Introduction: The official statistics suggesting an accelerated rate of population ageing (as life span increases) and alarming estimates of dementia prevalence rates (i.e., CVD prevalence exceeds 30% while neurodegenerative disorders almost reach 25%) in Romania suggest that the Alzheimer crisis is of an acute interest.

Aims: Based on reported data correlated with our previous efforts in developing AD care, we pursued a practical guideline for preventive, predictive and personalized (3P) diagnostic and care for Alzheimer disease (AD) patients.

Methods: We cross-referenced official census data with national health insurance and (inter)national reports estimating AD prevalence rates.

Results: We analyzed a country specific bio-psycho-social model which, depending on various factors, enables a customized patient approach. The assessment of patient-specific risk factors (i.e. education, genetic burden, metabolic factors etc) correlated with environmental factors (i.e. specific home conditions, exposure to pollution, infectious agents etc), when added to specific AD assessments, enables us to better predict the course of AD (i.e. specific response to a certain medication). This lead to BRAINAGING, a national educational program aiming at specifically training medical personnel specialized in addressing ageing and age-related disorders.

Conclusions: The medical professionals in Romania are readily expecting the implementation of 3P principles of care (prevention, prediction and personalization) into current practice. This approach is expected to decrease financial burden both for patients and their (in)formal caregivers and for the health insurance system. Moreover, such 3P care should improve quality of life for patients (decreasing the burden of care for their caregivers).