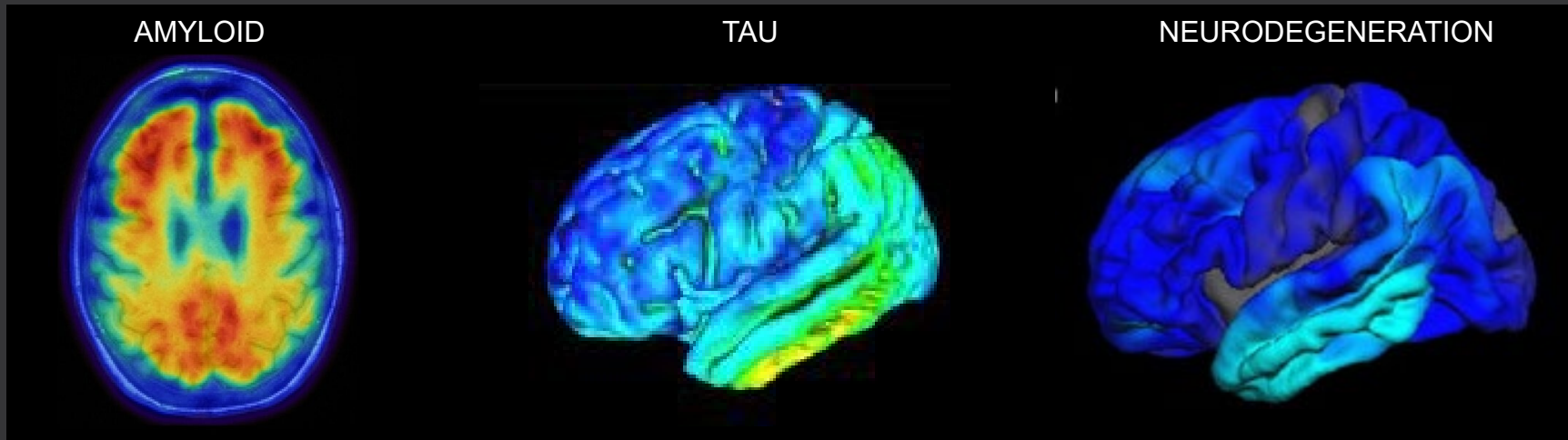
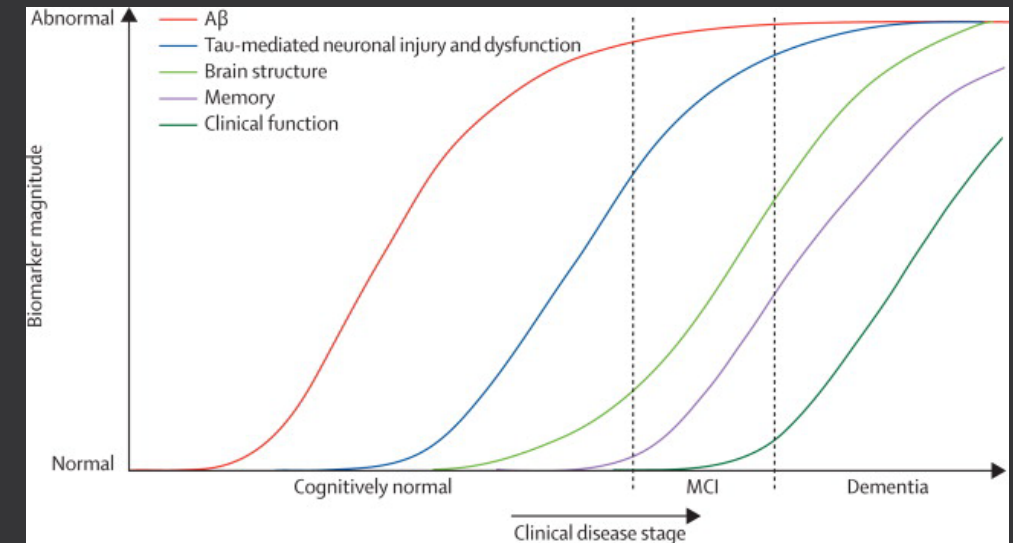


# “ATN” triple brain imaging to better understand and detect Alzheimer’s disease

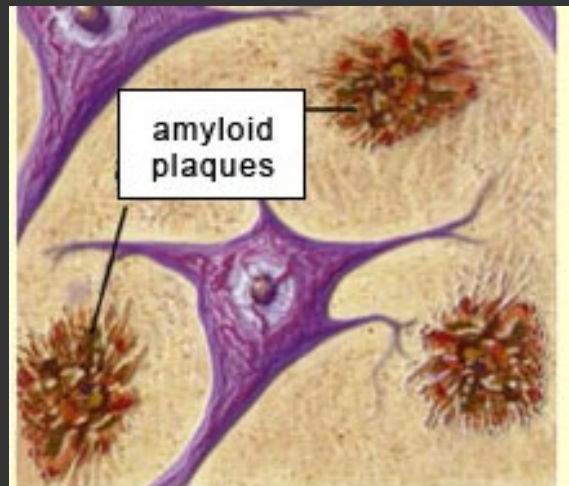


# Alzheimer's disease

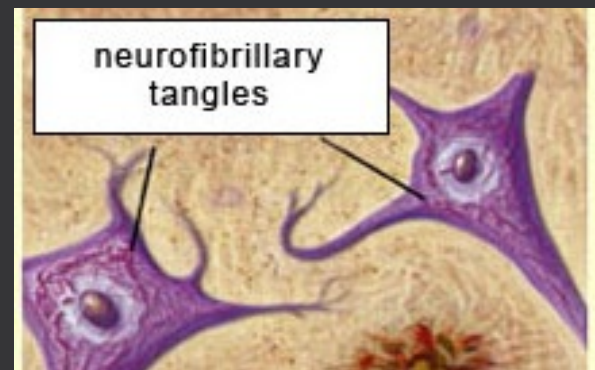
- Alzheimer's disease (AD) is characterized clinically by decline in memory and other cognitive functions.
- AD is defined biologically by amyloid plaques (A), tau tangles (T), and neurodegeneration (N).
- Because biological changes precede clinical symptoms, detecting “ATN” is crucial for early diagnosis and effective treatment.



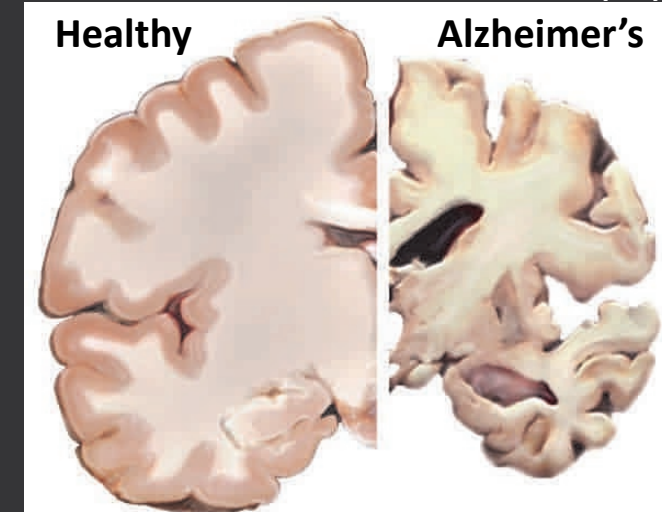
## AMYLOID (A)



## TAU (T)



## NEURODEGENERATION (N)



Decades

Years

Symptoms

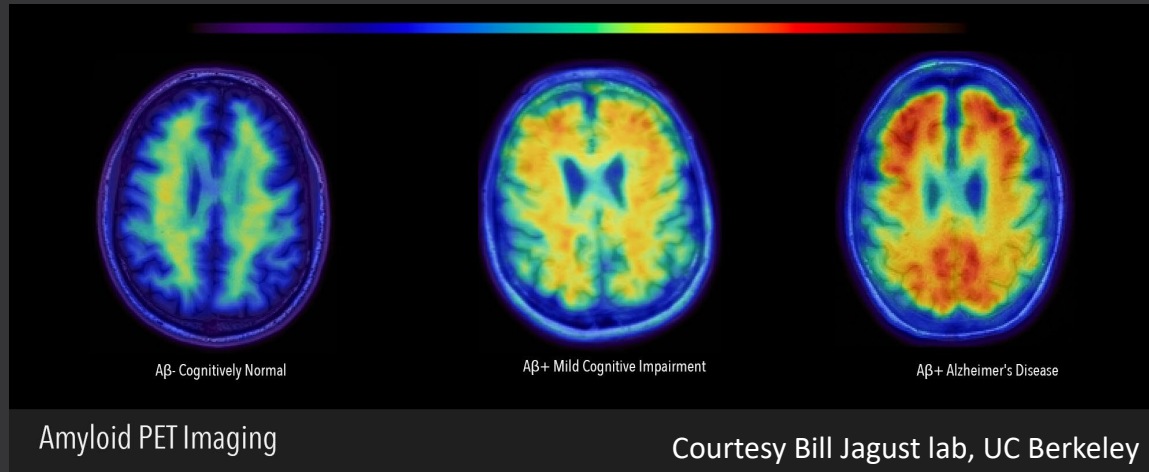
# Measuring “ATN”

|                            | Measure  | Method   | Pro  | Con                                     |
|----------------------------|--|--|--|---|
| <b>Cerebrospinal fluid</b> | A: amyloid- $\beta$ 42/40<br>T: phosphorylated tau<br>N: neurofilament light                     | Lumbar puncture  | Directly measures brain proteins   | Requires lumbar puncture                |
| <b>Plasma</b>              | A: phosphorylated tau-217;<br>amyloid- $\beta$ 42/40<br>T: MTBR-tau243<br>N: neurofilament light | Blood draw   | Inexpensive<br>Non-invasive  | Indirect                                |
| <b>Brain imaging</b>       | A: Amyloid PET<br>T: Tau PET<br>N: MRI   | <u>MRI</u> : Strong magnetic field creates pictures of brain<br><br><u>PET</u> : Radioactive tracer binds to protein of interest | Directly measures brain structure & proteins<br><br>Shows where in the brain | Expensive<br><br>PET involves radiation |

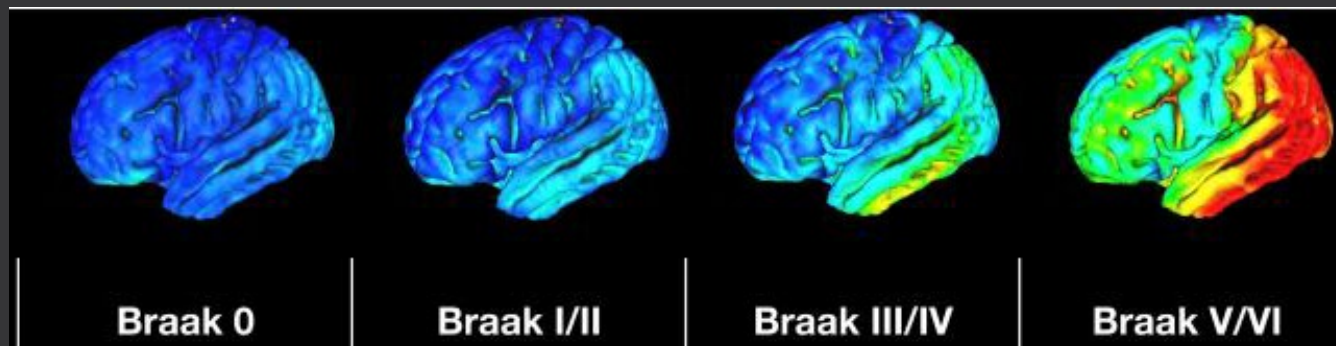
- MRI (magnetic resonance imaging) and PET (positron emission tomography) provide a direct picture of regional brain changes.

# ATN neuroimaging

## Amyloid PET

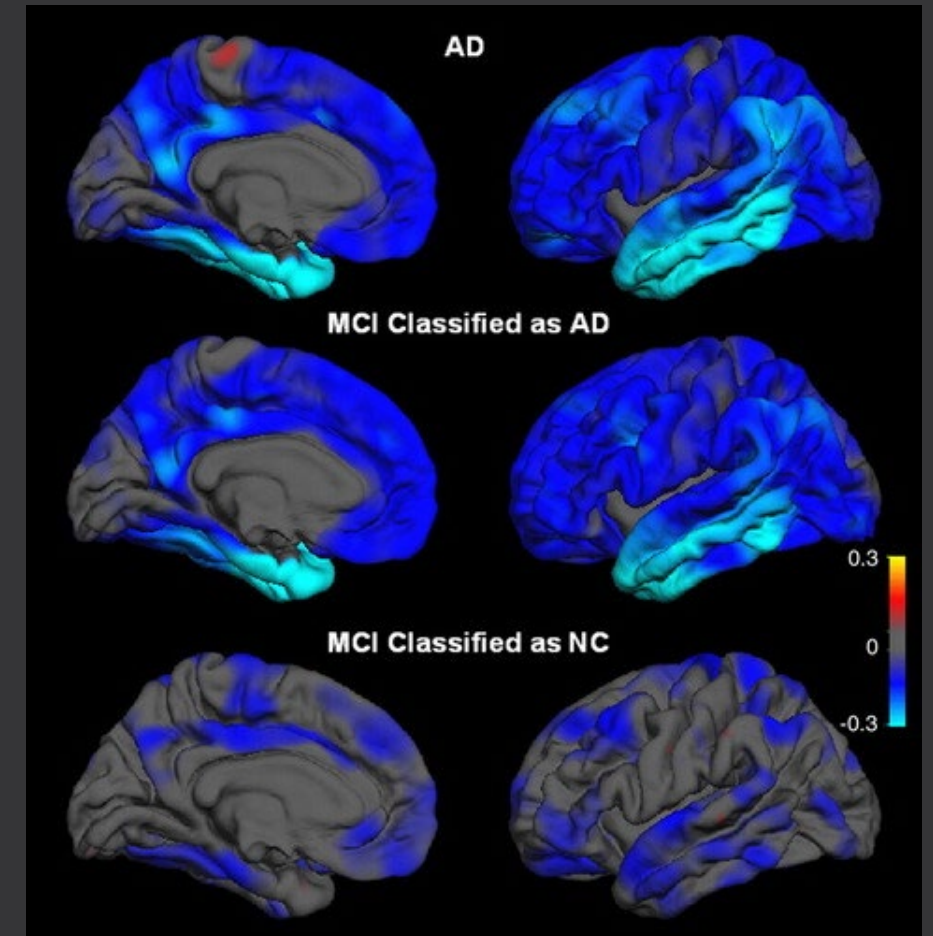


## Tau PET



Scholl et al. (2016) *Neuron*

## MRI

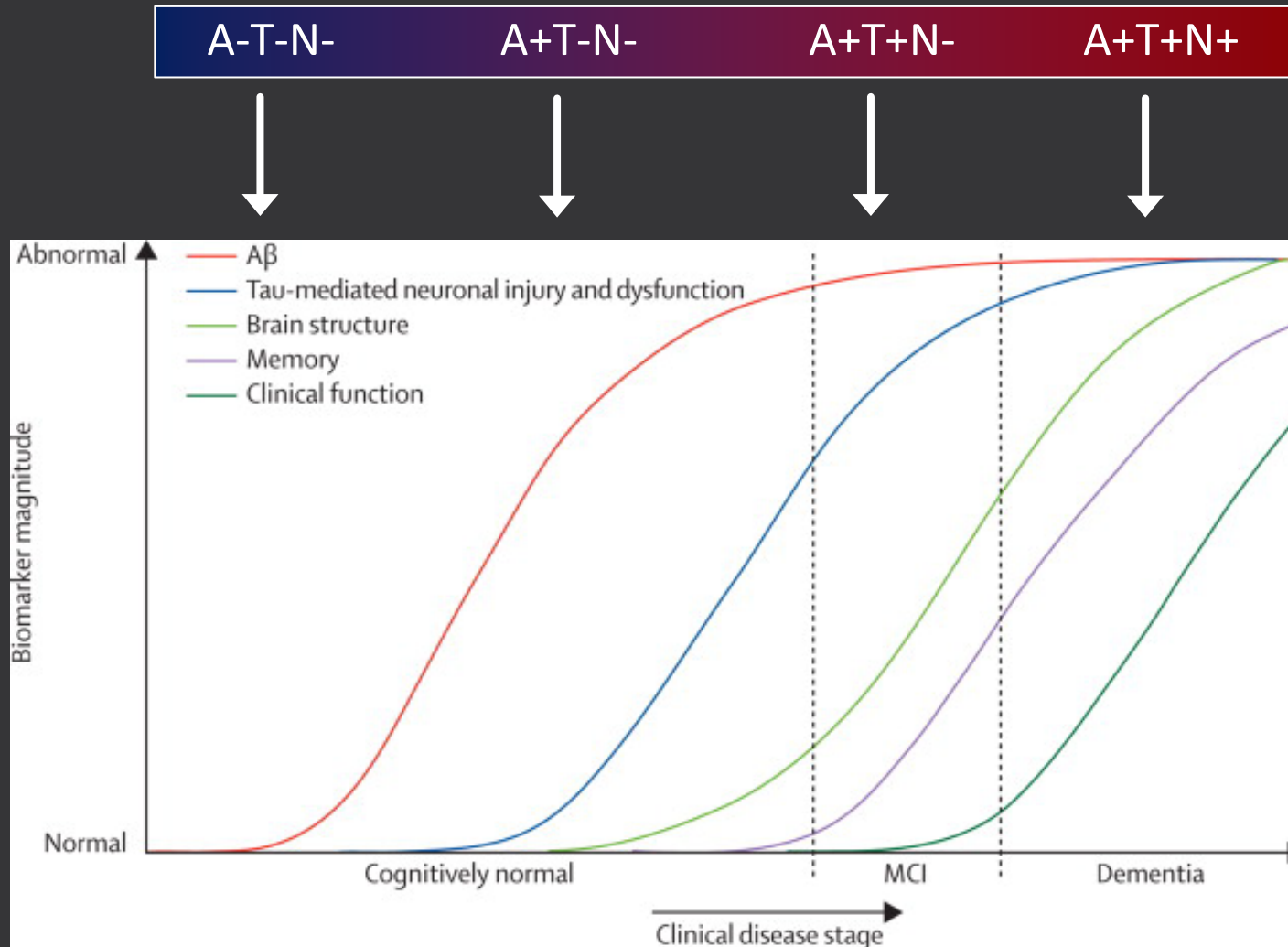


McEvoy et al. (2009) *Radiology*



# ATN neuroimaging applications:

*Detecting and staging Alzheimer's disease*



# ATN neuroimaging applications:

## *Understanding Alzheimer's disease*

Comparing ATN markers to other measures (cognitive, clinical, fluid, imaging, post-mortem) helps us better understand:

### Risk factors:

- How do modifiable or non-modifiable factors influence AD risk?
  - *APOE4*, sex, race/ethnicity, vascular and cardiometabolic disorders, sleep, physical activity, hearing loss, etc

### Copathologies:

- Do other neuropathological changes interact with amyloid or tau to influence dementia risk?
  - alpha-synuclein, TDP-43, cerebrovascular disease

### Disease heterogeneity:

- Spatial patterns of amyloid, tau, and neurodegeneration can reveal AD subtypes, that differ in clinical time-course, and relationships with risk factors and clinical outcomes.
  - Women sustain more tau before showing cognitive decline (*Digma et al, Brain, 2020*)
  - Black, Hispanic, and Asian individuals have greater cognitive impairment at lower levels of AD pathology (*Wilkins et al, JAMA Neurology, 2022*)
  - Different spatial patterns of tau and neurodegeneration correspond with different symptoms (*Vogel et al, Nature Medicine, 2021; ten Kate et al, Brain, 2018*)

# ATN neuroimaging applications:

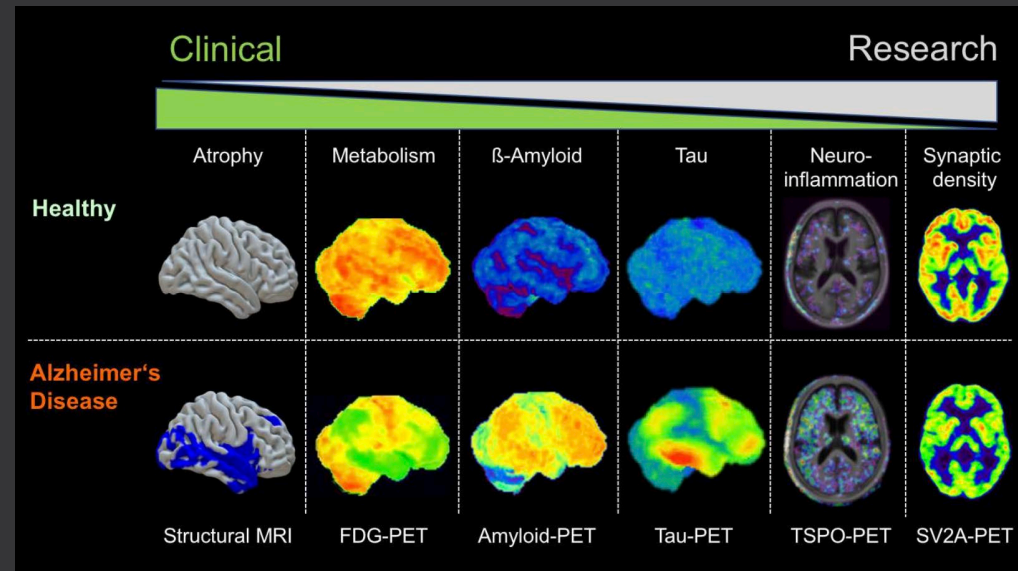
## *Developing new Alzheimer's disease biomarkers*

Using MRI and PET as the gold standard supports development of *less expensive, more convenient* ATN biomarkers.

e.g.. Plasma phosphorylated tau and neurofilament light

ATN neuroimaging can help develop biomarkers of other processes that contribute to, or interact with, amyloid, tau and neurodegeneration.

- Blood-brain barrier dysfunction (dynamic contrast-enhanced MRI)
- Brain blood flow (arterial spin labeling)
- White matter lesions (FLAIR MRI)
- Microstructural damage (diffusion MRI)
- Brain clearance (glymphatic MRI)
- Brain metabolism (FDG PET)
- Brain inflammation (GFAP, TSPO PET)
- Synapse loss (CSF markers, SV2A PET)



# ATN neuroimaging applications:

## *Developing Alzheimer's disease treatments*

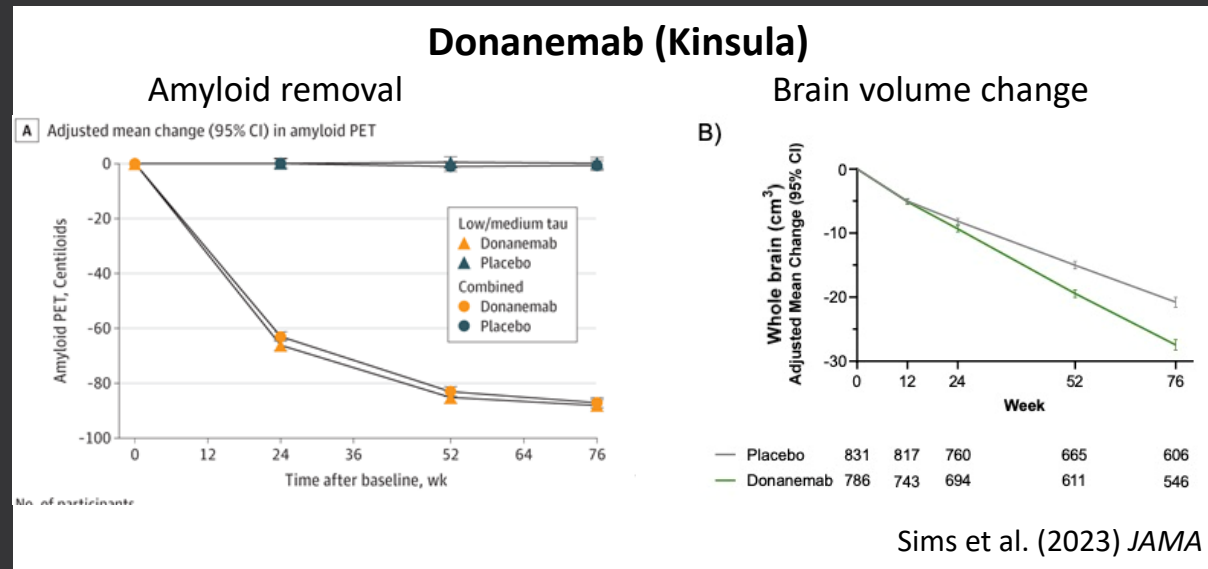
ATN neuroimaging is critical in AD clinical trials:

### Participant selection:

- For drugs targeting amyloid or tau, PET can identify individuals with increased levels.
- Some drugs work best at specific disease stages; ATN imaging can identify individuals at the right stage.

### Treatment efficacy:

- Did the drug remove amyloid or tau, or slow neurodegeneration?





# Risks and contraindications of ATN neuroimaging

## MRI

- Large magnetic field (no radiation)
- No metal implants / pacemakers
- Possible claustrophobia, anxiety, exposure to loud noise



## PET

- Low levels of radiation equivalent to ~6 years natural environmental exposure
- Injection of radiotracer may be associated with mild pain, light-headedness, bruising, or headache



# Will I find out my results?

*If you choose, you can receive:*

| Test                               | Results shared                                   |
|------------------------------------|--|
| <b>Amyloid and tau PET</b>         | Abnormally elevated proteins, or normal for age  |
| <b>MRI</b>                         | Abnormal brain finding<br>CD of brain images     |
| <b>Memory &amp; thinking tests</b> | Summary of results                               |
| <b>Lumbar puncture</b>             | Abnormally elevated cerebrospinal fluid proteins |

# How do I participate?

For study questions, screening, and enrollment:

- Nichol Ferng (ADRC study coordinator; [nferng@health.ucsd.edu](mailto:nferng@health.ucsd.edu))
- Christina Gigliotti (Manager of Clinical Operations; [cgigliotti@health.ucsd.edu](mailto:cgigliotti@health.ucsd.edu))
- Emilie Reas (ADRC Biomarker Core Co-leader; [ereas@health.ucsd.edu](mailto:ereas@health.ucsd.edu))

## THANK YOU!

*UCSD Shiley-Marcos ADRC participants*

**UC San Diego**  
SCHOOL OF MEDICINE  
SHILEY-MARCOS ALZHEIMER'S  
DISEASE RESEARCH CENTER