

**Karp, Anita et al. (2006). *Mental, Physical and Social Components in Leisure Activities Equally Contribute to Decrease Dementia Risk.* in :*Dementia & Geriatric Cognitive Disorders* .Vol. 21 Issue 2, p6573-**

**Background:** There is accumulating evidence in the literature that leisure engagement has a beneficial effect on dementia. Most studies have grouped activities according to whether they were predominantly mental, physical or social. Since many activities contain more than one component, we aimed to verify the effect of all three major components on the dementia risk, as well as their combined effect. **Methods:** A mental, social and physical component score was estimated for each activity by the researchers and a sample of elderly persons. The correlation between the ratings of the authors and the means of the elderly subjects' ratings was 0.86. The study population consisted of 776 nondemented subjects, aged 75 years and above, living in Stockholm, Sweden, who were still nondemented after 3 years and were followed for 3 more years to detect incident dementia cases. **Results :** Multi-adjusted relative risks (RRs) of dementia for subjects with higher mental, physical and social component score sums were 0.71 (95% CI: 0.49–1.03), 0.61 (95% CI: 0.42–0.87) and 0.68 (95% CI: 0.47–0.99), respectively. The most beneficial effect was present for subjects with high scores in all or in two of the components (RR of dementia = 0.53; 95% CI: 0.36–0.78). **Conclusions:** These findings suggest that a broad spectrum of activities containing more than one of the components seems to be more beneficial than to be engaged in only one type of activity.

**An active and socially integrated lifestyle in late life might protect against dementia. By: Fratiglioni, Laura; Paillard-Borg, Stephanie; Winblad, Bengt . *Lancet Neurology* ,Jun2004, Vol. 3 Issue 6, p343-35311 ,p**

The recent availability of longitudinal data on the possible association of different lifestyles with dementia and Alzheimer's disease (AD) allow some preliminary conclusions on this topic. This review systematically analyses the published longitudinal studies exploring the effect of social network, physical leisure, and non-physical activity on cognition and dementia and then summarises the current evidence taking into account the limitations of the studies and the biological plausibility. For all three lifestyle components (social, mental, and physical), a beneficial effect on cognition and a protective effect against dementia are suggested. The three components seem to have common pathways, rather than specific mechanisms, which might converge within three major aetiological hypotheses for dementia and AD :the cognitive reserve hypothesis, the vascular hypothesis, and the stress hypothesis. Taking into account the accumulated evidence and the biological plausibility of these hypotheses, we conclude that an active and socially integrated lifestyle in late life protects against dementia and AD. Further research is necessary to better define the mechanisms of these associations and better delineate preventive and therapeutic strategies

**Influence of social network on occurrence of dementia: a community-based longitudinal study. By: Fratiglioni, Laura; Wang, Hui-Xin ;Ericsson, Kjerstin; Maytan, Margaret; Winblad, Bengt .Lancet ,04/15/2000 ,Vol. 355 Issue 9212, p1315**

**Summary Background:** Few data are available on the effect of social ties on dementia development. This study explored whether single social network components and different degrees of the social connections affect dementia incidence. **Methods:** A community-based cohort of 1203 non-demented people, living at home in the Kungsholmen district of Stockholm, Sweden, and who had good cognition, was followed for an average period of 3 years. On the basis of medical and psychological data, 176 patients were diagnosed with dementia according to the criteria of the third edition revision of the Diagnostic and Statistical Manual of Mental Disorders. Information on social network was obtained by personal interview by trained nurses at baseline. The covariates included in the analysis were age, sex, education, cognitive and functional status, depressive symptoms, and vascular diseases. **Findings:** Those individuals living alone, and those without any close social ties, both had an adjusted relative risk for developing dementia of 1.5 (95% CI 1.0-2.1 and 1.0-2.4, respectively). Compared with married people living with someone, single people and those living alone had an adjusted relative risk of 1.9 (95% CI 1.2-3.1). Infrequent contacts with network resources did not increase the risk of the disease if such contacts were experienced as satisfying. When all components were combined in an index, a poor or limited social network increased the risk of dementia by 60% (95% CI, 1.2-2.1 and a significant gradient was found for the four degrees of social connections ( $p=0.0009$ ). **Interpretation:** An extensive social network seems to protect against dementia. Confirmation of this finding and further investigation to clarify the mechanisms are worthwhile due to the implications for prevention.

**Prevention of Alzheimer's disease and dementia. Major findings from the Kungsholmen Project. By: Fratiglioni, Laura; Winblad, Bengt; von Strauss, Eva . Physiology & Behavior ,Sep2007, Vol. 92 Issue 1/2 ,p 98-104**

**Abstract:** The aging of the population is a worldwide phenomenon, and studying age-related diseases has become a relevant issue from both a scientific and a public health perspective. This review summarises the major findings concerning prevention of Alzheimer's disease (AD) and other dementias from a population-based study, the Kungsholmen Project. The study addresses risk- and protective factors for AD and dementia from a lifetime perspective: at birth, during childhood, in adult life, and in old age. Although many aspects of the dementias are still unclear, some risk factors have been identified and interesting hypotheses have been suggested for other putative risk or protective factors. At the moment it is also possible to delineate some preventative strategies for dementia.