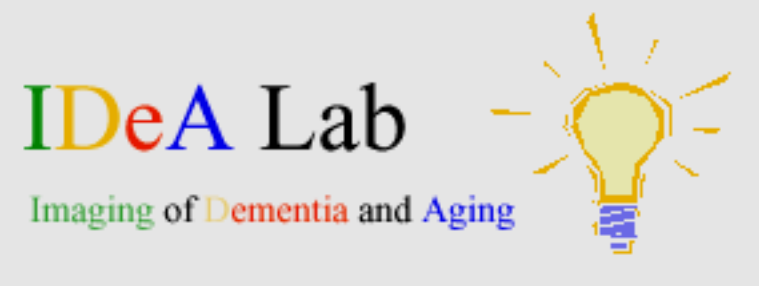


# Vascular risk factors impact cognition independent of PIB PET and MRI measures of AD and vascular brain injury

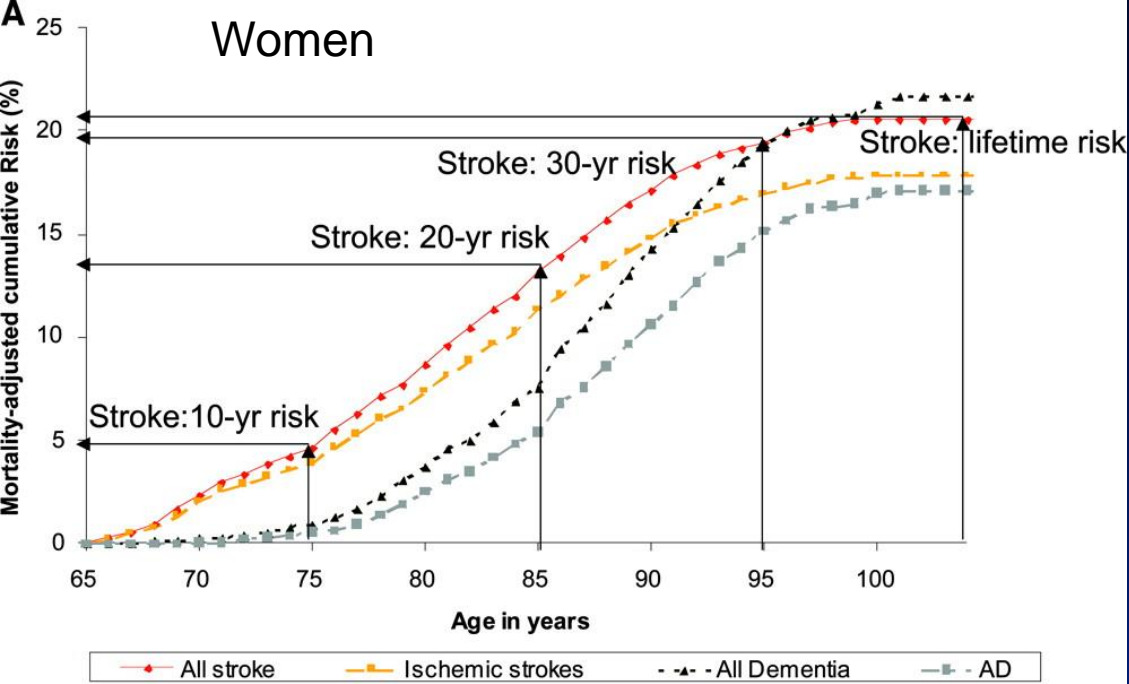
C. DeCarli, D. Mungas, O. Carmichael, S. Villeneuve, E. Fletcher, D. Harvey, L. Beckett, B. Singh, W. Jagust, B. Reed

Department of Neurology and Center for Neuroscience at UC Davis and the Helen Wills Neuroscience Institute at UC Berkeley



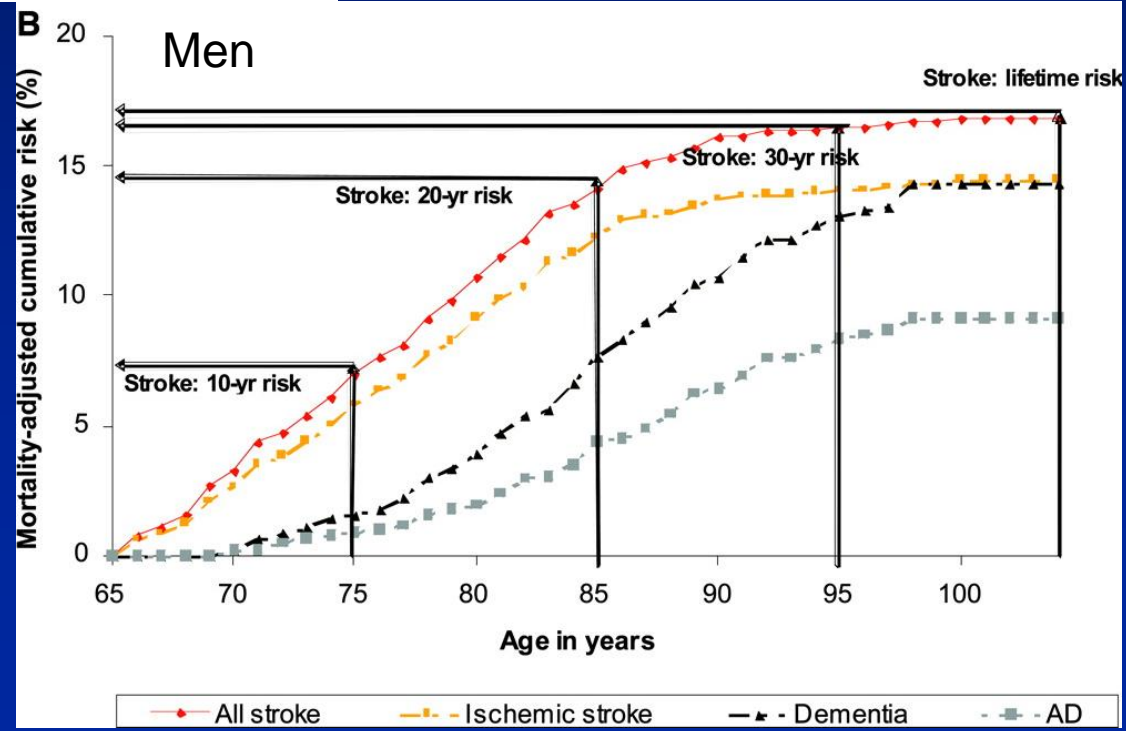
# Disclosures

- P30 AG10129, P01 AG12435, R01 AG010220, R01 AG 031563 and R01 AG021028
- Consultant to Novartis

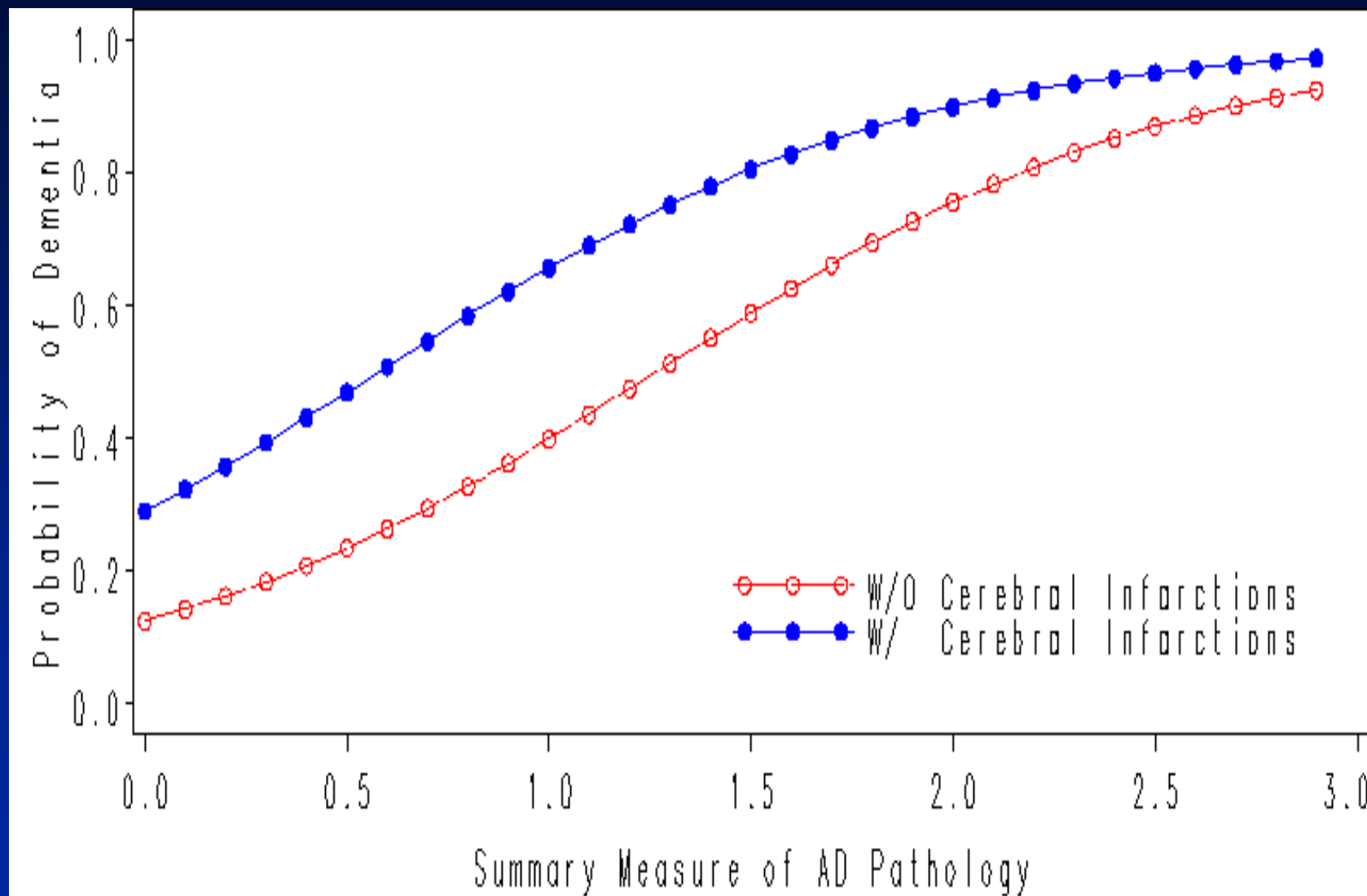


# Future Risk of Stroke or Dementia at Age 65

Seshadri, S. et al.  
Stroke 2006;37:345-350



## Cerebral infarctions and the likelihood of dementia from Alzheimer disease pathology





ELSEVIER

Neurobiology of Aging 33 (2012) 1006.e25–1006.e36

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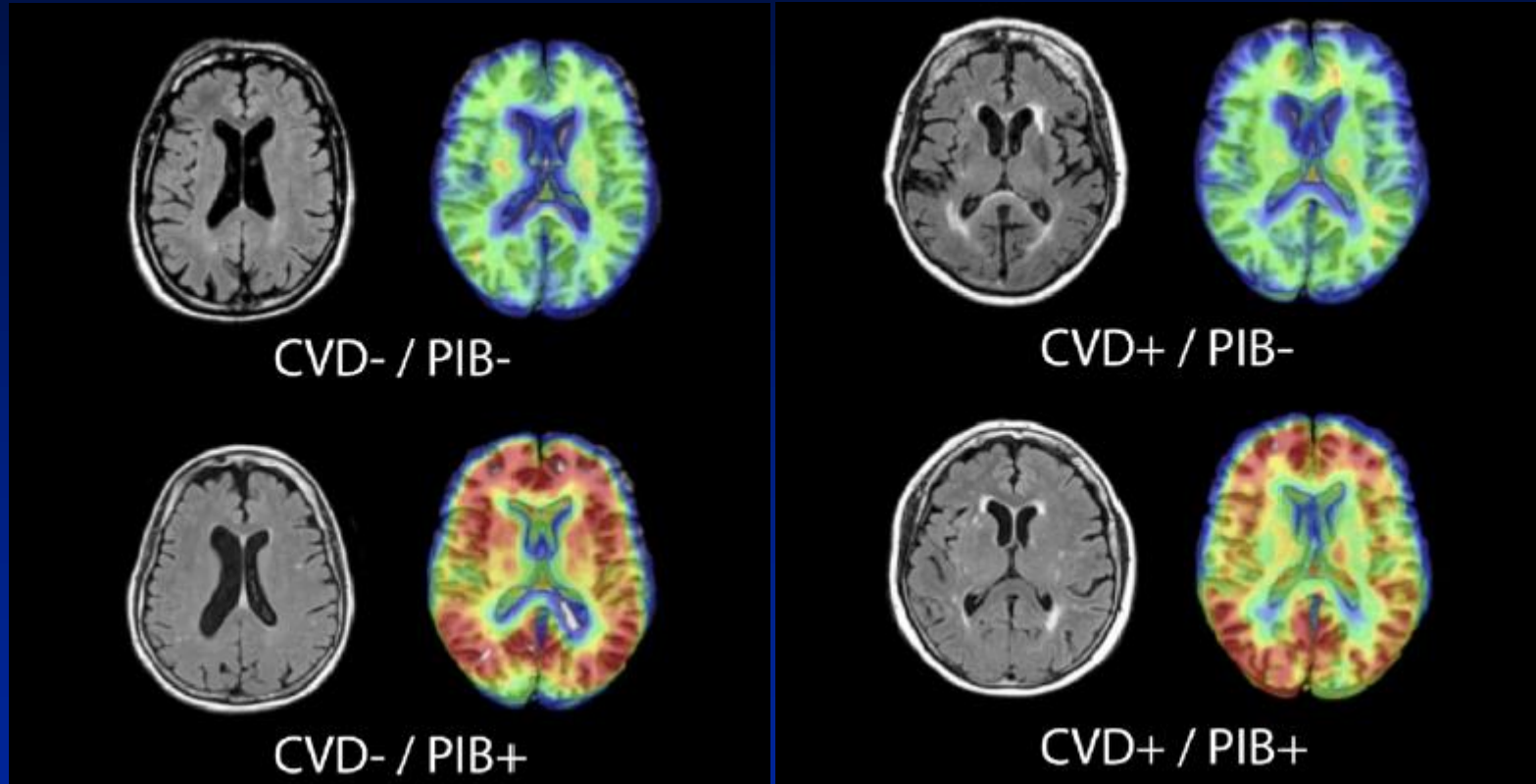
www.elsevier.com/locate/neuaging

## Cerebrovascular disease, beta-amyloid, and cognition in aging

Natalie L. Marchant<sup>a,b,\*</sup>, Bruce R. Reed<sup>c</sup>, Charles S. DeCarli<sup>c</sup>, Cindee M. Madison<sup>a</sup>,  
Michael W. Weiner<sup>d</sup>, Helena C. Chui<sup>e</sup>, William J. Jagust<sup>a,b</sup>

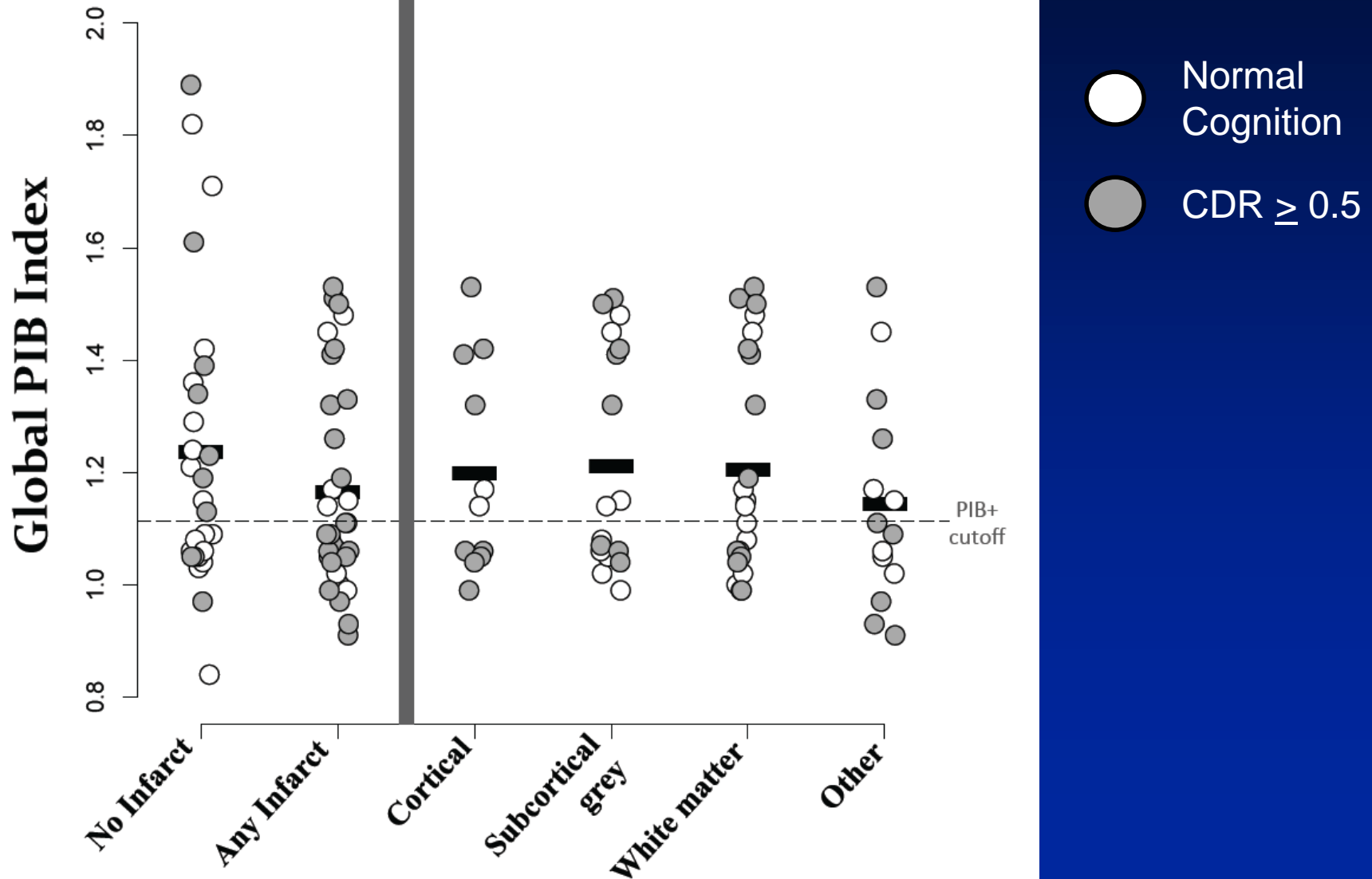
	CVD– ( <i>n</i> = 27)	CVD+ ( <i>n</i> = 27)	Total ( <i>n</i> = 54)
Age	76.2 ± 6.4	77.8 ± 7	77 ± 6.7
Sex (M/F)	14/13	18/9	32/22
Education	16.2 ± 2.6	14.8 ± 2.9	15.5 ± 2.8
APOE ε4 % <sup>a</sup>	23.1	28	25.5
GDS	4 ± 3.7	2.4 ± 2.2	3.2 ± 3.2
MMSE	29.1 ± 1.2	28.3 ± 1.2*	28.7 ± 1.3
Composite vascular risk	0.27 ± 0.27	0.44 ± 0.27*	0.36 ± 0.27
WMH percentage of TCV	0.19 ± 0.11	0.92 ± 0.75**	0.56 ± 0.65
Infarct type (cortical/subcortical/ both)	0	1/14/2	1/14/2
PIB –/+	18/9	15/12	33/21

# Group Classification

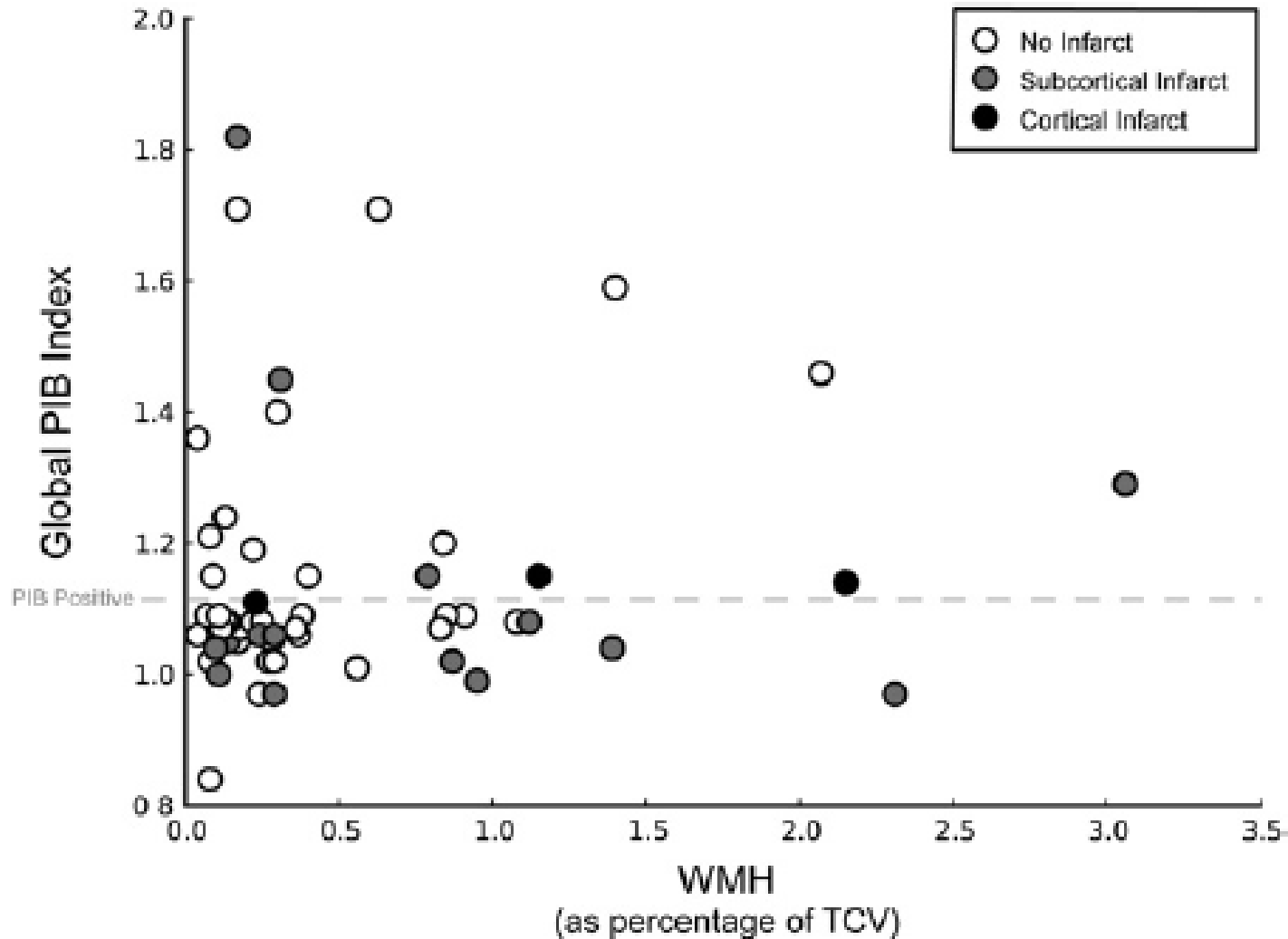


CVD+ defined as extensive WMH or infarction or both on MRI

# PiB Retention in Relation to Infarction

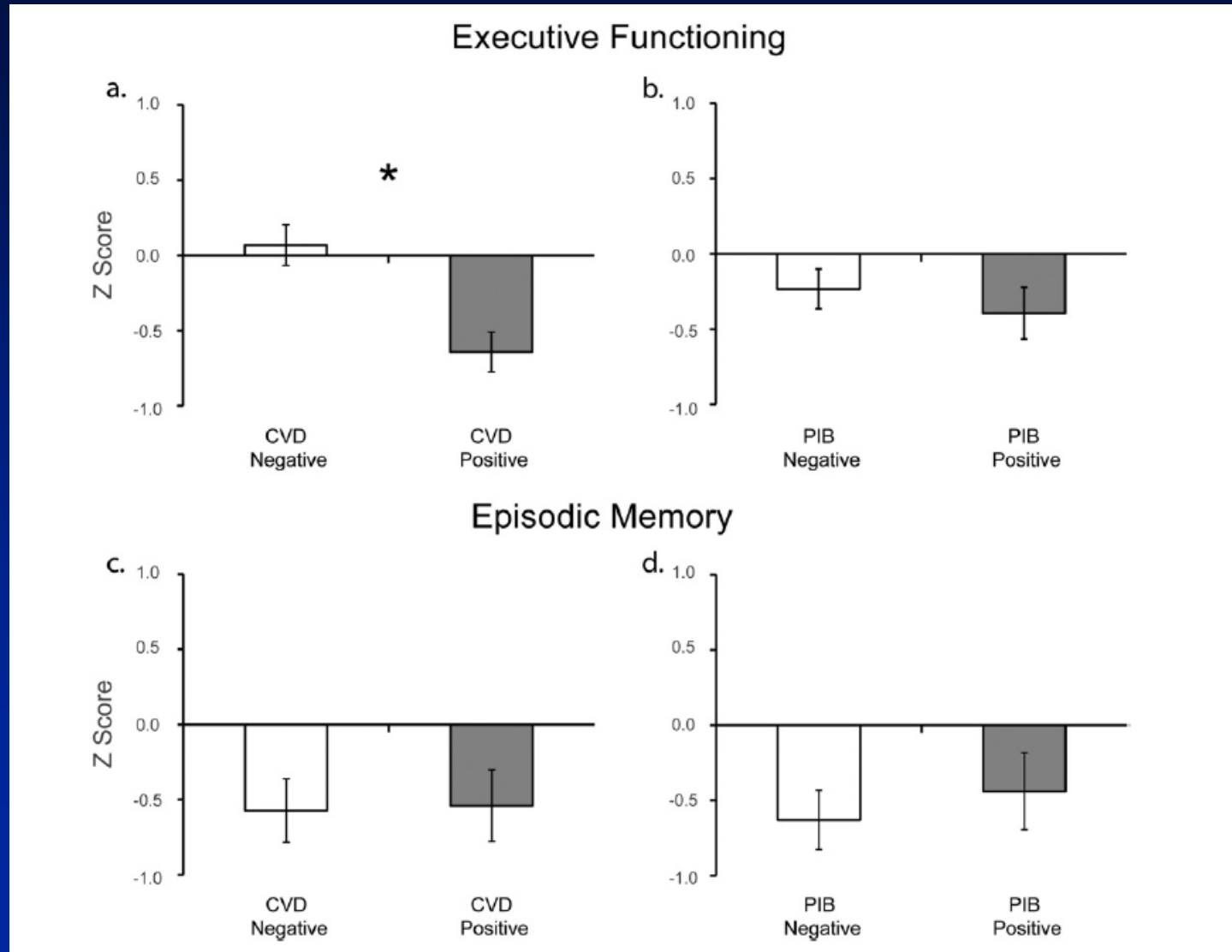


# Association Between WMH volume and PiB Index





# Association with Cognition



# The Aging Brain and Cognition

## Contribution of Vascular Injury and A $\beta$ to Mild Cognitive Dysfunction

Natalie L. Marchant, PhD; Bruce R. Reed, PhD; Nerses Sanossian, MD; Cindee M. Madison, MA; Stephen Kriger, BS; Roxana Dhada, BA; Wendy J. Mack, PhD; Charles DeCarli, MD; Michael W. Weiner, MD; Dan M. Mungas, PhD; Helena C. Chui, MD; William J. Jagust, MD

JAMA Neurol. Published online February 11, 2013.  
doi:10.1001/2013.jamaneurol.405

	PiB- (n = 32)	PiB+ (n = 29)	<i>t</i>	$\chi^2$	<i>P</i> Value
Age, mean (SD), y	76.6 (7.5)	79 (6.3)	$t_{59} = 1.4$		.17
Male sex	19 (59)	24 (83)		$\chi^2_1 = 4.00$	.046
Educational level, mean (SD), y	13.8 (2.9)	14.1 (2.5)	$t_{59} = 0.5$		.64
APOE $\epsilon 4$ allele <sup>b</sup>	3 (12)	10 (40)		$\chi^2_1 = 5.09$	.02
MMSE score, mean (SD)	28 (2.2)	27.4 (2.3)	$t_{59} = 1.0$		.32
GDS score, mean (SD)	1.5 (1.7)	2.4 (2.6)	$t_{57} = 1.5$		.14
Infarct+	20 (62)	14 (48)		$\chi^2_1 = 1.25$	.26
CDR $\geq$ 0.5	15 (47)	16 (55)		$\chi^2_1 = 0.42$	.52

# Impact of Vascular disease on Cognition

## Episodic Memory

	Demographics			Infarct					WMH	A $\beta$
	Age	Sex (Male)	Education	Cortical	Subcortical grey	White matter	Other	Number (0, 1, >1)	WMH volume	Global PIB Index
Stage 1	-.107	.064	.245							
Stage 2				-.06	-.29*	-.06	-.02	-.19	.02	-.18
Stage 3	-.24	-.02	.16		-.34*				.19	-.08

## Executive Function

	Demographics			Infarct					WMH	A $\beta$
	Age	Sex (Male)	Education	Cortical	Subcortical grey	White matter	Other	Number (0, 1, >1)	WMH volume	Global PIB Index
Stage 1	-.01	.08	.51***							
Stage 2				-.47***	-.33*	-.17	-.2	-.14	-.21	-.15
Stage 3	-.08	-.19	.38**	-.54**					.05	-.04

# Coronary Artery Disease Is Associated with Cognitive Decline Independent of Changes on Magnetic Resonance Imaging in Cognitively Normal Elderly Adults

*Ling Zheng, MBBS, PhD,\* Wendy J. Mack, PhD,† Helena C. Chui, MD,\* Lara Heflin, PhD,‡ Dan Mungas, PhD,§ Bruce Reed, PhD,§ Charles DeCarli, MD,§ Michael W. Weiner, MD,||# and Joel H. Kramer, PsyD\*\**

JAGS 60:499–504, 2012

Model	Independent Variable	Global Cognition*	Verbal Memory*	Executive Function*
1	CAD	−2.56 (0.88) .004	−2.55 (1.12) .02	−1.49 (0.67) .03
	Baseline WMH	−0.17 (0.39) .67	0.06 (0.49) .9	0.2 (0.29) .49
	Change in WMH	−1.91 (0.86) .03	−2.18 (1.1) .049	−2.56 (0.65) <.001
2	CAD	−2.55 (0.85) .003	−2.38 (1.13) .04	−1.35 (0.67) .046
	Baseline SBI	−0.14 (0.23) .56	−0.24 (0.3) .42	−0.33 (0.18) .07
	Change in SBI	−0.39 (0.17) .02	−0.23 (0.22) .28	−0.31 (0.13) .02
3	CAD	−2.53 (0.86) .004	−2.47 (1.06) .02	−1.41 (0.66) .03
	Baseline HV	0.09 (0.19) .63	0.66 (0.23) .004	0.17 (0.15) .24
	Change in HV	0.74 (0.27) .007	0.57 (0.33) .08	0.72 (0.21) .001
4	CAD	−2.43 (0.9) .007	−2.23 (1.12) .048	−1.27 (0.71) .08
	Baseline CGM	0.06 (0.15) .68	0.14 (0.18) .42	0.03 (0.11) .82
	Change in CGM	0.09 (0.1) .34	0.17 (0.12) .14	0.08 (0.07) .27
5	CAD	−2.69 (0.85) .002	−2.52 (1.06) .02	−1.51 (0.65) .02
	Change in WMH	−1.27 (0.87) .15	−1.63 (1.09) .14	−2.03 (0.66) .002
	Change in SBI	−0.24 (0.16) .14	—	−0.07 (0.12) .56
	Baseline HV	—	0.68 (0.23) .004	—
	Change in HV	0.53 (0.28) .06	0.45 (0.34) .19	0.49 (0.21) .02

# Summary

- **Vascular risk factors are common among older individuals**
- **In a high vascular risk group**
  - **Vascular brain injury is associated with impaired cognition**
    - **Impact due to extent of cerebral amyloid less prominent**
  - **Vascular risk factors exert effect on cognition when adjusting for vascular and degenerative brain injury**

# Aims

- Evaluate effect of vascular burden on change in cognition in a diverse, community based study
  - Adjusting for:
    - Amyloid Retention
    - Structural MRI

# Methods

- **Cognition measured with Spanish English Neuropsychological Assessment Scale (SENAS)**
  - Memory
  - Executive
- **MRI quantification**
  - Total brain volume
  - Hippocampal volume
  - WMH
- **Amyloid Imaging**
  - PiB DVR

# Vascular Burden

- Risk Factors

- Hypertension
- Diabetes
- High Cholesterol

- Vascular Injury

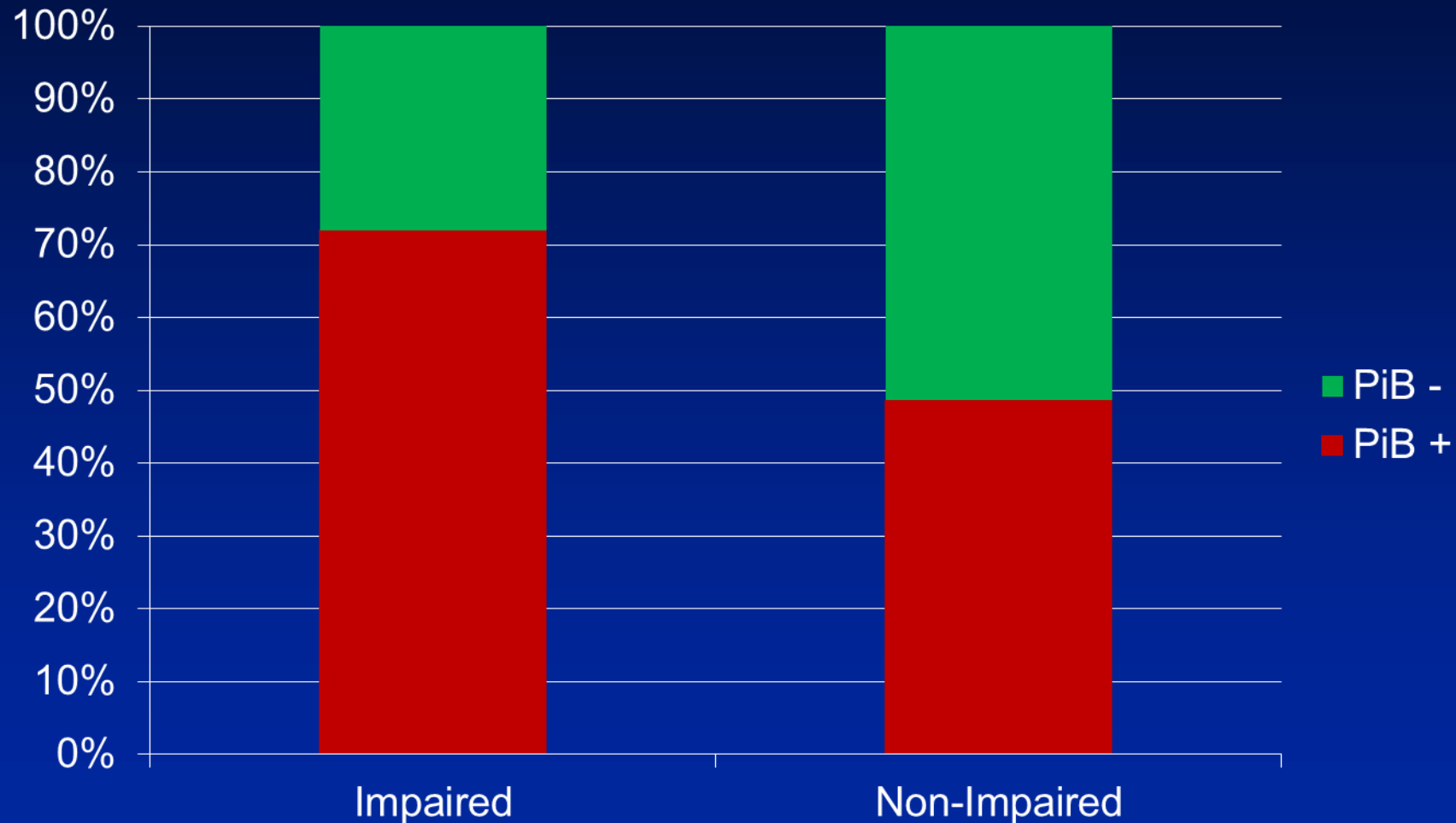
- Coronary Artery Disease
- Stroke /TIA



# Study Cohort

	Normal (N=37)	MCI (N=25)	Demented (N=3)
<b>Years of Observation</b>	5.7 $\pm$ 3.0	3.0 $\pm$ 2.7	4.4 $\pm$ 2.8
<b>Age</b>	72 $\pm$ 7	75 $\pm$ 7	80 $\pm$ 5
<b>Gender (%F)</b>	51%	44%	33%
<b>Ethnicity (% Caucasian)</b>	51%	80%	100%
<b>Education (years)</b>	15 $\pm$ 4	16 $\pm$ 2	17 $\pm$ 4
<b>Vascular Burden (number)</b>	1.7 $\pm$ 1.2	1.7 $\pm$ 1.2	1.3 $\pm$ 1.2
<b>Episodic Memory (SD units)</b>	0.30 $\pm$ 0.81	-0.96 $\pm$ 0.54	-1.24 $\pm$ 0.24
<b>Executive Function (SD units)</b>	0.13 $\pm$ 0.57	-0.07 $\pm$ 0.43	-0.51 $\pm$ 0.45
<b>Brain Volume (%TCV)</b>	77.8 $\pm$ 3.5	76.1 $\pm$ 5.0	72.4 $\pm$ 1.8
<b>Hippocampus (% TCV)</b>	0.30 $\pm$ 0.05	0.23 $\pm$ 0.06	0.19 $\pm$ 0.04
<b>WMH (log %TCV)</b>	-5.6 $\pm$ 1.2	-5.4 $\pm$ 1.0	-5.6 $\pm$ 0.73
<b>Global PiB Index</b>	1.19 $\pm$ 0.22	1.41 $\pm$ 0.36	1.75 $\pm$ 0.17

# Amyloid Positivity by Impairment Category



# Results

	Episodic Memory			Executive Function		
	Estimate	Std Error	P-Value	Estimate	Std Error	P-Value
<b><u>MODEL 1</u></b>						
Time	-0.09	0.20	NS	-0.067	0.022	0.007*
Baseline Age	-0.01	0.014	NS	-0.01	0.01	NS
Education	0.06	0.03	0.04*	0.08	0.02	<.0001*
Impaired	-0.46	0.35	0.0005*	-0.10	0.09	NS
Impaired x Time	0.01	0.081	NS	-0.024	0.018	NS
<b><u>MODEL 2</u></b>						
Global PiB DVR	-0.41	0.35	NS	0.18	0.24	NS
Global PiB DVR x Time	-0.21	0.07	<0.008*	-0.12	0.05	0.03*
<b><u>MODEL 3</u></b>						
Hippocampal Volume	315	138	0.03*	179	95	NS
Hippocampal Volume x Time	8.6	23.4	NS	35.5	17	0.05*
<b><u>MODEL 4</u></b>						
Vascular Burden	-0.12	0.08	NS	-0.17	0.05	0.002*
Vascular Burden x Time	-0.006	0.013	NS	0.01	0.01	NS

# Conclusion I

- **Vascular burden was associated with overall poorer performance on tests of executive function after adjusting for amyloid retention and structural brain differences, even in a cohort with substantial amyloid burden**
  - **Cause is uncertain and may reflect direct toxicity (e.g. diabetes) or increased inflammation or other unidentified process**

# Associations of Circulating Growth Differentiation Factor-15 and ST2 Concentrations With Subclinical Vascular Brain Injury and Incident Stroke

Charlotte Andersson, MD, PhD; Sarah R. Preis, ScD; Alexa Beiser, PhD; Charles DeCarli, MD; Kai C. Wollert, MD; Thomas J. Wang, MD; James L. Januzzi Jr, MD; Ramachandran S. Vasan, MD; Sudha Seshadri, MD

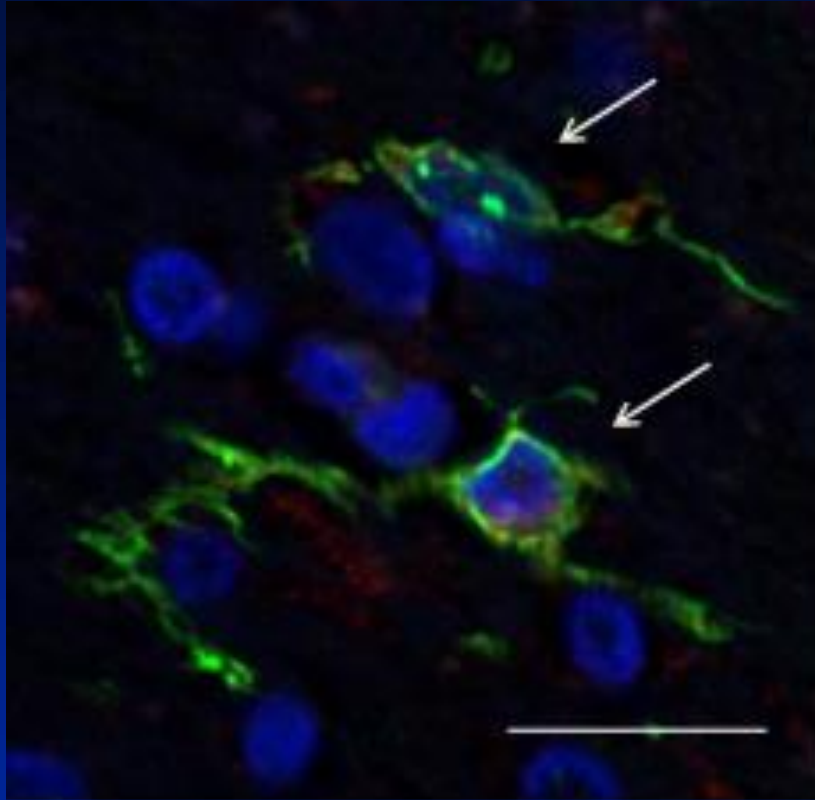
***Stroke*. 2015;46:00-00. DOI: 10.1161/STROKEAHA.115.009026**

Outcome	Biomarker	Effect	Model 1, n=2127*		Model 2, n=2083†		Model 3, n=1745‡	
			$\beta$ (SE)	P Value	$\beta$ (SE)	P Value	$\beta$ (SE)	P Value
Total cerebral brain volume	GDF-15§	Continuous	−1.25 (0.18)	<0.0001	−1.01 (0.19)	<0.0001	−0.86 (0.21)	<0.0001
		Quartiles						
		Q1	0.00 (ref)	...	0.00 (ref)	...	0.00 (ref)	...
		Q2	−0.24 (0.17)	0.15	−0.24 (0.17)	0.16	−0.064 (0.18)	0.73
		Q3	−0.40 (0.18)	0.03	−0.31 (0.19)	0.10	−0.15 (0.21)	0.48
		Q4	−1.18 (0.20)	<0.0001	−0.97 (0.21)	<0.0001	−0.71 (0.23)	0.002
		Test for linear trend	...	<0.0001	...	<0.0001	...	0.004
	sST2§	Continuous	−0.77 (0.19)	<0.0001	−0.58 (0.19)	0.002	−0.40 (0.20)	0.05
		Quartiles						
		Q1	0.00 (ref)	...	0.00 (ref)	...	0.00 (ref)	...
		Q2	−0.21 (0.17)	0.21	−0.10 (0.17)	0.54	−0.010 (0.18)	0.96
		Q3	−0.32 (0.17)	0.07	−0.20 (0.17)	0.24	−0.073 (0.19)	0.70
		Q4	−0.82 (0.18)	<0.0001	−0.65 (0.18)	0.0004	−0.47 (0.20)	0.02
		Test for linear trend	...	<0.0001	...	0.0005	...	0.02

# Inflammation and Cognition

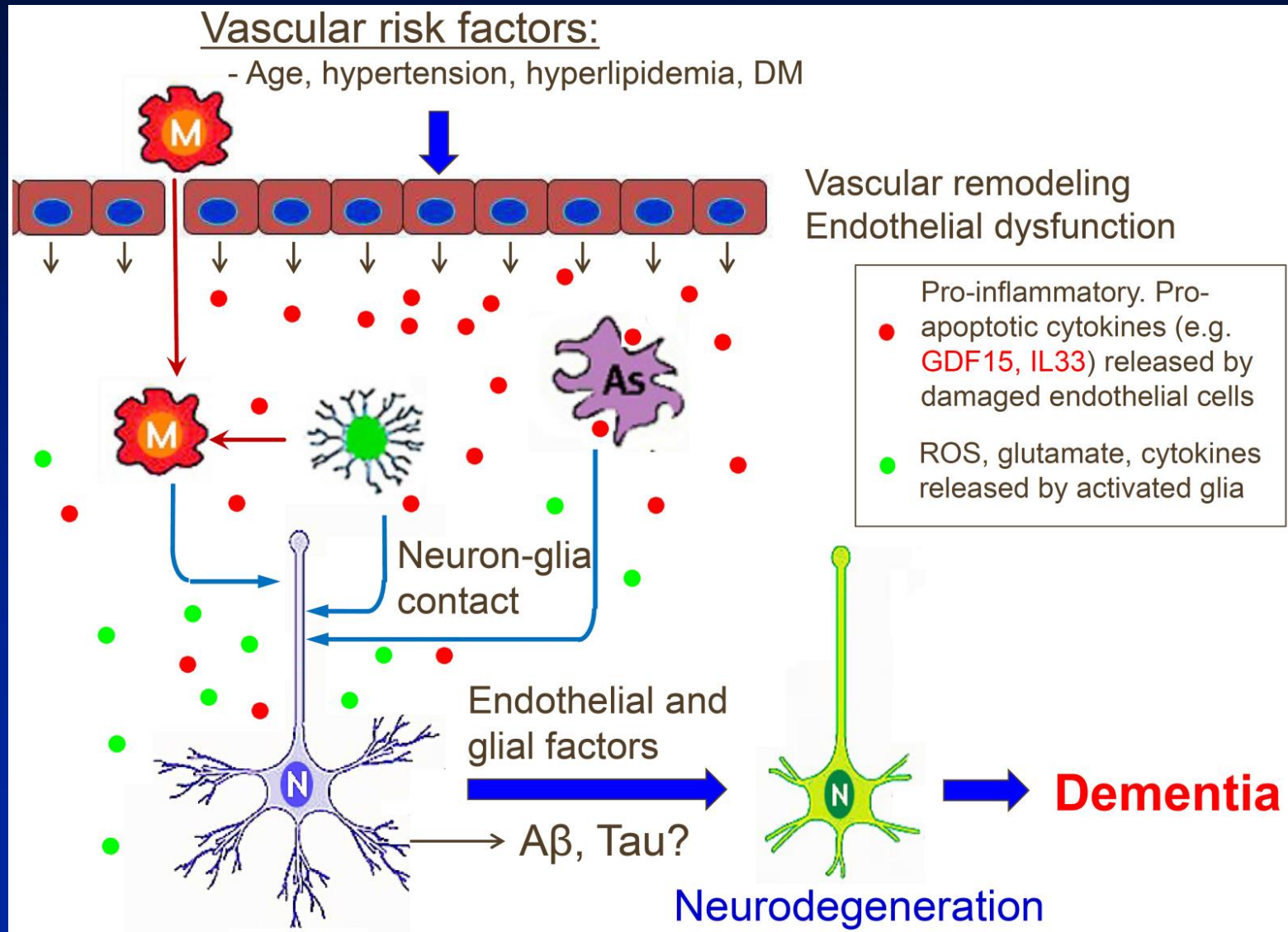
Outcome	Biomarker	Effect	Model 1, n=2463*		Model 2, n=2397†		Model 3, n=2008‡	
			$\beta$ (SE)	P Value	$\beta$ (SE)	P Value	$\beta$ (SE)	P Value
Visual reproductions delayed	GDF-15§	Continuous	−0.78 (0.19)	<0.0001	−0.57 (0.20)	0.004	−0.49 (0.21)	0.02
		Quartiles						
		Q1	0.00 (ref)	...	0.00 (ref)	...	0.00 (ref)	...
		Q2	−0.33 (0.17)	0.05	−0.33 (0.17)	0.06	−0.40 (0.19)	0.03
		Q3	−0.41 (0.18)	0.03	−0.30 (0.19)	0.12	−0.40 (0.21)	0.06
		Q4	−0.93 (0.21)	<0.0001	−0.78 (0.22)	0.0003	−0.62 (0.24)	0.009
		Test for linear trend	...	<0.0001	...	0.001	...	0.01
	sST2§	Continuous	−0.59 (0.19)	0.002	−0.47 (0.19)	0.02	−0.41 (0.20)	0.04
		Quartiles						
		Q1	0.00 (ref)	...	0.00 (ref)	...	0.00 (ref)	...
		Q2	−0.14 (0.17)	0.39	−0.12 (0.17)	0.49	−0.19 (0.18)	0.30
		Q3	−0.16 (0.18)	0.37	−0.11 (0.18)	0.52	−0.08 (0.19)	0.67
		Q4	−0.49 (0.18)	0.008	−0.38 (0.19)	0.04	−0.40 (0.20)	0.048
		Test for linear trend	...	0.01	...	0.06	...	0.10

# GDF-15 in Brain



**Immunostaining of human cortex from individual who had mixed dementia (AD+vascular dementia).** Blue=cell nuclei stained with DAPI. Green=microglia stained with IBA-1. Red =immunostaining for GDF15. Colocalization of GDF15 is noted in microglia (arrows). Bar = 20um.

# Model of Inflammation and Brain Pathology in Aging





# Conclusions II

- Aging and atherosclerosis lead to increasing inflammation
- Inflammation can lead to brain injury and cognitive decline independent of vascular risk factors
- Inflammation may lead to microglial activation with release of harmful cytokines



## **IDeA Lab**

- **Owen Carmichael\***
- **Evan Fletcher**
- **Pauline Maillard**
- **Baljeet Singh**
- **Noel Smith**
- **Oliver Martinez**

Supported by NIH, State of California and the Alzheimer's Association

\*Biomedical Imaging Center, Pennington Biomedical Research Center