.
OUR SCIENTIFIC PANEL

PROFESSOR JAMES VICKERS
BSC(HONS) PHD DSC
CHAIR

Professor James Vickers is Professor of Pathology at the University of Tasmania and Co-Director of the Wicking Dementia Research and Education Centre. His research interests include neurodegenerative disease (particularly Alzheimer’s disease), traumatic brain injury, structural brain plasticity, ageing-related changes in cognition, dementia prevention and health services in dementia. Professor Vickers has been a member of the AADRF Scientific Panel since 2006, and became Chair of the panel in 2014.

PROFESSOR ELIZABETH COULSON
BSC(HONS) PHD

Professor Elizabeth Coulson is a neuroscientist and Group Leader of the Nerve Cell Survival Laboratory at the School of Biomedical Sciences and the Queensland Brain Institute, University of Queensland. Her research interests include the investigating how degeneration of cholinergic neurons of the basal forebrain contributes to cognitive decline in Alzheimer’s disease and the role the role of neurotrophins and their receptors play in this process. Professor Coulson has been a member of the AADRF Scientific Panel since 2012.

PROFESSOR VELANDAI SRIKANTH
MBBS PHD FRACP

Professor Velandai Srikanth is a specialist senior geriatrician with clinical expertise in stroke and cognitive disorders at Monash University. As an established Clinical Academic, he has developed and leads the multifaceted Stroke and Ageing Research (STAR) group based in the Department of Medicine, School of Clinical Sciences at Monash Health. Professor Srikanth has been a member of the AADRF Scientific Panel since 2012.
PROFESSOR RALPH MARTINS
PHD AO
Professor Ralph Martins is the Inaugural Chair of Ageing and Alzheimer’s Disease at Edith Cowan University as well as the Director of Centre of Excellence for Alzheimer’s disease – Research and Care. Professor Martin’s current research interests are focused on understanding the mechanisms and factor(s) leading to the abnormal release and deposition of βA4 in Alzheimer’s disease. Professor Martins has been a member of the AARDF Scientific Panel since 2010.

PROFESSOR WENDY MOYLE
RN DIPAPPSCI BN MHSC PHD
Professor Wendy Moyle is the Director of the Centre for Health Practice Innovation in the Menzies Health Institute Queensland at Griffith University and a research leader in the Dementia Collaborative Research Centre - Carers and Consumers. Her research expertise include quality of life, complementary and alternative medicine, dementia care and behavioural and psychological symptoms of dementia (BPSD), social robotics and family involvement in care. Professor Moyle has been a member of the AADRF Scientific Panel since 2012.

PROFESSOR ELIZABETH BEATTIE
RN PHD FGSA
Professor Elizabeth Beattie is the Director of the Dementia Collaborative Research Centre - Carers and Consumers, Director of the Queensland Dementia Training Study Centre and Professor of Aged Care and Dementia, School of Nursing all at the Queensland University of Technology. She has extensive experience with research in the residential aged care sector, including complex multi-site investigations. Professor Beattie has been a member of the AADRF Scientific Panel since 2012.

PROFESSOR LINDY CLEMSON
PHD MAPPSC BAPPSC WAIT DIPOT NSWCOLLOT
Professor Lindy Clemson is Professor of Occupational Therapy and Ageing and Director of the Ageing, Work and Health Research Unit in the Faculty of Health Sciences at the University of Sydney. Her research focus includes the physical environment, functional capacity and adaptation, daily life activity, enabling participation and preventing falls with older people. She has been a member of the AADRF Scientific Panel since 2013.
CHRISTINE BRYDEN
BSC(HONS) PSM GRAD DIPL PAST COUNS MBA
Christine Bryden was a research scientist for a major pharmaceutical company in the UK, before working in scientific publishing in Holland, the UK and Australia. She then joined the CSIRO, working with researchers and industry to deliver outcomes for the mineral, energy and aerospace industries. She was appointed head of the Office of the Chief Scientist and Secretary of the Australian Science and Technology Council, advising the Prime Minister on Science and Technology, and administering the Cooperative Research Centres program. After diagnosis with dementia in 1995 she became an author, advocate and speaker. She was an elected member of the Board of Alzheimer’s Disease International from 2003 to 2006, and has been a member of the Alzheimer’s Australia Consumer Dementia Research Network since 2010. She is a member of the Steering Committee of Queensland’s Statewide Dementia Clinical Network Steering Committee, of the Caboolture Hospital Clinical Council, and of the Cognitive Impairment Advisory Group of the Australian Commission on Safety and Quality in Health Care. Christine has been on the AADRF Scientific Panel since 2014.

DOCTOR JANE THOMPSON
BSC(HONS) MSC PHD
Dr Jane Thompson is a past carer of her husband who was diagnosed with Alzheimer’s disease in early 2004 at the age of 69. She cared for him at home until about four months before he died in November 2007. Jane is very keen to contribute to improving the experiences of carers of people with dementia, particularly for close family members. Jane holds a BSc with Honours in Zoology, an M.Sc in Biochemistry and a PhD in Zoology, and has worked in a variety of research roles, with her most recent research interests focusing on women’s postnatal health. She has been a member of Alzheimer’s Australia’s Consumer Dementia Research Network since its inception in 2010, and has represented consumers on a range of dementia research project and program steering and advisory committees, including as a member of the Dementia Collaborative Research Centres Coordinating Committee. Jane has been on the AADRF Scientific Panel since 2014.

PROFESSOR GLYNDA KINSELLA
DIPPHYSIO MSC PHD
Professor Glynda Kinsella is Coordinator of Postgraduate Programs in Clinical Neuropsychology, in La Trobe University’s Department of Psychology and Counselling. Her research focus is the neuropsychology of mild cognitive impairment in older age and the evaluation of interventions for these changes. Professor Kinsella has been a member of the AADRF Scientific Panel since 2013.
AKNOWLEDGEMENTS

FUNDRAISING

Our fundraisers continue to amaze us with their persistence, courage and strength to undertake astonishing challenges all in the name of supporting the AADRF and the Hazel Hawke Research and Care Fund. We thank everyone who has supported us over the past year; you have on many occasions put your bodies on the line to raise money for the AADRF and awareness of dementia and that means the world to us.

These fundraisers are individuals, families, schools, businesses and community and interest based organisations. They support us in a number of innovative ways including: participation in marathons, charity walks and other physical challenges; hosting of sporting events; holding fundraising days through social and special interest events; staff morning teas; community raffles; school cake stalls; garage sales; and contributions through donation programs.
STRATEGIC PARTNERSHIPS

We would like to thank everyone for their support over the past 12 months. We are humbled by the generosity shown by individuals and organisations. In particular, we would like to thank the following supporters:

The Australian Government for their support of dementia awareness, dementia risk reduction and dementia services delivered through Alzheimer’s Australia.

The Hazel Hawke Research and Care Fund and the family of Hazel Hawke for their continued support of dementia research.

Professor James Vickers (Chair) and Members of the AADRF Scientific Panel.

Members of the Consumer Dementia Research Network.

Alzheimer’s Australia Dementia Research Foundation – Victoria.

Alzheimer’s Australia National, State and Territory organisations.

The Rosemary Foundation.

Resthaven Inc.

Petersen Family Foundation

The Sylvia and Charles Viertel Charitable Foundation.

The Dementia Collaborative Research Centres.

The ACT National Science Week Committee and Questacon for the organisation of the dementia research panel discussion.

The many dedicated researchers who assisted our Scientific Panel by reviewing applications to the Dementia Research Program and providing expert feedback.

WORKPLACE GIVING PARTNERS

We are also proud to be supported by a wide range of staff who generously provide donations to the AADRF through their internal workplace giving schemes. Our contributors include:

- Alcatel-Lucent Australia
- BHP Billiton
- Maquarie Bank
- The Australian Charities Fund
- Veda Advantage

DONORS AND COMMUNITY FUNDRAISERS

We are grateful to all of our donors who have assisted us in working towards our goal of a world without dementia. Many of our donors make a contribution in memory of a loved one and wish to remain anonymous. Some of our organisational and individual donors include:

- All Souls Opportunity Shop
- Awabakal Descendants Traditional Owners Aboriginal Corporation
- Bruce and Joy Reid Trust
- Cae Tolman
- CommInsure Community (CBA)
- Collaborate for a Cause Charity Auction
- G Up
- Mayger Family
- Molly’s Song
- Mount Hope Community Association
- Oatlands Golf Club
- Overgrove Pty Ltd
- Port of Brisbane
- Plants Management Australia – Dianthus Memories
- Taylor Robinson
- Lucy Taylor – “Through Their Eyes”
- The Trust Company, part of Perpetual
- United Ways Sydney
- Will Durand
STATEMENT BY BOARD MEMBERS

The following financial information was extracted from the audited financial statements of Alzheimer’s Australia Dementia Research Foundation Ltd. ABN 79 081 407 534, for the year ending 30 June 2015 and is included for information purposes only.

A fully copy of the financial statements, including notes to the financial statements and audit opinion, can be obtained free of charge upon request from:

Alzheimer’s Australia Dementia Research Foundation Ltd.
Level 1, AMA House
42 Macquarie Street Barton ACT 2600
E: foundation@alzheimers.org.au
P: (02) 6278 8900

PRINCIPAL ACTIVITIES

The principal activity of the organisation during the financial year was the funding of research into Alzheimer’s disease and other dementias.

SHORT-TERM AND LONG-TERM OBJECTIVES

The short and long term objectives of the organisation are to:

• Build the capacity of Australian dementia research sector to undertake world-leading dementia research.

STRATEGIES

To achieve these objectives, the organisation has adopted the following strategies:

• Attracting and supporting postgraduate students and emerging dementia researchers through a competitive research funding program.

SIGNIFICANT CHANGES

There have been no significant changes in the nature of the principle activities of Alzheimer’s Australia Dementia Research Foundation Ltd. during the financial year.

In the opinion of Board Members, at the date of this statement there are reasonable grounds to believe that Alzheimer’s Australia Dementia Research Foundation Ltd. will be able to pay its debts as and when they become due and payable.

Signed on behalf of Alzheimer’s Australia Dementia Research Foundation Ltd. Board Members by:

David Nathan  Henry Brodaty
Treasurer  Chair
1 December 2015  1 December 2015
INDEPENDENT AUDITOR’S REPORT TO THE MEMBERS OF ALZHEIMER’S DEMENTIA RESEARCH FOUNDATION LIMITED


The accompanying summary financial statements, of Alzheimer’s Dementia Research Foundation Limited, which comprises the summary statement of financial position as at 30 June 2015 and the summary statement of revenue and expenditure for the year then ended, notes comprising a summary of significant accounting policies and the Statement by Board Members that the information are derived from the audited financial report of Alzheimer’s Dementia Research Foundation Limited for the year ended 30 June 2015. We expressed an unmodified auditor’s opinion on that financial report in our auditor’s report dated 1 December 2015. The financial report and the summary financial statements do not reflect the effects of events that occurred subsequent to the date of our report on that financial report.

The summary financial statements do not contain all the disclosures required by the financial reporting framework applied in preparation of the audited financial report of Alzheimer’s Dementia Research Foundation Limited. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial report of Alzheimer’s Dementia Research Foundation Limited.

Board Members’ Responsibility for the Summary Financial Statements

The Board Members are responsible for the preparation of the summary financial statements on the basis described in the Basis of Preparation Note.

Auditor’s Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Australian Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements.

Opinion

In our opinion, the summary financial statements derived from the audited financial report of Alzheimer’s Dementia Research Foundation Limited for the year ended 30 June 2015 are consistent, in all material respects, with that audited financial report on the basis described in the Basis of Preparation Note.

Basis of Accounting

Without modifying our opinion, we draw attention to the Basis of Preparation Note to the summary financial statements, which describes the basis of accounting. The summary financial statements have been prepared to assist Alzheimer’s Dementia Research Foundation Limited to meet the requirements of members. As a result, the summary financial statements may not be suitable for another purpose. Our report is intended solely for the members of Alzheimer’s Dementia Research Foundation Limited.

James Barrett, CA
Registered Company Auditor
BellchambersBarrett

Canberra, ACT
Dated this 1st day of December 2015

Liability limited by a scheme approved under Professional Standards Legislation
## Statement of Revenue and Expenditure for the Year Ended 30 June 2015

### Revenue

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operating activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fundraising</td>
<td>106,184</td>
<td>134,811</td>
</tr>
<tr>
<td>Donations &amp; bequests</td>
<td>918,608</td>
<td>1,592,823</td>
</tr>
<tr>
<td><strong>Total operating activities</strong></td>
<td>1,024,792</td>
<td>1,727,634</td>
</tr>
<tr>
<td><strong>Non-operating activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest received</td>
<td>138,615</td>
<td>179,123</td>
</tr>
<tr>
<td>Gains on investment</td>
<td>70,569</td>
<td>90,940</td>
</tr>
<tr>
<td>Other income</td>
<td>28,839</td>
<td>1,500</td>
</tr>
<tr>
<td><strong>Total Non-operating activities</strong></td>
<td>238,023</td>
<td>271,563</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>1,262,815</td>
<td>1,999,197</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total auspice fee</td>
<td>(219,727)</td>
<td>(202,818)</td>
</tr>
<tr>
<td>Grants issued</td>
<td>(2,437,349)</td>
<td>(1,619,811)</td>
</tr>
<tr>
<td>Other expenses</td>
<td>(126,016)</td>
<td>(144,796)</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>(2,783,092)</td>
<td>(1,967,425)</td>
</tr>
<tr>
<td>(Deficit) / surplus from operations</td>
<td>(1,520,277)</td>
<td>31,772</td>
</tr>
<tr>
<td><strong>Other comprehensive income:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other comprehensive income</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total comprehensive income for the year</strong></td>
<td>(1,520,277)</td>
<td>31,772</td>
</tr>
</tbody>
</table>

In the 2014-2015 financial year the Alzheimer's Australia Dementia Research Foundation had a total revenue of $1.262 million, largely from donations and bequests. Donations are the income received from the general public while fundraising income is that which is related to particular promotions or events. Our revenue for the previous financial year was $1.999 million.

Although approximately $2.615 million worth funding was offered in the 2014-2015 financial year, $2.437 million had been paid to researchers at 30 June 2015. Our administration costs cover the management of the grants program and expenses associated with running the grants program, including bank fees, legal fees and meetings to assess grant applications and governance.
# STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2015

## ASSETS

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>3,900,912</td>
<td>4,366,200</td>
</tr>
<tr>
<td>Trade and other receivables</td>
<td>296,820</td>
<td>228,455</td>
</tr>
<tr>
<td>Financial assets</td>
<td>-</td>
<td>1,209,271</td>
</tr>
<tr>
<td>Other assets</td>
<td>-</td>
<td>16,818</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td><strong>4,197,732</strong></td>
<td><strong>5,820,744</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial assets</td>
<td>726,037</td>
<td>775,657</td>
</tr>
<tr>
<td><strong>Total Non-Current Assets</strong></td>
<td><strong>726,037</strong></td>
<td><strong>775,657</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>4,923,769</strong></td>
<td><strong>6,596,401</strong></td>
</tr>
</tbody>
</table>

## LIABILITIES

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade and other payables</td>
<td>498,022</td>
<td>650,377</td>
</tr>
<tr>
<td>Other current liabilities</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td><strong>498,022</strong></td>
<td><strong>650,377</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>498,022</strong></td>
<td><strong>650,377</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net assets</strong></td>
<td><strong>4,425,747</strong></td>
<td><strong>5,946,024</strong></td>
</tr>
</tbody>
</table>

## EQUITY

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retained Earnings</td>
<td><strong>4,425,747</strong></td>
<td><strong>5,946,024</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015 ($)</th>
<th>2014 ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td><strong>4,425,747</strong></td>
<td><strong>5,946,024</strong></td>
</tr>
</tbody>
</table>

## BASIS OF PREPARATION

The financial statements are for the Alzheimer’s Australia Dementia Research Foundation Ltd. as an individual entity, incorporated and domiciled in Australia. The Alzheimer’s Australia Dementia Research Foundation Ltd. is an entity limited by guarantee.

The summary financial statements have been derived from the audited financial statements Alzheimer’s Australia Dementia Research Foundation Ltd. dated 1 December 2015. These statements were prepared in accordance with Australian Accounting Standards – Reduced Disclosure Requirements of the Australian Accounting Standards Board and the Corporations Act 2001. Alzheimer’s Australia Dementia Research Foundation Ltd. is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

The summary financial statements have been prepared on an accruals basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities. The amounts presented in the financial statements have been rounded to the nearest dollar. The presentation currency used is Australian Dollars.
Information about Alzheimer’s Australia Dementia Research Foundation Ltd. can be found on our website:

www.dementiaresearchfoundation.org.au

For more information about Alzheimer’s Australia:

www.fightdementia.org.au
National Dementia Helpline: 1800 100 500