A look at estimates of the number of elderly with dementia in Japan reveals that there were 2.52 million elderly with dementia in 2010, accounting for 8.6% of elderly aged 65 years and over (1). The elderly with dementia are estimated to account for an increasing proportion of the elderly aged 65 years and over according to estimates for 2015, 2025, and 2035 (1). The current report summarizes approaches to dealing with dementia in various fields and approaches to screening for forgetfulness. This report also discusses additional measures to prevent dementia in the future and approaches to those measures.

A report (2) stated that primary care physicians play an important role in the early detection of dementia. In additional, reports (2, 3) have described an approach by medical associations to prevent dementia in the form of “forgetfulness screening” implemented by the medical establishment and government agencies, the central role of primary care physicians in that screening, and the details of the screening implemented. These reports (2, 3) have indicated that such screening is effective at detecting dementia early. Efforts to further enhance the coordination of medical care and welfare services are crucial to dealing with dementia (4). Outpatient services to deal with forgetfulness are reported to be a crucial point of contact for medical facilities and government agencies providing such care and services (4).

Another report (5) stated that dementia care should be spearheaded by primary care physicians but that specialists have a crucial role in explaining dementia diagnosis and treatment. A further report (6) described dementia screening.

In the future, a system must be established to facilitate further cooperation in efforts to detect dementia early and prevent the condition. Medical facilities must act in concert and experts in various fields must work together to implement measures to deal with dementia.

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REFERENCES