An Initiative for Speeding Innovation

2021 Planning

December 2020
A Comprehensive Global Response

Our Focus

On January 21st, during the World Economic Forum’s Annual Meeting (Davos 2020), pharmaceutical executives, government leaders, non-governmental organization representatives and healthcare thought leaders met and decided to pursue collaboration in three areas to speed innovation.

1. **Global Cohort Development**
   - Build a global cohort with high-quality, detailed data on a well-characterized, diverse population, readily available to researchers, to increase discovery of targets for drug development with associated biomarkers.

2. **Global Clinical Trials**
   - Reduce the cost and time to bring new treatments to market globally.

3. **Healthcare System Preparedness**
   - Facilitate the implementation of national, regional and global commitments to provide access to future innovations in treatment, diagnosis and care.
Addressing Global Unmet Needs
A Track Record of Spurring Innovation

- **Gavi**
  - Funds increased access to immunizations
  - $900M launch
  - $19B to date

- **CEPI**
  - Funds vaccines research for emerging infectious diseases
  - $750M launch
  - $2B to date

- **Davos Alzheimer’s Collaborative**
  - Funds innovation in Alzheimer’s disease
  - $700M goal at launch

- **Timeline**:
  - 2000 - 2001
  - 2021
Taking the Next Step to Respond to Global Commitments

2013
Ministers from each of the G7 countries committed to a 12-point plan to set an ambition goal to speed innovation.

2017
Set a global action plan at the World Health Assembly aimed at making a difference to the lives of people affected by dementia.

2019
G20 commits to promote healthy and active ageing and implement comprehensive set of policies to address dementia.

2020
Presentation during the 2020 Annual Meeting in Davos charges WEF and CEOi to develop a multi-year collaborative to change the pace of innovation in Alzheimer’s disease research and care.

2021
A $700+M collaboration announced

Link: http://www3.weforum.org/docs/WEF_The_Davos_Agenda_Overview_2021.pdf
Building the Organization

A Sustainable Stand-Alone Global Organization
A Comprehensive Global Response

Our Approach to Speeding Innovation

1. Achieving Global Scale
2. Linking Regional & Sectoral Efforts
3. Engaging LMIC
Davos Alzheimer’s Collaborative

Building the Scientific and Business Plans

- **Q1**
  - Create **Advisory Committee and Leadership Group**
  - Launch **Work Groups**

- **Q2**
  - Develop **business plans**
  - Initiate **funding discussions**

- **Q3**
  - Announce during virtual **Davos 2021** (January)

- **Q4**
  - Hold First **Board Meeting**

- **Q1**
  - Secure foundational phase funding commitments (2021 funding)
## Leadership Group Update

### Overview of Progress and Path Forward

<table>
<thead>
<tr>
<th>Task</th>
<th>December 1</th>
<th>“Virtual Davos” (January 25)</th>
<th>“In-Person Davos” (May)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding</td>
<td>Seed</td>
<td>Foundational phase – Initial commitments</td>
<td>Foundational phase – funded</td>
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<tr>
<td>Tax advantaged legal structure</td>
<td>US 501c3 – Filed with IRS, Initial Board formed</td>
<td>Switzerland-based foundation – Positive discussions with authorities</td>
<td>Rest of world (ROW) footprint designed</td>
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<tr>
<td>Milestones</td>
<td>Draft</td>
<td>2021 Milestones/Foundational Phase</td>
<td>Initial 5-year plan</td>
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<tr>
<td>Communications</td>
<td>2021 plan</td>
<td>Draft Prospectus for LG Review</td>
<td>Documentary in development</td>
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<tr>
<td>Costs by project</td>
<td>Draft</td>
<td>Under review/Work in progress</td>
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<tr>
<td>Partnership development – International organizations</td>
<td>World Health Organization</td>
<td>• OECD</td>
<td>• United Nations (in discussions)</td>
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<tr>
<td></td>
<td></td>
<td>• African Academy of Science (in discussions)</td>
<td>• European Commission</td>
</tr>
<tr>
<td>Partnership development – Financial organizations</td>
<td>• JP Morgan</td>
<td></td>
<td>• PAHO, APEC and other regionals</td>
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<tr>
<td></td>
<td>• Bank of America</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partnership development – Research, academia, coalition (ex-industry)</td>
<td>• International HundredK+ Cohort Consortium</td>
<td></td>
<td>• World Bank (subject to pledges)</td>
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<tr>
<td></td>
<td>• Global Coalition on Aging</td>
<td></td>
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<tr>
<td></td>
<td>• Harvard School of Public Health</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Gates Ventures</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Wellcome Trust</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Broad Institute of MIT and Harvard</td>
<td></td>
<td></td>
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<tr>
<td>Partnership development – National governments</td>
<td>• Japan</td>
<td>• UK/Scotland (in discussion)</td>
<td>Three committed</td>
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<tr>
<td></td>
<td>• Canada</td>
<td></td>
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</table>
Governance Structure

Proposed Flow of Funds

Funds from Governments and Sovereign Wealth Funds

World Bank

Once $200M is raised

Funds from NGOs, Philanthropy and Grants

Swiss-based Foundation

Investments

For-Profit Vehicle

US-based 501c3

ROW Organization(s)

TBD

Funds from NGOs, Philanthropy and Grants

Investments

Grant Funding

Investment Funding with Return

2021
Foundational Funding

50%
50%

Under evaluation
Swiss Foundation Board composed of no fewer than 3 and no more than 13 independent members and 7 observers

Board sub-committees to be formed with permanent board structure (e.g., auditing, resource mobilization, etc.)

Investors Forum is 5 rotating members who invested in DAC (and will serve as an observer on the Board)

Champions Council members are key ambassadors for the effort; group meets annually to review progress and provide input

Scientific and Medical Advisory Council is the principal advisory group to the Board and the CEO on scientific, legal, regulatory and healthcare system issues

Partners Coordination Council is comprised of DAC partners, co-creators and collaborators

Task Forces are comprised of subject matter experts and advise each of the program leads
Resource Mobilization

Seed Funding Complete. 2021 Fund Raising is Starting.

2020 Seed Funding

2021 Foundational Funding

- 50% Healthcare Company Foundations, Other Philanthropy and HNW Individuals
- 50% Private Sector

2022-2026 Funding

- 25% Healthcare Company Foundations
- 25% Private Sector
- 25% Other Philanthropy and HNW Individuals
- 25% Public Sector
A Comprehensive Global Response

Preliminary Approximate Expense Budget

1. **Global Cohort Development**
   - **Goal**: Build a global cohort with high-quality, detailed data on a well-characterized, diverse population to increase discovery of targets for drug development and identify associated biomarkers.
   - **2021**: $20M
   - **2022-2026**: $350M
   - **Total**: $370M

2. **Global Clinical Trials**
   - **Goal**: Build a global platform and network to reduce the cost and time to bring new treatments to market globally.
   - **2021**: $20M
   - **2022-2026**: $241M
   - **Total**: $261M

3. **Healthcare System Preparedness**
   - **Goal**: Facilitate the implementation of global commitments to provide access to future innovations in treatment, diagnosis and care.
   - **2021**: $5M
   - **2022-2026**: $100M
   - **Total**: $105M

**Total**
- **2021**: $45M
- **2022-2026**: $691M
- **Total**: $736M
Project Budget Summaries

Proposed Initial Budgets by Work Groups
Global Cohort Development

The Issues We Face

- Incomplete global understanding of the heterogeneity and the variability of Alzheimer’s etiology
- Need for new targets and biomarkers for drug development

Our Commitment

- Build a global cohort with high-quality, detailed data on a well-characterized, diverse population, readily available to researchers, to increase discovery of targets for drug development with associated biomarkers
2021 Anticipated Milestones - Cohorts

- Initiate a cross-region heterogeneity exploration pilot to engage cohorts
  - Including the Middle East, South East Asia, Africa and South America and connect with more advanced cohorts in the Western world to test our abilities to combine and federate data and provide a roadmap for further integration of racially distinct and diverse cohorts.

- A “higher-reach pilot” will provide resources to geographically diverse cohorts
  - Including additional measures both one-time measurements and longitudinal measurements.

- Release Alzheimer’s Data Atlas as a platform to allow researchers to work with DAC developed data
  - A demo available in January for the announcement at the virtual WEF meeting
  - Create linkages with other data aggregation efforts

- Develop and conduct preliminary testing of a global biorepository plan

- Recruit 30 additional cohorts
  - Targeted outreach to cohorts that have the strongest alignment with the scientific plan and access to the targeted measurements
About the Foundational Phase

- Pan-global cohort with emphasis on under-researched populations
- Paired with "gold standard" cohort (e.g., UK Biobank)
- Creates understanding of the ideal cohort sample composition
- Develop year-over-year cohort development plan

1. Create a uniform, minimum data and biosample set and enable consistent data collection across regionally diverse cohorts
   - 10,000 - 12,000 subjects

2. Initial enrichment of cohorts to increase collection of measurements highly prioritized by Work Group
   - 6,000 subjects

3. Develop a biosample repository and management system

Connected, accessible via Alzheimer’s Data Atlas and (aspirational) Alzheimer’s Data Work Bench
Alzheimer’s Data Atlas
## Cohort Development

### Five Year Costs

<table>
<thead>
<tr>
<th>Foundational Phase (2021)</th>
<th>Year 1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Total</th>
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<tr>
<td>Uniform Data Set</td>
<td>$4M</td>
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<td>Biosample Mgt</td>
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**Approx Total Budget**  $370M
Global Clinical Trial Support Platform

The Issues We Face

- Alzheimer’s clinical trials are slow, laborious and expensive
- There is limited coordination, data collection and efficiency across global clinical trial sites for Alzheimer’s disease
- Research participation is largely not possible outside N. America, Europe and Japan

Our Commitment

- Build a global platform and network to increase the speed, efficiency and quality of Alzheimer’s clinical trials worldwide
2021 Anticipated Milestones – Clinical Trials

- Develop and deploy a network of more than 40 European sites organized for accelerating studies and implementing novel trial designs
  - The European network will include the 11 countries covered by EPAD
  - Establish recruitment teams, study/IT infrastructure and regulatory start up processes by region or country to optimize site performance

- Evaluate and establish site networks in Singapore, Australia, Japan and China and an exploratory trial site(s) in South America and Africa
  - Design and establish a global rater certification program and an imaging center certification for the global network to ensure pre-qualified centers and experts when a study protocol is approved

- Initiate the first transatlantic therapeutic clinical trial with a minimum of 110 sites

- Evaluate leading biomarkers (blood and digital) in a “prognostication” study and design and develop a biomarker-based screening program for inclusion in therapeutic clinical trials for global use

- Develop a set of performance metrics (focusing on reporting and measuring quality, acceleration and lower cost, etc.) for each region/country on the 6-year roadmap

- Continued development of the North American network of more than 80 sites and design federated data collection process.
## Clinical Trials
### Five Year Costs

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<tr>
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<th>3</th>
<th>4</th>
<th>5</th>
<th>Total</th>
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<td>North America</td>
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<td>$9.5M</td>
<td>$9M</td>
<td>$10M</td>
<td>$10M</td>
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<td>Europe</td>
<td>$5.5M</td>
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<td>$11M</td>
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<tr>
<td>Australia and Singapore</td>
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<td>$8M</td>
<td>$7.5M</td>
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<tr>
<td>Japan</td>
<td>$1M</td>
<td>$4M</td>
<td>$10M</td>
<td>$13M</td>
<td>$20M</td>
<td>$24M</td>
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</table>

Approx Total Budget: $261M
Healthcare System Preparedness
Healthcare System Preparedness

The Issues We Face

• The aging global population, which increases the number of families with Alzheimer’s, has a dramatic impact on national budgets, global economic growth and monetary policy

• Healthcare systems are not prepared to detect cognitive change, diagnose accurately, identify the right intervention or deliver future treatment

• Facilitate the implementation of national, regional and global commitments to provide access to future innovations in treatment, diagnosis and care

Our Commitment
2021 Anticipated Milestones – Healthcare Systems

• Final 2021 plan endorsed by DAC HSP Work Group
  • Alignment on measurement plan
  • 2021-2022 Business Plan and Implementation Plan completed
  • Communications plan roll-out begins (Start in Feb)

• 12 governments committed to participating in Learning Lab
  • Equitable representation between H, L, M income countries

• Flagship projects launch at May “Davos”
  • Initial centrally-driven project – focused on early detection

• Initial calls for locally-driven project proposals at May “Davos” – focused on early detection
  • First official call for proposals (2022 funded projects)

• Two convenings completed (General Assembly to be co-hosted with a government and WHO)
  • Aiming for July – Cohort Learning Lab, associated with AAIC (Amsterdam)
  • Aiming for November – General Assembly, associated with Lausanne dialog (Switzerland)
Patient Pathway
Our Process

Q1 2021
- Screening and early detection
  - Centrally-driven flagship project (12-15 months)

Q1 2022
- Early detection
  - Screening and early detection
  - Centrally-driven flagship project (12-15 months)
- Diagnosis of MCI and dementia
  - Centrally-driven flagship project (12-15 months)
- Grants for locally-driven projects (18-24 months)

Q1 2023
- Early detection
  - Early detection
  - Grants for locally-driven projects (18-24 months)
- Centrally-driven flagship project (12-15 months)
- Grants for locally-driven projects (18-24 months)

Q1 2024
- Early detection
  - Early detection
  - Grants for locally-driven projects (18-24 months)
- Care Planning
  - Centrally-driven flagship project (12-15 months)
- Grants for locally-driven projects (18-24 months)
- Scale and agile dissemination via learning lab

Q1 2025
- Care Planning
  - Centrally-driven flagship project (12-15 months)
- Grants for locally-driven projects (18-24 months)
- Scale and agile dissemination via learning lab

Q1 2026
- Care Planning
  - Centrally-driven flagship project (12-15 months)
- Grants for locally-driven projects (18-24 months)
- Scale and agile dissemination via learning lab

Other key events:
- Cohort Learning Lab (AAIC Side Event)
- General Assembly Dissemination (Lausanne Dialogs)
Flagship Project – Early Detection

Concept Overview

- Annual Wellness Visit
  - baseline
- Memory Complaint
- Digital Cognitive Assessment
- Rule Out Other Causes
- Blood Test
- Diagnosis

HCS Option: AD Specialist Consult (In-person or Virtual)

- surveys
- endpoint
- surveys
- No pathology detected
- Specialist Exam

MEASUREMENT CONCEPT: Brain health mindset - proportion of target population with standardized baseline cognitive test scores in electronic medical records and reviewed annually

BARRIER IDENTIFICATION: Operational challenges and key stakeholder feedback
## Healthcare System Preparedness

### Five Year Costs

<table>
<thead>
<tr>
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<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td><strong>Grant/Investment Funding</strong></td>
<td>$4M</td>
<td>$5M</td>
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<td>$20M</td>
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<td><strong>Learning Laboratory</strong></td>
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<td>$3M</td>
<td>$4M</td>
<td>$5M</td>
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<tr>
<td><strong>Communications and Convenings</strong></td>
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<td>$500K</td>
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<td>$700K</td>
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<td><strong>General Administrative Expenses</strong></td>
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<td>$600K</td>
<td>$800K</td>
<td>$900K</td>
<td>$1M</td>
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<td><strong>Total Budget</strong></td>
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<td></td>
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<td>$105M</td>
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Approx Total Budget: $105M
How We Worked in 2020

Deep Engagement with Top Thought Leaders Across the Field
Leadership Group
Coordinate time-bound work groups, development of concept/coalition and operational framework

Co-Chairs of Leadership Group
George Vradenburg (CEOi), Arnaud Bernaert (WEF)
General oversight, advocacy and sustainability of the initiative

Work Group 1
Global Cohort Development

Work Group 2
Global Clinical Trials

Work Group 3
Healthcare System Preparedness

Work Group 4
Finance and Metrics

Advisory Committees

Secretariat
CEOi (Drew Holzapfel), WEF (Kelly McCain), CEOi-WEF Fellow (Alissa Kurzman)
Coordination of Leadership Group, Advisory Committee, and Work Groups
Our Leadership Group

Esko Aho
Former Prime Minister, Finland

Arnaud Bernaert, Co-Chair
Head, Health and Healthcare, World Economic Forum

Niranjan Bose
Managing Director, Health and Life Sciences, Gates Ventures

Vint Cerf
Chief Internet Evangelist, Google

Amitabh Chandra
Professor of Public Policy and Business Administration, Harvard University

Rachelle Doody
Global Head of Neurodegeneration, Roche/Genentech

Hilary Doxford
Former Vice Chair, European Working Group for People with Dementia; Ambassador, Alzheimer’s Society

John Dwyer
President, Global Alzheimer’s Platform Foundation

Andrew von Eschenbach
Former Commissioner, U.S. Food and Drug Administration

Howard Fillit
Founding Executive Director and Chief Science Officer, Alzheimer’s Drug Discovery Foundation

Michel Goldman
Founding Executive Director, Innovative Medicines Initiative

Margaret (Peggy) Hamburg
Former Commissioner, U.S. Food and Drug Administration

Nancy Ip
Dean of Science and Director of the State Key Laboratory of Molecular Neuroscience, The Hong Kong University of Science and Technology

Christoph Koenen
Executive Vice President and Chief Medical Officer, Otsuka America Pharmaceutical

Margery Kraus
Founder and Executive Chairman, APCO Worldwide

John Lim
Executive Director, Centre of Regulatory Excellence, Duke-NUS Medical School; Deputy Director of Medical Services, Ministry of Health, Singapore; Chairman, Singapore Clinical Research Institute

David Mayhew
Vice Chairman, JP Morgan; Chairman, Alzheimer’s Research UK

Haruo Naito
Representative Corporate Officer and CEO, Eisai Co., Ltd.

Brad O’Connor
Chief Executive Officer, Cogstate

Andrea Pfeifer
Co-founder and Chief Executive Officer, AC Immune SA

Kathleen Sebelius
Former Secretary, U.S. Department of Health and Human Services

Daniel Skovronsky
Senior Vice President and Chief Scientific Officer, Eli Lilly and Company

Paul Stoffels
Vice Chairman of the Executive Committee and Chief Scientific Officer, Johnson & Johnson

Michel Vounatsos
Chief Executive Officer, Biogen

George Vradenburg, Co-Chair
Convener, Global CEO Initiative on Alzheimer’s Disease

Elias Zerhouni
Professor Emeritus, Johns Hopkins University; Former Director, National Institutes of Health; Former President R&D, Sanofi

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Executive Director, Centre of Regulatory Excellence, Duke-NUS Medical School; Deputy Director of Medical Services, Ministry of Health, Singapore; Chairman, Singapore Clinical Research Institute

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Professor Emeritus, Johns Hopkins University; Former Director, National Institutes of Health; Former President R&D, Sanofi
Global Cohort Working Group and Advisors

Rhoda Au
Boston University School of Medicine; Framingham Heart Study

Philip Awadalla
Ontario Institute for Cancer Research, University of Toronto

Sinead Chapman
Broad Institute of MIT and Harvard

Aled Edwards
Structural Genomics Consortium; University of Toronto

Geoffrey Ginsburg
Duke Center for Applied Genomics & Precision Medicine; International HundredK+ Cohorts Consortium

Hakon Hakonarson,
Co-Chair
University of Pennsylvania; Children's Hospital of Philadelphia; International HundredK+ Cohorts Consortium

Steven E. Hyman
The Stanley Center for Psychiatric Research, Broad Institute of MIT and Harvard

Allan Levey
Emory University; Emory Alzheimer’s Disease Research Center

Mihaela Levitchi Benea
Biogen

Husseini Manji
Johnson & Johnson

Paul Maruff
Cogstate

Adesola Ogunniyi
University of Ibadan; University of College Hospital, Ibadan

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Canadian Institutes of Health Research, Institute of Aging; Schulich School of Medicine & Dentistry, University of Western Ontario

Nadeem Sarwar
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George Yancopoulos
Regeneron Pharmaceuticals

Elias Zerhouni,
Co-Chair
Johns Hopkins University; National Institute of Health; Sanofi
Healthcare System Preparedness Working Group and Advisors

Matthew Baumgart
Alzheimer’s Association

Samantha Benham-Hermetz
Alzheimer’s Research UK

Francesca Colombo
Organisation for Economic Co-operation and Development

Tarun Dua
World Health Organization

Phyllis Ferrell,
Co-Chair
Eli Lilly and Company

Lori Frank
Rand Corporation

Anika Heavener,
Co-Chair
Mass General Brigham

Karin Hellsvik
Biogen

Shailaja Korukonda
Eisai, Inc.

Lydia Lanman
Roche

Nancy Lynne
Bright Focus Foundation

Soeren Mattke
University of Southern California

Melissa Mitchell
Global Coalition on Aging

Ryoji Noritake
Health and Global Policy Institute

Tanya O’Connor
Cogstate

Desi Peneva
University of Southern California Schaeffer Center

Joanne Pike
Alzheimer’s Association

Craig Ritchie
University of Edinburgh, Centre for Dementia Prevention

Lenny Shallcross
World Dementia Council

Sean Stanton
C2N Diagnostics

Elina Suzuki
Organisation for Economic Co-operation and Development

Luc Truyen
Janssen, Inc.

Dan Wieberg
Home Instead Senior Care
Finance and Metrics Working Group and Advisors

David Bloom  
Harvard T.H. Chan School of Public Health

Bernard (Bernie) Chan  
National People's Congress of China; Non-Official Members of the Executive Council

John R. Dwyer Jr.  
Global Alzheimer's Platform Foundation

Chris (Edge) Egerton-Warburton  
Lion's Head Global Partners

Johnston Erwin  
Eli Lilly and Company

Geoffrey Ginsburg  
Duke Center for Applied Genomics & Precision Medicine; International HundredK+ Cohorts Consortium

Gray Hampton  
Bank of America Merrill Lynch

Scott Hayton  
McKinsey & Company

Anika Heavener  
Mass General Brigham

Jim Holdcroft

Melanie Schnoll-Begun

Elias Zerhouni  
Johns Hopkins University; National Institutes of Health; Sanofi
Thank You

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