

ILC-France
Activity Report 2012

1. Organization of ILC-France

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- Pr Claude Le Pen, Bernard Cottet, Dr. Laurent Goldstein, Carole Dufouil, Dr. Brigitte Heuls,
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President : Jean-Pierre WIEDMER

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General Secretary : Bernard FORETTE

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2. Achievements of ILC-France in 2012

ILC France pursues its main objectives:

- **Research on Longevity issues with 2 pillars : health prevention and sustained activity, both as a long life perspective.**
- **Communication to Influence decision makers in favor of the aging population with an emphasis on the two pillars above**

2.1 Research

2.1.1 « Healthy Companies Study– (EBS « Entreprises en Bonne Santé »)

This research program is completed. It was designed to assess the impact of a prevention program based on healthy lifestyle - nutrition, physical activity - and prevention of back pain. The study was conducted among 978 employees of three companies (PREVOIR, LILLY and HSBC Insurance) and funded by these companies during the working time of employees. The final report was issued in the first quarter of 2012.

The results show an improvement of the level of knowledge particularly concerning the relationship between nutrition and diseases. The impact of the program is important on health behaviour, especially on back pain and behavioural changes.

Finally, this program is considered an important tool in human resource management. It allows a large majority of employees to perceive the company as being involved in the welfare of its employees. A paper is being written.

2.1.2 ORLANDO Study “Is older age retirement related to delayed clinical dementia onset? “ Abstract below accepted at AAIC, boston July 2013

Older Age at retirement is associated with decreased risk of dementia. Analysis of a healthcare insurance database of self-employed workers

Background

Intellectual stimulation and mental engagement throughout life might be protective against dementia. We investigated whether age at retirement influences dementia risk among self-employed workers in France.

Methods

We linked health and pension databases including self-employed workers who were living and retired as of December 31st 2010. Dementia cases were defined based either on ICD-10th diagnosis or on claim for one of the medication against dementia (donepezil, galantamine, rivastigmine). Data were analysed using Cox proportional hazard model where age at dementia diagnosis or age at censoring (31st December 2010) was the dependent variable and age of retirement was the independent variable. Hazard ratios were computed adjusting for gender, marital status, occupational category, type of retirement, pension amount, diagnosis of hypertension, diabetes. Sensitivity analyses to assess potential reverse causation and differential cohort or temporal diagnosis biases were undertaken.

Results

Among the 429,803 retired self-employed workers alive on December 31st 2010, prevalence of dementia was 2.65%. Workers had been retired on average for more than 12 years. Multivariable analyses showed that the hazard ratio (HR) of dementia was 0.968 (95% Confidence Interval= [0.962-0.973]) per each extra year of age at retirement. After excluding workers who had dementia diagnosed within the 5 years following retirement, the results remained unchanged and highly significant ($p < 0.0001$). Results were also similar in further analyses stratified by age categories or year of dementia diagnosis.

Conclusions

Professional activity may be an important determinant of mental exercise and social integration. Our data show strong evidence of a significant decrease in the risk of developing dementia associated with older age at retirement, in line with the "use it or lose it" hypothesis. This health perspective should be taken into consideration when the age of cessation of professional activity is discussed. Our results thus highlight the importance of maintaining high levels of cognitive and social stimulation throughout work and retiree life and emphasize the need for interventions and policies to help older individuals achieve such cognitive and social engagement.

2.1.3 Collaboration with ILC Japan (Shinichi Ogami) in the “International Comparative Study on Ideal Terminal Care and Death”.

French data has been collected in the palliative care services by the mean of detailed questionnaires filled by physicians, nurses and social workers. The Japanese principal investigator

was then able to compare the French data with those collected in other countries and make recommendations to improve support for people and their families while taking into account the cultural and social differences. ILC France was invited by ILC Japan to present French and European results of "End-of-life care, an international study" during The Japanese symposium held in Tokyo on February 3, 2012.

2.1.4 "International Comparative Study on Productive Ageing" in collaboration with ILC Japan. (Shinichi Ogami)

ILC France collaborated on this international study by answering the following questions on active aging in France :

- Social basis for an aging society?
- Laws and individual systems of financial support after retirement?
- Laws/ systems of current conditions on the employment of older people?
- Laws / systems on a stable housing for the elderly?
- Measures to promote social participation of the elderly?

The report and its annexes were sent to ILC Japan.

2.2 Influencing decision makers

2.2.1 Parliamentary Study Group on Longevity.

MPs are the primary actors involved in the process of substantial reforms, particularly the reform of pensions. To deal with the lack of accurate information of MPs on the "longevity revolution" in our country, ILC France proposed to Dr. Denis Jacquat MP of Moselle and vice president of the Commission of Cultural, Family and Social Affairs of the Parliament, to create the Study Group on Longevity in 2006. This group is enriched by the network of ILC-France. Proceedings of each hearing are available on demand. Since its creation, 34 hearings personalities specialized in the field of aging and labor were heard.

There was only one hearing in 2012 pending the re-establishment of the group following his natural dissolution after presidential and parliamentary elections: -20 November 2012 : "**Avoidable hospitalizations, readmissions and care pathways: a comparison between France and the United States.**" **Speaker: Victor G. Rodwin**, Professor of Health Policy and Management Wagner / NYU.

The group has been recreated in early 2013 as the "Task Force on issues of aging» Dr. Denis Jacquat was reappointed chair and 82 MP are participating in this parliamentary group.

2.2.2 Parliamentary Meeting on Longevity

There was no parliamentary meetings in 2012 because of the presidential election and the change of parliamentary majority.

ILC-France is in charge of the scientific direction. These parliamentary meetings gather a public of 200 policymakers, institution representatives and geriatricians. Complete proceedings are published and available on demand or on the web-site (www.ilcfrance.org).

2.2.3 11e Congrès francophone sur la Maladie d'Alzheimer et les syndromes apparentés. Toulouse 22 Mai 2012.

Positive preliminary results on Orlando study has been published in may 2012 during an ILC-France symposium entitled "Alzheimer's disease and Professional Life" chaired by F. Forette.

Agenda :

- 1. The concept of Cognitive Reserve: Michel Poncet
- 2. Comparative results of SHARE and HRS on the Role of retirement on cognitive function: Stephane Adam
- 3. Results of ORLANDO Study (" Is Older age Retirement related to delayed Clinical Dementia Onset?" Carole Dufouil et al.

Abstract : Prevention and / or delay of onset of Alzheimer's disease (AD) are major issues pending pathophysiological treatments. The concept of Cognitive Reserve has been proposed to explain epidemiological data showing that individuals engaged in intense intellectual activity had a lower risk of developing Alzheimer's disease. The level of education and intellectual activity do not protect against injuries of AD but delay their clinical expression. Neuroplasticity allows the brain to develop connections of complex dendritic networks able to cope with future losses. It is the support of the concept of Brain and Cognitive Reserve.

2.3 Communication, other symposia, working group, meeting in 2012

- 2-3-1. Participation to Nuclear meeting of EDF (Electricité de France). Radiation & Health
Chronic diseases and work - Seniors and Labour - February 8, 2012.
Topic: "Aging and Work"
- 2-3-2. 10th Congress GEROSANTE-CIPPEG, Montpellier April 4, 2012 Theme: "Active Ageing".
- 2-3-3. Meeting of the Board of Directors, Held at Charles University, Prague,
Czech Republic, May 27, 2012 Chaired by Iva Holmerova (ILC Czech Republic). Successful meeting. An ILC Global Alliance symposium was organized under the IFA - 11th Global Conference on Ageing Prague, May 28, 2012 on the theme "Productive Ageing: Opportunities and Conditions '
ILC France was responsible for presenting and write an article, "Healthy and active aging, Barriers and opportunities in UK, Japan and France" (see Chapter 2 of the proceedings of the conference)
- 2-3-4. AXA Conference, September 21, 2012 - Paris. Theme: "The well-being at work: Utopia, hope and reality: how to fight stress?"
- 2-3 5.Présentation-AXA, September 25, 2012, in Paris December 11, 2012, in Biarritz. Theme: "Lectures on aging well"
- 2-3-6. Participation at World Café Europe, Tuesday, October 2, 2012 in London, invited by Moira Allan, president of the association "2 Young 2 Retire" partner for France for the project "European Voice for active aging" EVAA.
- 2-3-7. Silverlife presentation at November 19, 2012-Paris.
Theme: "The elderly are a chance for France"
What to do in retirement, how best to invest in this period of life?

2-3-8. National Conference on Mutual hospitals, MNH, November 22, 2012 in Paris. Theme: "Observatories of fragility"

2-3-9. Conference for Mérieux and Bullukian Foundations, December 14, 2012, Paris. Theme: "The Immortal Man, how far to go"

2.4 Other activities in 2012

Radio, TV and press interviews

TF1, RFI, canal +, Europe 1, RFO, RTL,

Meetings with companies and other personalities : Mme S. GONI (Lundbeck), Mr. M. ALBRECHT (Nutricia), Dr. B.HEULS (RSI), Mr C.LAMBERT (IPSEN), Dr A.RAYNAUD (AXA), Mr WIEDMER (HSBC), Mr Nicolas FREMDER (Train Alzheimer), Mme D. KARNIEVITZ (CNAV), Mme G.ASCON (Fondation des Caisses d'Épargne), Mme I.LAUDIER (CNC), Mr Y.GARCIER (Occupational Medicine director of EDF), Mr LORENZI (Chaire de la Transition Démographique – Université Dauphine).

Institutions Memberships : Board of the Institute of Life Sciences, Cardio-geriatrics Group of French Society of Geriatric and Gerontology (SFGG) and the French Society of Cardiology (SFC), Scientific Board of the MAPT Study Toulouse, Foundation for Alzheimer Scientific Cooperation, Scientific Board of the Association Robert Debré, Scientific Board of SFGG, Board "ENVISÂGE" Novartis, Scientific Board of EXHONIT, Board of "Equilibre et population", Board of the IMPACT Study (Pfizer), Alzheimer vaccine Safety Monitoring Committee AC001 EU/US/Japan (Pfizer-Wyeth), Scientific Board of SAGES study (Sanofi Aventis), Presidency of "Collectif Alzheimer", National College of Professors of Geriatrics, Board of the Foundation Leroy-Merlin, IAGG 2009 Board, Steering Committee of the Presidential Alzheimer Plan, General Manager of FNG.

Participation in the National Foundation of Gerontology's program "Growing is Aging".

Chronos's prize awarded at the 18th Bookfair - 2012 - Paris- www.prix-chronos.org

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