

St. Lucia

Research conducted in

Saint Lucia's Alzheimer's disease response is non-governmental organization (NGO)-led with most clinical capacities located in the capital, Castries. Saint Lucia Alzheimer & Dementia Association (SLADA), drives awareness and carer support, while public and private hospitals provide diagnosis, testing and care. Access outside the capital remains more limited and some complex cases still go off-island. Saint Lucia aims for universal health coverage (UHC) but most dementia-related services are still paid out-of-pocket. Legal gaps remain since there is no dementia-specific framework for capacity, guardianship or fitness-to-drive, while protections rely on broader mental-health and older adults policies. Upcoming strategies include the government's UHC reform and ongoing updates to the mental-health policy and the National Policy for Older Persons, which could improve access and affordability. There is currently no national dementia plan although it was widely advised by ADI as a part of broader Caribbean strategy.

Highlights

Health system **Non-Universal, Mixed Funding (Mixed Provision)**

ADI member association(s): **St Lucia Alzheimer & Dementia Association (SLADA)**

National dementia plan:

Dementia plan funding: **No plan**

Dementia prevalence rate: **722**

Dementia incidence rate: **125**

Population: **180270**

Median age: **35**

Health expenditure (% of GDP): **5**

Diagnosis

Initial examinations occur at primary clinics or private general practitioner rooms, with red flags referred to Castries hospitals like Owen King EU or Tapion Hospital for cognitive assessments and imaging. Island clinics experience extended wait times, sometimes exceeding four to six hours for non-urgent care. Clinicians utilise internationally validated instruments like MMSE and MoCA, adjusting for educational attainment. On-island MRI and CT capacity exists across public and private sites, minimizing overseas referrals. However, genetic testing samples are shipped abroad, and advanced biomarkers are not used in routine practice. Financial barriers remain high, with out-of-pocket costs comprising 38.7% of health spending.

Diagnosis pathway

People typically begin with examinations at primary clinics or private general practitioner rooms. Persistent red flags trigger referrals to specialists for cognitive assessment and imaging, primarily centred in Castries at the Millennium Heights Medical Complex, Owen King EU Hospital, or private Tapion Hospital. Public-private collaborations aim to provide these services locally, though some complex cases require overseas travel. Outside main urban corridors, pathways are more informal, relying on repeated primary care visits or private providers. This pattern reflects low awareness and limited regional specialist density.

In Saint Lucia, people typically begin with the initial examinations at primary care clinics or private general practitioner (GP) rooms. When persistent memory or behavioral “red flags” are noted, they are referred to hospital specialists for cognitive assessment and imaging. Most of the imaging capacity is centered in Castries’ Millennium Heights Medical Complex and its most prestigious public hospital, Owen King EU (OKEU), as well as private facilities such as Tapion Hospital. Although overseas travel is required when diagnostic services are unavailable on the island, Saint Lucia has been working to provide these services locally through public-private collaboration.³⁰ Outside the main urban corridor, pathways are more informal and may rely on repeat primary-care visits or private providers before specialist review. Alzheimer’s Disease International (ADI) has identified a similar pattern across the Caribbean due to low baseline awareness and limited specialist density.

References

- https://www.eeas.europa.eu/delegations/barbados/owen-king-european-union-hospital-opens-st-lucia_und_en
- <https://tapionhospital.com>
- <https://resonandina.com/impact-launch-of-st-lucias-first-new-15-t-mri-in-public-private-partnership/>
- <https://www.alzint.org/what-we-do/policy/whatsyourplan/caribbean-region-campaign/>

Wait times

Status: Long wait time

Waiting times at clinics in Saint Lucia are currently extended due to overcrowding, especially in the Accident and Emergency (A&E) department. While life-threatening and serious conditions are prioritized, waiting times for non-

urgent care in the A&E can exceed 4-6 hours. To manage the situation, the government is encouraging residents to use polyclinics with extended hours, wellness centers, or private physicians for non-urgent medical needs.

References

- <https://www.thestkittsnevisobserver.com/overcrowding-and-extended-waiting-times-at-accident-and-emergency-department-in-st-lucia/>

Diagnosis cost

Status: Mostly or fully covered

Financing is mixed and households face high out-of-pocket exposure as Saint Lucia moves toward universal health coverage. Out-of-pocket spending accounted for almost half of health spending in 2014 and about 38.7% in 2022, creating financial barriers to specialist visits and imaging. To lower these expenses, the government launched a universal health coverage agenda supported by the World Bank. This involves a staged rollout, performance-based financing, and a new financing model explicitly designed to pool public and private sector risks and lower out-of-pocket costs.

Saint Lucia is moving toward universal health coverage (UHC), but for now financing is mixed and households still face high out-of-pocket exposure. Pan-America Health Organization (PAHO)'s Health in the Americas profile notes out-of-pocket accounted for "almost half" of total health spending in 2014, and more recent tracking puts out-of-pocket at about 38.7% of current health expenditure in 2022, underscoring financial barriers to specialist visits and imaging. 23 In parallel, the government has launched a UHC agenda, backed by World Bank support, to reduce out-of-pocket and pool risks across public and private sectors. Official reports describe a staged UHC rollout, performance-based financing, and a new financing model explicitly aimed at lowering out-of-pocket costs.

References

- <https://p4h.world/app/uploads/2024/10/UHC-St-Lucia.x24228.pdf>
- <https://hia.paho.org/en/country-profiles/saint-lucia>
- <https://p4h.world/en/countries/saint-lucia/>
- <https://documents1.worldbank.org/curated/en/099061825082017018/pdf/P166783-af4f2682-513f-4f1f-99f2-05f4633852a2.pdf>
- <https://sluhc.com/building-a-healthier-saint-lucia-advancing-universal-health-coverage/>

Cognitive tests

Status: Available

Although no Saint Lucia-specific dementia screening guideline was identified, cognitive assessment in the Caribbean commonly relies on internationally validated instruments such as the Mini-Mental State Examination (MMSE) and Montreal Cognitive Assessment (MoCA), both of which have been widely used and validated in Caribbean and Latin American populations. Consistent with regional practice, clinicians are encouraged to consider educational attainment when interpreting MMSE and MoCA scores to reduce the risk of misclassification.

References

- <https://www.researchsquare.com/article/rs-8823313/v>

<https://pmc.ncbi.nlm.nih.gov/articles/PMC13111965/>

Imaging tests

Status: Commonly used

In Saint Lucia, advanced imaging is concentrated in Castries, where the public Owen King EU Hospital (OKEU) has modern radiology capacity, including an MRI scanner and a newly installed CT service. The private Tapion Hospital also advertises a full radiology suite with MRI and CT, offering an additional on-island option for cross-sectional imaging. Beyond these hospitals, Castries hosts dedicated imaging providers such as GableWoods (GW) Medical Center, which lists MRI and CT among its services, and Rodney Bay's La Clinique du Corps International, where a 1.5 T MRI was launched in 2023 as part of private-public partnership. Access and affordability still vary by location but together these sites confirm that CT and MRI are available on-island, reducing the need for overseas referrals.

References

- <https://www.facebook.com/watch/?v=1796361470483930>
- <https://tapionhospital.com/about-us/>
- <https://www.gwmedicalcenter.com/>
- <https://resonandina.com/impact-launch-of-st-lucias-first-new-15-t-mri-in-public-private-partnership/>

Genetic tests

Most of the laboratories list routine services but do not list Alzheimer's disease-related genetic testing such as apolipoprotein E (APOE) or APP/PSEN1/PSEN2. Instead, private laboratories explicitly note they use referral (send-out) laboratories for specialized tests, with samples shipped abroad. In practice, when Alzheimer's disease-related genetic testing are pursued, clinicians typically use external providers via send-out pathways, consistent with global guidance that such testing is specialized and usually paired with genetic counseling.

References

- <https://www.slulabservices.com/the-lab/services/>
- <https://www.invitae.com/us/providers/test-catalog/test-03504>
- <https://tapionhospital.com/laboratory-service>

Biomarker tests

Status: Rarely used

There is no official document that confirms use of cerebrospinal fluid (CSF) A β /tau or blood-based Alzheimer's disease biomarkers in routine clinical practice. The general literature confirms that such biomarkers are clinically validated in more advanced clinics, mainly in the United States, but remain "infrequently used in clinical practice" globally due to access, cost and infrastructure constraints.

References

- <https://www.jpreventionalzheimer.com/7225-diagnostic-biomarkers-of-amyloid-and-tau-pathology-in-alzheimers-disease-an-overview-of-tests-for-clinical-practice-in-the-united-states-and-europe.html>

<https://molecularneurodegeneration.biomedcentral.com/articles/10.1186/s13024-021-00430-x>

Treatment & care

Saint Lucia lacks a national memory clinic network or dementia-specific palliative pathways, routing care through neurology or psychiatry departments at Castries hospitals. General palliative support is available through cancer non-governmental organisations. Standard symptomatic dementia medications like donepezil, rivastigmine, galantamine, and memantine are accessed via private pharmacies, as no national public reimbursement list exists. Pharmaceutical regulation is managed by the Ministry of Health and the Pharmacy Council. Day-to-day care costs, transport, and private fees are paid out-of-pocket, creating affordability gaps that ongoing universal health coverage reforms intend to address over time.

Specialized facilities and services

Saint Lucia has no publicly documented national network of memory clinics. Most dementia care is routed through hospital neurology or psychiatry services in Castries, primarily at public hospitals like Owen King EU or private Tapion Hospital, which offer reliable neurospecialist capacity and advanced imaging. Palliative care is expanding but remains focused on terminal conditions like cancer, with no specific dementia pathways, teams, or protocols documented. While the St Lucia Alzheimer & Dementia Association provides advocacy, formal dementia-dedicated clinic networks and palliative standards are absent from government profiles.

Saint Lucia has no publicly documented national network of memory clinics. Instead, most dementia care is routed through hospital neurology or psychiatry services in Castries, mainly at public hospitals like OKEU or private Tapion Hospital. These hospitals offer tertiary services and have demonstrated reliable neurospecialist capacity, serving as a key site for specialist consultations and advanced imaging with MRI and CT. Palliative care capacity is developing but remains mostly focused on patients with terminal conditions such as cancer. Numerous cancer non-governmental organizations (NGOs) and groups like Faces of Cancer Saint Lucia and the Saint Lucia Cancer Society provide navigation and support that can incidentally benefit people living with dementia. However, there is little documentation of dementia-specific palliative pathways, teams, or protocols. At the same time, civil society advocacy still exists through Saint Lucia Alzheimer & Dementia Association (SLADA), but formal, dementia-dedicated clinic networks and palliative standards have not been described in government or PAHO profiles to date.

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.
Date generated: 23 October 2026		Official UK medicine details (MHRA SPC) link

Generic Name	Trade Name	Used for
Galantamine	Razadyne, Razadyne ER, Reminyl, Reminyl XL, Nivalin, Lycopremine, 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

Dementia-related costs remain largely out-of-pocket or covered by private insurance because universal health coverage is still rolling out. Public facilities reduce but do not eliminate expenses; user fees, transport, and private medications are entirely out-of-pocket. High-ticket items like CT, MRI imaging, and private home care cause the largest affordability gaps. The government's ongoing reform plans to shift these costs over time by standardising benefits and pooling public-private risks. However, until these benefits are fully funded, comprehensive financial protection for dementia care is not guaranteed.

With UHC still being rolled out in Saint Lucia, many day-to-day dementia-related costs are still largely out-of-pocket or paid through private insurance, while public facilities reduce but do not eliminate expenses. User fees and transport are fully paid out-of-pocket, while medicine in private facilities is also paid out-of-pocket. Higher-ticket items, such as CT and MRI imaging or private home care, tend to fall outside routine public coverage and create the biggest affordability gaps. However, the government's UHC reform is intended to shift this costs over time by pooling risks across public and private sectors, standardizing benefits, contracting both public and private providers, and introducing clearer payment and referral pathways. Until those benefits are fully defined and funded, comprehensive protection for dementia care is not yet guaranteed.

References

- <https://sluhc.com/saint-lucia-charts-bold-path-toward-universal-health-coverage-a-roadmap-for-equity-and-access/>
- <https://hia.paho.org/en/country-profiles/saint-lucia>

Caregiver support

Public policy documents outline no dedicated state cash allowances, respite schemes, or carer benefits for dementia. Non-governmental organisations handle most support; the St Lucia Alzheimer & Dementia Association offers education workshops, peer-support groups, and awareness campaigns to reduce stigma and empower families. Additionally, private groups like Angels of the West Indies provide dementia-care skills training, home-

based assistance, and practical respite. These civil society initiatives help fill critical gaps resulting from the country's limited formal geriatric or palliative services.

No dedicated state cash allowances, respite schemes, or carer benefits for dementia are described in public policy documents or Ministry of Health releases. Most of the carer support is handled by NGO sector. For example, SLADA serves as the country's main advocacy and support organization, offering carer education workshops, peer-support groups, and community awareness campaigns. Its activities focus on reducing stigma, improving early recognition, and empowering families who often serve as the primary carers. Alongside SLADA, other private and NGO actors such as Angels of the West Indies provide dementia-care skills training, home-based assistance, and practical respite for families coping with long-term care needs. These initiatives help fill gaps left by limited formal geriatric or palliative services.

References

- <https://www.facebook.com/SLUDementia/>
- <https://www.stlalzangels.com/>

Policy

There is no dedicated national dementia plan despite regional encouragement from Alzheimer's Disease International. Policy reforms include updating the national Mental Health Policy, drafting a Mental Health Bill, and revising the National Policy for Older Persons to address integrated healthcare and caregiving support. Legal gaps are severe; the Mental Hospitals Act relies on outdated concepts, lacking modern capacity laws, guardianship frameworks, carer protections, or cognitive fitness-to-drive criteria. Culturally, low public awareness and stigma cause dementia to be viewed as normal ageing or spiritual issues, delaying medical help-seeking and isolating families.

National dementia plan

As of now, there is no dedicated national dementia plan. ADI's Caribbean campaign has encouraged governments, including Saint Lucia, to adopt national dementia plans aligned with WHO's Global Action Plan.

References

- <https://www.alzint.org/what-we-do/policy/whatsyourplan/caribbean-region-campaign/>

Upcoming plans

The government is advancing policy reforms highly relevant to dementia and older adults. PAHO is supporting revisions to the national Mental Health Policy and a new Mental Health Bill, which held public consultations in August 2025. Simultaneously, consultations occurred in 2024-2025 for a revised National Policy for Older Persons addressing healthy ageing, integrated healthcare, and caregiving support. Furthermore, a Digital Health Blueprint Toolkit for 2023-2026 aims to underpin universal health coverage reforms. These initiatives could embed dementia screening, long-term care, and carer rights into law and practice.

The government of Saint Lucia is advancing two key policy reforms that are highly relevant to dementia care and old adults services. First, PAHO is supporting the Ministry of Health, Wellness and Elderly Affairs in reviewing and updating the national Mental Health Policy and drafting a new Mental Health Bill, with public consultations held in August 2025. Second, the government is engaged in developing a revised National Policy for Older Persons, with consultations underway in 2024-25 to frame an implementation strategy that addresses healthy ageing, integrated healthcare, economic security, and caregiving support. Also, the Ministry of Health, Wellness and Elderly Affairs has launched a "Digital Health Blueprint Toolkit" as part of its ongoing work to build a full-fledged digital health strategy for 2023-2026. The strategy is designed to underpin the country's broader UHC reforms by using digital infrastructure to improve service delivery, enhance data systems, and reduce access and efficiency gaps. Together, these reforms could enable future dementia-specific strategies by embedding older-person and mental-health priorities, such as screening, long-term care, carer support and rights-based legislation, into law and practice.

References

- <https://p4h.world/app/uploads/2024/10/UHC-St-Lucia.x24228.pdf>
- <https://www.govt.lc/news/ministry-of-health-paho-engage-public>
- <https://www.govt.lc/news/consultation-meetings-for-review-and-updating-of-mental-health-policy-and-bill>
- <https://health.govt.lc/news/health-ministry-engages-stakeholders-in-national-elderly-policy-consultation>
- <https://stluciatimes.com/169085/2025/02/health-ministry-engages-stakeholders-on-policy-for-saint-lucias-elderly/>
- <https://www.thestkittsnevisobserver.com/ministry-of-health-launches-digital-health-blueprint-toolkit-to-assist-with-the-development-of-a-roadmap-to-implement-digital-health-strategy-in-saint-lucia/>
- <https://sluhc.com/building-a-healthier-saint-lucia-advancing-universal-health-coverage/>

Policy gaps

Legal barriers

Saint Lucia lacks a dementia-specific legal framework, and the Mental Hospitals Act relies on outdated concepts like persons of unsound mind. There are no statutory definitions for assessing capacity, granting medical consent, or managing property for cognitively impaired individuals. Guardianship remains informal and court-dependent without clear safeguards or periodic reviews. Clinicians face no legal duty to report impairment, and no specific driving eligibility regulations exist for dementia. Gaps also include missing carer protections, residential care standards, and diagnosis confidentiality rules.

Saint Lucia currently lacks a dementia-specific legal framework as Mental Hospitals Act outlines procedures for persons “of unsound mind” (including committal and custody) but lacks modern capacity law, dementia-specific provisions or fitness-to-drive criteria. There are no statutory definitions or procedures for assessing capacity, granting medical consent, or managing property for people living with cognitive impairment. Guardianship remains informal and court-dependent without clear safeguards or periodic review. Similarly, there is no dedicated regulation on driving eligibility for people living with dementia or legal duty for clinicians to report impairment. Broader gaps include the absence of carer protections, standards for residential care and clauses ensuring non-discrimination or confidentiality for dementia diagnoses. Lack of these regulations highlights an urgent need for inclusion of dementia-specific clauses in the upcoming Mental Health Bill and National Policy for Older Persons revisions.

References

- <https://attorneygeneralchambers.com/laws-of-saint-lucia/mental-hospitals-act/schedule>
- <https://stluciatimes.com/169085/2025/02/health-ministry-engages-stakeholders-on-policy-for-saint-lucias-elderly/>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC6020921/>

Cultural barriers

According to Alzheimer's Disease Interna, low awareness, stigma, and cultural misconceptions remain widespread across the Caribbean, where dementia is often viewed as a normal part of aging or attributed to spiritual or moral causes. This stigma can lead to delayed diagnosis, social isolation, and limited carer support, as families may hesitate to seek medical help or disclose a loved one's condition.

Research

Dementia research is limited by infrastructure and small-scale clinical services, with academic presence limited to institutions like American International Medical University and the University of the West Indies Open Campus. There are no active Alzheimer's disease interventional trials, national clinical trial registries, or dementia patient databases. System-level innovations focus on universal health coverage reforms and the National Digital Health Strategy (2023-2026). This digital blueprint aims to implement electronic health records, telehealth, and e-referral platforms, which could eventually establish the operational backbone required for early cognitive impairment detection and structured care pathways.

Selected academic institutions

[American International Medical University](#) [Commonwealth University College of Medicine](#) [The University of the West Indies \(UWI\) Open Campus – Saint Lucia](#) [Spartan Health Sciences University \(Castries\)](#)

Clinical trials and registries

Searches of ClinicalTrials.gov and WHO ICTRP show no Alzheimer's disease interventional trials recruiting or ongoing in Saint Lucia. No dedicated national clinical trials authority, clinical trials registry, or dementia-specific patient registry was identified in Saint Lucia.

Selected innovative methods

Country-specific dementia innovations are undocumented due to limited research infrastructure, but system-level reforms could indirectly strengthen care. The universal health coverage reform aims to expand financial protection and reduce out-of-pocket costs for specialist consultations, imaging, and medications. Additionally, the National Digital Health Strategy (2023-2026) plans to introduce electronic health records, telehealth, and e-referral platforms linking primary clinics with major hospitals. These systems could eventually improve continuity of care, facilitate remote neurological specialist consultations, and support structured dementia pathways.

Country-specific innovations in Alzheimer's disease diagnostics or therapeutics have not yet been documented in Saint Lucia, which reflects limited research infrastructure and small-scale neurology services. However, several system-level innovations are beginning to take shape through broader health-sector reforms that could indirectly strengthen dementia care. The UHC reform, supported by the World Bank and PAHO, aims to expand financial protection, integrate public and private providers, and reduce out-of-pocket spending on specialist consultations, imaging, and chronic-disease medications. At the same time, Saint Lucia's National Digital Health Strategy (2023-2026) envisions electronic health records, telehealth services, and e-referral platforms linking primary care with hospitals like OKEU and Tapion. When fully implemented, these systems could improve continuity of care, enable remote specialist consultations for neurological conditions, and support routine medication monitoring for people living with cognitive impairment. Over time, the convergence of UHC financing and digital integration could

create the operational backbone for more structured dementia pathways facilitating earlier detection, coordinated follow-up, and better access to essential medicines.

References

- <https://www.govt.lc/news/ministry-of-health-launches-digital-health-blueprint-toolkit-to-assist-with-the-development-of-a-roadmap-to-implement-digital-health-strategy-in-saint-lucia>
- <https://sluhc.com/building-a-healthier-saint-lucia-advancing-universal-health-coverage/>
- <https://p4h.world/app/uploads/2024/10/UHC-St-Lucia.x24228.pdf>

Support

Support is predominantly NGO-led, featuring groups like the St Lucia Alzheimer & Dementia Association (SLADA), Angels of the West Indies, and the Saint Lucia National Community Foundation. No state cash benefits or respite schemes exist for dementia caregivers. SLADA hosts public workshops, peer-support networks, and yearly World Alzheimer's Day campaigns alongside the health ministry to combat stigma and clarify normal ageing versus dementia. Angels of the West Indies delivers a certified training curriculum comprising online modules and clinical placements. Information dissemination relies completely on NGO channels, official ministry releases, and general media.

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:

[St Lucia Alzheimer & Dementia Association \(SLADA\)](#) [Angels of the West Indies](#) [Saint Lucia Cancer Society](#) [Girl Guide Association of Saint Lucia](#)

Selected initiatives

In September 2024, the St Lucia Alzheimer & Dementia Association marked World Alzheimer's Month with public workshops and media campaigns on early help-seeking. They also align yearly activities on World Alzheimer's Day with global campaigns alongside the health ministry. Additionally, Angels of the West Indies operates a structured Certified Dementia Caregiver programme. This initiative combines forty online modules, five virtual or in-person workshops, and eighty clinical hours to equip family and paid carers with hands-on communication, safety, and behaviour management techniques.

On 28 September 2024, SLADA marked World Alzheimer's Month with a public workshop focused on "understanding dementia vs normal aging" and the importance of early help-seeking. The event was promoted locally via broadcast and social media channels to reach families and carers across Castries and surrounding communities.

Angels of the West Indies runs a structured Certified Dementia Caregiver program in Saint Lucia that blends online learning with practical skills

40 online modules, five in-person or virtual workshops, and 80 clinical hours. These sessions are designed to equip family members and paid carers with hands-on techniques for communication, daily care, safety, and behavior management, and are offered periodically with options for local clinical placements.

Each year on World Alzheimer's Day, SLADA and the Ministry of Health, Wellness and Elderly Affairs align local activities with the global World Alzheimer's Month campaign.

References

<https://www.facebook.com/watch/?v=813750117333375>

- <https://www.stlalzangels.com/professional-training>
- <https://www.facebook.com/p/St-Lucia-Alzheimer-Dementia-Association-100063782596634>

Dedicated media outlets

No specific Alzheimer's disease or other dementias-related media were identified and all the information flows via SLADA channels, Ministry releases, and general media.

References

- <https://www.facebook.com/SLUDementia/>