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Wanted – Nobel Prize Winners

The last quarter of each year is always busy. In Malta, we tend to be weighed down by discussions and debates revolving around the budget in October, and rightly so. October is also tied to awareness and preventive care with various laudable Pink October campaigns targeting breast cancer in women and testicular cancer in males. There is also the Movember movement which promotes health through a male lens focusing on prostate cancer awareness during November. November is also dedicated to raising awareness about pancreatic cancer.

October is the month which is associated with appreciation for older persons, indeed October 1st is the United Nations International Day dedicated to them. In October we also get to know the year's Nobel Prize laureates in the fields of peace, chemistry, physics, literature and of course, physiology/medicine.

It is my firm belief that there is a linkage between these seemingly disparate topics.

The COVID-19 pandemic was a human tragedy. However, it would be foolish not to admire the concerted research impetus it triggered and the astounding results of the biomedical effort that went into the development of vaccines. Lightning speed, this was *blitzkrieg* by any other name! It would have been preposterous indeed, had the discoveries leading to our mRNA vaccines been passed over in this year's Nobel Prize list. True to form, the groundbreaking work of Professors Karikó and Weissman has been justly recognised.

The past three decades have seen a welcome shift in the management of breast and testicular cancer. Governments in developed nations recognised that these cancers are very significant health disorders affecting millions worldwide. Strong partnerships between governmental and non-governmental organisations brought about much-needed change, such that the outlook of patients with these diseases has changed dramatically, for the better. Heightened awareness, dedicated multi-disciplinary teams and patient advocacy groups harnessed the advent of refined diagnostic modalities and elegant surgical, hormonal, biological, chemotherapeutic and radiotherapeutic options to curb the suffering and to effect a cure for millions. This was no miracle! This effort would not have been possible without throwing money at these diseases. The insatiable research effort has been and continues to be considerable.

In developed nations, birth rates are down and life expectancy is up. As a result, populations are ageing and to cite Malta as one typical example, the older person population currently making up a fifth, will in the very near future account for a fourth of the total. Ageing is a reality, not a challenge. When one talks of "challenges" posed by this demographic truth, then it is a small step to slip along the discriminatory slide of ageism.

One does not need to be some maverick statistician to appreciate the facts. Populations are getting older, fact. Increasing age is the overwhelming non-modifiable risk factor for dementia, fact. The prevalence of dementia will double 10 years earlier than previously expected, fact. Despite the rising incidence of dementia we do not know much about it, fact. We are not throwing enough money at it, fact. We only have four drugs available in the EU, and these may or may not slow progression. These are not curative treatments despite being around woefully long. Donepezil, memantine, galantamine and rivastigmine were developed between 1956 and 1985!

Our efforts to treat the various types of dementia are laudable but nowhere near what is needed to defeat rather than dent this condition. We do well to improve care and standards, support persons and their relatives, train the workforce and develop documents. But these are coping strategies even if they profess to be "long-term". Governments and private enterprises have to recognise that this reality is here, it is not just on the way. We have to come together and pool resources to firmly work out the pathogenesis and effect a cure. Nothing else will work; I am a firm believer that dementia is one of the main true health disorders of this century. So why not engage with the big guns, the pharma giants, the big tech companies including Google, Microsoft, and Apple? How's that for a noble corporate responsibility initiative?

I started with October, money matters in the budget, worldwide campaigns against disease and the UN Day for Older Persons. Talk and strategies are cheap. The big guns need to start gunning and they should be gunning for the right reason. Humankind needs to evolve and dump the distractions offered by conflict and war. Yes, we need more Nobel Prize winners. Eager minds of tomorrow coming up with discoveries that will enable the effective development of a cure for dementia. We can and we will.