

# CLINICAL WORK-UP FOR PATIENTS WITH SUSPECTED DEMENTIA

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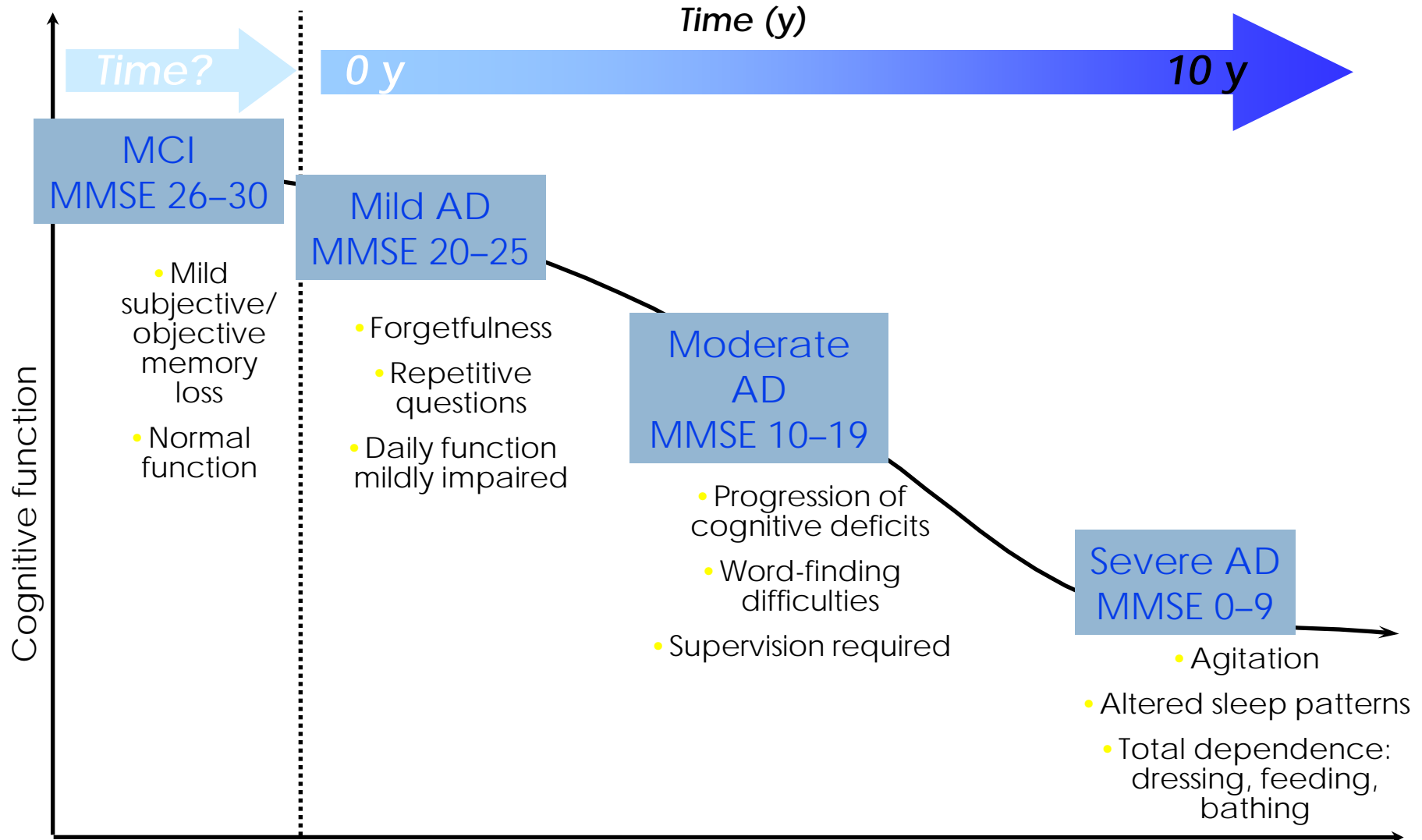
# Disclosure

- Scientific advisory board for NeuroPhage
- Consultant to Elan Corporation, Wyeth, Eisai Inc., Bristol-Myers Squibb, Eli Lilly and Company, NeuroPhage, Merck & Co., Roche, Amgen, Abbott, Pfizer Inc, Novartis, Bayer, Astellas, Dainippon, Biomarin, Solvay, Otsuka, Daiichi, AstraZeneca, Janssen, Medivation, Inc., Theravance, Cardeus, Anavex and Kyowa Hakko Kirin Pharma
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# Very brief background

- Dementia is syndrome: cognitive impairment causing functional decline
- Most age-related dementia is AD
- Differential dx includes vascular dementia, fronto-temporal dementia, Lewy body disease, B12 deficiency, hypothyroidism, depression ...
- Dementia in the US is an exploding epidemic; baby boomers have reached the age of risk

# Clinical Progression of AD and MCI



# Clinical evaluation of dementia

- **Detailed interview with patient and family**
  - **Cognitive/behavioral symptoms**
  - **Impact on function (work, community, driving, finances, social activity, judgment)**
  - **Mental status examination**
- B12, TSH
- Neuropsych testing?
- Structural Imaging?
- APOE genotyping?
- Spinal tap?
- FDG-PET?

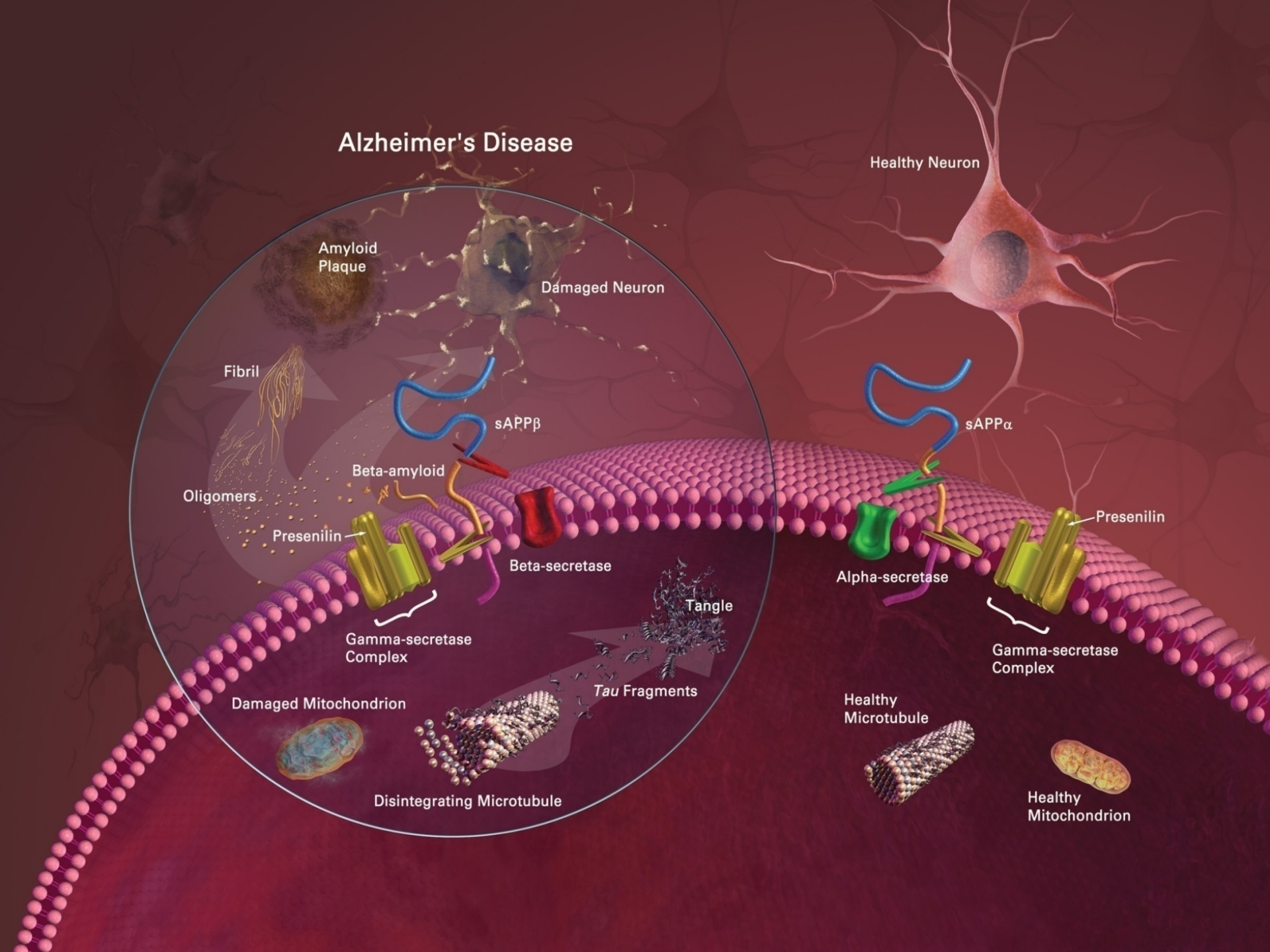
# Diagnostic challenges

- Atypical presentation
  - ▣ absence of predominant episodic memory impairment
  - ▣ predominant depression or behavioral symptoms
  - ▣ early age of onset
  - ▣ atypical time course
  - ▣ insufficient history from informant
  - ▣ Comorbidities that might contribute to cognitive impairment

# Pathology of AD

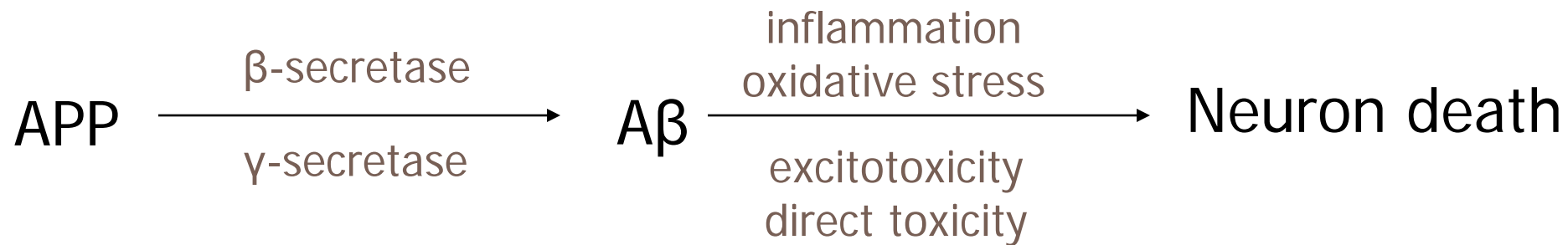
- Amyloid plaques and neurofibrillary tangles (plus synaptic loss, neuron loss, atrophy, gliosis ...)
- Cannot diagnose AD without amyloid
- New guidelines (2011): disentangled from clinical diagnosis of dementia

# Alzheimer's Disease

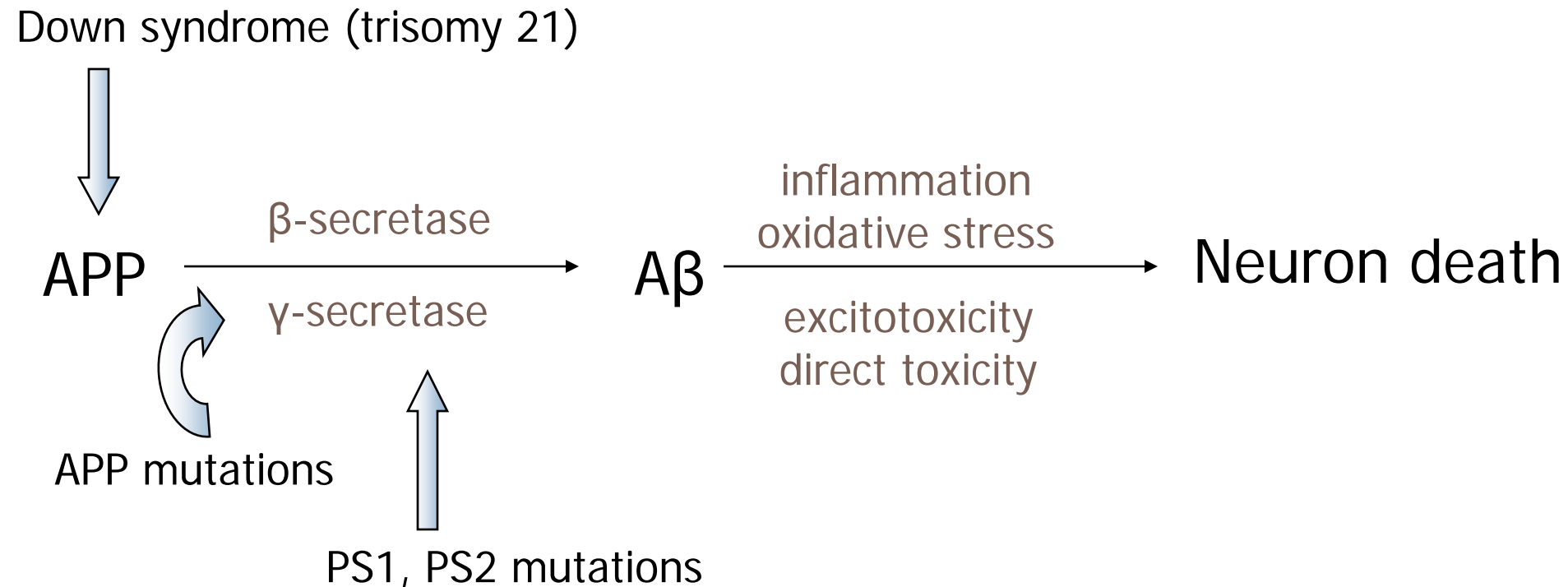




# Pivotal pathway in AD pathophysiology



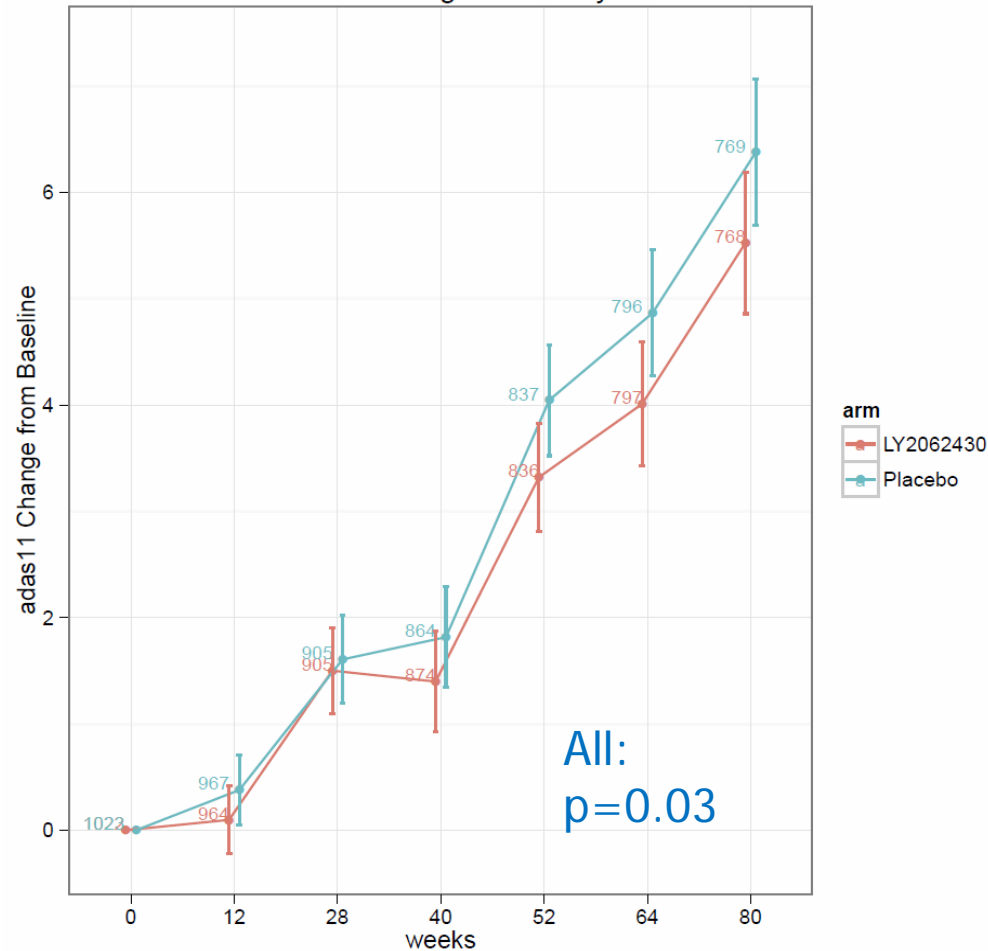
# Genetic causes of AD



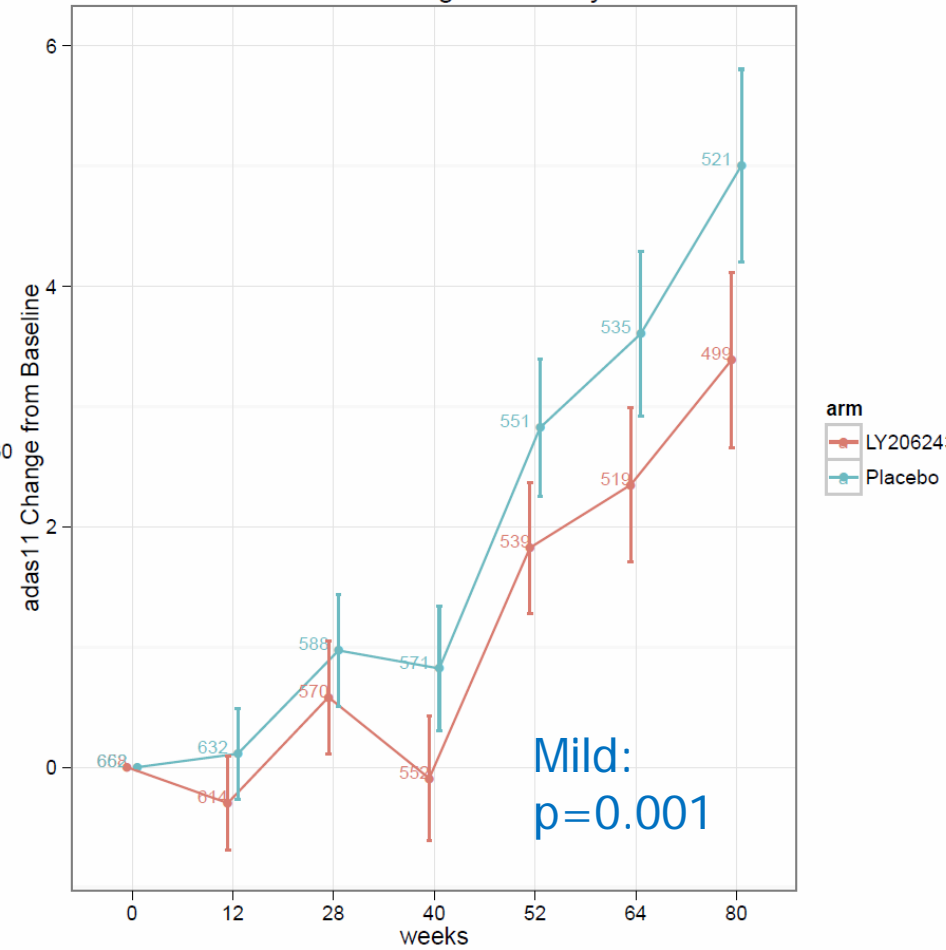
# Solanezumab

## ADAScog11 - pooled

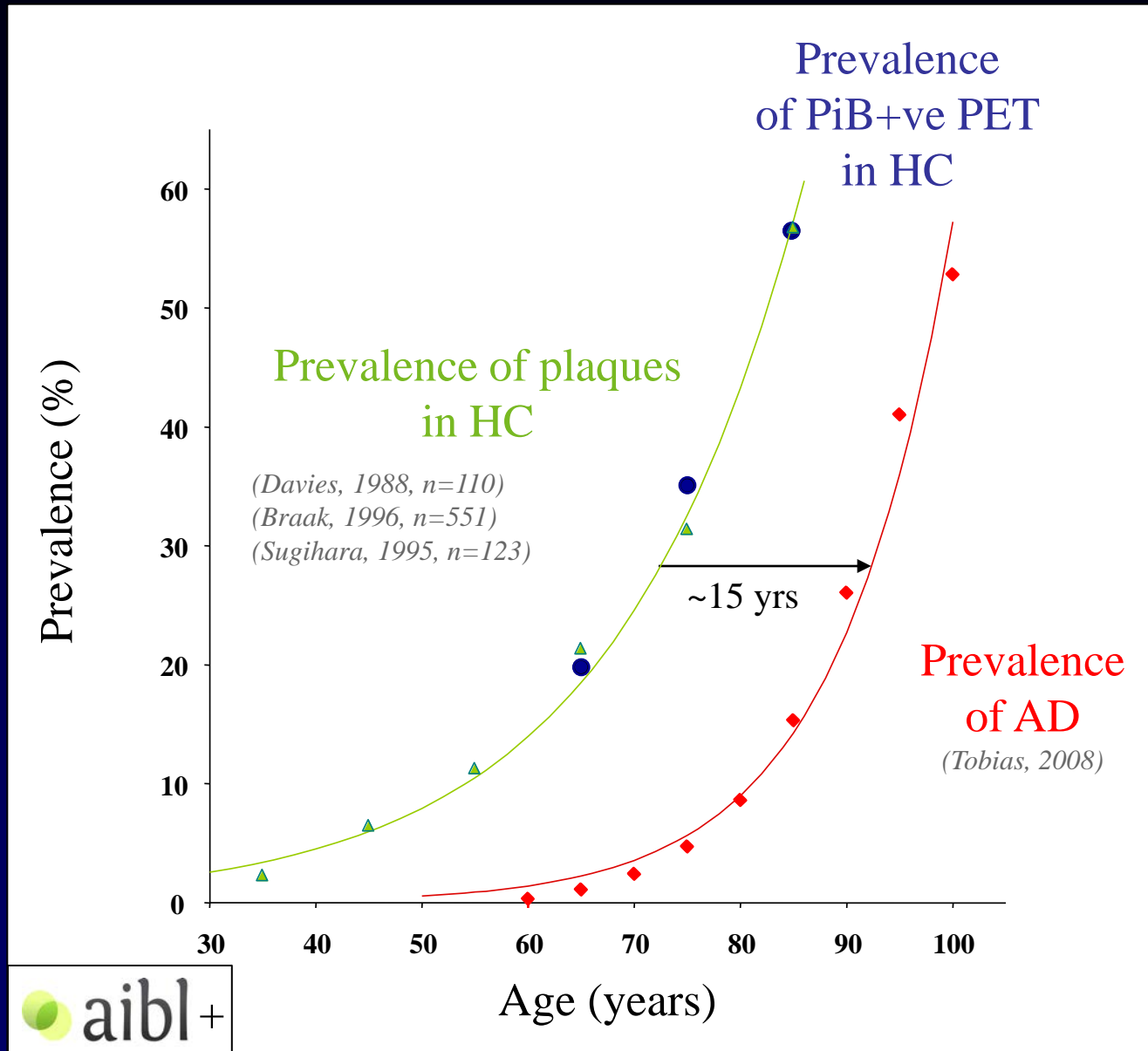
adas11 : CMB : ITT : Change Scores by time and arm



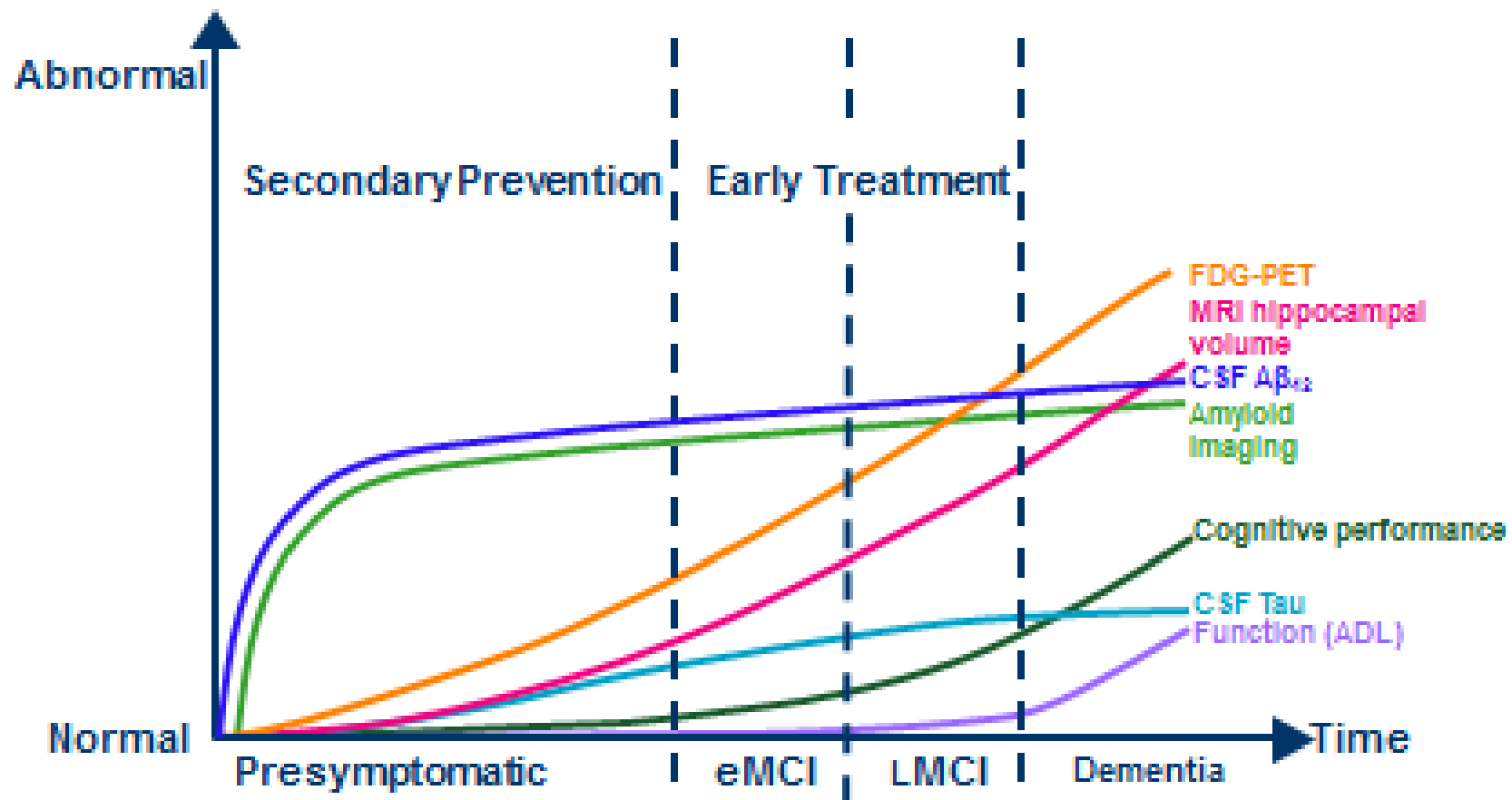
adas11 : CMB : mild : Change Scores by time and arm



# Preclinical Alzheimer's Disease?

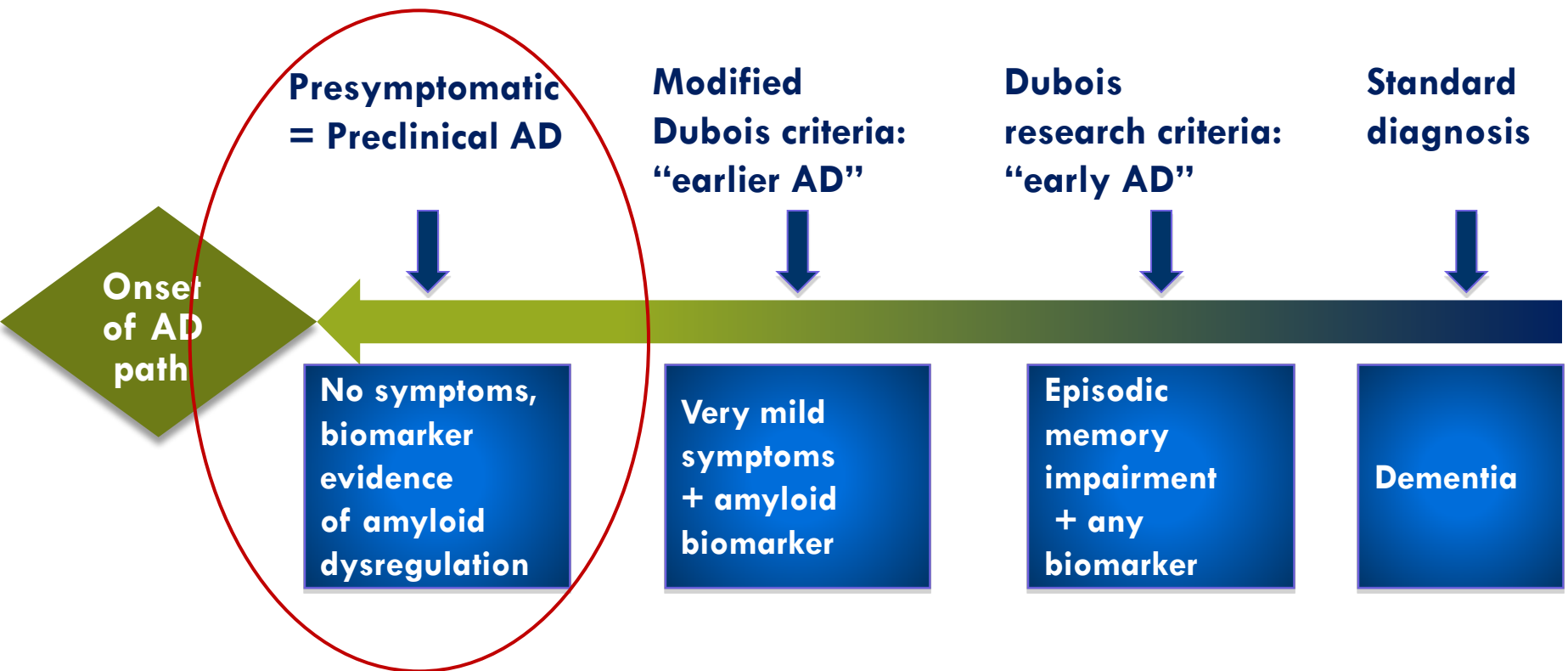


# AD Progression: ADNI model

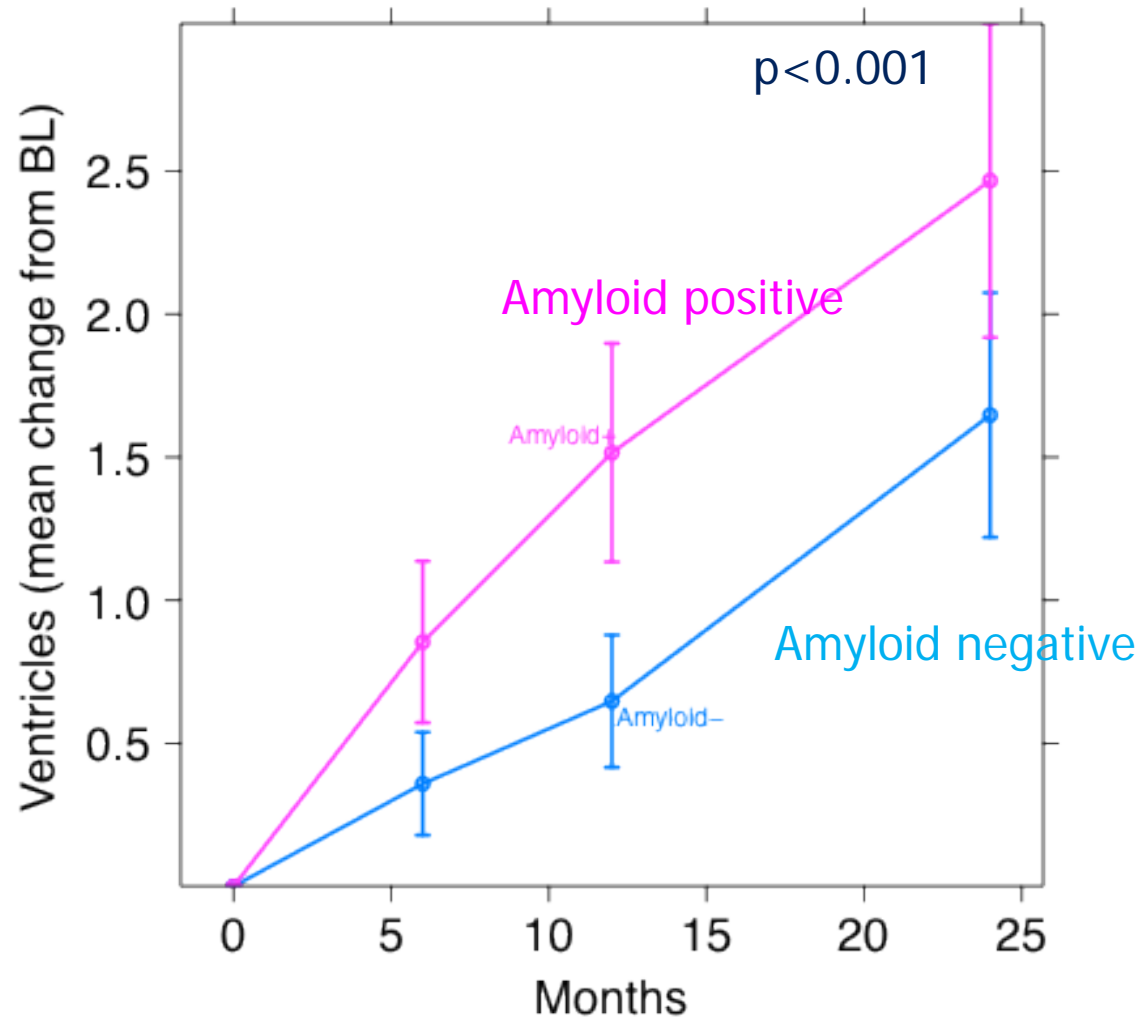


# AD Diagnosis Marching Leftward

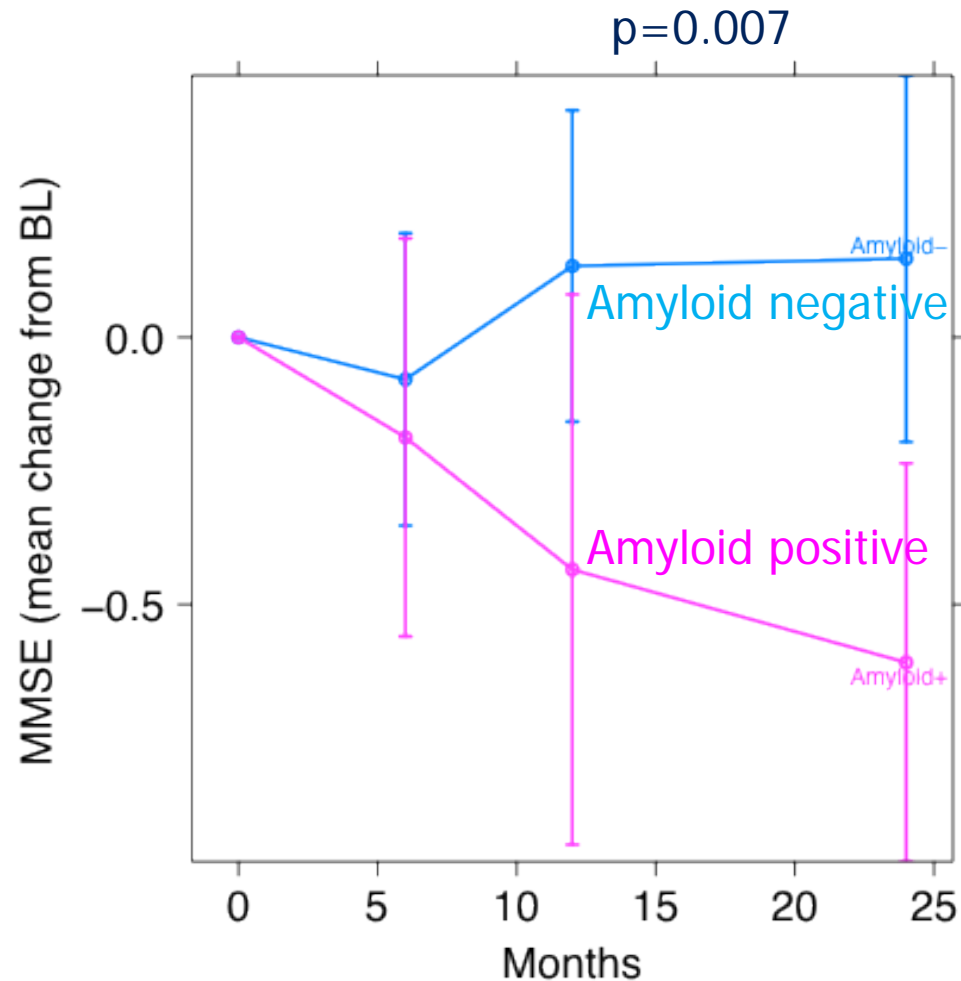
## SECONDARY PREVENTION



# Ventricular volume change in normals is linked to amyloid



# MMSE change in normals is linked to amyloid





# New paradigm

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- AD dementia
- Prodromal AD
- Preclinical AD

# Amyloid PET imaging is arguably the most important recent advance in AD therapeutic research



- Diagnostic accuracy in AD dementia
- Definition of prodromal AD
- Required for selection of preclinical AD
- Measure of amyloid removal

# Clinical value of amyloid PET today

- Negative scan effectively rules out AD
  - ▣ Reassurance of worried well
  - ▣ Guide any further w/u
- Positive scan effectively assures AD diagnosis in individuals with dementia (one third of APOE4 negatives do not have AD)
- Positive scan will provides prognosis in individuals with MCI

# Rates of PET “Amyloid Negativity” at Baseline by APOE carrier status

	<b>Bapineuzumab</b> <b><sup>11</sup>C-PiB</b>	<b>Solanezumab</b> <b><sup>18</sup>F-AV-45</b>
<b>APOE <math>\epsilon</math>4</b> <b>carriers</b> (% Amyloid negative)	6.5	6.6
<b>Non-carriers</b> (% Amyloid negative)	36.1	32.8

# What does a positive amyloid-PET scan mean in someone who is clinically normal?

- Nothing?
- Preclinical AD (will develop AD dementia if individual survives long enough)?
- Suspect the latter, but more longitudinal data needed

# Prediction

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- When anti-amyloid therapy is approved for preclinical AD, we will screen the population with amyloid PET scans starting in mid-50s

# Summary: Amyloid PET imaging

- ❑ Enormously important advance
- ❑ Pathology no longer required for diagnosis
- ❑ Negative scan rules out AD
- ❑ Positive scan plus dementia syndrome confirms AD
- ❑ Prognostic in MCI
- ❑ Essential for therapeutic research; early AD trials
- ❑ In most cases of AD dementia, diagnosis requires only skillful interviews and brief mental status examination