

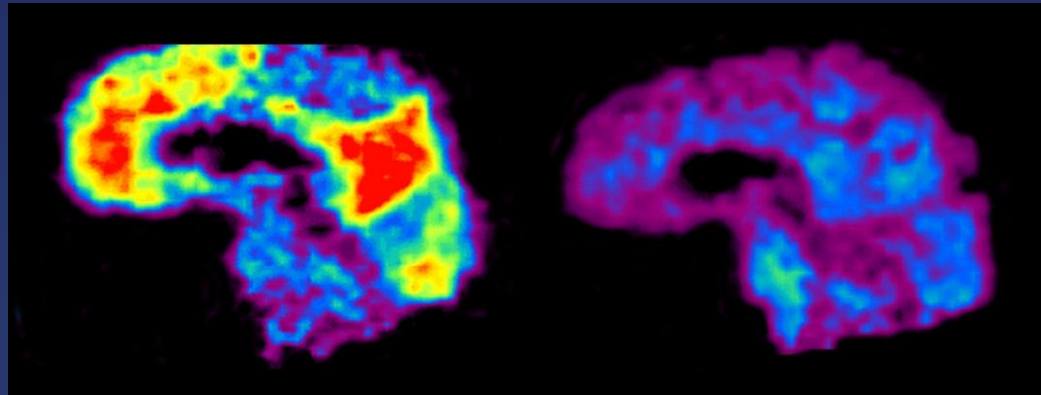
# Amyloid Imaging in Healthy Aging: Impact on Brain Function and Cognition

*Michael D. Devous, Sr.*

*Vice President, Imaging – Avid Radiopharmaceuticals*

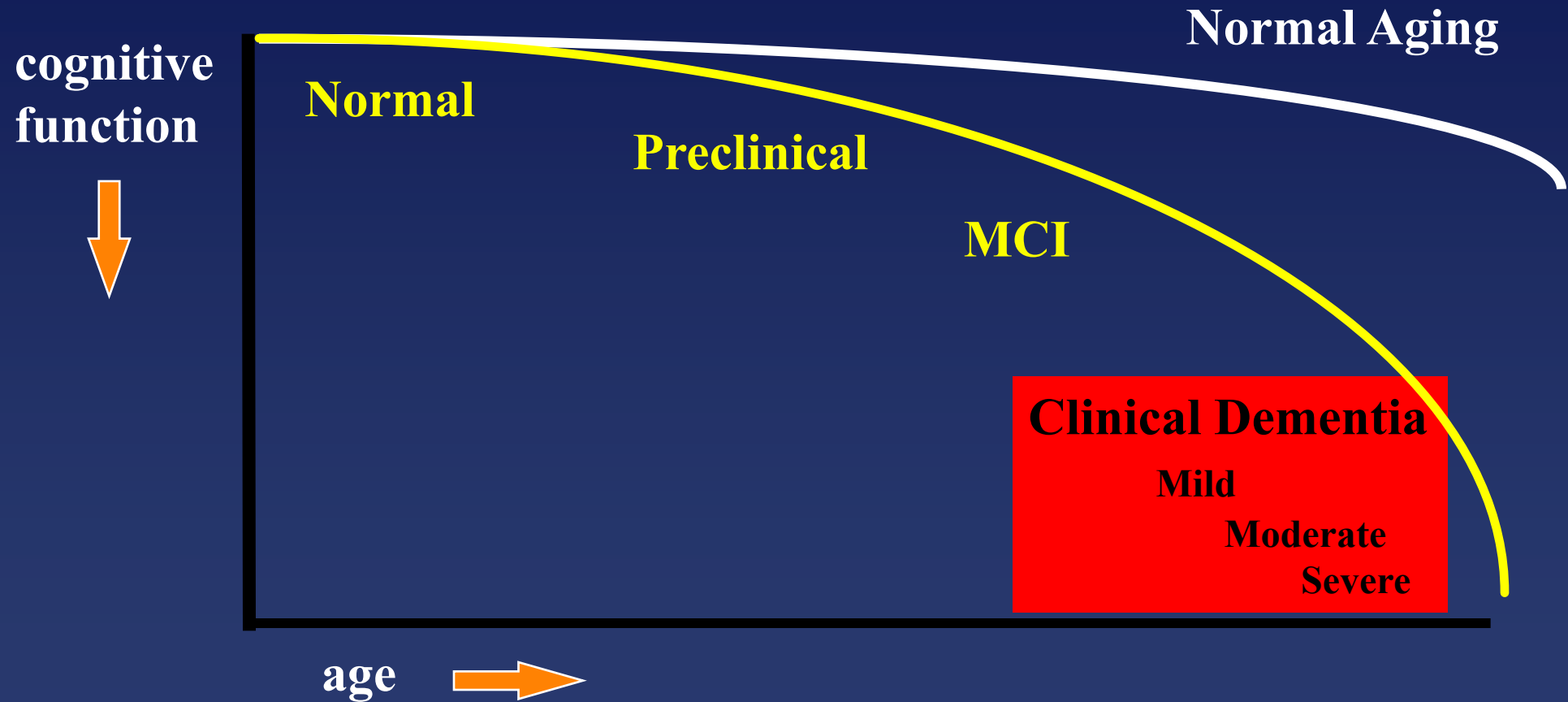
*Professor of Neurology*

*UT Southwestern Medical Center, Dallas, TX*



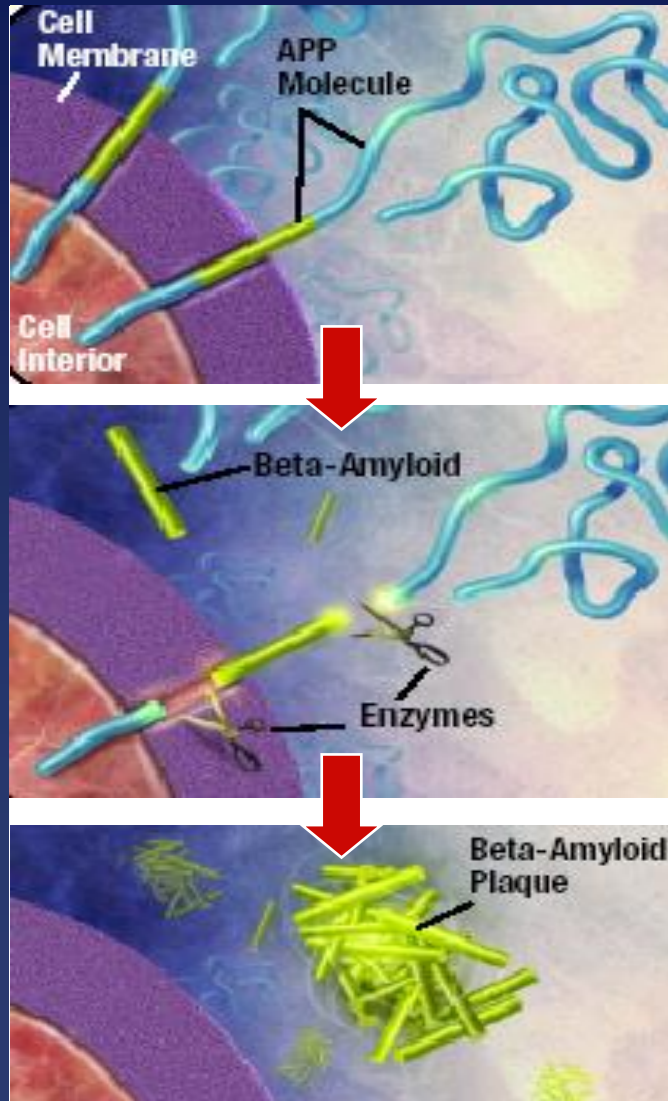
**2<sup>nd</sup> Alzheimer's Public Education Forum**  
**Miami, FL – January 19, 2014**

# The Continuum of Alzheimer's Disease

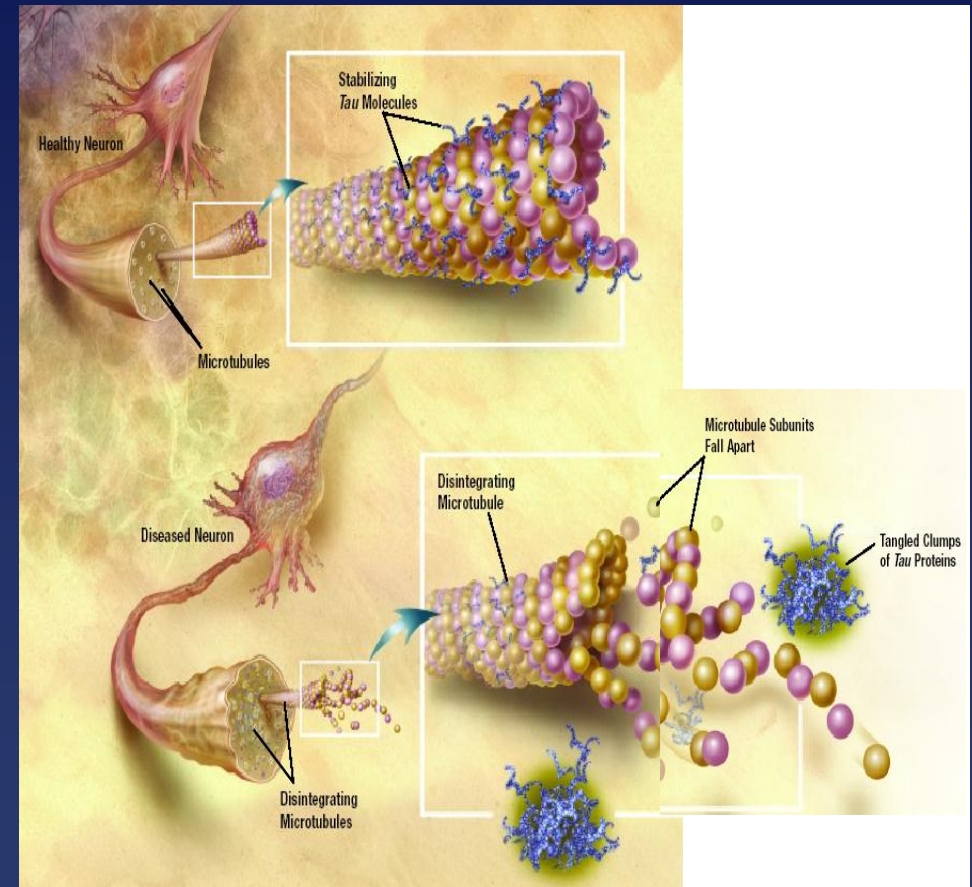


# Causes of Alzheimer's Disease

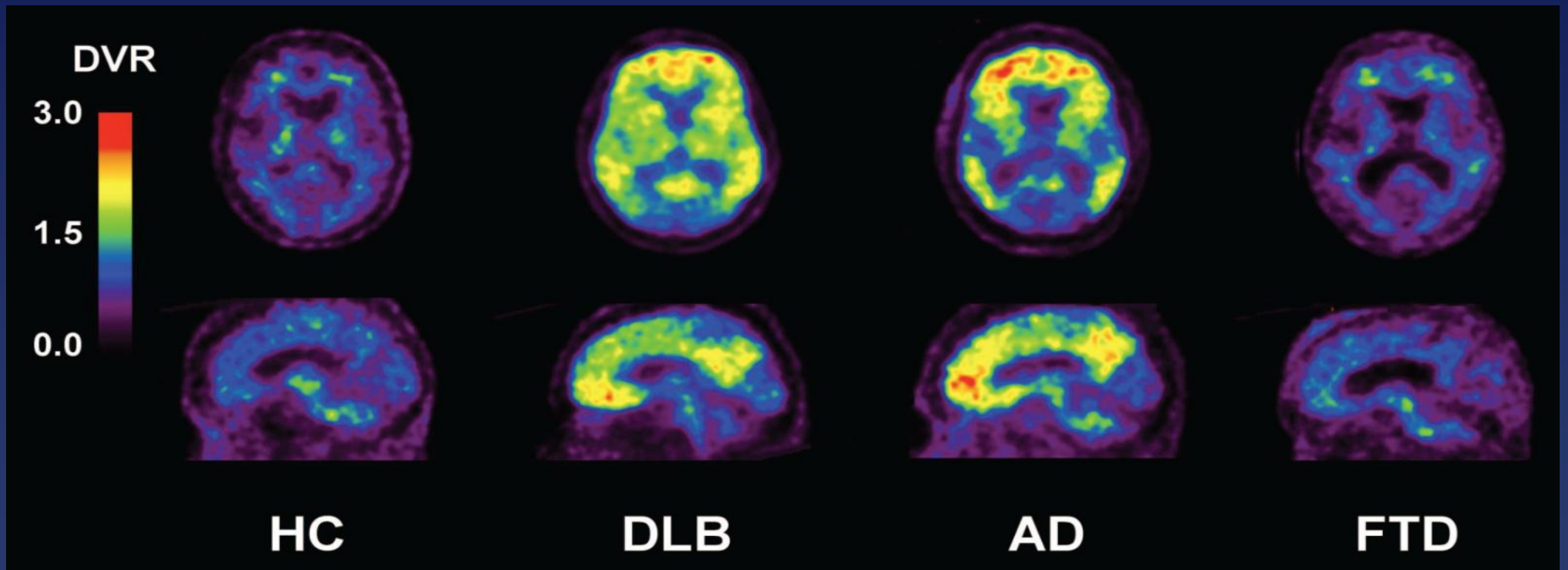
amyloid plaques damage  
nearby neurons



tau protein aggregates  
into tangles



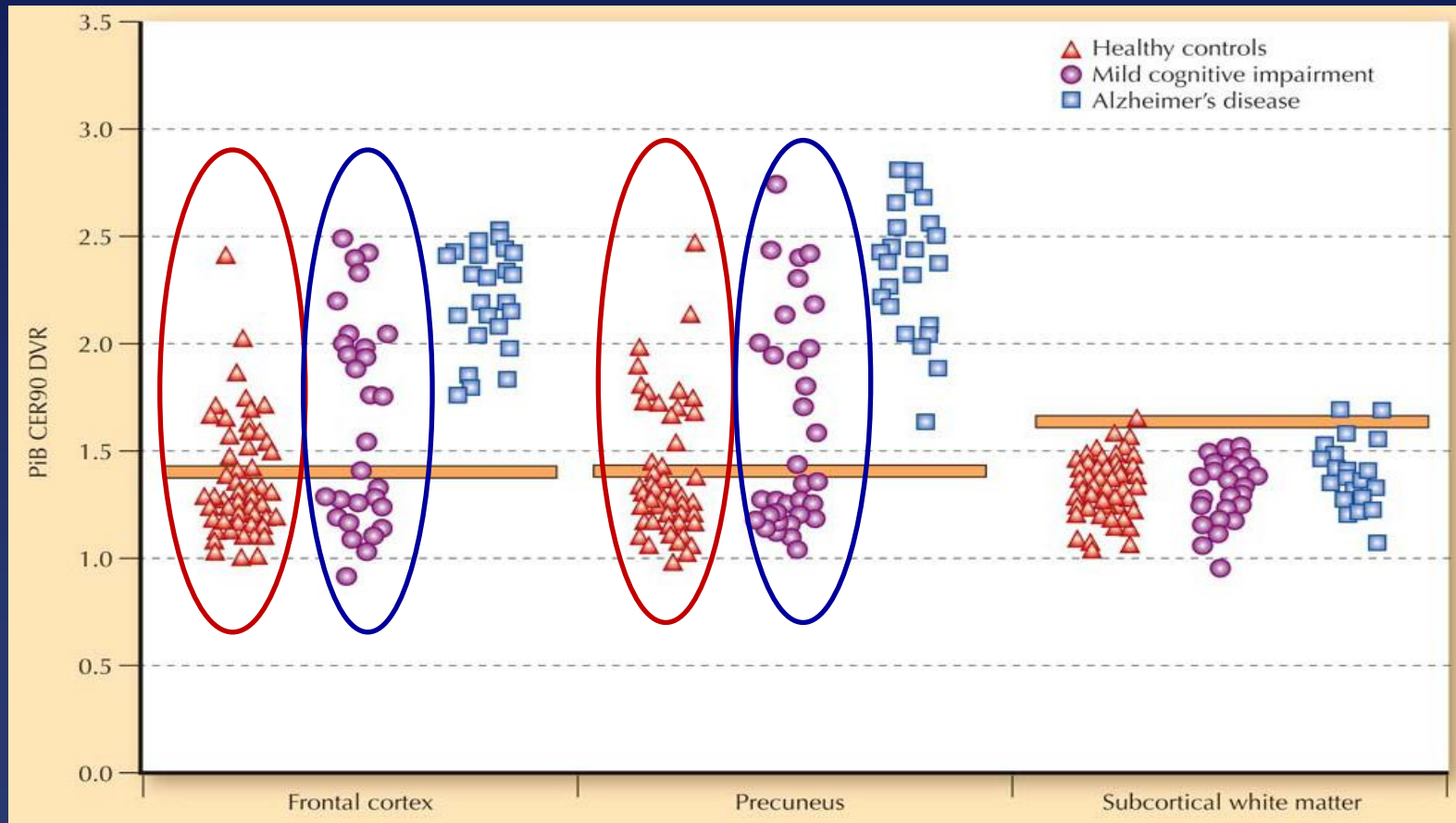
# And now we can image Amyloid Burden!



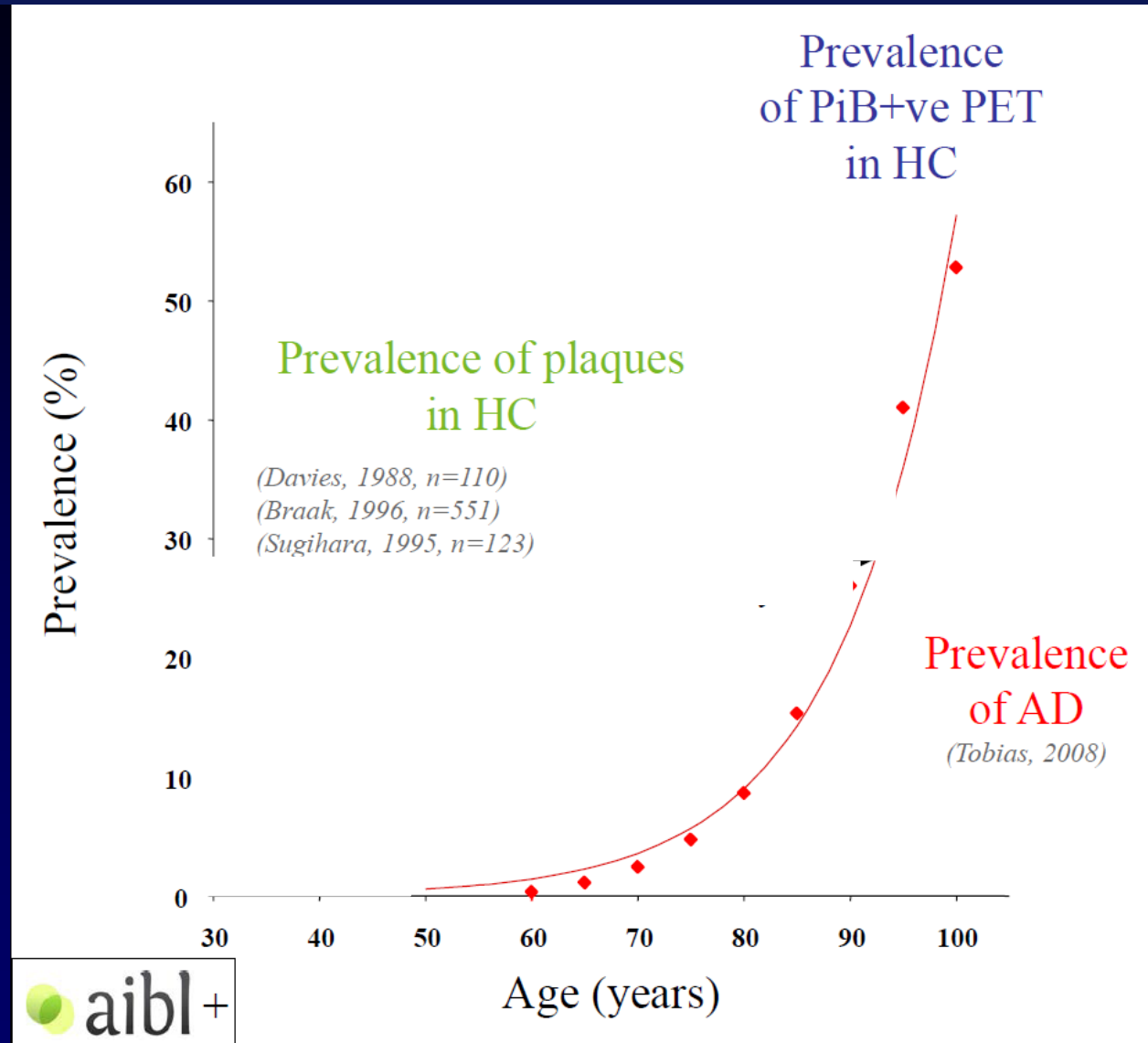


# In the beginning there was PIB

(now there are several amyloid imaging agents available!)



# Amyloid Imaging Predicts Disease by 15 years!



Rowe C et al *Neurobiology of Aging* 2010

**Can we fix it?**

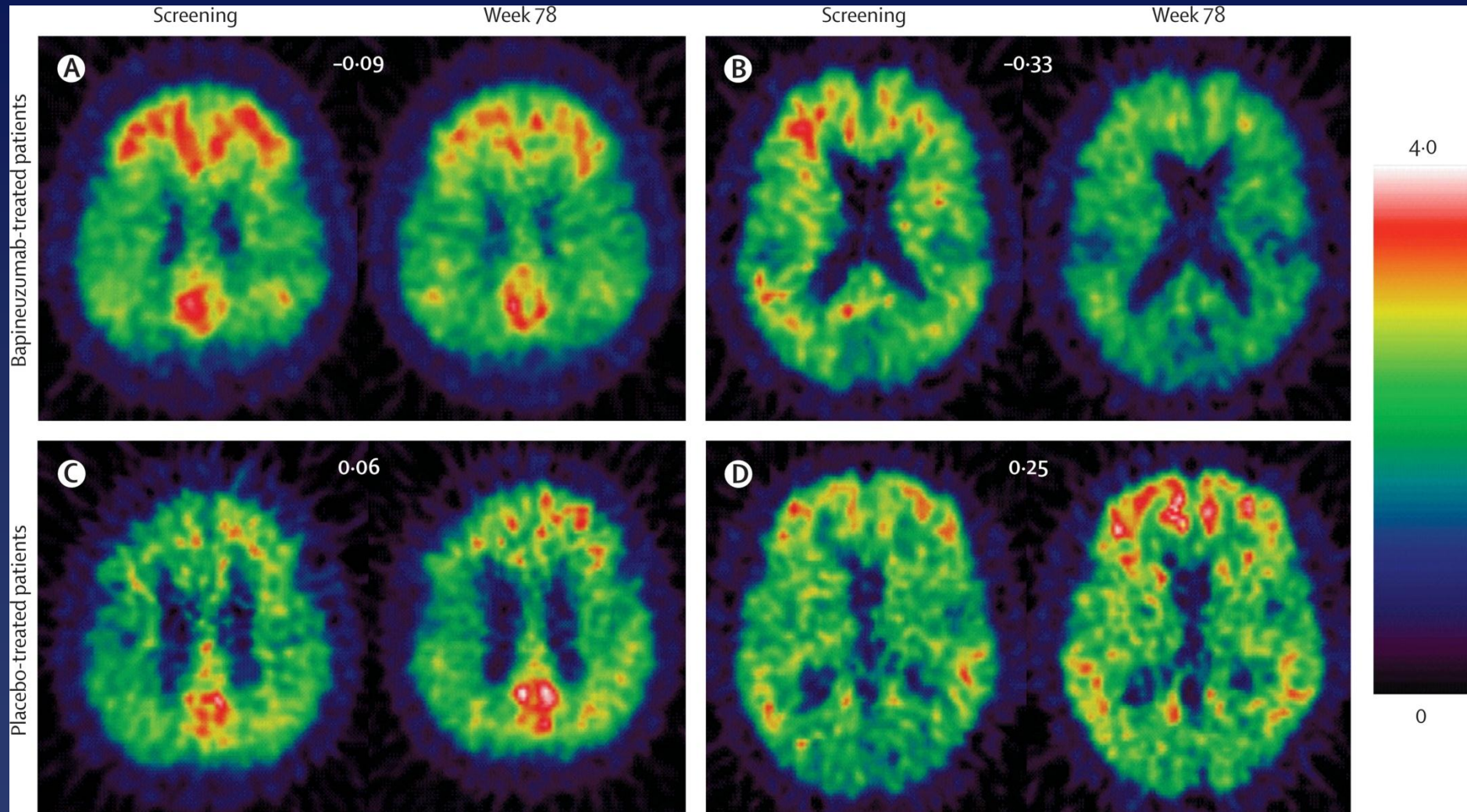
***Does Anti Amyloid Therapy Work?***

**No . . .**

**And**

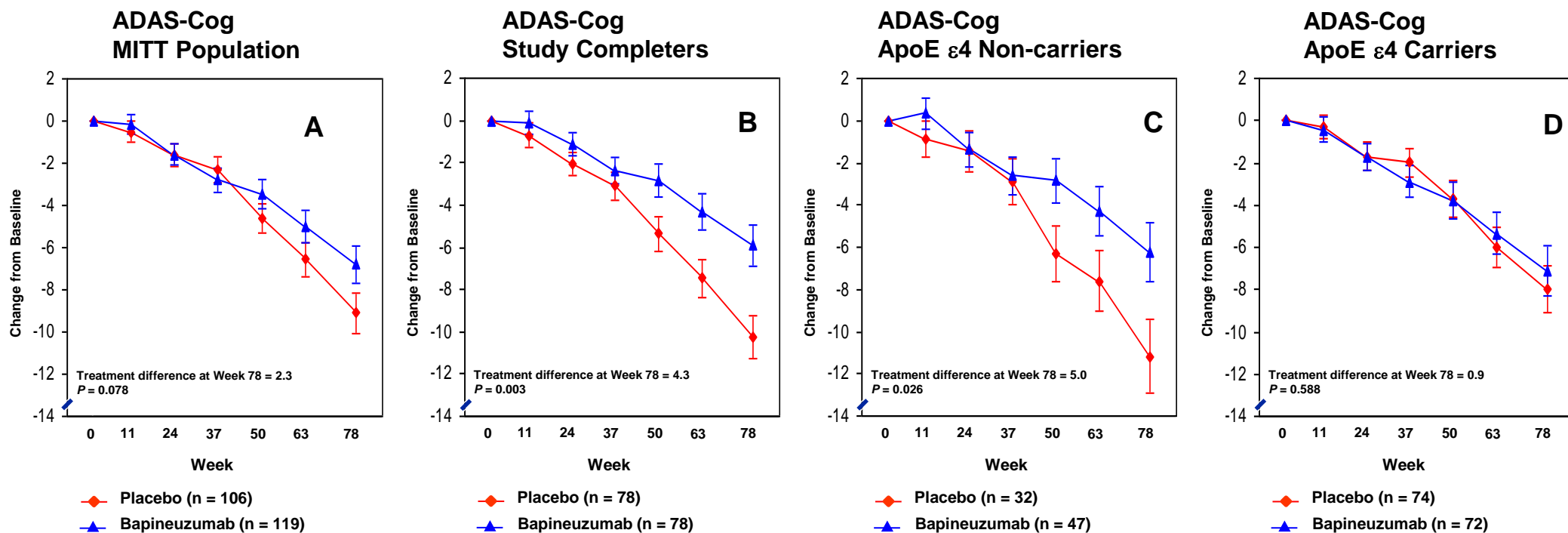
**. . . Yes**

# Monoclonal Antibody Reduction of Fibrillar Amyloid Burden

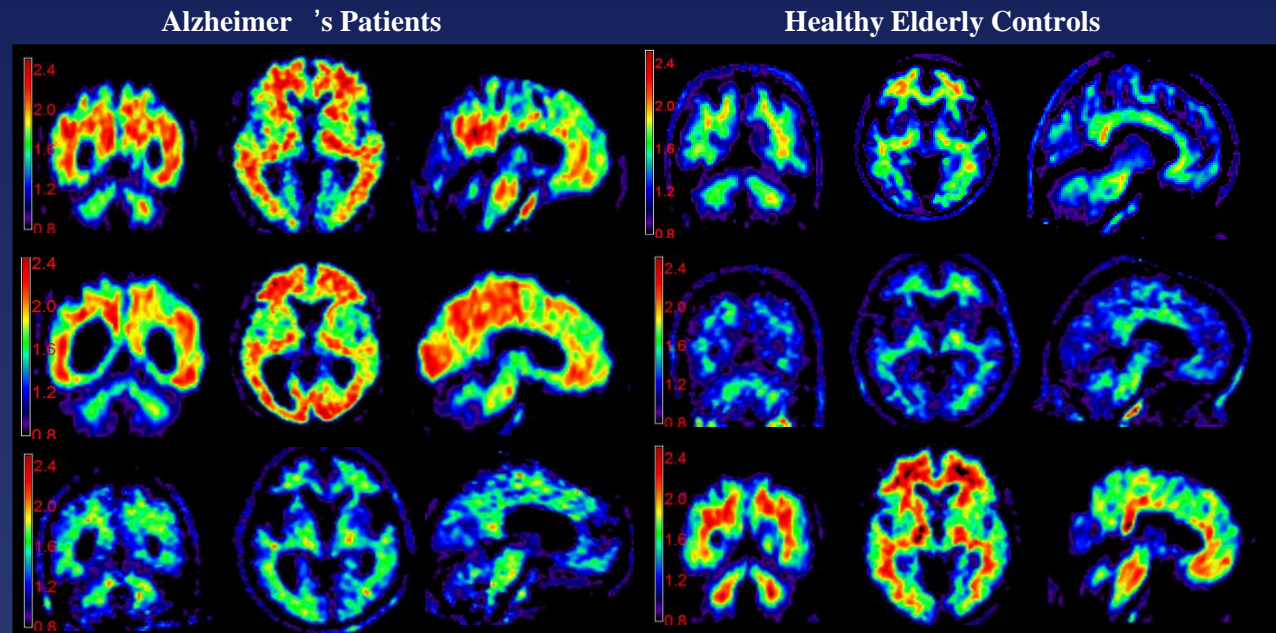
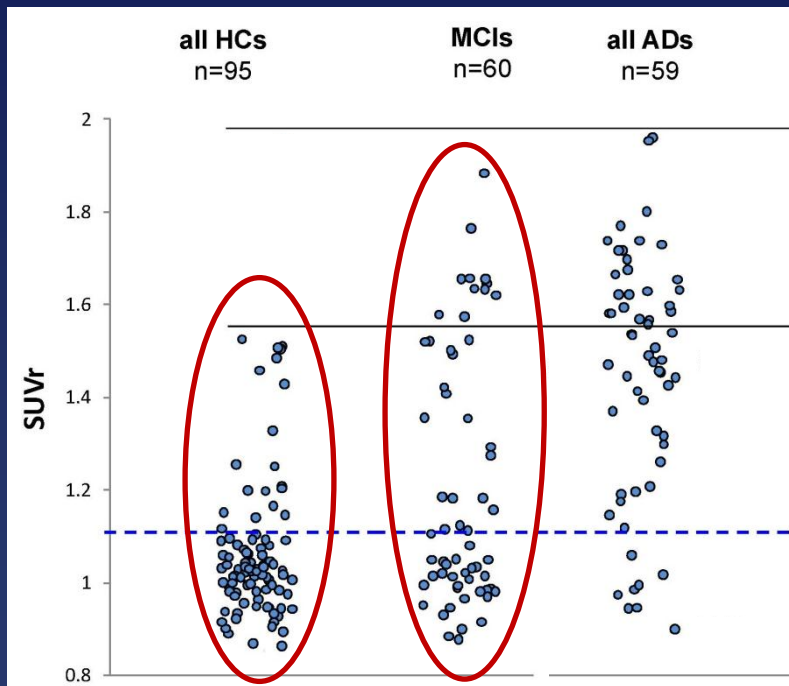




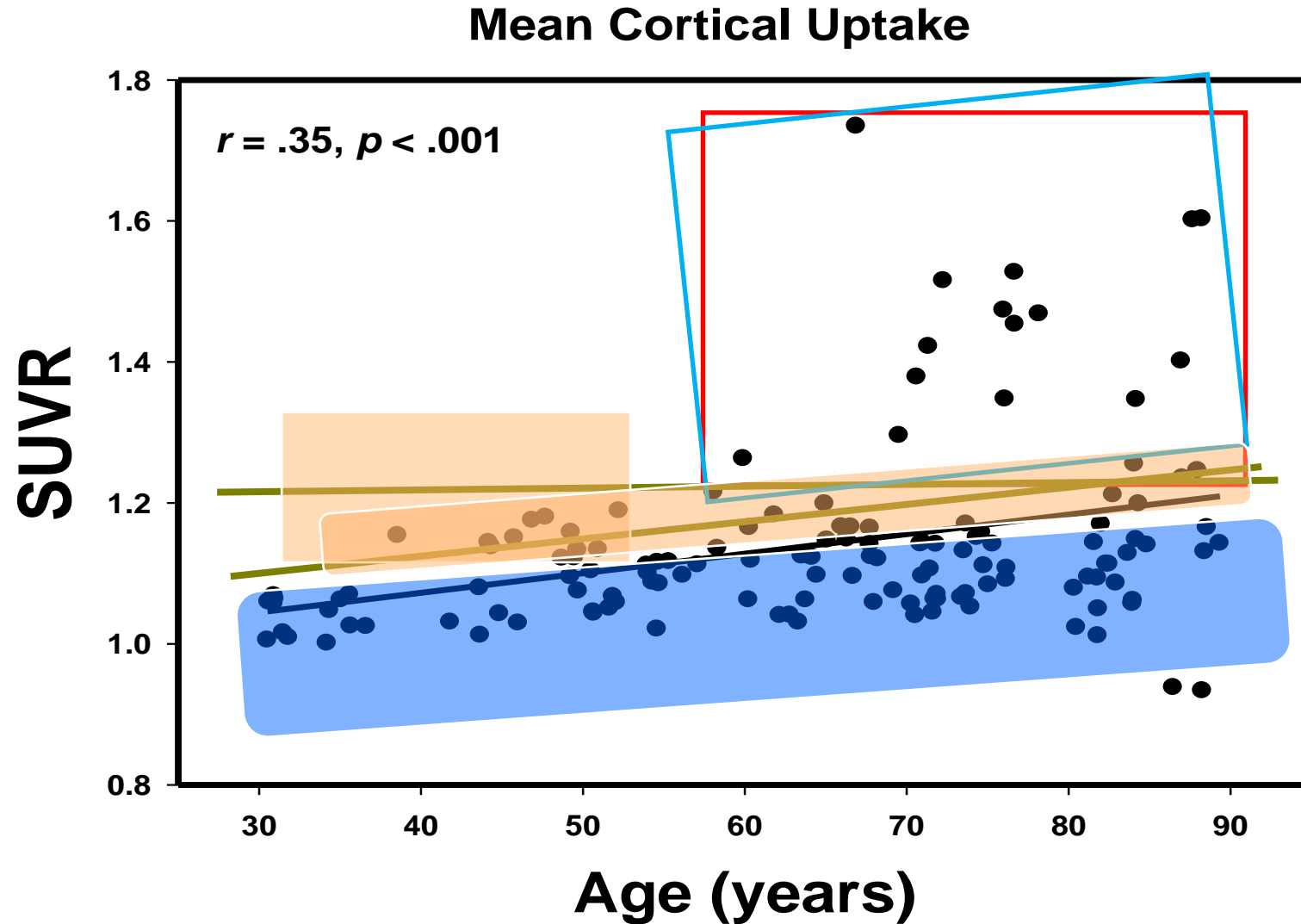
# Bapineuzumab Phase 2 Trial: Results



OK, so . . .  
what does uptake in normals mean?



# Amyloid in Healthy Aging Across the Lifespan



**Does increased amyloid burden in healthy adults impact brain function?**

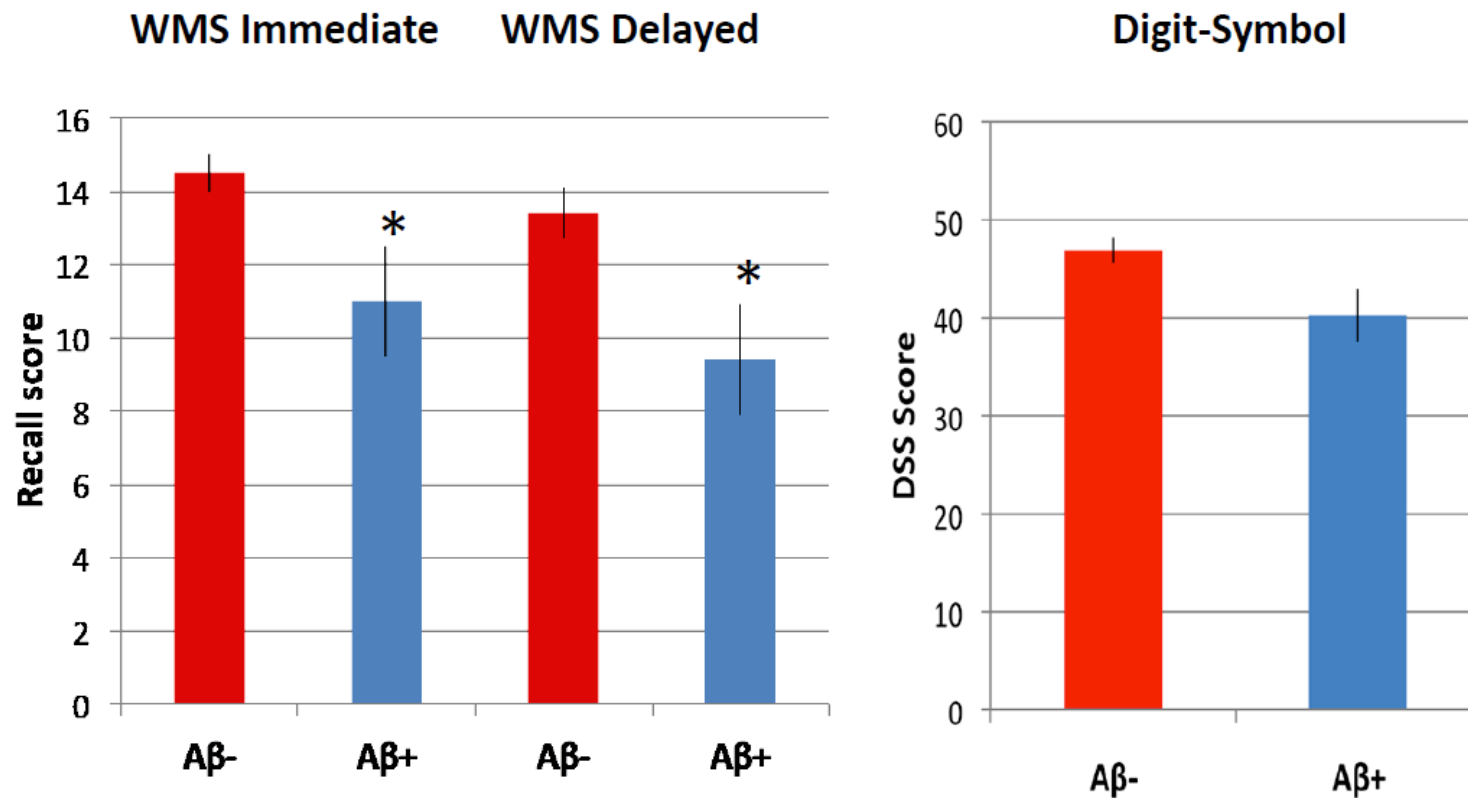
**Thinking Ability**

**Turning On Neurons**

**Connecting Neurons in a Network**

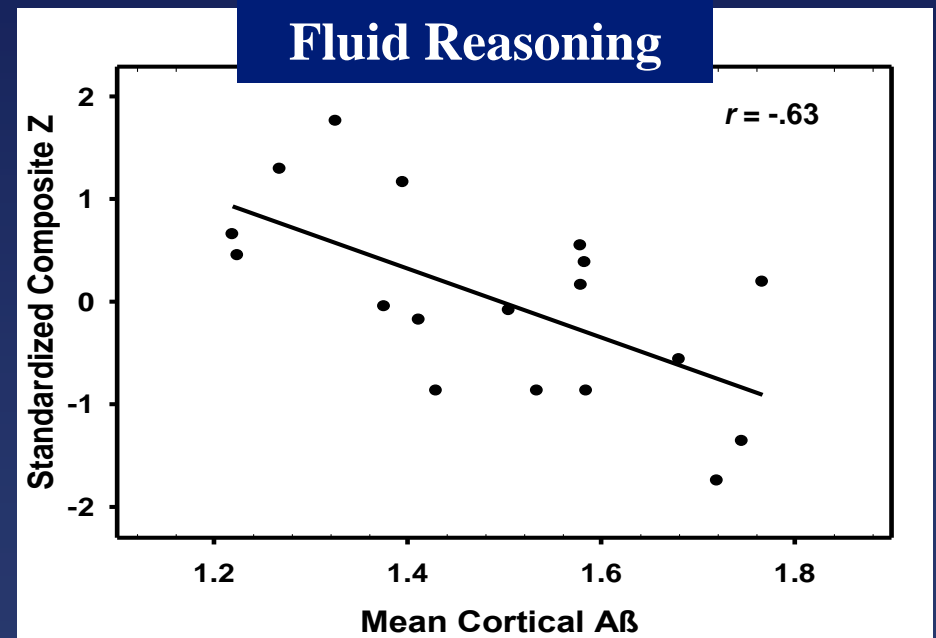
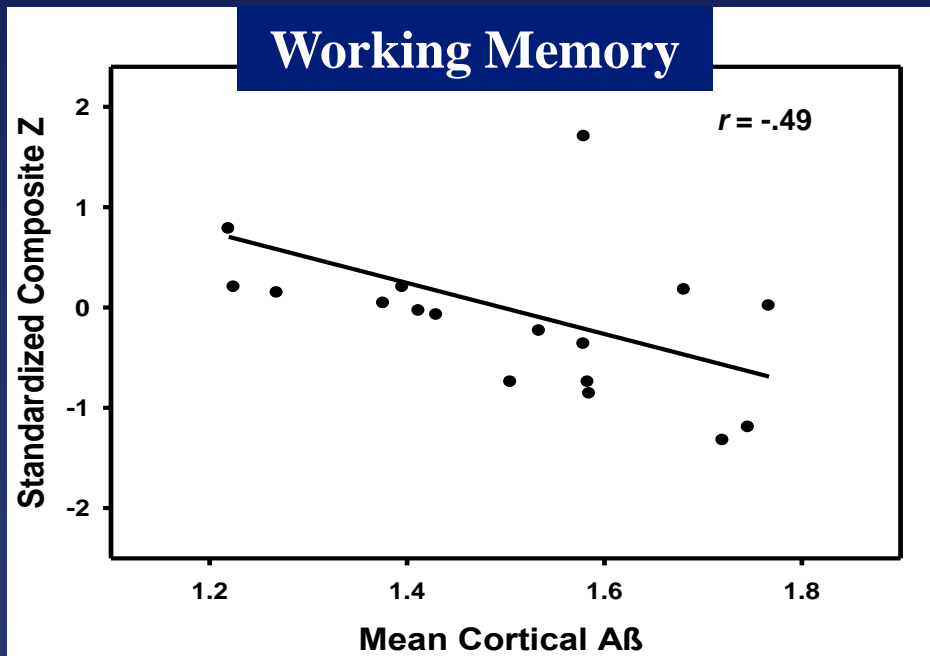


# Cognition in normal subjects >age 70 is linked to amyloid



Florbetapir (<sup>18</sup>F AV-45) Phase II Study

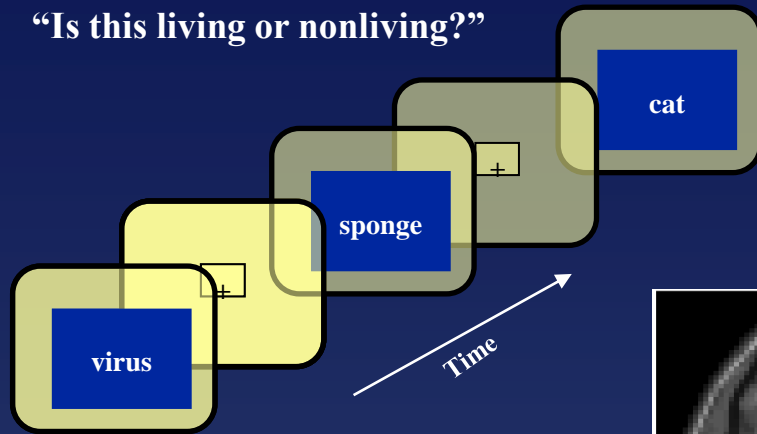
# Elevated A $\beta$ and Cognition – Poorer Thinking



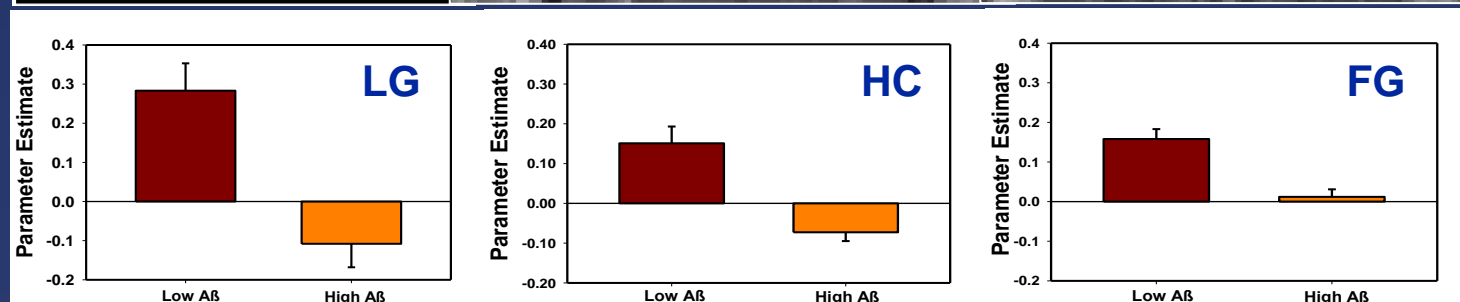
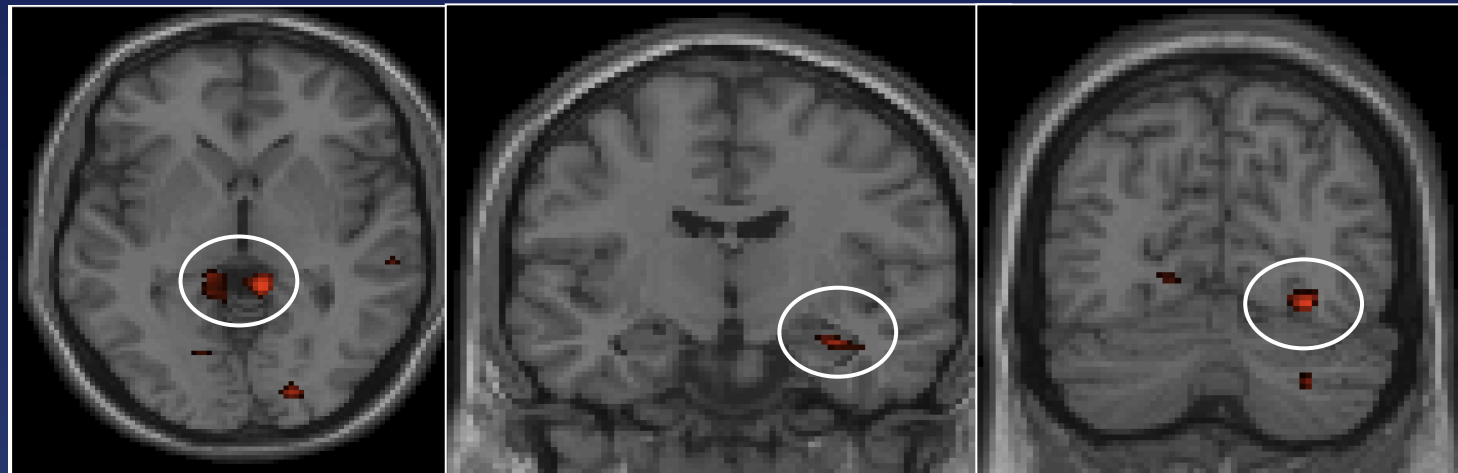
# More Amyloid – Worse Brain Activation

Functional Task: Semantic judgment

“Is this living or nonliving?”



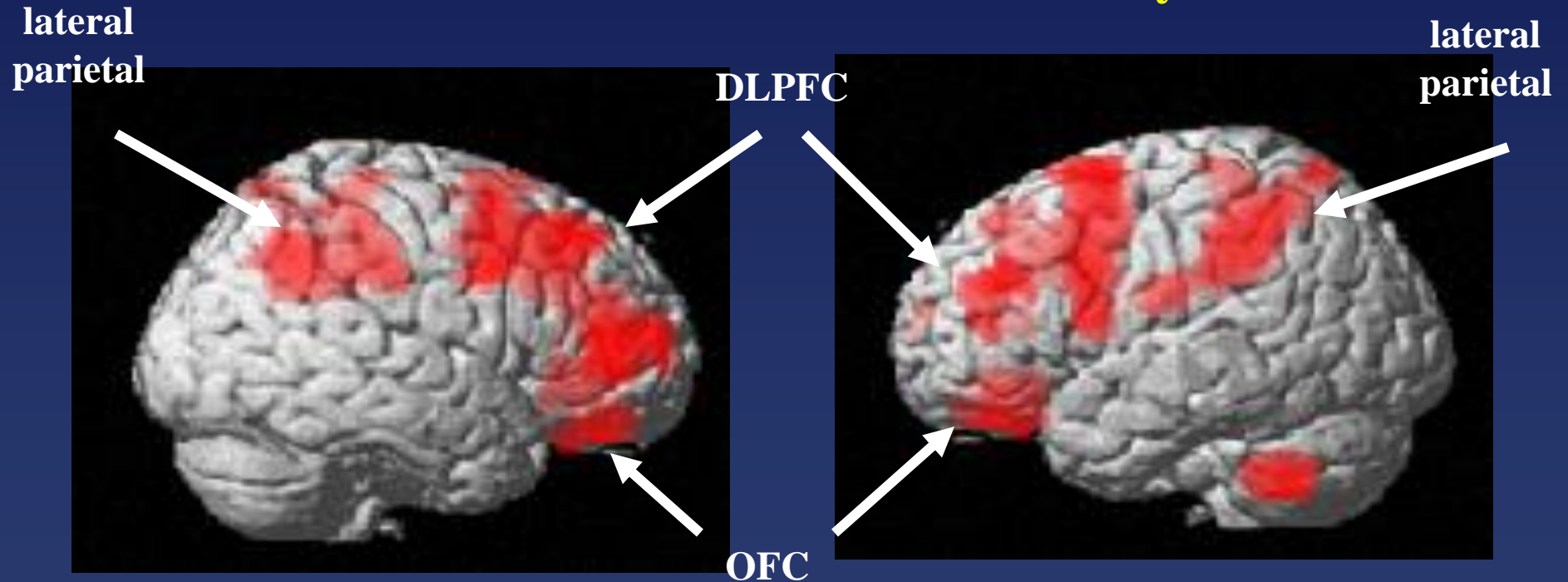
High amyloid group shows decreased modulation to task difficulty (hard - easy)



# More Amyloid – worse connectivity

Regions where increasing amyloid decreases

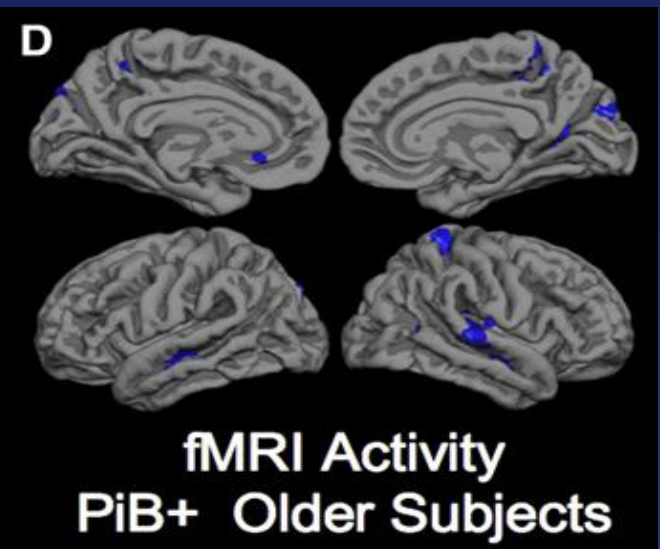
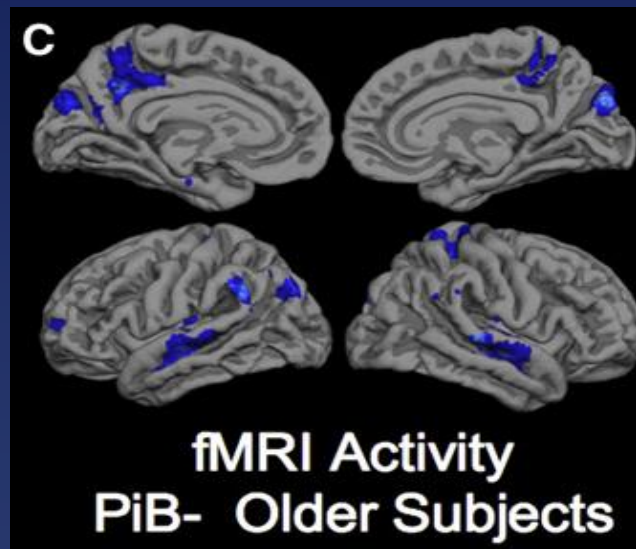
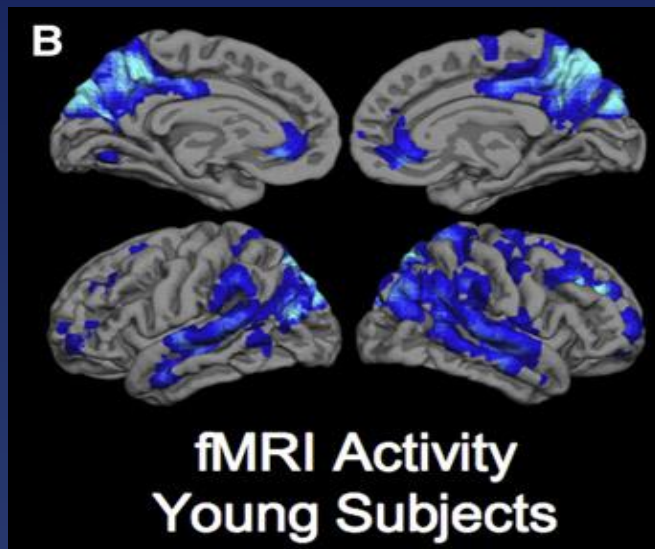
Default Mode Network connectivity



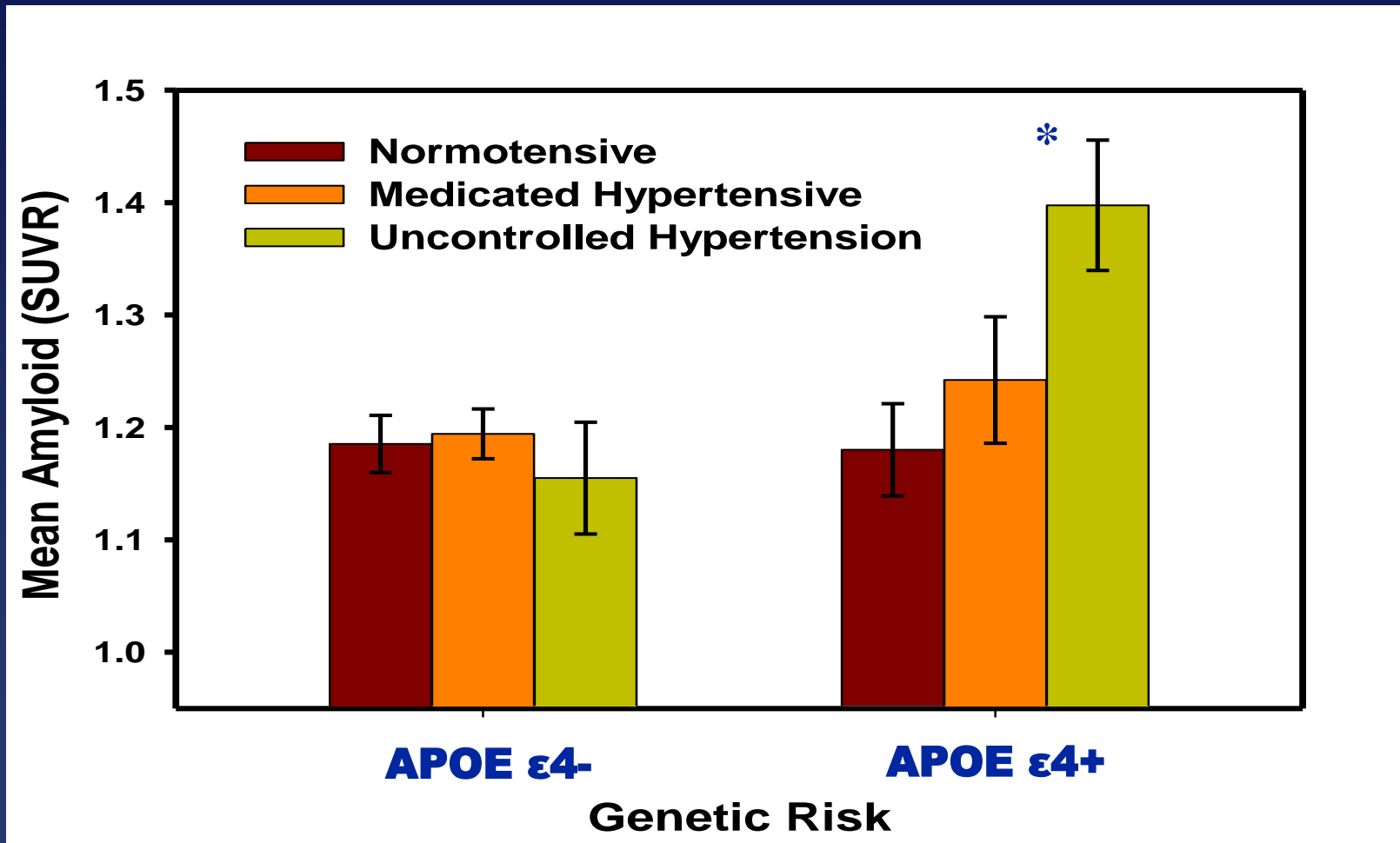


# Amyloid Impairs Default Mode Network Function in Older Persons without Dementia

Sperling et al; Neuron 63, 178–188, 2009



# Other risk factors are associated with more amyloid

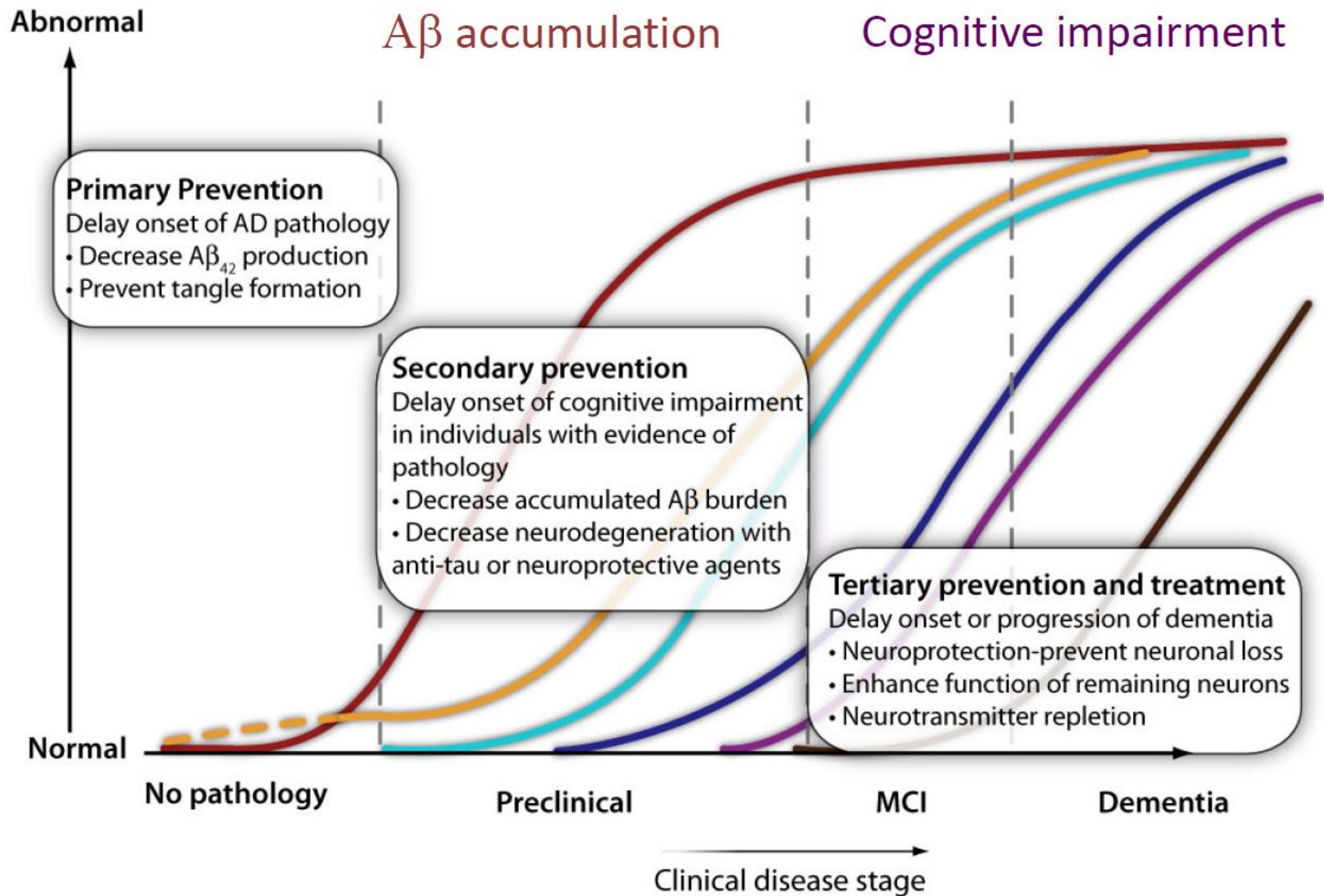


Age-adjusted means plotted

# Conclusions

- Amyloid increases with age even in healthy adults
- High amyloid is associated with faster progression
- Increased amyloid with age:
  - Impairs key types of thinking
  - Reduces the ability to activate neurons
  - Decreased brain network connectivity
- A $\beta$  burden is associated with a range of neuronal abnormalities, and thus may offer the opportunity to identify at risk individuals for early intervention

# Testing the Right Target and Right Drug at the Right Stage of AD





**And, in fact, that is where clinical trials  
are going . . .**

**Anti-amyloid treatment in  
Asymptomatic\* AD  
A4 Trial**

Reisa Sperling, M.D.

Paul Aisen, M.D.

# A4 Specific Aims

- To determine if treatment with an anti-amyloid drug will slow the rate of cognitive decline in normal elderly *who are at risk for decline to MCI or AD because of their amyloid.*
- To see if removing amyloid will also improve other biomarkers of degeneration – is there a “critical window” for treatment?

# The future of clinical trials, and in the end, the treatment of Alzheimer's Disease, is in asymptomatic at risk individuals

*where risk assessment is based on biomarkers!!*



Alzheimer's & Dementia 7 (2011) 280–292

Alzheimer's  
&  
Dementia

## Toward defining the preclinical stages of Alzheimer's disease:

Recommendations from the National Institute on Aging-Alzheimer's Association workgroups on diagnostic guidelines for Alzheimer's disease

Reisa A. Sperling<sup>a,\*</sup>, Paul S. Aisen<sup>b</sup>, Laurel A. Beckett<sup>c</sup>, David A. Bennett<sup>d</sup>, Suzanne Craft<sup>e</sup>, Anne M. Fagan<sup>f</sup>, Takeshi Iwatsubo<sup>g</sup>, Clifford R. Jack, Jr.<sup>h</sup>, Jeffrey Kaye<sup>i</sup>, Thomas J. Montine<sup>j</sup>, Denise C. Park<sup>k</sup>, Eric M. Reiman<sup>l</sup>, Christopher C. Rowe<sup>m</sup>, Eric Siemers<sup>n</sup>, Yaakov Stern<sup>o</sup>, Kristine Yaffe<sup>p</sup>, Maria C. Carrillo<sup>q</sup>, Bill Thies<sup>q</sup>, Marcelle Morrison-Bogorad<sup>r</sup>, Molly V. Wagster<sup>r</sup>, Creighton H. Phelps<sup>r</sup>

## Acknowledgements

# Thanks to

- 
- UT Dallas Center for Vital Longevity: Denise Park (Director), Kristin Christensen, Karen Rodrigue, Andrew Hebrank, Gérard Bisech, Rick
  - UT Southwestern Nuclear Medicine Center: Cherise Chin Fatt, Thomas Harris
  - UT Southwestern Center for Imaging Research: Robert Mungro, William Weaver, Richard K
  - UT Southwestern Center: Michael

# Supp

- # NAME