

HL: Alzheimer's Disease

Volume 849: debated on Monday 13 October 2025

See the full transcript [here](#)

Baroness Ritchie of Downpatrick asked what plans the Government had to ensure that all people with Alzheimer's disease have access to a timely and accurate diagnosis to improve access to care and quality of life.

Baroness Merron, for the Government, said that under the 10-year plan they would deliver the first modern service framework for frailty and dementia, designed to "reduce unwanted variation and narrow inequality in diagnosis and care." She said it would set national standards, redirect NHS priorities, and make timely and accurate diagnosis central to care and support.

Baroness Ritchie thanked the Minister for her reply but pressed further. She said that, according to Alzheimer's Research UK, one in three people with dementia in the UK currently do not have a diagnosis. Unlike other major conditions such as heart disease or cancer, dementia has no national waiting time targets. She asked whether the Government would introduce an 18-week referral-to-treatment target to give those with dementia, and their carers, parity with other conditions.

Baroness Merron replied that the framework was being developed with a wide group of partners to understand what should be included for the best outcomes. She agreed that waiting times were too long in many areas and said the Government were considering interventions to improve diagnosis times and were reviewing all options to reduce variation, including metrics and targets.

Lord Bethell noted new clinical trials showing potential for GLP-1 drugs to treat dementia, especially Alzheimer's disease, describing this as an "incredibly exciting development." He asked what the Government were doing to prepare diagnosis services so that patients would be ready for such treatments.

Baroness Merron agreed that these developments were exciting and said the Government were investing in dementia research across all areas, including causes, diagnosis, prevention, treatment, care, and support for carers. She said work was being done to maximise clinical trials and reduce waiting times. The modern service framework would take a "whole system" view, offering the direction needed to prepare for new treatments.

Lord Weir of Ballyholme referred to the ADAPT and READ-OUT trials using blood tests to improve diagnostic accuracy. He asked what steps the Government were taking to ensure the NHS could adopt such innovations and guarantee early, effective diagnosis for all.

Baroness Merron said that through the life sciences plan, the Government were removing obstacles and speeding up the transition from development to delivery. She said they aimed to "reduce friction and optimise access to and uptake of new medicines," including faster decision-making and implementation.

Baroness Bull said the Question referred not only to access to care but also to quality of life. She highlighted evidence that creativity enhances quality of life for those with dementia and their

carers, providing a valuable means of interaction. She asked what the Department was doing to embed creativity as part of treatment.

Baroness Merron agreed that creativity had an important role and said she had been involved personally in related discussions. She referred to the RightCare dementia scenario, which considers the full pathway from diagnosis through to later life, identifying the best approaches to support people along that journey.

Baroness Burt of Solihull said that Alzheimer's is the main form of dementia, and early diagnosis enables identification of specific types and access to targeted treatment and support. However, she said the time from GP presentation to diagnosis had risen from 13 to nearly 18 weeks. She asked what the Government would do to reverse this trend so more people could benefit from emerging treatments.

Baroness Merron said diagnosis was crucial but acknowledged that the health system had struggled to support those with complex needs, including dementia. She stressed the importance of the new framework, the first of its kind, which would take a comprehensive approach. It would be informed by the independent commission on social care due next year. She added that the Government remained committed to restoring the dementia diagnosis rate for patients aged 65 and over to the national ambition of 66.7%; as of August, it stood at 66.1%.

The Earl of Effingham said evidence showed that a healthy diet and regular exercise supported brain health and helped prevent Alzheimer's. He expressed concern that over half of the calories consumed by the average person came from ultra-processed foods and that fewer than a quarter of adults most at risk of Alzheimer's met the Chief Medical Officer's exercise guidelines.

Baroness Merron said the points raised applied to many health conditions and noted that the health service had struggled to support those with complex needs. She emphasised that prevention was one of the pillars of the 10-year plan and included promoting good diet and regular physical activity. She said she could not comment on a specific link with dementia but added that "there is so much more work to be done," which was why the Government were investing heavily in research and development.

Baroness Pitkeathley said family members caring for those with Alzheimer's often did so at great personal strain and relied on respite care, such as short-term nursing home placements, to take breaks or attend family events. She said such placements were becoming harder to obtain, being both expensive and increasingly unavailable.

Baroness Merron said these were helpful but concerning observations. She said she looked forward to the work of the independent commission on adult social care, chaired by Baroness Casey, as it would inform the modern service framework and address issues such as respite provision.