2026 ALZHEIMER'S DISEASE FACTS AND FIGURES

Special Report

Brain Health in America: Understanding and Supporting Lifelong Cognitive Health

ALZHEIMER'S ASSOCIATION®

PREVALENCE

AN ESTIMATED 7.4 MILLION AMERICANS ARE LIVING WITH ALZHEIMER'S DEMENTIA.

Prevalence Estimates

The prevalence numbers for "clinical Alzheimer's dementia" included in the rest of this section are based on estimates of how many people in the U.S. are living with the clinical symptoms of Alzheimer's.

The estimate of 7.4 million older adults who have clinical Alzheimer's dementia comes from a single community-based, longitudinal study in which participants were systematically evaluated and then re-evaluated on a regular basis; those who exhibited the clinical symptoms of Alzheimer's dementia were classified as having clinical Alzheimer's dementia.[A2, 276] A major advantage of this approach is that it attempts to capture all individuals living with the condition and does not rely on a dementia diagnosis by the health care system, a process that has resulted in a substantial undercount (i.e., "underdiagnosis") of the clinical Alzheimer's dementia population. The disadvantage is that the longitudinal study is located in a single, small geographic area and may not be nationally representative (although the estimation process attempted to account for the demographics of the entire U.S. population). In the future, *Facts and Figures* could report estimates of clinical Alzheimer's dementia prevalence from multiple longitudinal studies or using different symptom-based diagnostic criteria; these differences in criteria could result in different prevalence estimates from what we report here.

Estimating the Prevalence of Biological Alzheimer's Disease Across the Alzheimer's Disease Continuum Based on Biomarker Evidence

Almost all existing Alzheimer's dementia prevalence studies are based on the identification of clinical symptoms to classify an individual as having clinical Alzheimer's dementia; they do not rely on a biological diagnosis of Alzheimer's disease (i.e., a diagnosis based on evidence of Alzheimer's biomarkers). As data sources, methods and scientific knowledge begin to incorporate biomarkers, estimates of prevalence based on biological diagnosis may be available. This could lead to very different prevalence estimates for a number of reasons, which are discussed here. In this section, we present rough estimates of the number of people in each stage of the Alzheimer's disease continuum from no cognitive impairment to severe dementia (see Table 3a), based on a very recently available population-based study that included Alzheimer's disease biomarkers.[278] This study involves the Norwegian population and does not use a clinical staging system identical to the one presented in the Overview. As more population-based studies that incorporate Alzheimer's disease biomarkers become available, we will refine these estimates.

Estimated Prevalence of Dementia Due to Alzheimer's Disease Based on Biomarkers and Dementia Symptoms (stages 4-6)[1]

The estimated prevalence of dementia due to Alzheimer's disease based on biomarker evidence of Alzheimer's disease, as well as overt clinical dementia symptoms, is likely to be lower than the 7.4 million figure reported here. This is because autopsy- and biomarker-based studies[18, 75, 279-281] indicate that some individuals counted as having Alzheimer's dementia based on symptoms do not have biological Alzheimer's disease; that is, their dementia is caused by something other than Alzheimer's disease. Both autopsy studies and clinical trials have found that 15% to 30% of individuals who meet the criteria for clinical Alzheimer's dementia based on symptoms did not have biomarkers of Alzheimer's disease, that is, they did not have a biological diagnosis of Alzheimer's disease. A recent population-based study reported that 60% of older people with dementia had Alzheimer's disease based on biomarkers.[278] This would translate to roughly 4.4 million Americans age 65 and older being classified as having dementia due to Alzheimer's disease in 2026. This corresponds to stages 4-6 in the new criteria for clinical staging along the entire Alzheimer's disease continuum.

Estimated Prevalence of MCI due to Alzheimer's Disease Based on Biomarkers and Mild Cognitive Symptoms (stage 3)[1]

For decades, it has been recognized that all individuals with dementia have passed through a precursor stage frequently referred to as mild cognitive impairment (MCI). With the recent advent of biomarkers that detect the brain changes believed to characterize Alzheimer's disease, it may now be possible to determine which individuals diagnosed with MCI have MCI due to Alzheimer's disease. The number and proportion of older adults who have MCI due to Alzheimer's disease are currently difficult to estimate because they require studies with both population-based prevalence measures of MCI and tests of Alzheimer's biomarkers. This line of research is in its infancy. Furthermore, studies vary in both the threshold of cognitive impairment required for an MCI diagnosis and the level of biomarker burden that defines the presence of Alzheimer's disease. However, we can roughly estimate this prevalence indirectly using multiple data sources. A systematic review of more than 30 studies of all-cause MCI reported that about 17% of people age 65 and older had MCI.[282] The HRS HCAP study more recently estimated the prevalence of MCI in people age 65 and older to be 22%.[175] Therefore,

approximately 20% of older adults are likely to have MCI. Meanwhile, the recent population-based study in Norway reported that 32.6% of older people age 70 and older with MCI had Alzheimer's disease based on biomarkers.[278] Taken together, this means roughly 7% — or 4.2 million older Americans — may have MCI due to Alzheimer's disease. This corresponds to stage 3 in the new criteria for clinical staging along the entire Alzheimer's disease continuum.

Estimated Prevalence of Biological Alzheimer's Disease Across the Entire Cognitive Spectrum (stages 1-6)

Finally, as measures of the brain changes of Alzheimer's disease become more widely available in research, we will be able to estimate how many people have biological Alzheimer's disease regardless of the presence or absence of dementia or any form of cognitive impairment. The total number of people living with biological Alzheimer's disease is larger than the number with MCI or dementia due to Alzheimer's disease given that there is an incipient and silent (i.e., "preclinical") stage of Alzheimer's disease before the emergence of cognitive symptoms of either MCI or dementia.[283] While this is still the subject of ongoing research, estimates are emerging of the prevalence of preclinical Alzheimer's disease in the population.[284, 285] More research is needed to validate preclinical Alzheimer's and determine how to measure it with biomarkers that conclusively represent Alzheimer's disease, as opposed to other dementia-causing diseases. We also need to further understand if this preclinical stage is a valid representation of people who may go on to develop dementia due to Alzheimer's disease. For example, we know that many individuals with biological Alzheimer's disease may not develop cognitive symptoms in their lifetime, or not develop symptoms for many years in the future. The proportion of the asymptomatic population with biological Alzheimer's disease that will or will not develop cognitive symptoms has not been established.

For now, we provide a reasonable initial estimate of the number of people who have biomarkers for Alzheimer's disease in the preclinical stages of the Alzheimer's disease continuum using the most valid sources available. Approximately 16.6% of Americans age 45 and older report subjective cognitive decline[286] (SCD; see "Prevalence of Subjective Cognitive Decline" in this section), and a meta-analysis reported that 15% to 35% of people reporting SCD had biomarkers for Alzheimer's disease. This corresponds to about 1 to 3 million Americans age 65 and older with SCD and Alzheimer's disease, or 2 million as the middle estimate, corresponding to stage 2 in the new clinical staging criteria (see Table 3a).

In regard to older adults without any cognitive impairment (objective or subjective), recent studies have reported that 22% to 24% of older adults without cognitive symptoms have Alzheimer's disease biomarkers.[287, 288] The population-based study in Norway reported that 23.5% of people age 70 and older without cognitive impairment had Alzheimer's disease based on biomarkers.[278] Multiplying this by the estimated number of Americans who do not have dementia, MCI, or SCD yields an estimate of 8-9 million older Americans with asymptomatic Alzheimer's disease, corresponding to stage 1 of the new clinical criteria. Taken together, our estimates of people in stages 1 through 6 of the Alzheimer's disease continuum sums to approximately 19 million Americans age 65 and older, or 30% of all older Americans.

This will need to be verified through more population-based studies that incorporate biomarkers across the entire cognitive spectrum. This rough estimate is based on one population-based study conducted outside of the U.S. that included blood biomarker data,[278] as well as other studies and data sources that use a number of biomarker modalities (e.g. PET scans, cerebrospinal fluid analysis, and blood biomarker tests), some of which measured amyloid only and others of which measured amyloid and/or tau. Studies used here come from clinic-based samples rather than community-based samples, which could lead to inflated estimates of the proportions with biological Alzheimer's disease. This all introduces substantial uncertainty into these estimates for the U.S. population. Furthermore, most of these studies only included data from people age 65 or, in the case of the Norway study, 70 and older; the estimates of Americans with biological Alzheimer's disease will be higher if we could include individuals age 55 and older. In addition to variability in the prevalence of Alzheimer's disease by age, these estimates could be affected by other demographic factors including sex and race/ethnicity, which have yet to be taken into account when estimating prevalence for all Americans. Finally, it should be noted that fully understanding the impact of biological Alzheimer's disease on dementia prevalence will require biomarkers for other dementia-causing conditions: even if asymptomatic people with biological Alzheimer's disease do go on to develop dementia, the primary cause may not be Alzheimer's disease but another condition or a combination of Alzheimer's disease and other pathologies.