

Trends in hospitalizations for Alzheimer’s disease in the Brazilian unified health system, 2016–2025: age group analysis and evidence of early-onset cases

Isabela Karina Vilas Boas¹, Mayra Leindeker Maffini¹, Eduarda Paiva Borsa¹, Luana Ramin Alves¹, Pedro Henrique Paesi Dutra¹, Fabiano Barbosa Carvalho¹
Universidade Federal de Ciências da Saúde de Porto Alegre

INTRODUCTION & AIM

Alzheimer’s is the leading cause of dementia and represents a growing public health challenge in Brazil. Understanding hospitalization trends helps identify at-risk groups and guide resource planning.

This study analyzed 10 years of DataSUS hospitalizations for Alzheimer’s disease in the Brazilian Unified Health System (2016–2025).

The aim was to describe age-specific patterns and highlight the presence of early-onset cases.

METHOD

A descriptive analysis of hospitalizations for Alzheimer’s disease (ICD-10 G30) recorded in SIH/SUS from 2016 to 2025.

Data were extracted from TABNET/DATASUS and grouped into five age strata:

- <50 years
- 50–59 years
- 60–69 years
- 70–79 years
- ≥80 years

Trends were examined over time and across age groups.

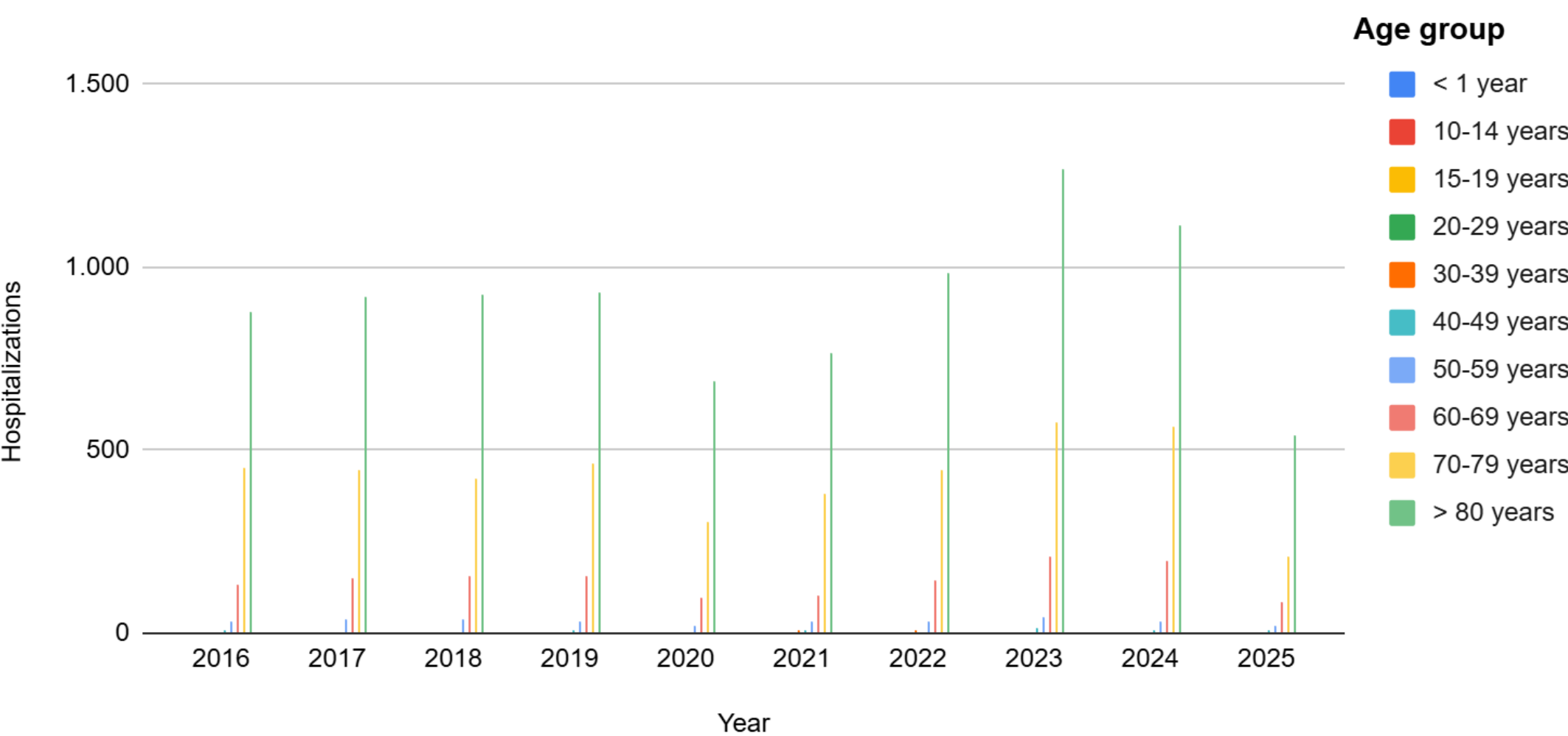


Figure 1. Hospitalizations over the years by age groups

RESULTS & DISCUSSION

- A total of **15,198 hospitalizations** occurred between 2016–2025.
- **Older adults predominated**, especially those **≥80 years (59.3%)**, followed by **70–79 (28.1%)**.
- **<60 years represented <2%**, but cases were present in all age groups.
- Hospitalizations increased until **2019**, declined during **COVID-19 (2020–2021)**, peaked in **2023 (n=2,125)**, and decreased in 2025 (likely due to reporting delays).
- The proportion of **<65 years ranged from 2–6%**, without sustained growth.
- Findings reinforce the health-system burden of advanced age groups and highlight the need to recognize infrequent but relevant early-onset cases.

CONCLUSION

Hospitalizations for Alzheimer’s disease in Brazil predominantly affect older adults, especially those aged 80 years and above.

The observed trends emphasize the importance of early diagnosis, public awareness of initial symptoms, and targeted care strategies.

Although uncommon, early-onset cases underline the need for continued monitoring and tailored approaches

FUTURE WORK / REFERENCES

Future studies should integrate outpatient and diagnostic data to clarify early-onset patterns and improve surveillance.

Expanding analyses to regional trends may support targeted public health interventions.

References available upon request and based on DataSUS/TABNET records.