Argentina

Research conducted in 01/10/2026

Argentina reached a major milestone in February 2026 with the approval of the National Plan for Alzheimer's and Related Disorders. This strategy focuses on reducing stigma through public awareness, training healthcare workers, providing comprehensive psychological support for patients and caregivers, and strengthening intersectoral coordination, research, and epidemiological tracking. Argentina is a regional powerhouse in scientific research, with local scientists driving the LatAm-FINGERS lifestyle intervention trial and pioneering the use of artificial intelligence.

Highlights

Health system **Universal, Mixed Funding, (Mixed Provision)**
ADI member association(s): **Association for the Fight against Alzheimer's Disease (A.L.M.A.)**
National dementia plan: **The National Plan for Alzheimer's and Related Disorders**
Dementia plan funding: **Inadequately funded plan**
Dementia prevalence rate: **765**
Dementia incidence rate: **138**
Population: **45875693**
Median age: **33**
Health expenditure (% of GDP): **10**

Diagnosis

In Argentina, Alzheimer's diagnosis begins at the GP's office, yet many patients face long waits and rely on families to recognise early signs. While cognitive tests like MMSE and MoCA are widely used, access to specialists, imaging, and advanced PET or CSF analyses is concentrated in a few urban centres. Blood biomarkers remain experimental, and genetic testing is largely provided by foreign labs. Costs are manageable only for those with disability certification, leaving others to navigate variable copayments and limited coverage.

Diagnosis pathway

Diagnosis in Argentina follows Argentine Neurological Society guidelines, starting with GP assessment and lab tests, followed by specialist referral for clinical evaluation, cognitive testing, and CT/MRI imaging. Advanced diagnostics like PET and CSF analysis remain largely limited to research settings.

According to the 2025 Argentine Consensus for the Diagnosis of Dementias, the diagnostic pathway begins in primary healthcare with a detailed medical history, neurological examination, and assessment of cognitive and functional changes, including information provided by family members. Patients with suspected cognitive impairment undergo screening using instruments such as the Mini-Mental State Examination (MMSE), Montreal Cognitive Assessment (MoCA), and activities of daily living assessments. Individuals with normal screening results may be reassessed after six months, while those with confirmed cognitive deficits are classified as having mild cognitive impairment (MCI) or dementia depending on their functional independence and referred to a neurologist, psychiatrist, or geriatrician. Specialist evaluation includes comprehensive neuropsychological assessment, laboratory investigations to exclude reversible causes, and structural neuroimaging, preferably MRI. The guidelines distinguish between probable or possible Alzheimer's disease diagnosed clinically and biologically confirmed disease supported by biomarkers, acknowledging differences in diagnostic resources and accessibility across healthcare settings.

References

- https://www.elsevier.es/es-revista-neurologia-argentina-301-articulo-enfermedad-alzheimer-guia-practica-clinica-S185300281170026X
- https://revistavertex.com.ar/ojs/index.php/vertex/article/view/946/735

Wait times

Status: Medium wait time

No official data exist on wait times for primary or specialist care in Argentina; however, reports suggest patients may queue over 24 hours just to schedule neurology appointments, with consultations often delayed by more than a month.

In 2026, access to healthcare in Argentina faces significant delays of up to four months or more for specialist appointments owing to a severe healthcare funding crisis and an overstretched public system. To reduce long

queues at hospitals, various jurisdictions have expanded virtual appointment systems and digital self-service kiosks.

References

- https://www.lanacion.com.ar/sociedad/27-horas-de-fila-y-un-mes-de-espera-ya-no-alcanza-con-dormir-en-un-hospital-publico-para-conseguir-nid20032024/
- https://www.lanacion.com.ar/economia/brecha-de-26-paraguas-fiscal-y-carta-al-gobierno-por-que-las-clinicas-advierten-sobre-una-larga-nid25092026/

Diagnosis cost

Status: Partially covered

Argentina's PMO covers GP and specialist visits, cognitive assessments, and MRI. However, advanced diagnostics are often excluded. Patients with a CUD receive full coverage, while others face variable copayments that can limit access.

The basic Mandatory Medical programme (PMO), which all insurers must provide, covers GP and specialist visits, neurocognitive assessments, and high-complexity imaging such as MRIs. However, it does not explicitly include advanced diagnostic tools such as PET scans, biomarker analysis, or genetic testing, and insurers may deny coverage for these. Obtaining the Single Disability Certificate (CUD) entitles patients to 100% coverage of all medically prescribed services related to the certified disability, including advanced diagnostics, and exempts them from all copayments. For patients without a CUD, copayments for visits and tests are common and can vary widely; while they are regulated, insurers retain discretion to adjust them, often creating financial barriers to access.

References

- https://www.argentina.gob.ar/justicia/derechofacil/leysimple/programa-medico-obligatorio
- https://www.argentina.gob.ar/justicia/derechofacil/leysimple/certificado-unico-discapacidad
- https://www.alma-alzheimer.org.ar/es/servicios-alma/asesoramiento

Cognitive tests

Status: Available

There is no nationally organised, widespread screening programme for dementia in the country, which means the diagnostic journey relies on individuals and families recognising early signs. Two of the most common screening tools used in clinical settings, the Mini-Mental State Examination (MMSE) and the Montreal Cognitive Assessment (MoCA), are both validated and used in Argentina. However, the unequal distribution of specialists and diagnostic centres across the country means that access to a healthcare professional proficient in administering and interpreting such specialised tests is not uniform.

References

- https://www.researchgate.net/profile/Carlos-Mias-3/publication/267764166_MMSE_normas_para_la_region_litoral_argentina/links/545a21df0cf2cf5164842db3/MMSE-normas-para-la-region-litoral-argentina.pdf
- https://www.demneuropsy.org/article/validation-of-the-argentine-version-of-the-montreal-cognitive-assessment-test-moca-a-screening-

tool-for-mild-cognitive-impairment-and-mild-dementia-in-elderly/
- https://link.springer.com/chapter/10.1007/978-3-319-95360-1_28
- Allegri, R. F., Ollari, J. A., Mangone, C. A., Arizaga, R. L., De Pascale, A., & Pellegrini, M. (1999). The Mini-Mental State Examination in Argentina: Instructions for Administration. Revista Neurológica Argentina, 24, 31–35.
- Serrano, C. M., Sorbara, M., Minond, A., Finlay, J., Arizaga, R. L., Iturry, M., & Allegri, R. F. (2020). Validation of the Argentine version of the Montreal Cognitive Assessment Test (MOCA): A screening tool for mild cognitive impairment and mild dementia in elderly. Dementia & Neuropsychology, 14(2), 145–152. doi.org
- Roca, M., Crivelli, L., Sarasola, D., Sabe, L., Calcagno, M. de L., García Caballero, A. A., Torralva, T., & Manes, F. (2005). The Addenbrooke's Cognitive Examination in Spanish for Diagnosing Dementia and Differentiating Alzheimer's Disease from Frontotemporal Dementia. Revista de Neurología, 41(12), 717–721. doi.org

Imaging tests

Status: Used in specific cases

Argentina has made significant strides in integrating advanced neuroimaging techniques into Alzheimer's disease research and clinical practice, with the establishment of Alzheimer's Disease Neuroimaging Initiative (ADNI). Standard structural Computed Tomography (CT) and Magnetic Resonance Imaging (MRI) scans are mainly available in urban areas and in the private sector. Advanced functional scans like PET have a restricted availability and accessibility. The availability of FDG-PET and amyloid-PET is mostly limited to one centre in Buenos Aires at the Institute for Neurological Research Dr. Raul Carrea (FLENI).

References

- https://pmc.ncbi.nlm.nih.gov/articles/PMC11567812/
- https://www.intpsychogeriatrics.org/article/S1041-6102%2824%2903892-4/fulltext
- https://www.alz.org/getmedia/9030cab2-34ab-4e7a-9dce-e5d54d6b17a2/ww-adni-november-2014-argentina-12.pdf
- https://www.fleni.org.ar/

Genetic tests

Genetic testing for the prediction of Alzheimer's disease in Argentina is available through foreign-based commercial companies. Despite the limited availability, Argentina is a significant contributor to the global genetic research, which may enable access to at-risk individuals.

Most predictive genetic tests or advanced molecular panels offered in the country, such as full sequencing of specific genes or risk genes such as APOE4, are performed through partnerships with highly specialised laboratories abroad. Argentina has scientific institutions and regional referral centres that conduct genetic studies focused on clinical diagnosis and global research protocols. Although the Centro Nacional de Genética Médica (CENAGEM) under the Ministry of Health, exists, its public resources are largely prioritised for rare genetic and developmental conditions.

References

- https://www.inis-biotech.com.ar/en/tecnologias2
- https://www.fleni.org.ar/novedades/alzheimer-hereditario-fleni-y-dian-investigan-familias-argentinas/
- https://www.argentina.gob.ar/salud/anlis/cenagem

https://www.fleni.org.ar/especialidades/neurologia/neuropatologia-y-biologia-molecular/
- https://www.manlab.com.ar/nosotros/

Biomarker tests

Alzheimer's disease biomarker testing is not widely available throughout the country. In Argentina, Alzheimer's disease biomarker tests are mainly performed at highly specialised neurological centres and specialised private laboratories, mostly concentrated in Buenos Aires.
While testing is available at the FLENI Neurological Institute, blood biomarkers are currently discussed in the context of international research and are not yet part of routine clinical practice in Argentina.

References

- https://www.sciencedirect.com/science/article/pii/S2173580819301397
- https://www.infobae.com/america/ciencia-america/2025/08/09/la-nueva-era-del-alzheimer-5-novedades-presentadas-en-el-congreso-de-investigacion-mas-grande-del-mundo/
- https://www.fleni.org.ar/novedades/estudio-genetico-y-de-biomarcadores-de-alzheimer/
- https://www.manlab.com.ar/nosotros/

Treatment & care

Specialised memory clinics and advanced diagnostic centres are largely concentrated in Buenos Aires and Rosario, creating geographic and socioeconomic barriers for families elsewhere. Day centres, supported by PAMI, and NGOs like A.L.M.A. provide community-based caregiver support. Palliative dementia care remains limited. The Single Disability Certificate (CUD) ensures full coverage for treatments, while others rely on partial insurance. Provincial programs and NGOs offer caregiver training, workshops, and support groups, though direct financial assistance is scarce.

Specialized facilities and services

Specialised memory clinics and advanced diagnostic centres are concentrated in Buenos Aires and Rosario, with leading institutions like FLENI, INECO, and Favaloro foundations providing comprehensive evaluations. Provincial access is limited, forcing families from other regions to travel long distances, creating geographic and socioeconomic barriers. Day centres, primarily public or private facilities in Buenos Aires, are supported by PAMI, while NGOs such as A.L.M.A. offer widespread community-based caregiver support across provinces. Palliative dementia care remains underdeveloped, with services largely hospital- or home-based, leaving significant gaps in specialised end-of-life support despite a national palliative care law.

In the city of Neuquén, in Neuquén Province, Argentina, there is the San Rafael Neurocognitive Evaluation and Rehabilitation Center. It is a regional reference center for the diagnosis and treatment of dementias. Together with the ALMA Comahue association, it has been supporting families and people with dementia for 12 years.

Specialist memory clinics and advanced diagnostic centres are concentrated in Buenos Aires and Rosario, including leading institutions such as the FLENI, INECO and Favaloro foundations and Hospital Italiano, which provide comprehensive assessments and specific treatments.
In public-sector hospitals, patients generally receive care from general practitioners, who sometimes refer them to specialists. PAMI provider hospitals, including Hospital César Milstein in Buenos Aires, have specialists, day centres and family support. Demand is high and access remains limited, as in the provinces, forcing families from other regions to travel long distances and creating geographical and socioeconomic barriers.

Day centres are mainly public or private facilities, some supported by PAMI, while NGOs such as A.L.M.A. Buenos Aires offer extensive community support for families and caregivers.
Palliative care for dementia remains underdeveloped, with services mainly based in hospitals or provided at home, leaving significant gaps in specialist end-of-life support despite the existence of a national palliative care law.

Specialist memory clinics and advanced diagnostic centres are located almost exclusively in Buenos Aires and Rosario. Leading institutions such as the INECO and Favaloro foundations and FLENI, together with major private hospitals such as Hospital Italiano, offer comprehensive neurological and neuropsychological assessments but are concentrated in these urban centres. Although a limited number of dementia specialists practise in provincial capitals such as Córdoba or San Miguel de Tucumán, they are scarce. This centralisation forces families elsewhere in the country to undertake long, costly journeys to obtain an accurate diagnosis, creating significant geographical

and socioeconomic barriers to diagnosis, treatment and care.

Day centres are also geographically concentrated, with a mixture of public and private facilities available mainly in Greater Buenos Aires.
Buenos Aires City operates a network of free public centres, including one for cognitive impairment. The public health insurance scheme PAMI (Comprehensive Medical Care Programme), through Hospital César Milstein, provides coverage for specialist day centres for its members.
Community support through NGOs is expanding.

However, A.L.M.A. Buenos Aires centralises care and support through volunteers providing in-person and remote services.

Approved medication

Generic Name	Trade Name	Used for
Donepezil	Aricept, Aricept ODT, Adlarity, Eranz, Memac, Alzepil, Davia, Donecept, Donep, Donepex, Donesyn, Dopezil, Yasnal, Memorit, Pezale, Redumas, Zolpezil, Namzaric*	Donepezil is indicated for the symptomatic treatment of mild to moderately severe Alzheimer's dementia. Official UK medicine details (MHRA SPC) link
Rivastigmine	Exelon, Exelon Patch, Prometax, Rivastach, Nimvastid	Symptomatic treatment of mild to moderately severe Alzheimer's dementia. Symptomatic treatment of mild to moderately severe dementia in patients with idiopathic Parkinson's disease. Official UK medicine details (MHRA SPC) link
Galantamine	Razadyne, Razadyne ER, Reminyl, Reminyl XL, Nivalin, Lycoremine, Galsya	Galantamine is indicated for the symptomatic treatment of mild to moderately severe dementia of the Alzheimer type. Official UK medicine details (MHRA SPC) link
Memantine	Namenda, Namenda XR, Ebixa, Memary, Axura, Akatinol, Maruxa, Nemdatine, Namzaric*	Treatment of adult patients with moderate to severe Alzheimer's disease. Official UK medicine details (MHRA SPC) link

*Namzaric = combination of Donepezil and Memantine
** MHRA: Medicines and Healthcare products Regulatory Agency - UK medicines regulator;
SPC: Summary of Product Characteristics - detailed product information

Treatment cost

Following an Alzheimer's diagnosis, Argentine patients can secure the Single Disability Certificate (CUD), ensuring complete funding for medications, therapies, and supportive care. Those without the CUD depend on regular

insurance, which typically requires copayments and provides partial coverage.

In Argentina, both government and private insurance are legally required to cover medicine and therapy costs for Alzheimer's disease. More precisely, following a diagnosis, patients can apply for the Single Disability Certificate (CUD), a legal document that compels their insurer to provide 100% coverage for all related treatments and services. This coverage includes medications, rehabilitation, and support services such as home assistance or residential care.

Without the CUD, patients rely on the standard coverage provided by their insurer, which typically involves copayments and limitations.

References

- https://www.argentina.gob.ar/justicia/derechofacil/leysimple/prestaciones-por-discapacidad
- https://www.argentina.gob.ar/sssalud/usuarios/cobertura-prestacional/discapacidad

Caregiver support

Provincial programs provide targeted caregiver support: Mendoza's Mayor Respiro offers free group sessions to prevent burnout, while Tucumán's Alzheimer Nodes deliver training, workshops, and family support. PAMI retirees can access a Home Auxiliary subsidy to fund external care, not as a caregiver salary. NGOs like A.L.M.A. and Alzheimer Argentina supplement services with counseling, educational workshops, and supervised support groups, offering emotional and practical guidance nationwide, though direct financial assistance remains limited.

Psychosocial support for caregivers is provided mainly by NGOs, in person or remotely. The leading organisation, A.L.M.A. Buenos Aires, and other NGOs in the country's RADA network offer a nationwide network of services including support groups, personalised advice by telephone and email, and educational workshops, although they do not provide direct financial assistance. Other organisations, such as Alzheimer Argentina, also offer supervised support groups and psychotherapy for the family, focusing on emotional and practical guidance.
For retirees and pensioners affiliated with PAMI (, the national health insurance scheme for this group), additional financial support is generally not available to members; it may be obtained through a disability certificate.

References

- https://www.alma-alzheimer.org.ar/es/servicios-alma
- https://alzheimer.org.ar/
- https://fundacionleon.org.ar/
- https://www.alma-alzheimer.org.ar/es/noticias/red-de-alzheimer-y-demencias-argentina-rada

Policy

Argentina's approach to dementia is at a historic transition point, divided between a recent ministerial strategy and a national bill awaiting approval, complemented by provincial plans.

The National Plan for Alzheimer's Disease and Related Disorders (ministerial route)
Formally established by the National Ministry of Health through Resolution 279/2026, it is the first nationwide programme designed specifically to address this issue.
Civil-society organisations such as Asociación de Lucha contra el Mal de Alzheimer (A.L.M.A.) have noted that, because it was created through a ministerial resolution, it lacks a specific, mandatory budget allocation, limiting actual funding for large-scale training, external caregivers and communication guidelines.

The National Alzheimer's Bill (legislative route)
To remedy the ministerial resolution's budget shortcomings, the scientific community and NGOs are advocating for the plan to become a national law.
The bill passed the Chamber of Deputies on 9 October 2025 and is currently being debated in the National Senate for final enactment.

Coordinated provincial programmes
Given the historic lack of a unified national framework, various provinces took the initiative and designed their own cognitive health strategies:
Tucumán: has a pioneering provincial programme focused on a comprehensive public health approach. It has "Alzheimer's nodes" across its healthcare units for early detection, support workshops, telemedicine and the integration of dementia content into higher education.
Mendoza: introduced targeted caregiver support initiatives, such as "Mayor Respiro", which offers free group psychological support to prevent burnout among supporting families.
Other provinces with their own programmes: Catamarca, Chaco, Santa Fe and Entre Ríos have also established local networks or coordination groups to manage diagnosis and patient care.

National dementia plan

Several Argentine provinces have enacted their own dementia legislation in the absence of a national plan, including Tucumán, Catamarca, Chaco, Santa Fe, and Entre Ríos. Tucumán's Provincial programme for the Comprehensive Management of Alzheimer's Disease and Other Dementias aim to improve quality of life for patients and families through early detection, specialised clinics, and ongoing healthcare training. The programme emphasises research, data collection, caregiver support, inclusive communities, improved access to services like the CUD, telemedicine, and integration of dementia education into higher education curricula, creating a coordinated provincial framework despite the lack of nationwide legislation.

The National Plan for Alzheimer's Disease and Related Disorders was officially approved in February 2026. The strategic framework operates under the National Directorate for a Comprehensive Approach to Mental Health and is designed to address the growing impact of neurodegenerative diseases, identified as a public health priority

because of their progressive nature and significant effects on social and occupational functioning.

The strategy is organised around six main pillars:
Promotion and prevention: launch public awareness campaigns to educate communities and reduce dementia-related stigma.
Workforce training: provide healthcare workers with specific guidelines to ensure early detection and appropriate intervention.
Comprehensive care: provide dedicated psychological support and care resources for patients and informal caregivers.
Research and information: promote ongoing clinical and social research to keep information systems up to date.
Intersectoral coordination: encourage collaboration between ministries and healthcare sectors.
Epidemiology: formally assess the country's current epidemiological situation.

Previously, several Argentine provinces took the initiative to enact their own dementia legislation. Tucumán (Law 9014), Catamarca (Law 5895), Chaco (Law 7556), Santa Fe (Law 14111) and Entre Ríos have established subnational frameworks or programmes.
The most recent is the Provincial Programme for the Comprehensive Approach to Alzheimer's Disease and Other Dementias enacted by the Government of Tucumán. Its main aim is to improve the quality of life of people living with Alzheimer's disease and other dementias and their families. Its key objectives are:
Early detection and diagnosis: implement effective early detection strategies and establish specialist clinics throughout the province to provide medical, psychological and social support.

Accessible care: provide ongoing healthcare staff training on Alzheimer's disease and other dementias and develop public information and awareness campaigns on the disease and brain health.

Research and data collection: establish a reliable system of statistics and registration of new Alzheimer's diagnoses and strengthen research into new ways to prevent, treat and cure the disease.

Family and caregiver support: offer resources and support to families, including training for home caregivers.

Creating an inclusive environment: promote a friendly, inclusive environment by adapting communities and public spaces for people living with dementia.

Improving access to services: coordinate with the Provincial Disability Board to ensure access to the Unified Disability Certificate (CUD) and improve access to treatment and medicines.

Telemedicine: coordinate a telemedicine system for people living with dementia, including teleconsultation and tele-education.

Higher education: encourage universities and other higher education institutions to include dementia in healthcare professionals' curricula.

Argentina approved its first National Plan for Alzheimer's Disease and Related Disorders through Ministry of Health Resolution 279/2026, published on 19 February 2026. The plan has six pillars: promotion and prevention; workforce training; comprehensive care and family support; research, innovation and information systems; intersectoral coordination and governance; and assessment of the epidemiological situation. However, the resolution states that the measure does not entail new budget expenditure, so implementation may depend on existing institutional capacity and provincial coordination. A separate bill (PLEA) to create a broader national Alzheimer's and dementia

programme has passed the Chamber of Deputies but, as of late June 2026, remains under Senate consideration.

Several Argentine provinces have enacted their own dementia legislation, including Tucumán, Catamarca, Chaco, Santa Fe and Entre Ríos. Tucumán's Provincial Programme for the Comprehensive Approach to Alzheimer's Disease and Other Dementias aims to improve patients' and families' quality of life through early detection, specialist clinics and ongoing healthcare staff training. It emphasises research, data collection, caregiver support, inclusive communities, better access to services such as the Unified Disability Certificate (CUD), telemedicine and dementia education in higher education curricula, creating a coordinated provincial framework despite the lack of national legislation.

References

- https://www.boletinoficial.gob.ar/detalleAviso/primera/338538/20260219?busqueda=1&anexos=1
- https://www.mendoza.gov.ar/prensa/inicia-la-preinscripcion-al-programa-mayor-respiro-para-familiares-cuidadores-de-personas-mayores-con-demencia/
- https://www.argentina.gob.ar/normativa/nacional/resoluci%C3%B3n-279-2026-423231/texto
- https://fundacionleon.org.ar/hacia-un-plan-nacional-de-demencias-con-incidencia-de-leon/
- https://msptucuman.gov.ar/wordpress/wp-content/uploads/2024/11/PROGRAMA-ALZHEIMER-V01.pdf
- https://www.alma-alzheimer.org.ar/es/noticias/el-ministerio-de-la-salud-creo-el-plan-nacional-de-alzheimer-y-trastornos-relacionados

Upcoming plans

In May 2024, a Buenos Aires symposium united politicians, experts, and civil society, advancing advocacy for a national dementia strategy in Argentina.

There are no upcoming strategies.

Policy gaps

Legal barriers

The main legal obstacle is the absence of a unified, funded national plan for Alzheimer's disease and other dementias.

The main legal obstacle is the absence of a unified, funded national plan for Alzheimer's disease and other dementias.

References

- https://www.alzint.org/news-events/news/adi-regional-director-supporting-a-national-dementia-plan-for-argentina/

Cultural barriers

Public opinion surveys reveal that while Alzheimer's disease is one of the most feared diseases, people erroneously believe it is a normal and inevitable part of aging.

Research

Argentina leads in Alzheimer's research, advancing biomarker validation, lifestyle intervention trials, genetic studies, and AI-driven molecular insights through FLENI, University of Buenos Aires, and CONICET.

Selected academic institutions

FLENI Neurological Institute Institute of Genetic Engineering and Molecular Biology The Leloir Institute University of Buenos Aires Institute of Biomedical Research of Buenos Aires National University of La Plata Institute of Biochemical Research of La Plata National University of Cordoba University of San Andres

Clinical trials and registries

The regulatory authority for all clinical trials in Argentina is the National Administration of Drugs, Food and Medical Devices (ANMAT). ANMAT oversees the approval and monitoring of all clinical research in the country. They maintain the national public registry of clinical trials.

National Registry of Health Research (RENIS) is the official public database where all health research studies involving human beings in Argentina are registered.

Buenos Aires City has the computerised PRIISA registry platform, in compliance with Law No. 3301/09 (Law on the Protection of the Rights of Participants in Health Research

The regulatory authority for all clinical trials in Argentina is the National Administration of Drugs, Food and Medical Devices (ANMAT). ANMAT oversees the approval and monitoring of all clinical research in the country. They maintain the national public registry of clinical trials. National Registry of Health Research (RENIS) is the official public database where all health research studies involving human beings in Argentina are registered.

References

- https://www.argentina.gob.ar/anmat-en/what-anmat/know-our-history
- https://www.anmat.gob.ar/Medicamentos/investigacion_clinica_en.asp
- https://sisa.msal.gov.ar/sisadoc/docs/050104/renis_intro.jsp
- https://buenosaires.gob.ar/gcaba_historico/salud/docencia-investigacion-y-desarrollo-profesional/priisaba

Selected innovative methods

FLENI Neurological Institute leads Alzheimer's research in Argentina, hosting ADNI, DIAN trials, and LatAm-FINGERS to validate biomarkers and test lifestyle interventions. University of Buenos Aires researchers conduct GWAS and molecular studies, while CONICET applies AI-enhanced super-resolution microscopy to track neuro-receptor dynamics in living cells, advancing understanding of Alzheimer's disease mechanisms.

FLENI Neurological Institute is a central hub for Alzheimer's disease research, hosting the Argentina-Alzheimer's Disease Neuroimaging Initiative (ADNI) to validate biomarkers and participating in international clinical trials like the

Dominantly Inherited Alzheimer Network (DIAN). Its Laboratory of Applied Neuroscience Research also uses pluripotent stem cells to model and study neurodegenerative diseases such as Alzheimer's disease. FLENI also leads the LatAm-FINGERS study, which adapts the Finnish FINGER model to test whether multidomain lifestyle interventions—combining diet, exercise, and cognitive training—can prevent cognitive decline in older adults across Latin America.

Researchers from the University of Buenos Aires have been involved in the first Genome-Wide Association Study (GWAS) for Alzheimer's in South American populations, identifying genetic risk factors shared with Europeans. They also conduct foundational research on the molecular mechanisms of Alzheimer's disease.

A research team at National Council for Scientific and Technical Research (Consejo Nacional de Investigaciones Científicas y Técnicas, CONICET) has for the first time used advanced super-resolution microscopy combined with artificial intelligence to visualise, in a living cell, how the nicotinic acetylcholine receptor (a membrane neuro-receptor implicated in neurological diseases such as Alzheimer's disease and Myasthenia gravis) moves and interacts with the lipid cholesterol.

References

- https://lian.fleni.org.ar/2025/01/09/a-day-at-lian-fleni-stem-cell-research/?lang=en
- https://www.fleni.org.ar/fingers/
- https://pubmed.ncbi.nlm.nih.gov/37204054/
- https://pubmed.ncbi.nlm.nih.gov/37985413/
- https://www.conicet.gov.ar/logran-revertir-deficits-de-la-memoria-en-un-modelo-experimental-de-la-enfermedad-de-alzheimer/
- https://www.conicet.gov.ar/un-equipo-del-conicet-logro-visualizar-por-primera-vez-con-ia-la-dinamica-de-un-neuroreceptor-implicado-en-enfermedades-neurologicas

Support

The ReDLat consortium advances dementia research across Latin America and the U.S., combining genomic, neuroimaging, and behavioral data to better understand Alzheimer's and frontotemporal dementia. Public engagement is supported through Revista Alzheimer, Alzheimer Argentina's magazine, which educates and raises awareness for general audiences.

Organizations are listed for informational purposes based on publicly available sources. Inclusion does not necessarily indicate affiliation with or endorsement by Alzheimer's Disease International (ADI).

Selected national associations, patient family associations, NGOs:

Association for the Fight against Alzheimer's Disease (A.L.M.A.) Alzheimer Argentina

Selected initiatives

The ReDLat consortium unites Latin American countries and the U.S., integrating genomic, neuroimaging, and behavioral data to advance understanding of Alzheimer's and frontotemporal dementia across diverse populations.

The ReDLat initiative

The ReDLat initiative is a multi-partner consortium designed to expand dementia research in Latin America and the Caribbean by combining genomic, neuroimaging, and behavioural data to better characterise Alzheimer's disease and frontotemporal dementia in the region's diverse populations. The initiative draws participants from Argentina, Brazil, Chile, Colombia, Mexico and Peru in Latin America, with collaborative links to the United States.

References

- https://red-lat.com/en-the-project/
- https://pmc.ncbi.nlm.nih.gov/articles/PMC7992978/

Dedicated media outlets

Revista Alzheimer is the official publication of the organisation Alzheimer Argentina, functioning as an informational magazine for a general audience.

References

- https://alzheimer.org.ar/revista-alzheimer/
- https://fundacionleon.org.ar/
- https://grupogamamdq.org/
- https://www.instagram.com/alma_laplata/