NEWS

World Alzheimer Congress 2000

Washington, DC, July 9-18, 2000

The first ever global conference on Alzheimer's disease, World Alzheimer Congress 2000, took place in Washington, DC, USA, July 9-18, 2000. Nearly 5,000 of the world's leading Alzheimer researchers, physicians, healthcare professionals, and other experts gathered for almost ten days to discuss the latest information about Alzheimer research, treatment and caregiving, and strategies to eliminate the disease. Alzheimer's disease affects 12 million people around the world. The number of people with Alzheimer's disease has been projected to increase to 22 million by 2025, and to 45 million by 2050. Alzheimer's disease is today in focus as a fatal, degenerative disease that attacks the brain and results in impaired memory, thinking and behavior. As the disease progresses, it becomes so severe that it interferes with an individual's daily functioning and eventually results in death.

Hosted by the Alzheimer's Association (USA), Alzheimer's Disease International and Alzheimer Society of Canada, World Alzheimer Congress 2000 united four longstanding events with one program: Pivotal Research (7th International Conference on Alzheimer's Disease and Related Disorders), Bridging Research and Care (a new program for physicians aimed at translating latest research achievements to clinical practice), and Creative Care (including 9th National Alzheimer's Disease Education Conference, 16th Alzheimer's Disease International, and 22nd Alzheimer Society of Canada Conference).

During the Pivotal Research program, some 3,000 international researchers presented their studies on Alzheimer's disease and other neurodegenerative diseases. Many of these studies offered encouraging news, including promising results of human safety trials on an Alzheimer vaccine, favorable outcome of the phase III trial of the drug memantine in people with moderate to severe Alzheimer's disease, and progress in creating better animal models of Alzheimer's disease.

Subjects of the program included new diagnostic and diagnostic follow-up possibilities. Dr. Nick Fox from Institute of Neurology, London, introduced studies with registration of serial MR2 images of hippocampus, which enables correlation with cognitive decline assessed by neuropsychological testing in early stages of Alzheimer's disease or in mild cognitive impairment. Magnetic resonance spectroscopy is also a useful tool in the diagnosis of Alzheimer's disease, as shown by Dr. R. Gonzales from Massachusetts General Hospital and Harvard Medical School from Boston.

An interesting review of mild cognitive impairment was presented by Dr. R. Peterson (Mayo Clinic, Rochester, Minnesota). Dr. J. Cummings from UCLA discussed the importance of focusing onto behavioral disturbances in advanced stages of the disease as well as on therapeutic possibilities of previously introduced cholinesterase inhibitors in the prevention and therapy of neuropsychiatric symptoms of Alzheimer's disease.

The second part of the Congress, Bridging Research and Care, primarily addressed physicians. All important issues of Alzheimer's disease were covered in-depth: definitions, diagnosis and therapy of Alzheimer's and related dementias (including vascular dementia, dementia associated with Lewy bodies, and frontotemporal dementia). Disclosing the diagnosis to family members, ethical and end-of-life issues were discussed in the light of different healthcare systems and different cultures throughout the world.

During the third part of the Congress (Creative Care), 1,500 professional Alzheimer's Association staff and volunteers from all over the world, and family caregivers shared information on diverse care approaches and hands-on care techniques from various parts of the world. The program included educational sessions for both family caregivers, professional care providers, public policy makers, researchers, and staff from Alzheimer organizations worldwide.

Despite the very intense program of the World Alzheimer Congress 2000, additional social events were

organized as well. During the reception at the National Museum of American History, the participants of the Congress had an opportunity to gather informally and to explore the Museum's rich exhibition while welcomed by 'George Washington', 'Abraham Lincoln', and other persons from the American history. Another festive occasion was Municipal reception and dinner that took place at the National Building Museum.

The Congress logo, 'With change in mind', is maybe best explained by the words of Edward Truschke, president of the American Alzheimer's Association: "While the pace of Alzheimer research is accelerating and there are many promising findings, we are still in a race against time as people from around the world live longer and face a greater risk of getting this disease. We can keep Alzheimer's from becoming the epidemic of the new century and we will defeat it. But only if we continue to work together".

Irena Martinić-Popović

5th Congress of the European Federation of Neurological Societies

Copenhagen, October 14-18, 2000

Fifth Congress of the European Federation of Neurological Societies was held in Bella Congress Center in Copenhagen, Denmark, October 14-18, 2000. Approximately 2,200 neurologists from all over Europe as well as those from North and South America, Africa, Asia and Australia participated in the work of the Congress. Copenhagen was probably chosen as the venue of the Congress because this year the Danish Neurological Society is celebrating its 100th anniversary.

The main topics of the Congress were: Stroke, Headache, Epilepsy, Movement Disorders, and Dementias. Besides these main topics, many short communications, focused workshops, teaching courses, special lectures, satellite symposia, scientist panel meetings, business meetings, and other meetings took place during the Congress.

Within the main topic of Stroke, the most debated subject was thrombolysis. Thrombolysis with recombinant tissue plasminogen activator (rt-PA) has been used in ever more European countries in therapy of ischemic stroke; in some of them experimentally, while some countries (e.g., Germany) have already registered rt-PA for therapy of ischemic stroke. Therapeutic window for use of thrombolysis is 3 hours from the onset of symptoms. In this short period of time, the patient has to be transported to the hospital and complete diagnostic work-up carried out including brain CT scan. It is not allowed to start thrombolytic therapy without brain CT scan. CT is needed to rule out hemorrhagic stroke, and should be normal or may show early signs of brain tissue ischemic lesion. Ischemia should not involve more than one third of the middle cerebral artery territory.

In Parkinson's disease, the main discussion was about the therapeutic role of COMT (catechol-O-methyl transferase) inhibitors. Also, some latest dopaminergic agonists were introduced. Therapeutic approach to multiple sclerosis is still concentrated on beta interferons and immunosuppressive therapy. Therapy of migraine has been enriched with a variety of new triptans.

The Congress was very well organized. Congress participants were accommodated at various hotels in Copenhagen, with very convenient transfer from the hotels to the Bella Congress Center.

Numerous posters, exactly 2,149 of them, were daily presented. Posters were also divided according to topics, and were displayed in three different poster sessions. Each session took one day (Monday, Tuesday and Wednesday). Each poster session chairperson discussed the poster topic with the author and group of participants, and selected one poster for the best poster award.

The work of the Congress was accompanied by a very interesting social program. For reception at the City Hall, organized by the Mayor of Copenhagen, only 500 seats were available, while all other participants had a welcome party at the Bella Congress Center. The participants had an opportunity to enjoy in the ballet Giselle at the Royal Danish Theatre. A farewell party was organized on the last evening of the Congress, however, the attendance was less than expected because the respective fee was not included in the registration fee.

Some fifteen neurologists from Croatia, coming from Zagreb, Rijeka, Osijek and Split, took part in the 5th Congress of the European Federation of Neurological Societies.

Zlatko Trkanjec

Sestre milosrdnice University hospital: The thirtieth Anniversary of the Center for Cardiac Pacing

In occasion of the 30th anniversary, the Center for Cardiac Pacing at the Sestre milosrdnice University Hospital was organized the 1th Croatian Symposium on Car-

diac Pacing, entitled Cardiac Pacing: Art in the Present, Challenge in the Future, in Hotel Inter-Continental in Zagreb, on September 17, 2000.

Cardiac pacing is certainly one of the most efficacy mode of therapy in the modern medicine, because it makes possibly to the patients a survival, that is not different from the survival in the general population. Owing to continual technological progress, the present indications for cardiac pacing are not only therapeutic, but preventive and haemodynamic. On the other hand, the use of the implantable cardioverter-defibrillators has reduced significantly a mortality of patients proned to the risk of sudden cardiac death and these devices have become the first choice of therapy for life-threatening ventricular tachyarrythmias.

In this fielding of the medicine, the Sestre milosrdnice University Hospital was always in the same level as the other developed European countries. The first pacemaker was implanted in this University Hospital by Professor Oberhofer in 1969, but the organized pacemaker's implantation was started in 1970. Since that about 4000 pacemakers were implanted at the Sestre milosrdnice University Hospital (Figure 1). The purpose of the Symposium was not only to demonstrate the long-term results of the Center for Cardiac Pacing at the Sestre milosrdnice University Hospital, but to bring up the present status of cardiac and to point out the possibilities of its future development. Promient Croatian and European cardiologist were invited to the Symposium to expose this issue.

The Symposium was opened by Professor Zvonko Kusić, head of the Sestre milosrdnice Hospital, Professor Šime Mihatov, chief of the Department of Medicine at the Sestre milosrdnice University Hospital, Professor Vladimir Goldner, chairman of the Working Group on Cardiac Pacing of the Croatian for Cardiac Pacing at the Sestre milosrdnice University Hospital.

Structurally, the Symposium was divided into four sessions. The two sessions were dedicated to fundamentals of cardiac pacing. From classical indications to cardiac pacin at transplanted heart, Dr. M. Jakić (Osijek), Dr. J. Gjurović (Zagreb), Ing. B. Ferek-Petrić (medtronic), Dr. A. Kuzmanić (Split), Dr. B. Buljević (Zagreb), Dr. M. Lovrić-Benčić (Zagreb), Dr. D. Hamel (Zagreb), Dr. R. Ugljen (Krapinske Toplice), Dr. D. Čuruvija (Rijeka) and Dr. B. Biočina (Zagreb) presented the most important clinical, technical and surgical aspects of cardiac pacing. Modern pacemakers have been enriched with new algorithms and functions. They have increased diagnostic capabilities and incorporate a variety of sensors n order that pacing today may be as physiological, effective and safe as possible. Also, lead technology has improved significantly so as to ensure lower chronic pacing thresholds, while single pass leads for VDD pacing allow chronic sensing of atrial electrical activity with great reliability.

The session on Cardiac Pacing in Special Circumstances was specially interesting, because the experience with a pacemaker therapy in hypertrophic cardiomyopathy, dilated cardiomy opathy, vasovagal syncope and congestive heart failure still smahll. In this session the paperere presented by Dr. Z. Batinič (Krapinske Toplice), Dr. K. Stanić (Rijeka), Dr. D. Kosi (Zagreb), Dr. A. Jović (Zadar) and Dr. V. Goldner (Zagreb). Dual chamber cardiac pacing with an appropriate atrioventricular delay may be useful in patients with drug refractory hypertrophic obstructive cardiomyopathy, reducing the pressure gradient in the left ventricle outflow tract and attenuating symptoms, normal interatrial conduction and PR interval > 200 msec, could represent the group getting real benefit from conventional dual-chamber pacing with personalized atrioventricular interval, computed by a pacemaker incorporating haemodynamic monitoring parameter. Dual-chamber pacing, cerefully prescribed on the basis of tilt-tableest results, may be effective in reducing symptoms if the patient with vasovagal syncope has a significant cardioninhibitory component to the cause of its cause of its symptoms. The biventricular pacing is a new therapeutic approach for the patients with dilated cardiomyopathy unresponsive to the best medical therapy, independently of the etioloy (ischemic of idiopathic) in functional class III and IV. with ejection fraction less thah 35% and left bundle branch block longer than 150 msec.

The last session on Treatment of Tachycarrhytmias was dedicated to therapy with implantable devices, including atrial pacing (Dr. B. Radić, Zagreb), atrial defibrillators (Dr. D. Petrač, Zagreb) and cardioverter-defibrillators (Dr. J. Borobla, Budapest, and Dr R. Cappato, Milan). Atrial pacing is indicated in patients with sick sinus syndrome, while dual site atrial pacing is superior to single site atrial ventricular defibrillaltor may be taken into consideration in patients with atrial tachyarrhytmias who otherwise have an indication for vntricular cardioverter-defibrillator. Up to now there is enough evidence, that implantable cardioverter-defibrillators are superior to antiarrhythimic drugs in reducing mortality in patients who survived cardiac arrest or unstable ventricular tachycardia, or who have MADIT criteria. At the end of the Symposium, Dr. D. Petrač sum-