

About AFTD

The Association for Frontotemporal Degeneration (AFTD) is a nonprofit founded by Helen-Ann Comstock and a host of dedicated volunteers in 2002. We work every day to advance:

Research We promote and fund research toward diagnosis, treatment and a cure.

Awareness We stimulate public awareness and understanding.

Support We inform and support those directly impacted.

Education We promote and provide education for healthcare professionals.

Advocacy We advocate for research and appropriate, affordable services.

We envision a world with compassionate care, effective support, and a future free of FTD. We hope you'll join with us in making that world a reality.

AFTD



HelpLine: 866.507.7222 or info@theaftd.org

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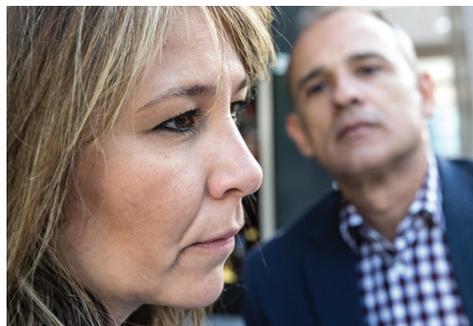


FTD is the most common form of dementia for people under 60.

Short for frontotemporal degeneration, FTD represents a group of brain disorders caused by degeneration of the frontal and/or temporal lobes of the brain. It is also frequently referred to as frontotemporal dementia, frontotemporal lobar degeneration (FTLD), or Pick's disease.

How does FTD differ from Alzheimer's disease?

- 1) **Different symptoms.** FTD brings a gradual, progressive decline in behavior, language or movement, with memory usually relatively preserved.
- 2) **It typically strikes younger.** Although age of onset ranges from 21 to 80, the majority of FTD cases occur between 45 and 64. Therefore, FTD has a substantially greater impact on work, family, and the economic burden faced by families than Alzheimer's.
- 3) **It is less common and still far less known.** FTD's estimated U.S. prevalence is around 60,000 cases, and many in the medical community remain unfamiliar with it. FTD is frequently misdiagnosed as Alzheimer's, depression, Parkinson's disease, or a psychiatric condition. On average, it currently takes 3.6 years to get an accurate diagnosis.



How does FTD progress?

The progression of symptoms—in behavior, language, and/or movement—varies by individual, but FTD brings an inevitable decline in functioning. The length of progression varies from 2 to 20+ years.

As the disease progresses, the person affected may experience increasing difficulty in planning or organizing activities, behaving appropriately in social or work settings, communicating with others, or relating to loved ones.

Over time, FTD predisposes an individual to physical complications such as pneumonia, infection, or injury from a fall. Average life expectancy is 7 to 13 years after the start of symptoms. The most common cause of death is pneumonia.

Is treatment available?

Today, there is no cure for FTD. Unfortunately, no current treatments slow or stop the progression of the disease. However, important steps can be taken to preserve and maximize quality of life. A growing number of interventions—not limited to medication—can help with managing FTD symptoms. Support groups are a crucial source of information and connection. Our website, www.theaftd.org, offers practical information about disease management and care coordination.

AFTD funds groundbreaking research to foster timelier, more accurate diagnosis, treatments, and a cure for FTD. Today's research can lead to tomorrow's breakthroughs—but only with support from our community.

Together, we can make a difference.

AFTD is community-driven, and our work to #endFTD can move more quickly with your help—whether as a donor or a volunteer.

Our nationwide volunteer and grassroots events programs **build awareness** and raise funds.

AFTD-funded grants and awards help spur **cutting-edge research**.

With help from volunteers, **AFTD leads in advocacy** for greater federal funding for research and programs that provide affordable, high-quality care.

Learn more at www.theaftd.org

