

Crossing the Line: The Challenges
& Controversies in Finding a Cure
for Alzheimers

Danielle Morgan
Literature Talk
10th January, 2025

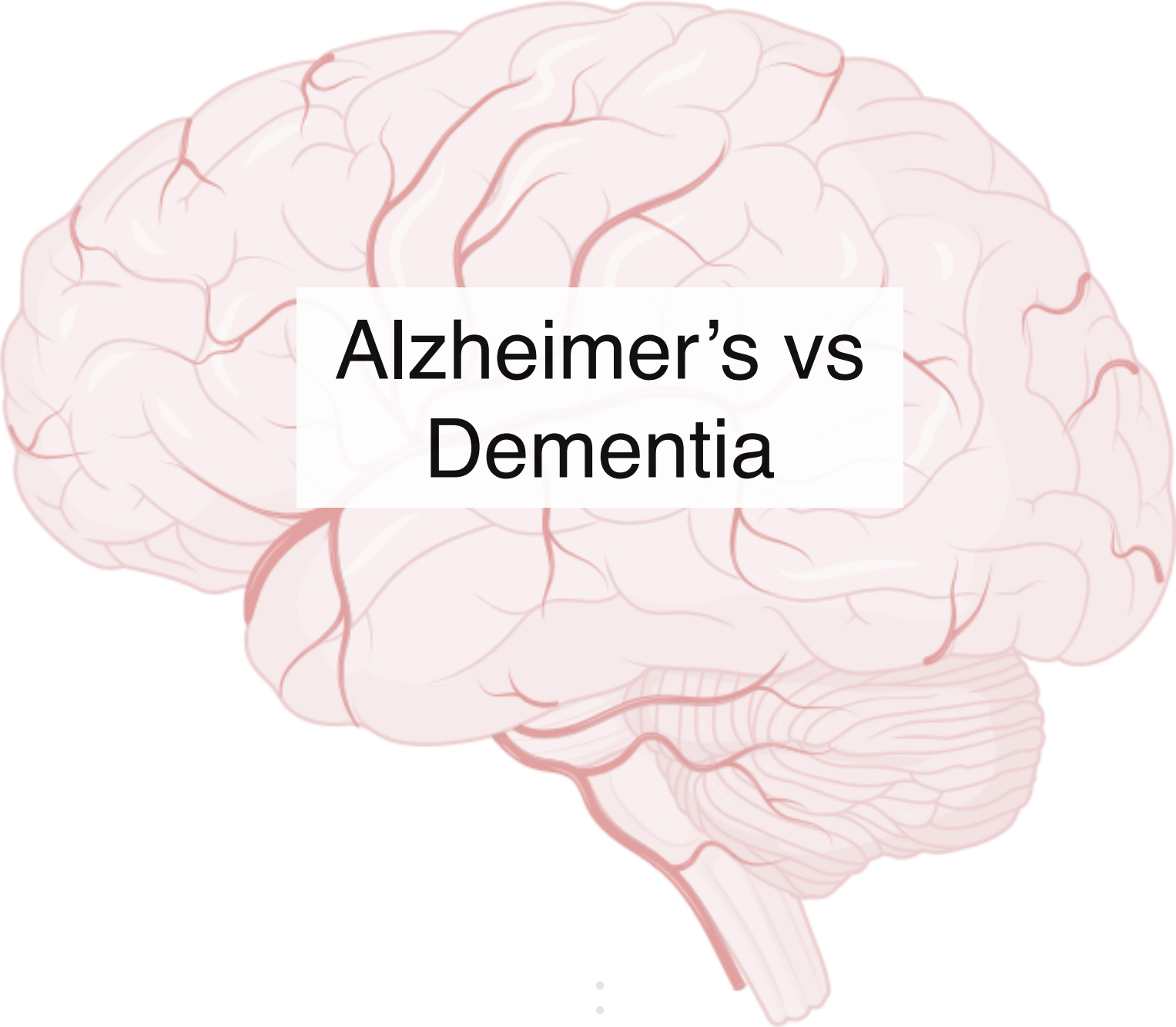


Alzheimer's vs Dementia

Dementia....

cognitive **symptoms** associated with neurological diseases

e.g. memory loss, confusion etc..



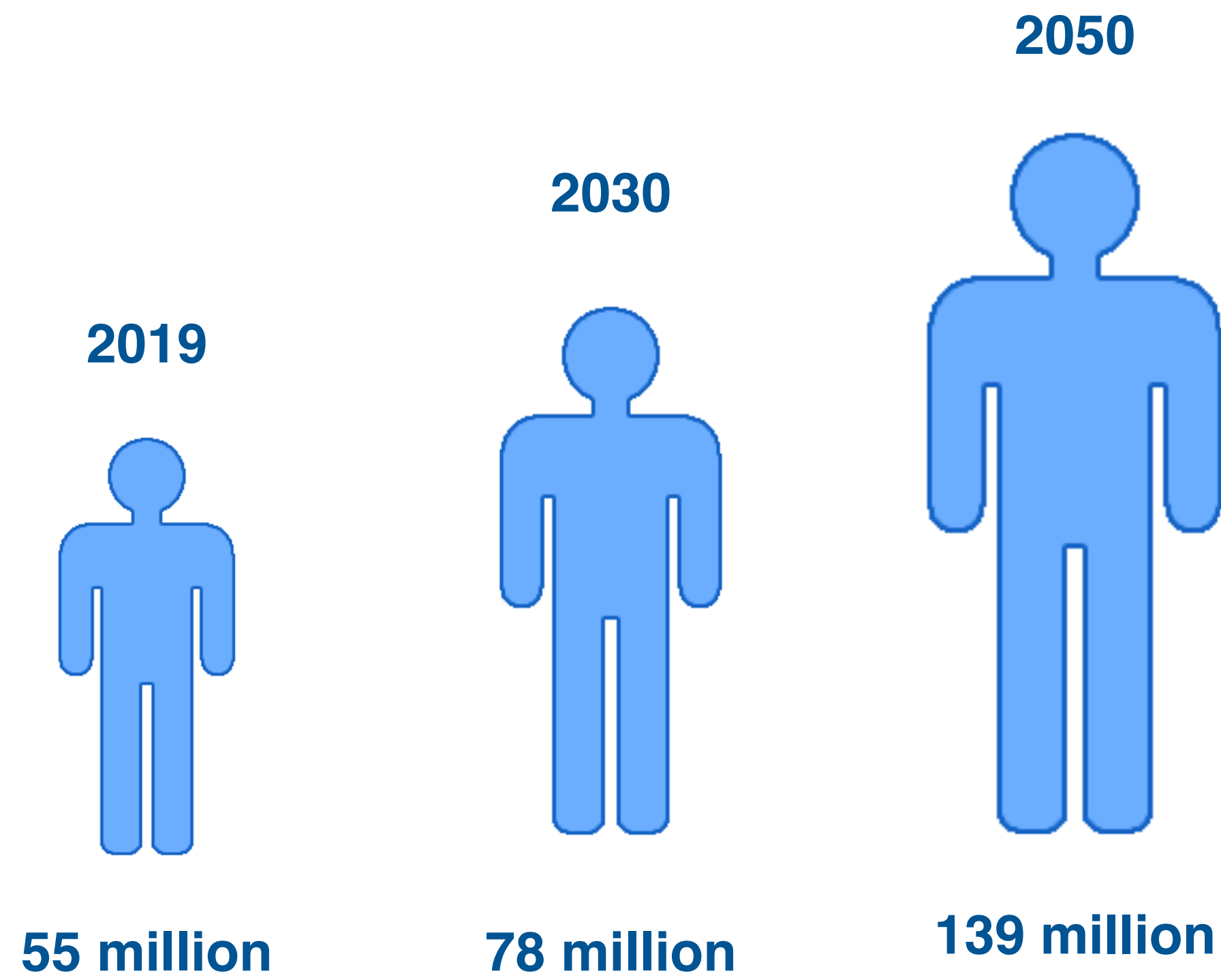
Alzheimer's vs
Dementia

Alzheimer's....

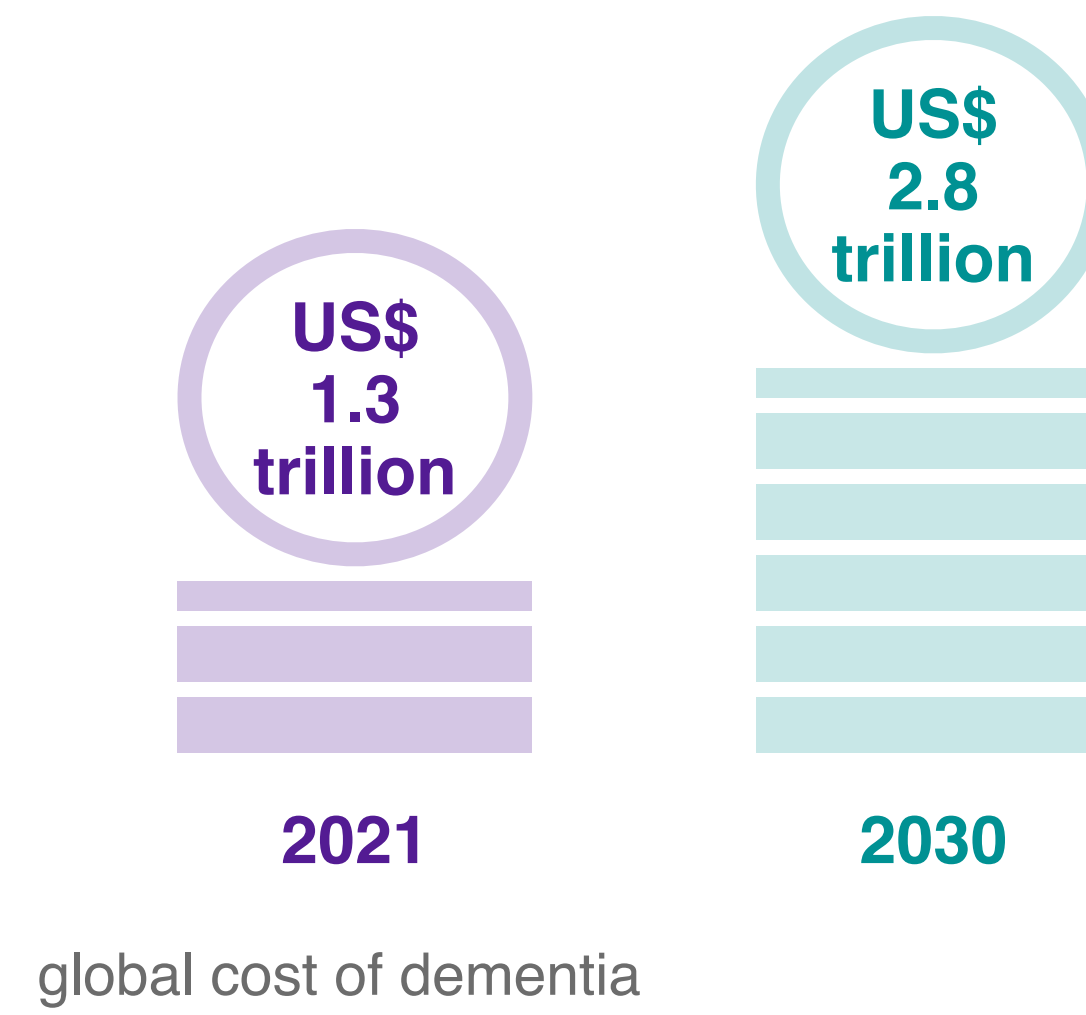
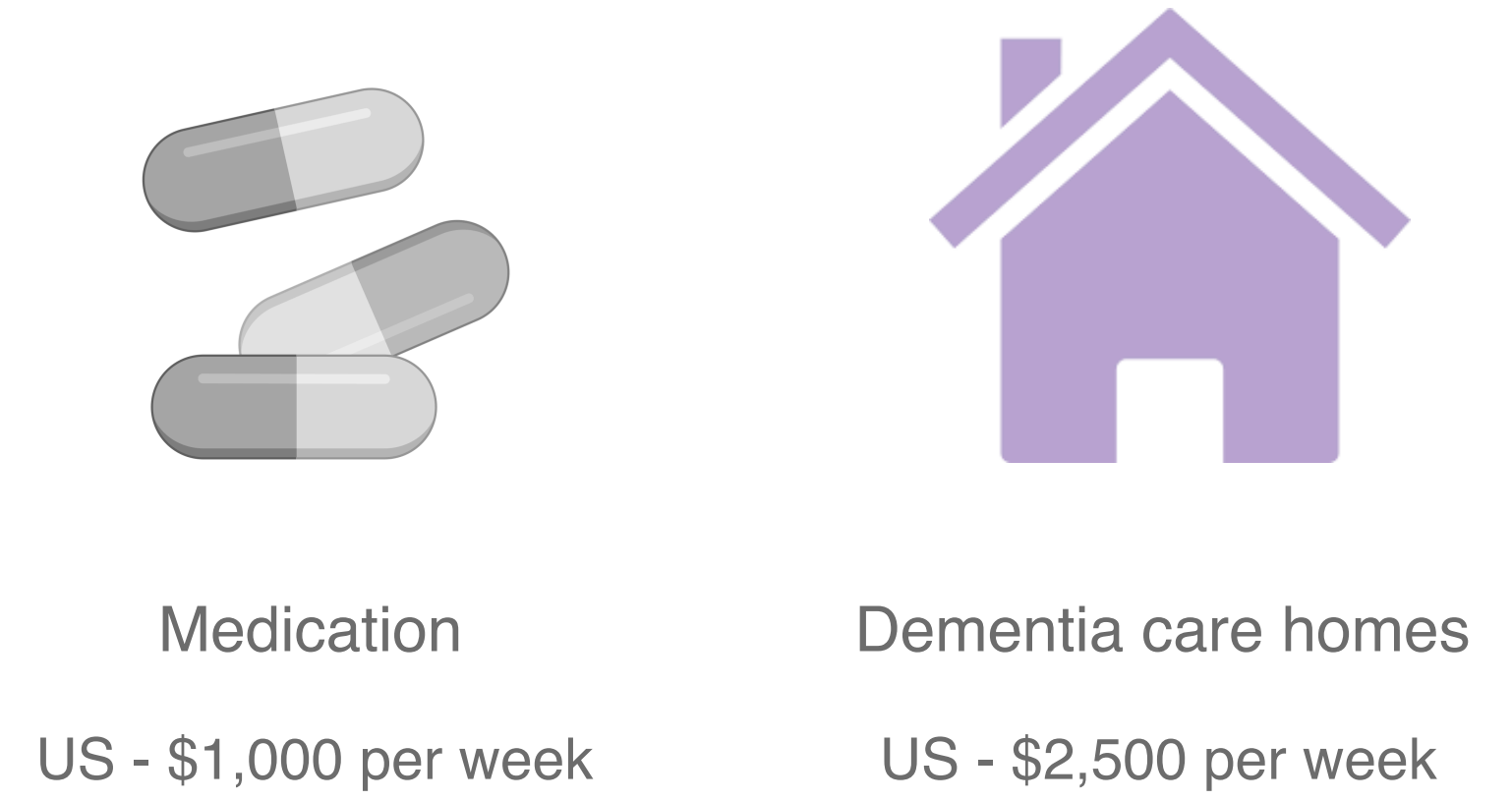
specific neurological **disease** with dementia symptoms

60-80% of dementia cases are related to Alzheimer's disease

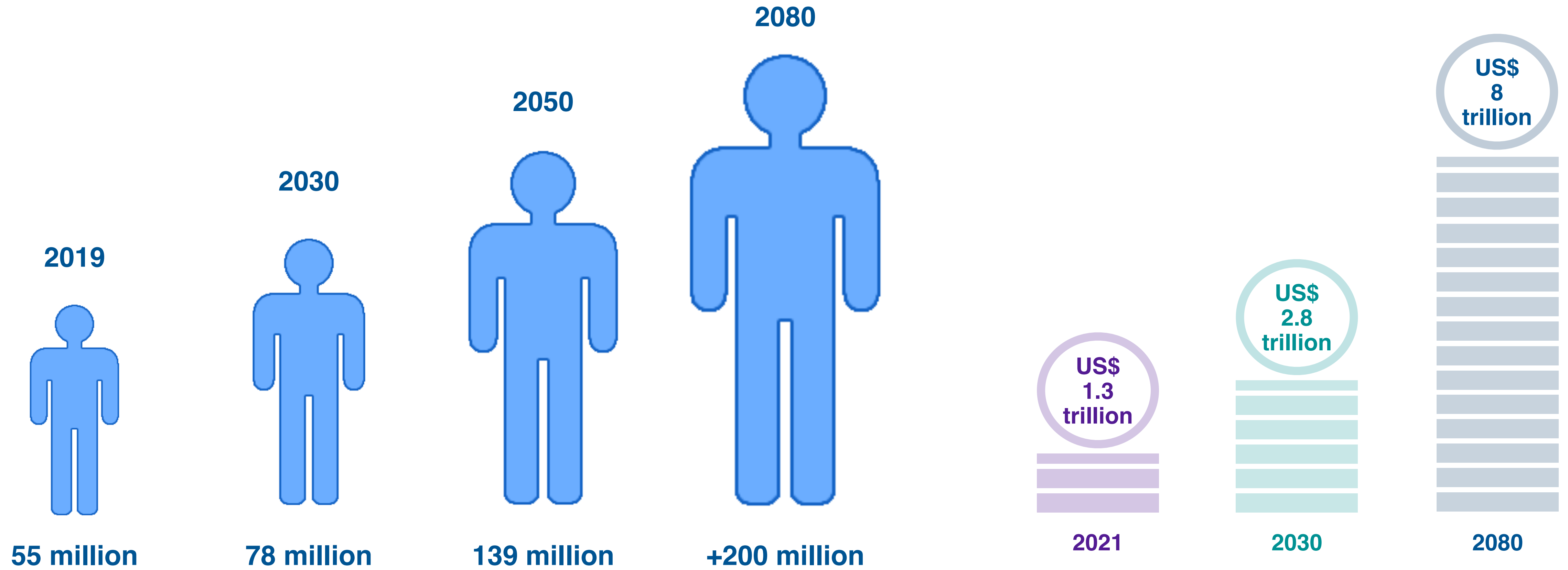
Global impact of Alzheimers



global no. of people with Alzheimer's



Global impact of Alzheimers



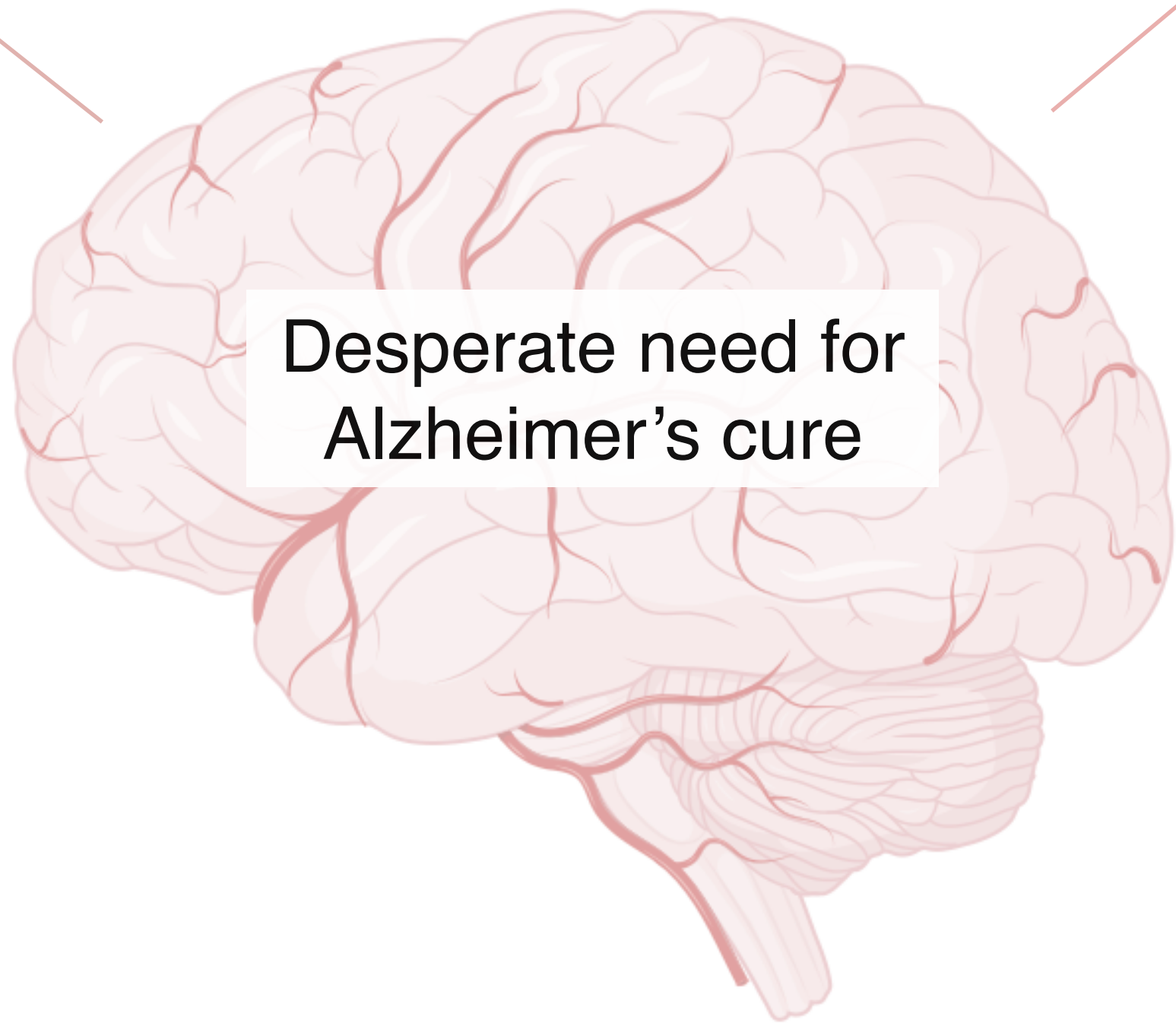
global no. of people with Alzheimer's

global cost of dementia

Only **8 FDA-approved** Alzheimer's drugs (mildly manage symptoms)

NIH - US\$3.98 billion budget for 2026 funding

Extremely expensive for Pharma companies to bring drugs to market



Desperate need for Alzheimer's cure

Failure rate of Alzheimer's drugs in clinical trials is ~ **99%**

(1906 - now)
No cure for Alzheimer's - only treatments for symptoms

Talk outline

Part I

- History of Alzheimer's - Alois Alzheimer
- Alzheimer's disease causing hypotheses

Part II

- Alzheimer's drug treatment strategies
- Clinical case studies (controversial FDA approvals)

Part III

- Outlook & future directions - how are Pharma companies tackling Alzheimer's

History of Alzheimers - Alois Alzheimer



Alois Alzheimer
(1864 – 1915)



Bavaria
1901

Auguste
died
1906

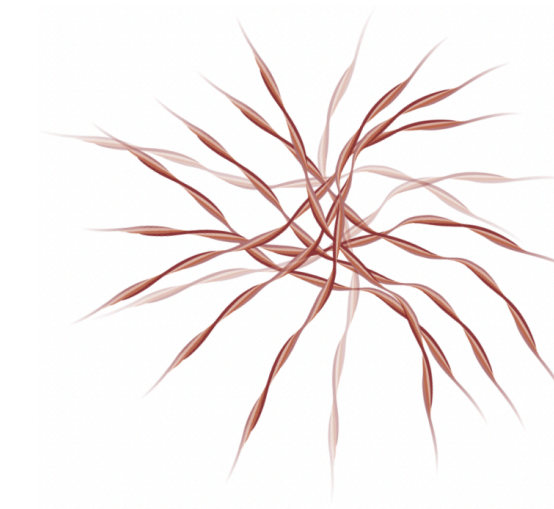
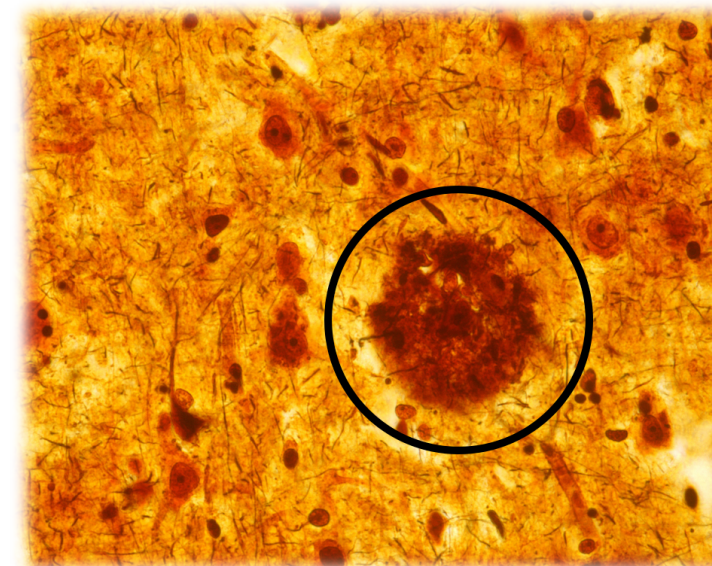
medical
conference
1907

A β plaques &
Tau tangles
widely accepted
mid-1900s

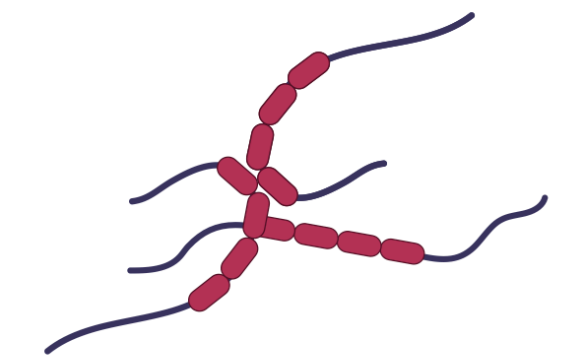
present day



Auguste Deter



A β plaques

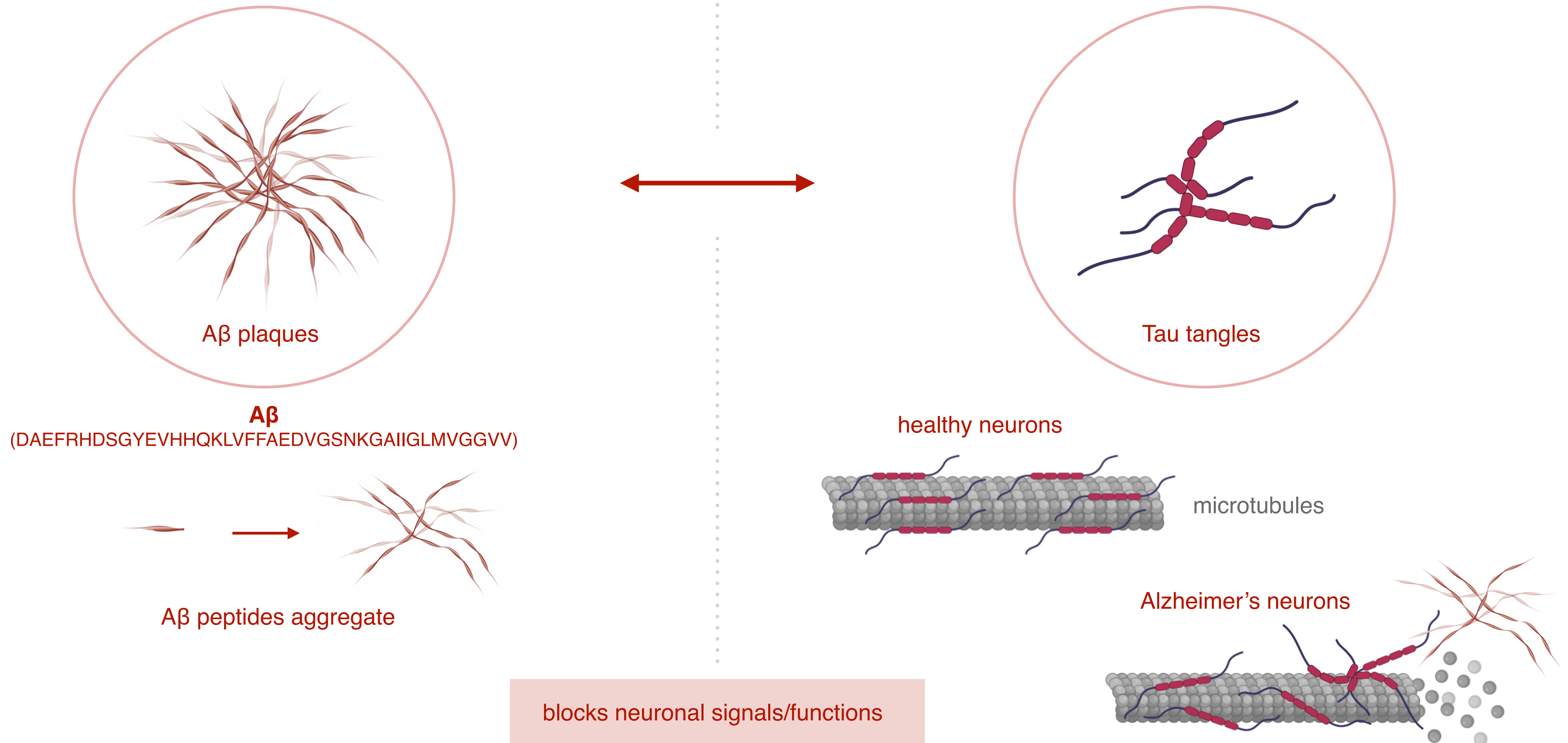


Tau tangles

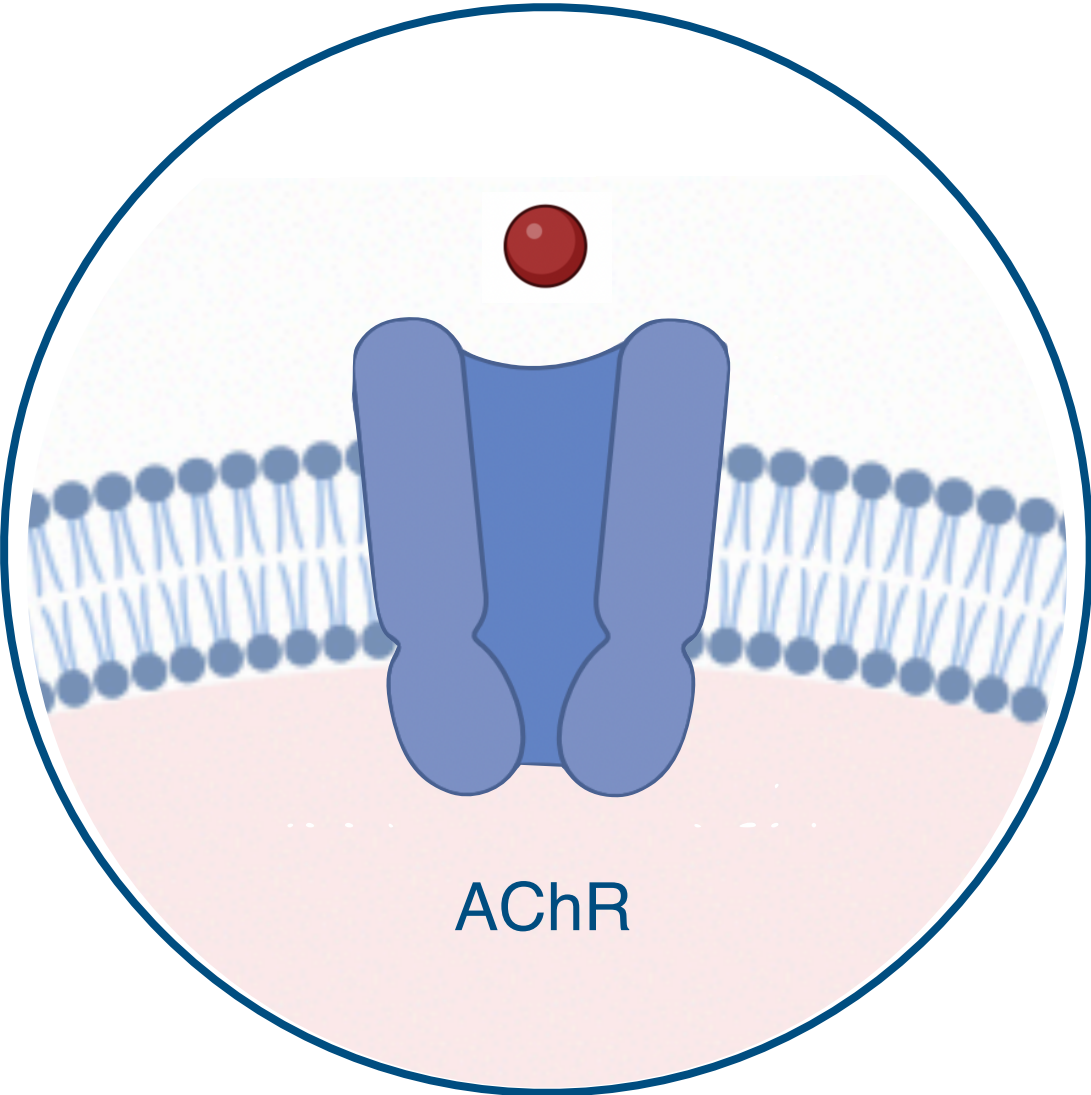
observations: memory loss, confusion, and behavioral changes

postmortem: “unusual plaques & tangles in the brain tissue”

Amyloid Beta (A β) & Tau tangles hypotheses



Cholinergic hypothesis



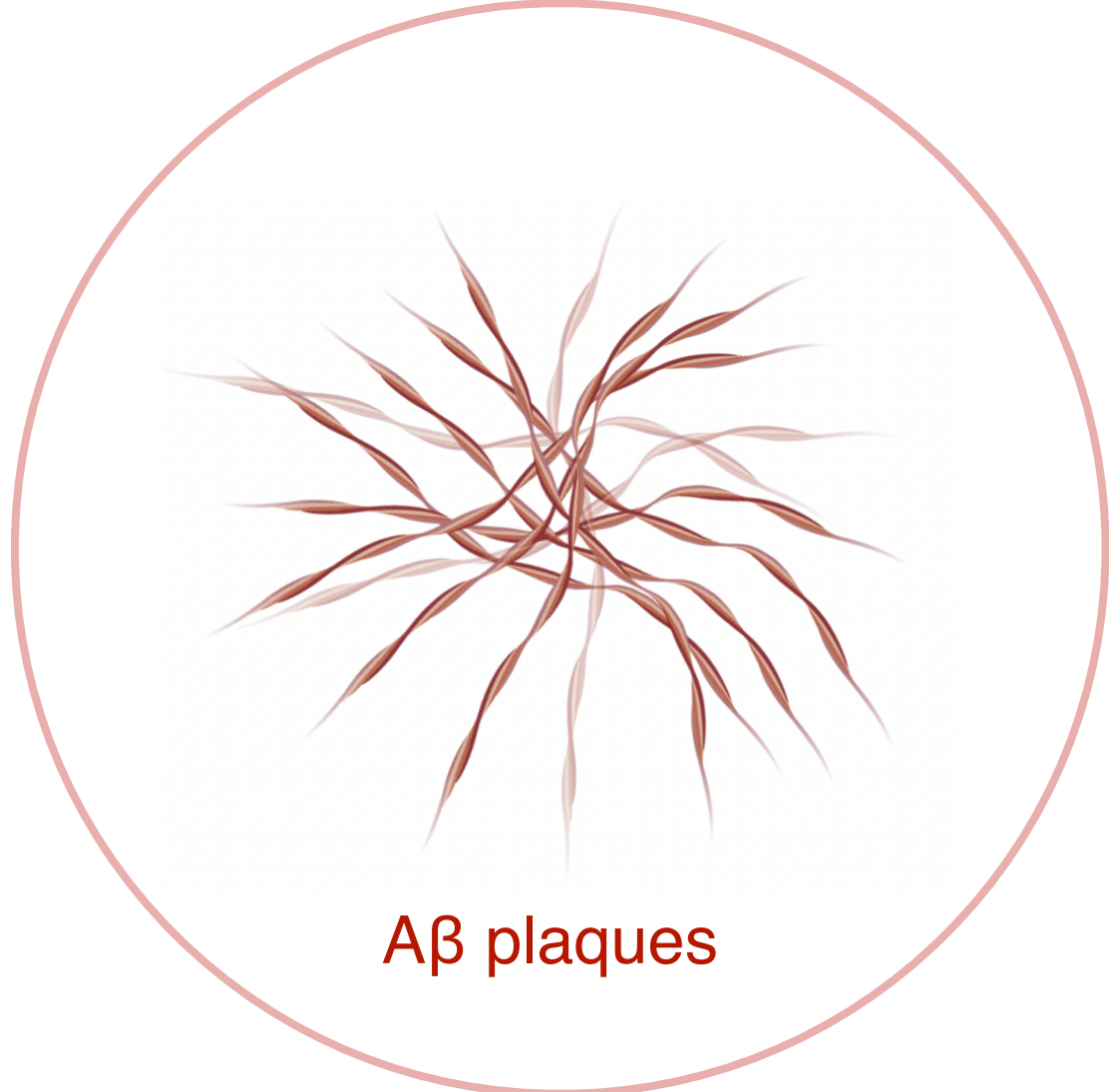
AChR

1970s

reduced synthesis of acetylcholine in AD patients

reduces neuronal signals/functions

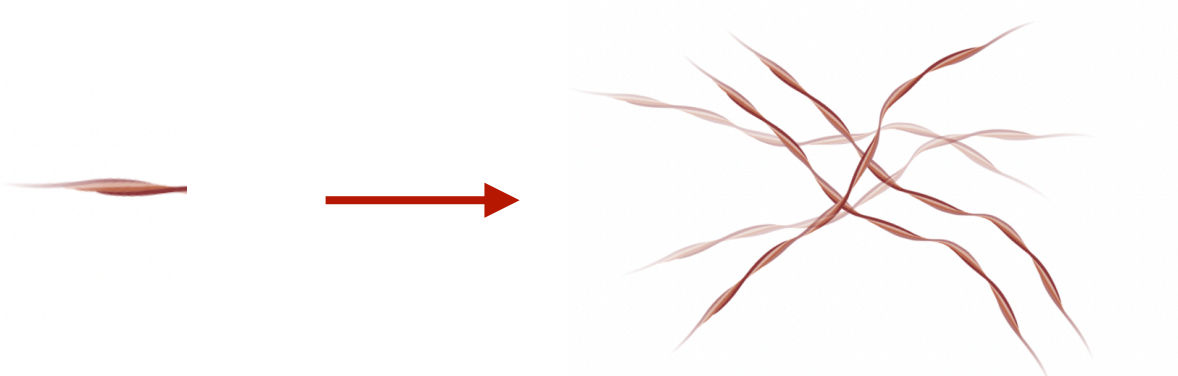
Amyloid Beta (Aβ) & Tau tangles hypotheses



Aβ plaques

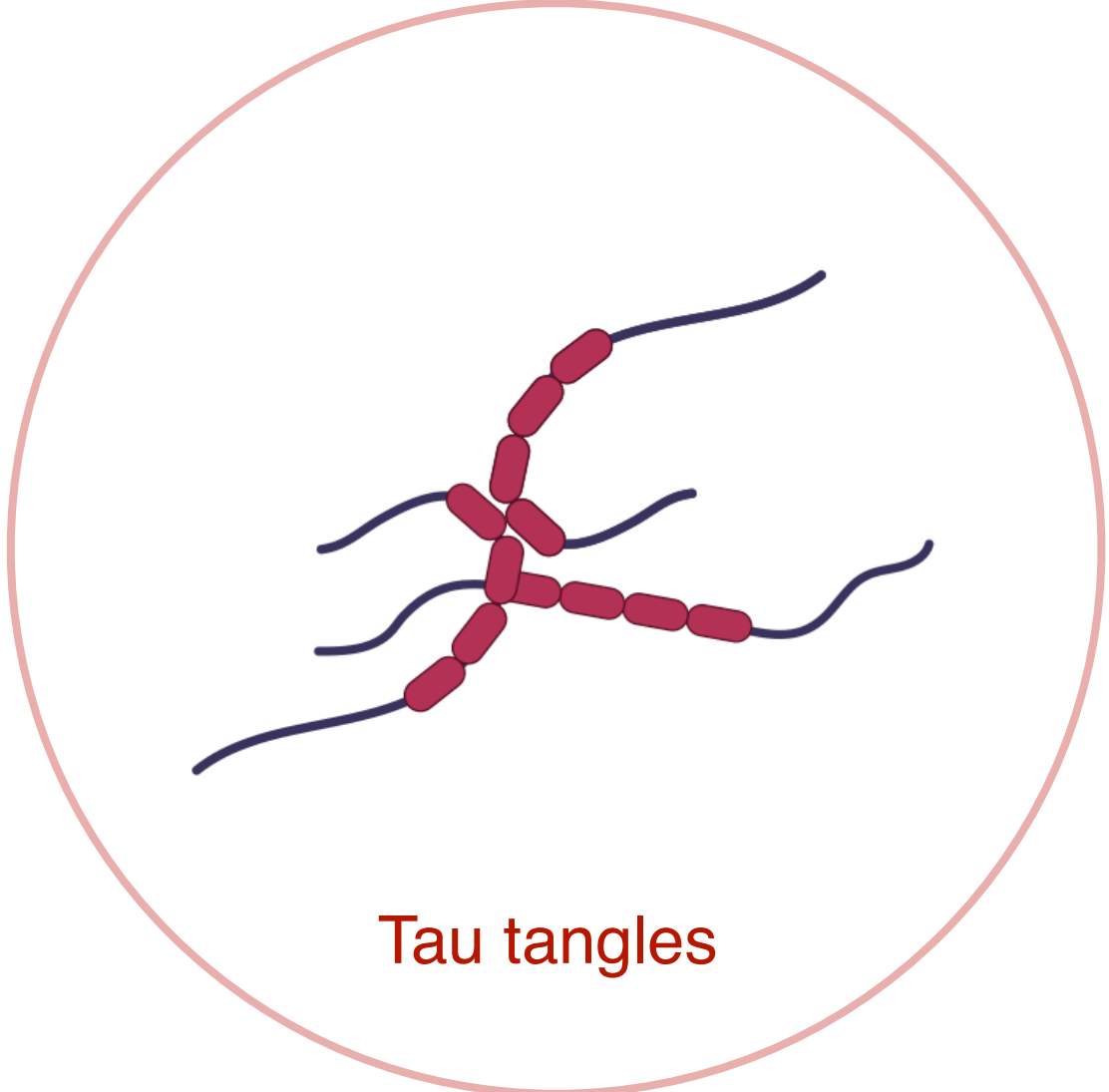
Aβ

(DAEFRHDSGYEVHHQKLVFFAEDVGSNKGAIIGLMVGGVV)



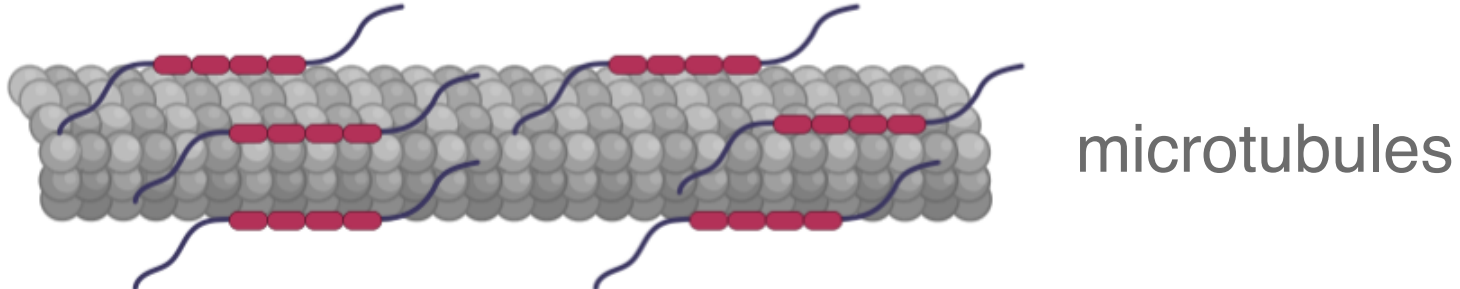
Aβ peptides aggregate

blocks neuronal signals/functions



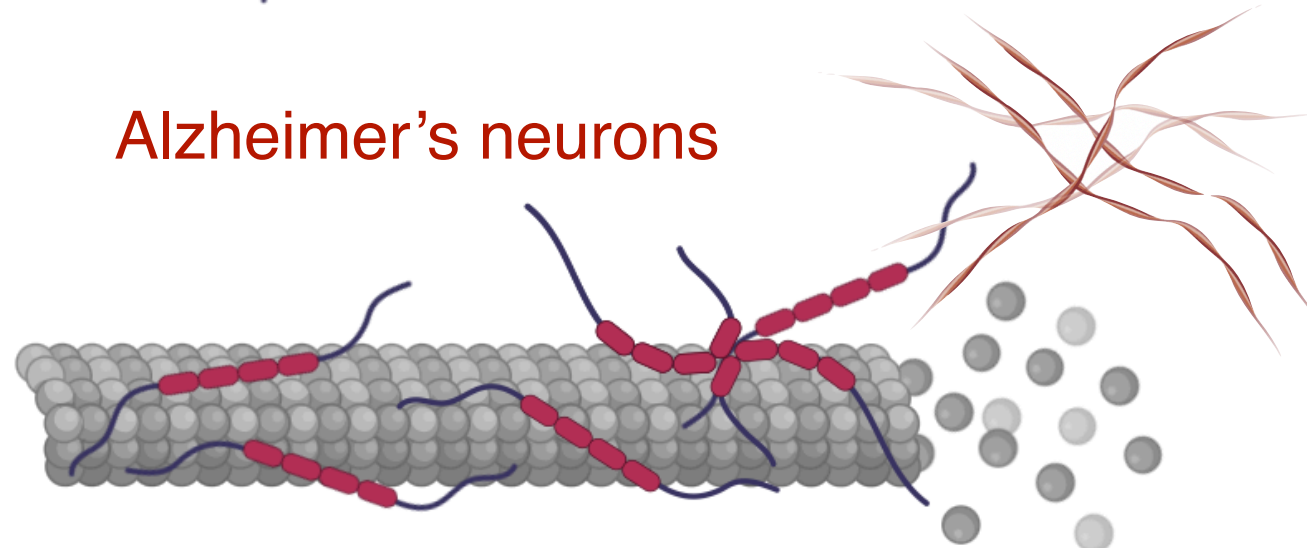
Tau tangles

healthy neurons



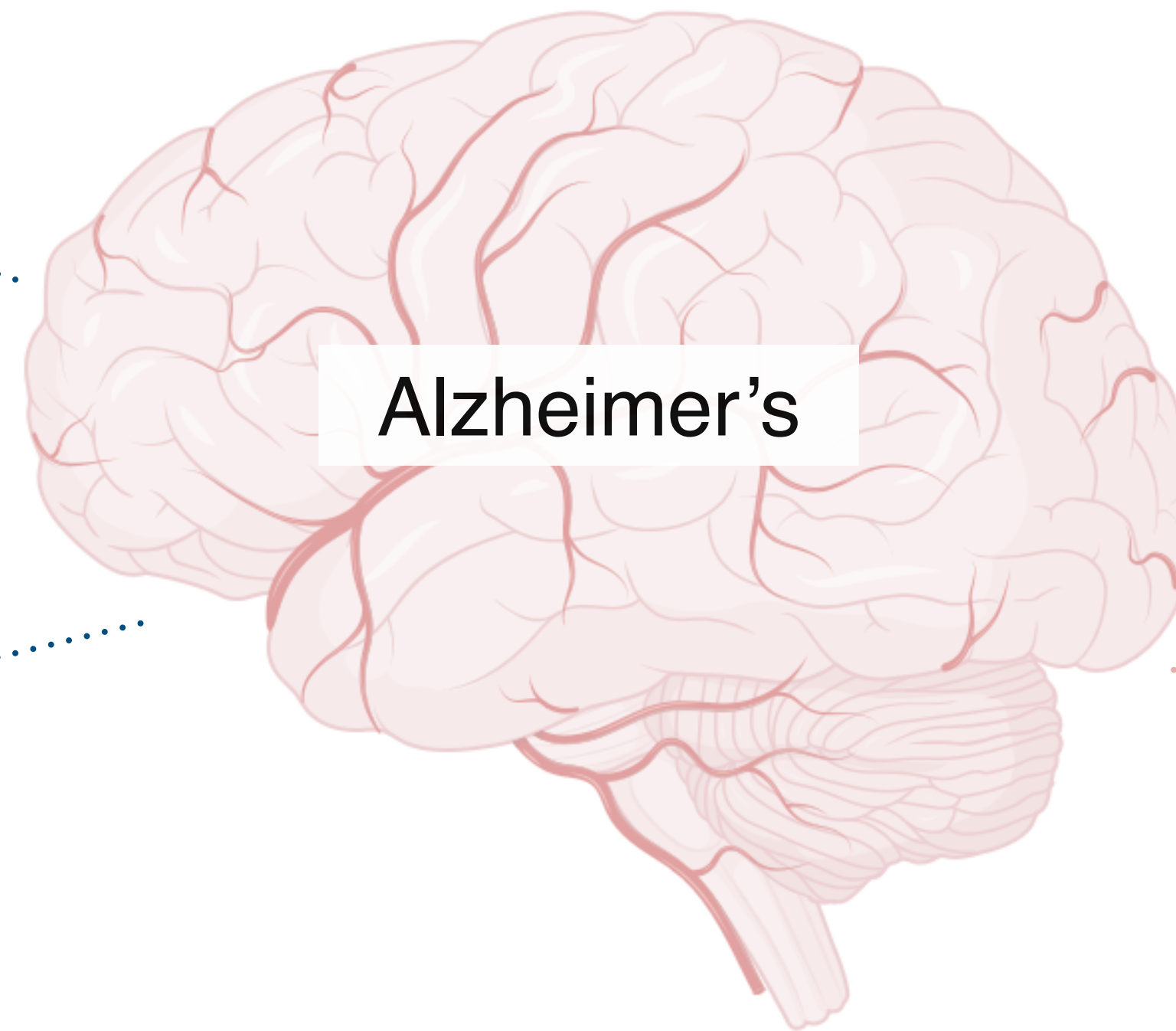
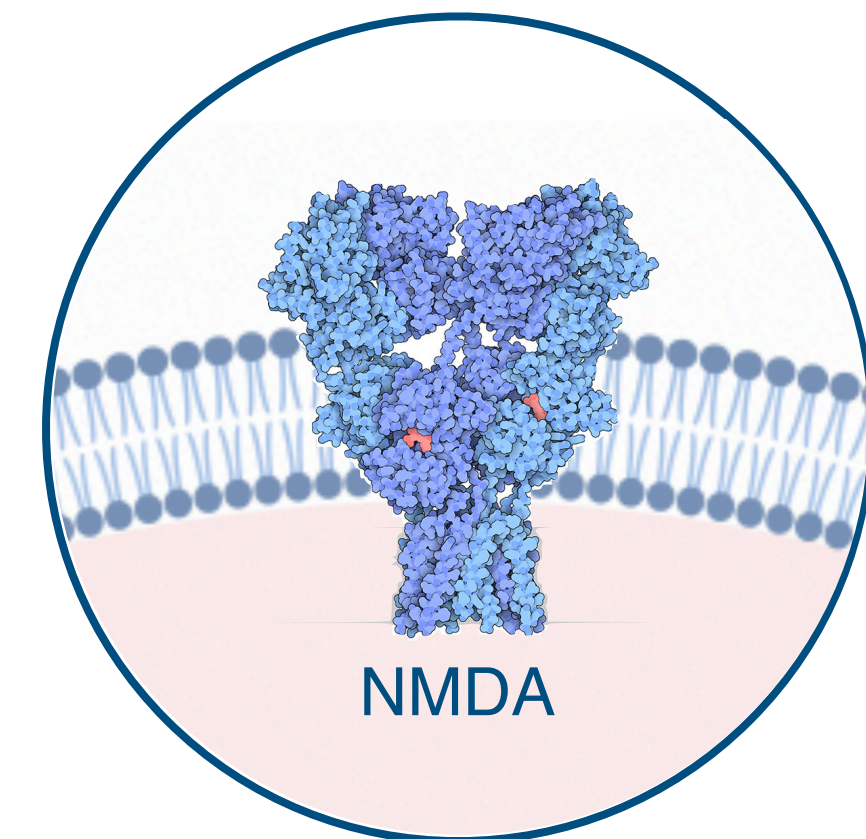
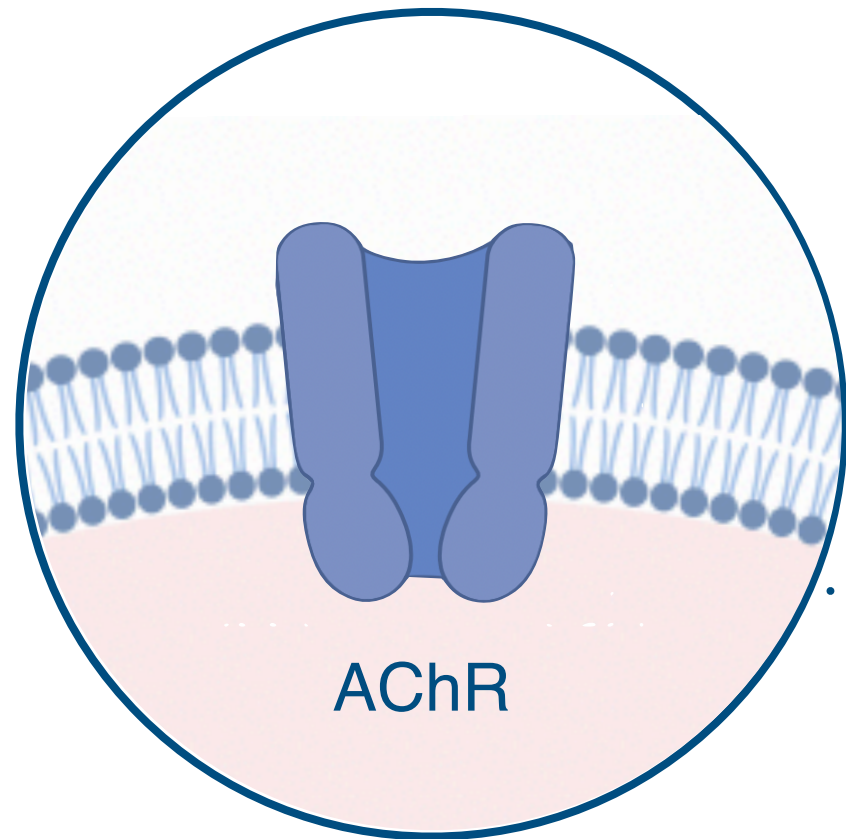
microtubules

Alzheimer's neurons

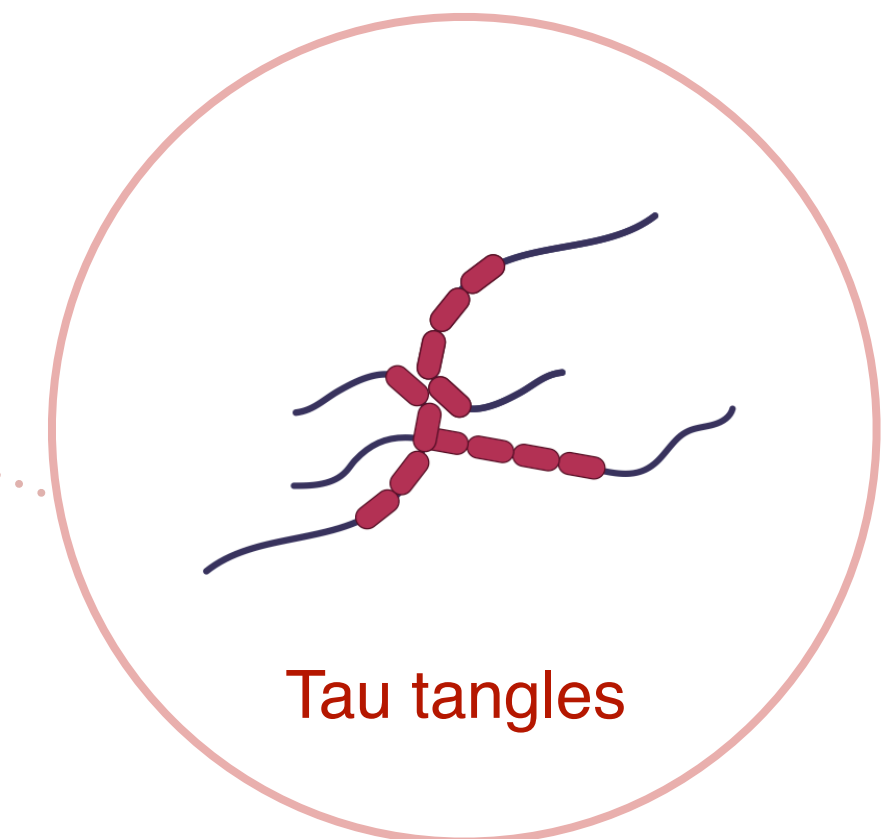
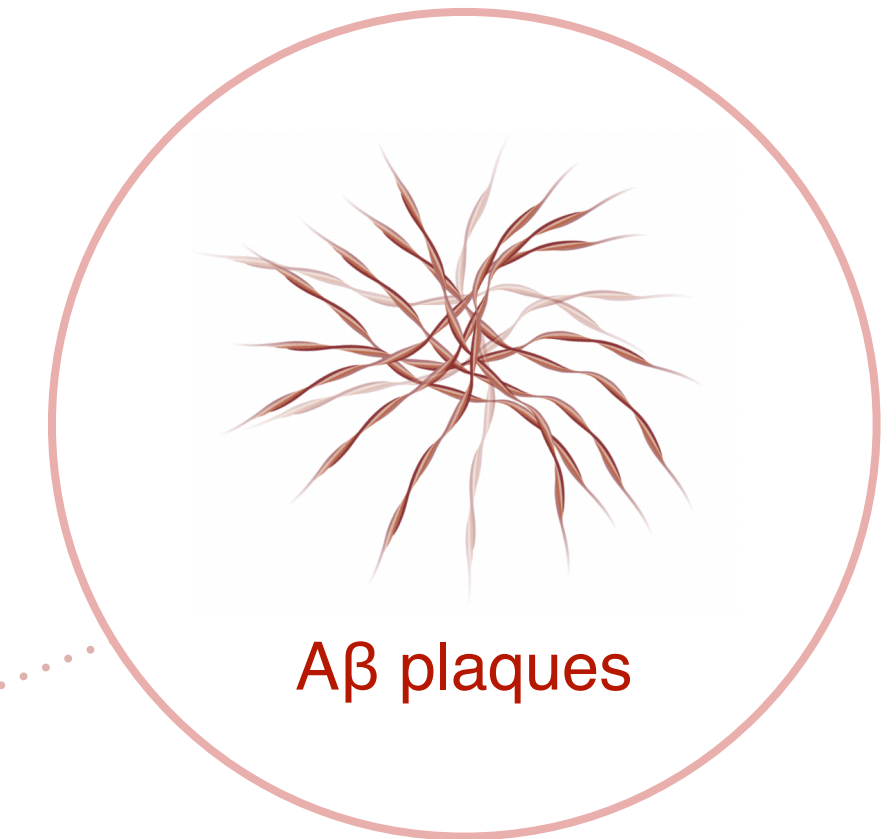


Alzheimers treatments & cures

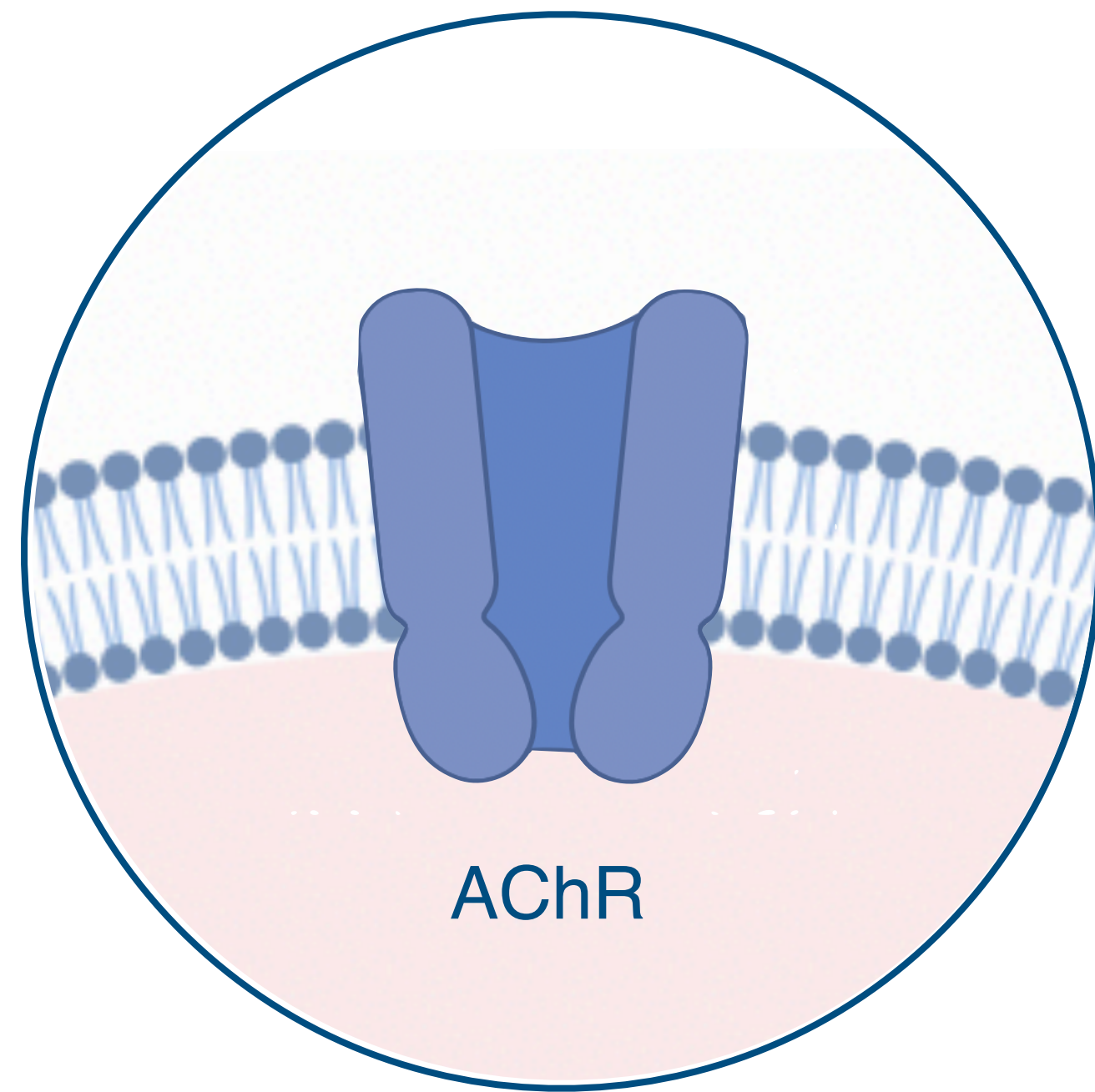
Cognitive symptom management



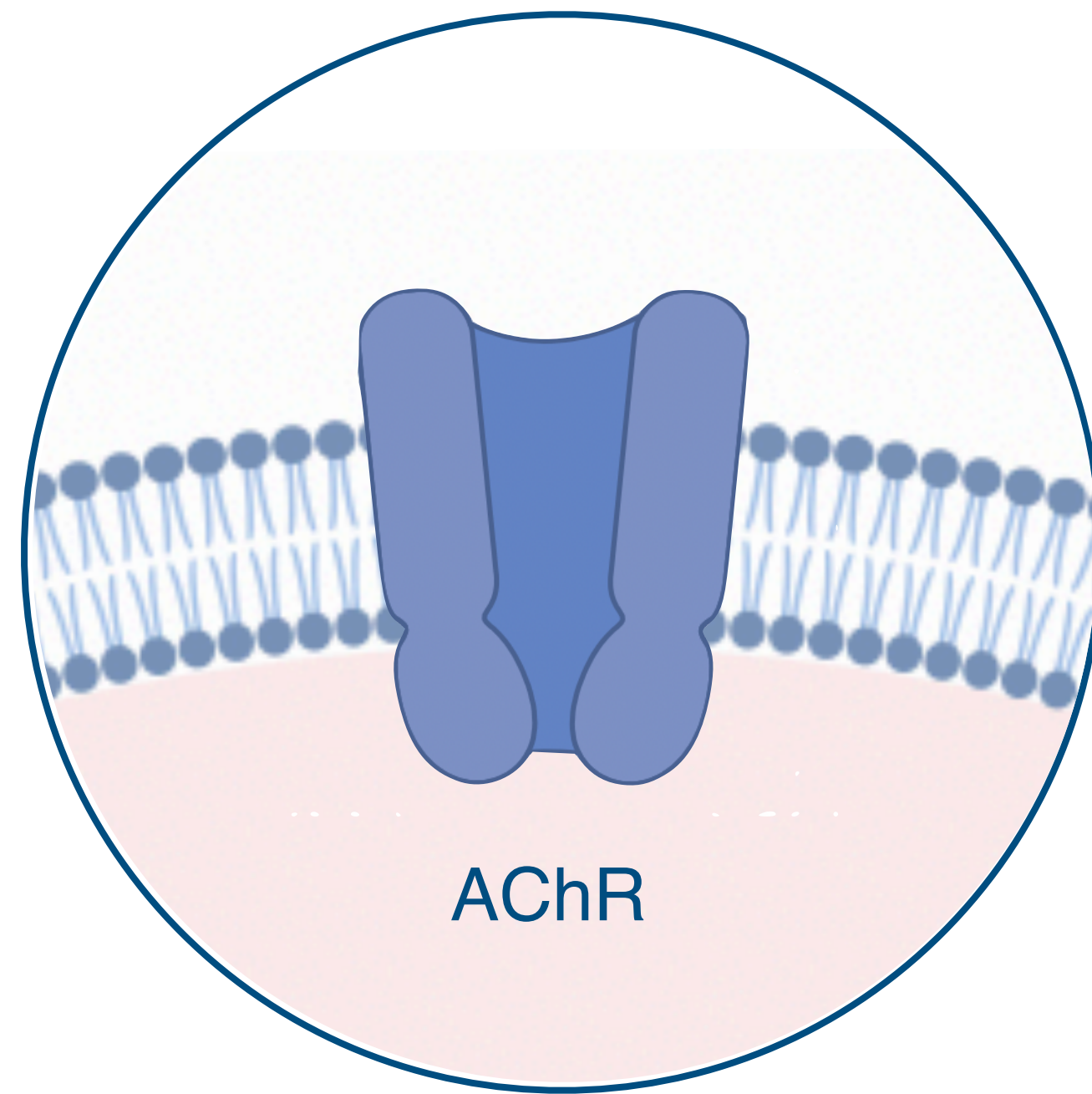
Disease-modifying treatments (DMTs)



Alzheimers treatments & cures



Alzheimers treatments & cures

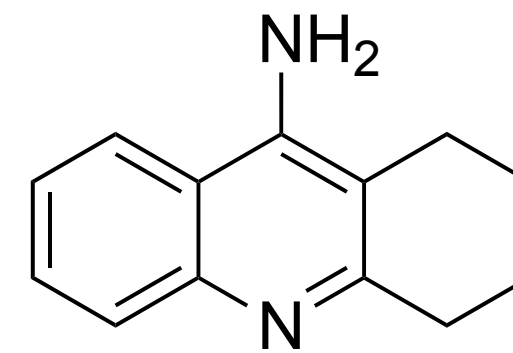


1993 - 2003
treating dementia symptoms

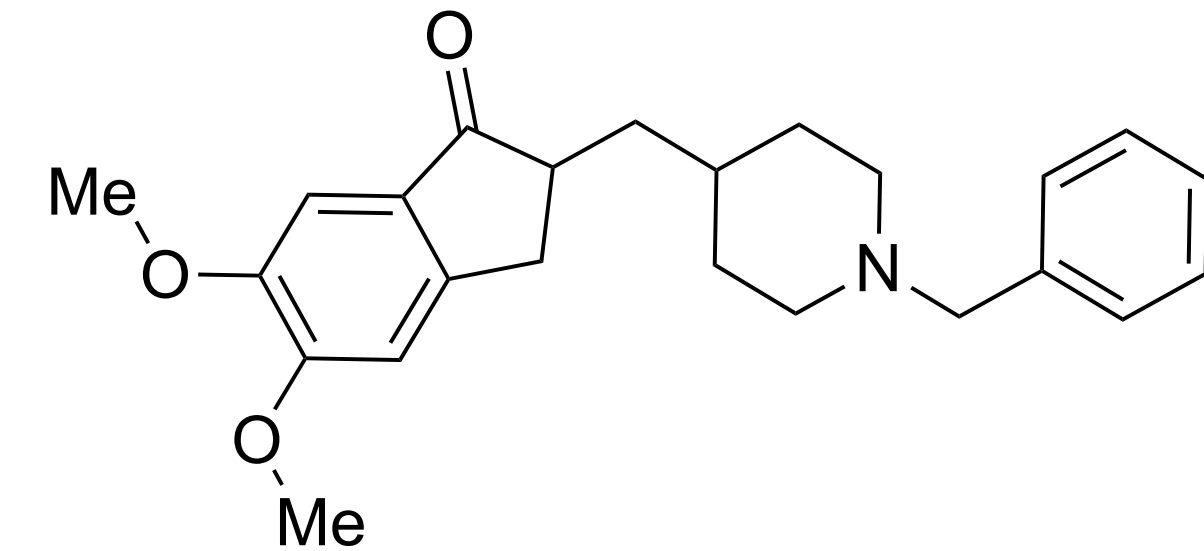
Cholinesterase Inhibitors (1990s)

manages cognitive decline

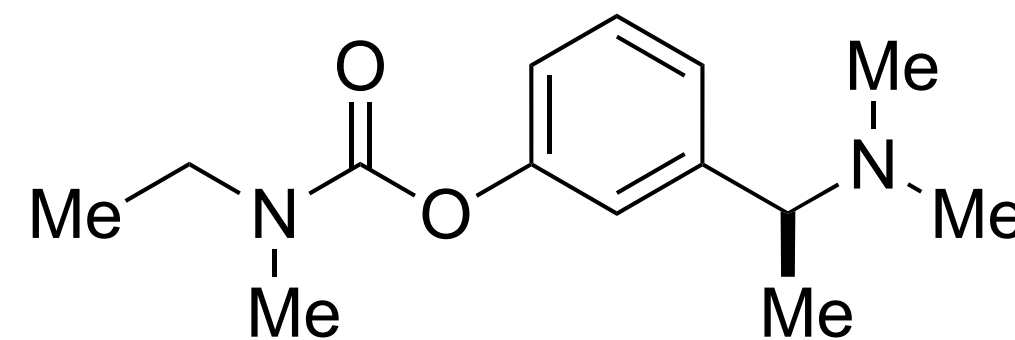
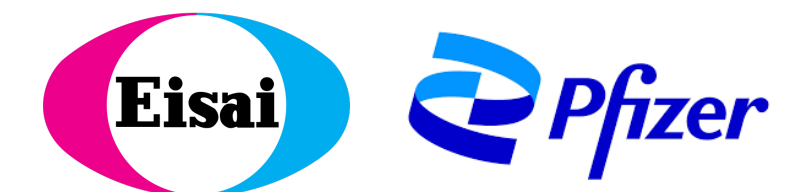
increase levels of acetylcholine (neurotransmitter) deficient in Alzheimer's patients



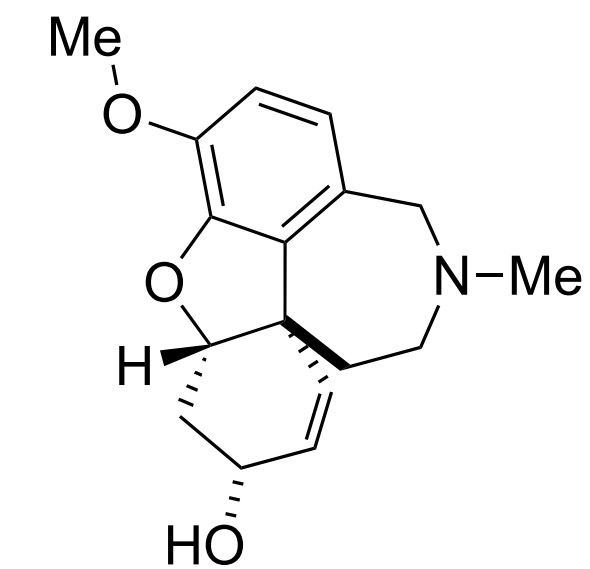
Tacrine (Cognex) - 1993



Donepezil (Aricept) - 1996



Rivastigmine (Exelon) - 2000

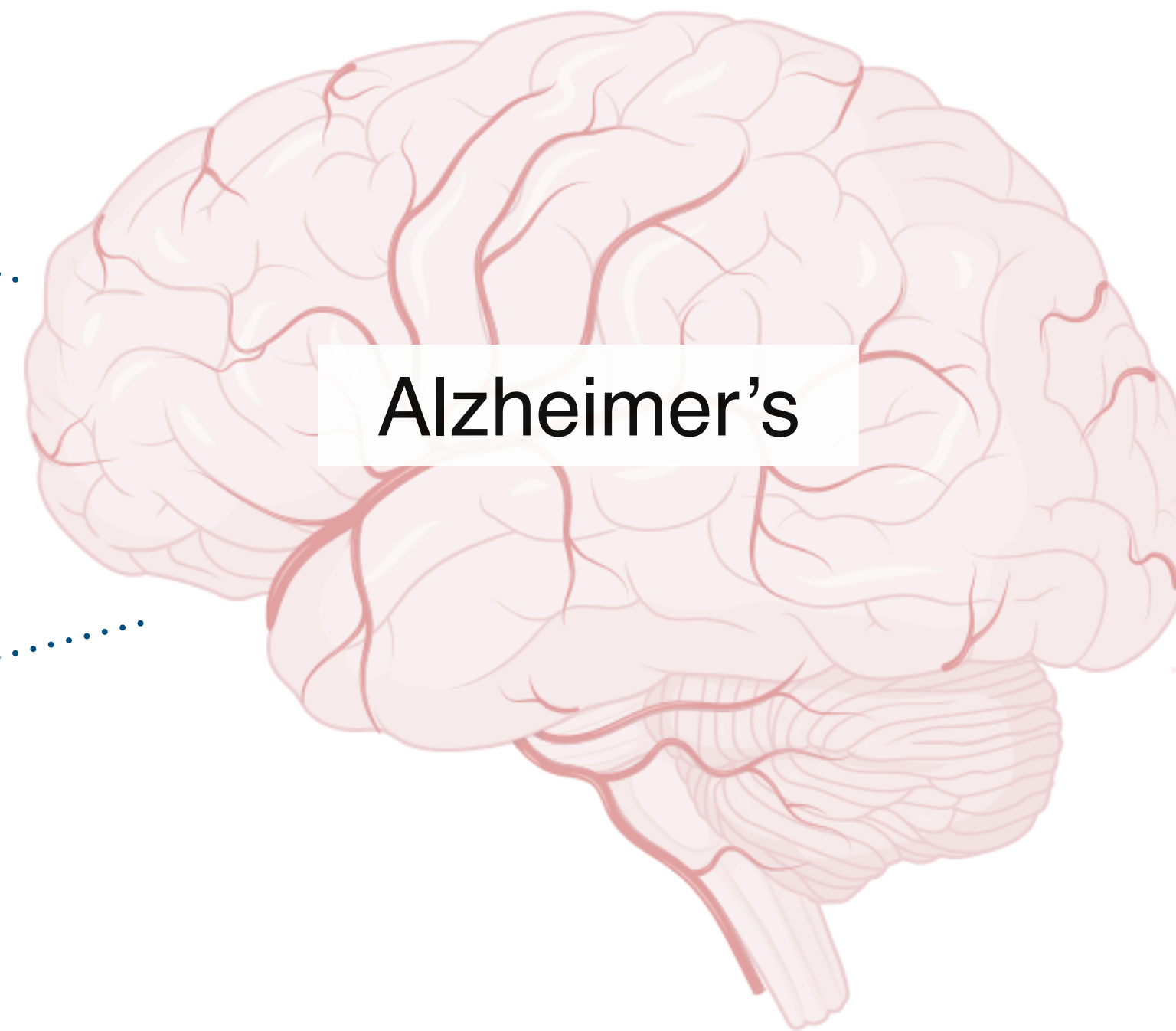
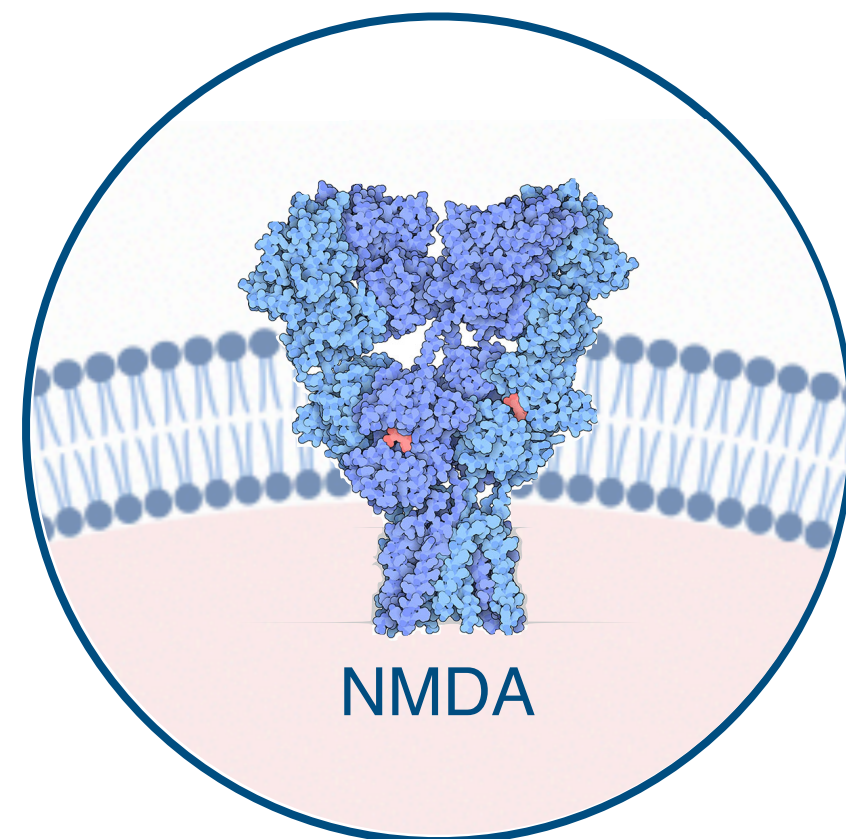
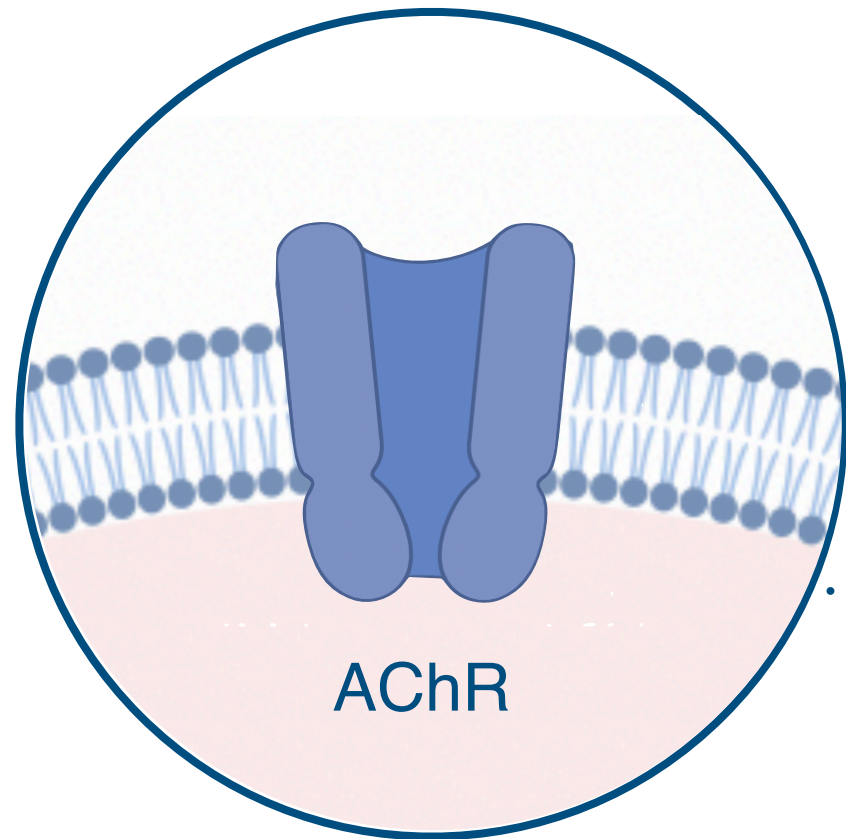


Galantamine (Razadyne) - 2001



Alzheimers treatments & cures

Cognitive symptom management



Disease-modifying treatments (DMTs)



1993 - 2003
treating dementia symptoms



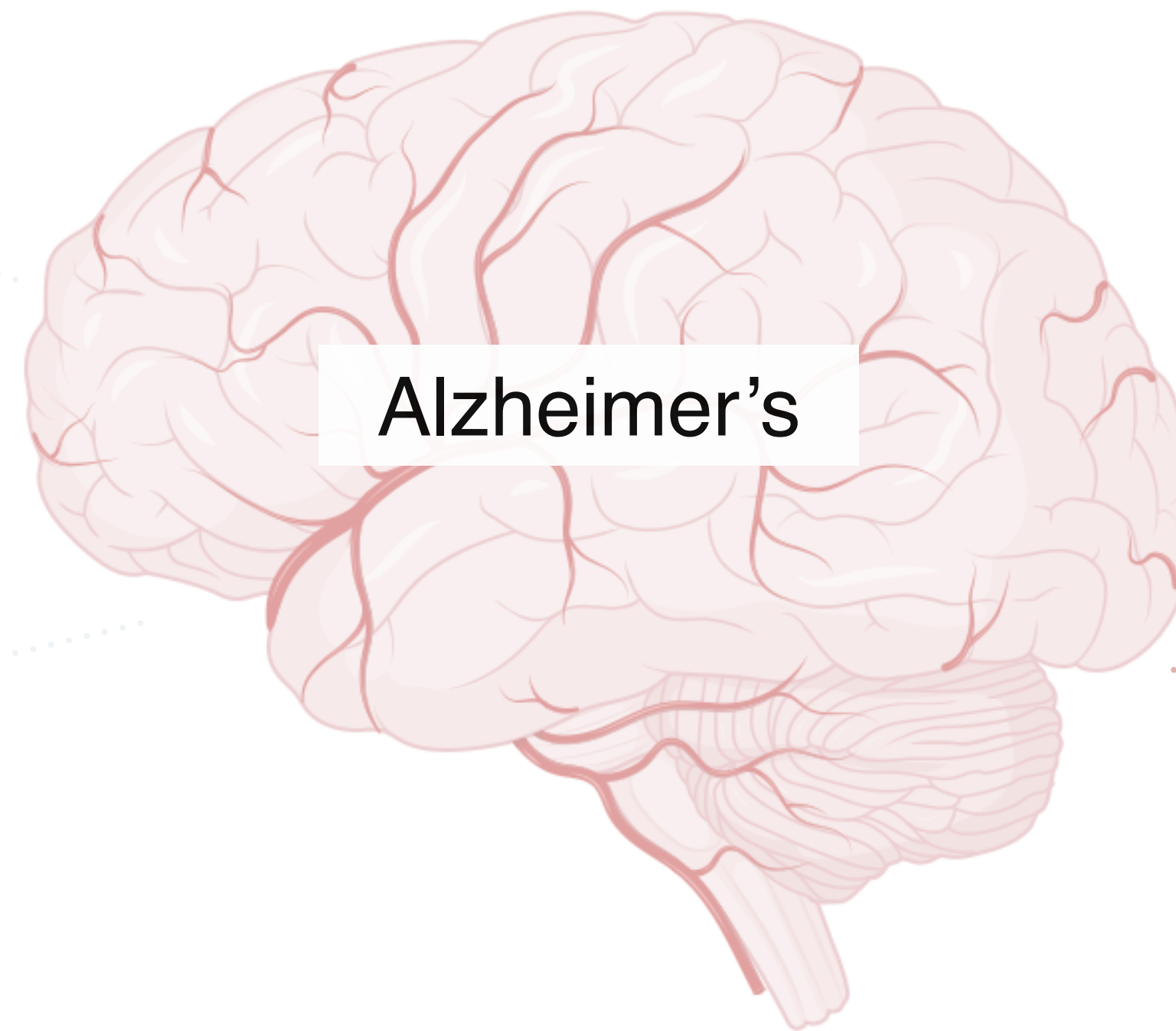
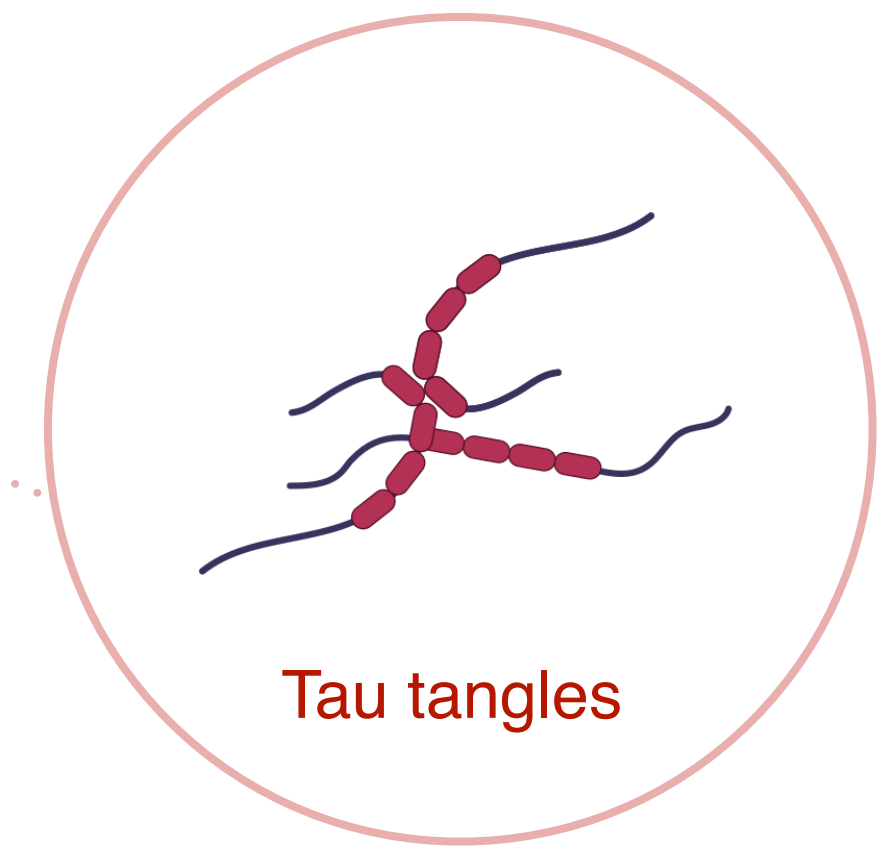
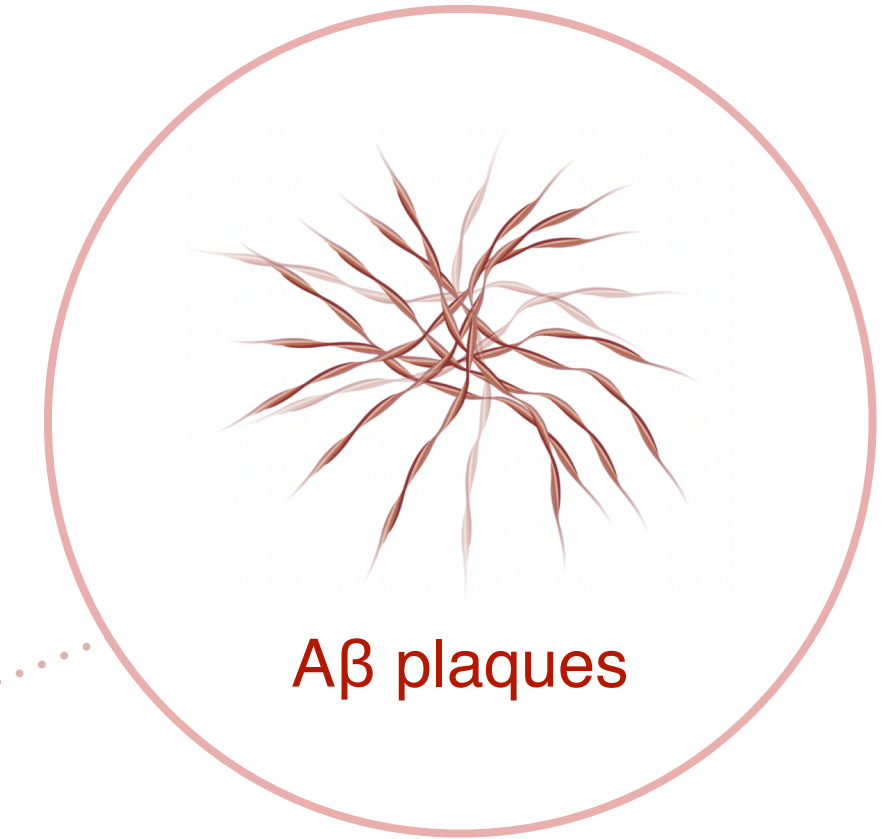
treatments/cures for Alzheimer's disease needed

Alzheimer's treatments & cures

Cognitive symptom management



Disease-modifying treatments (DMTs)



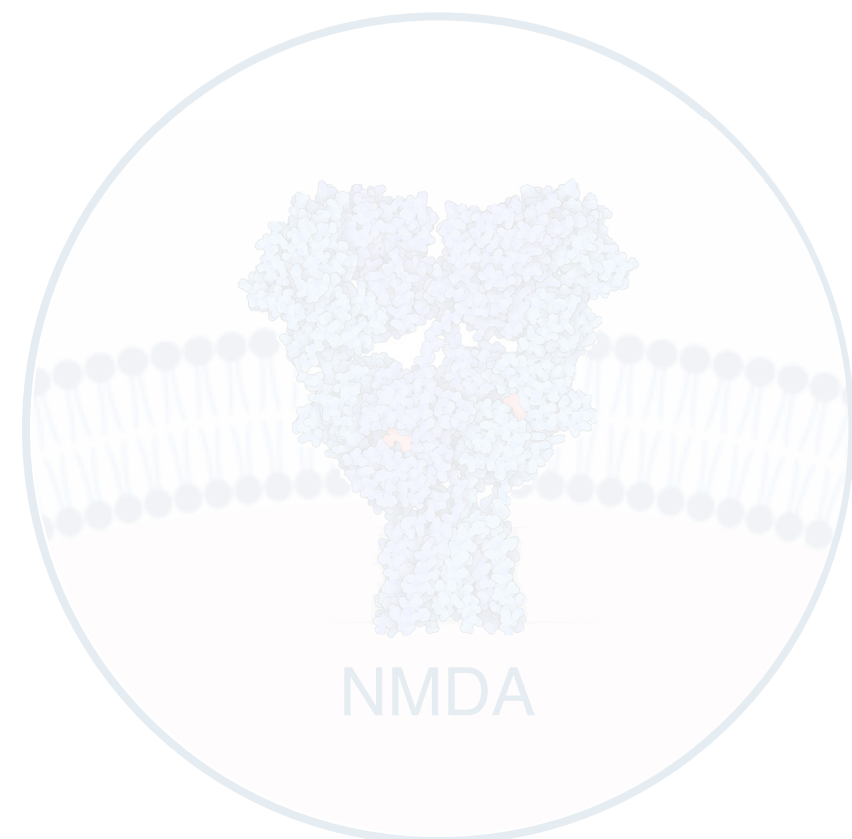
1993 - 2003
treating dementia symptoms



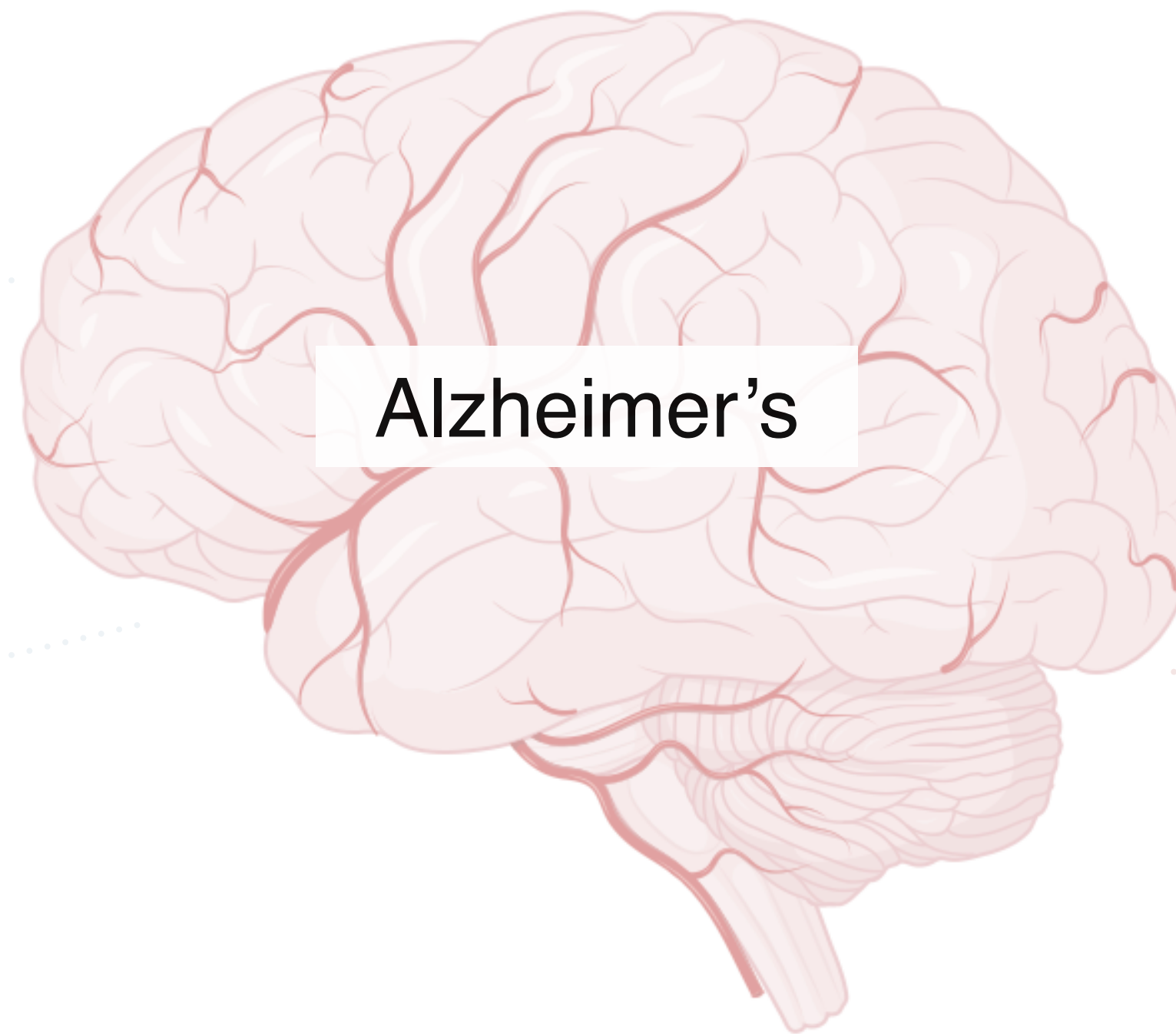
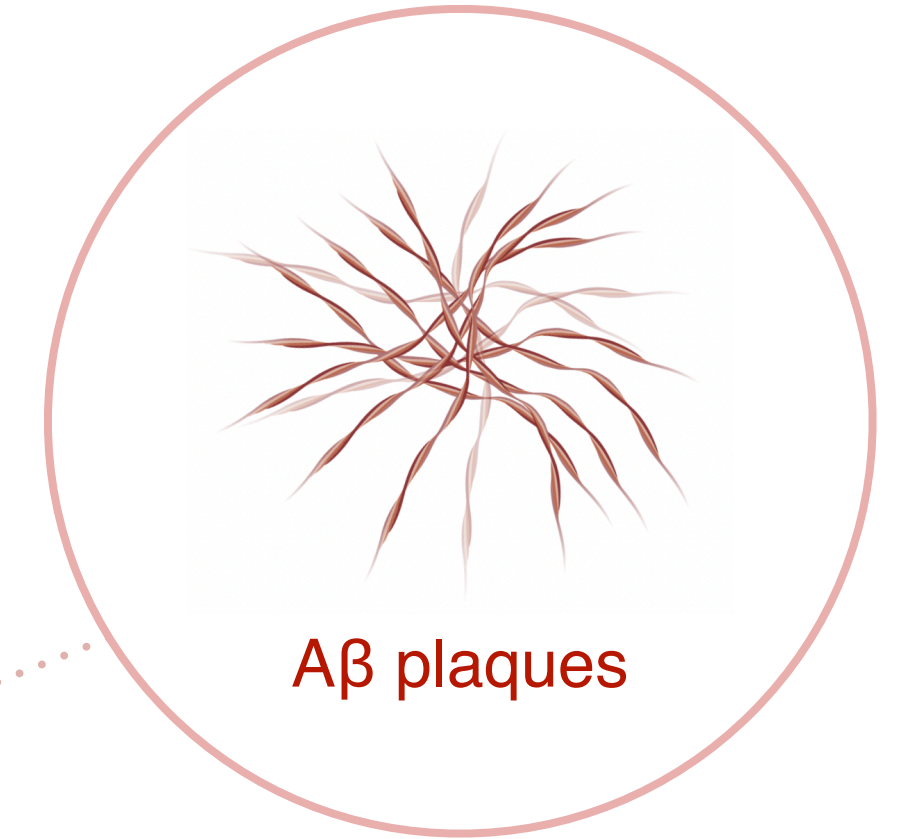
treatments/cures for Alzheimer's disease needed

Alzheimers treatments & cures

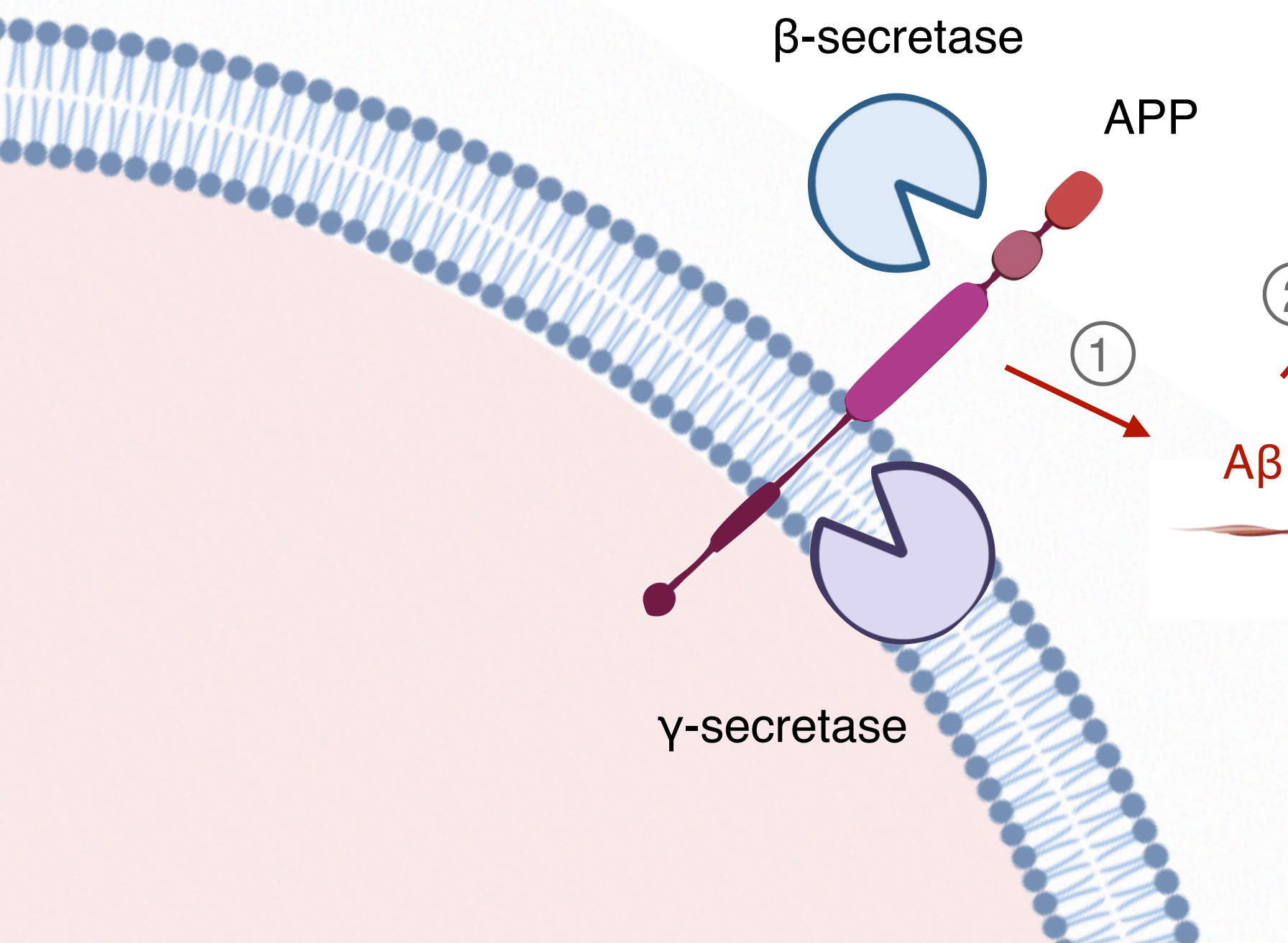
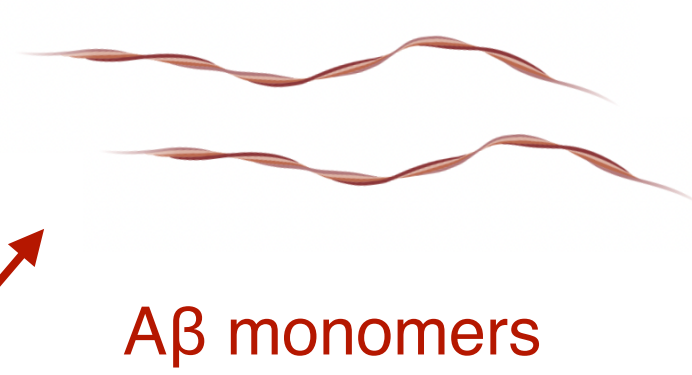
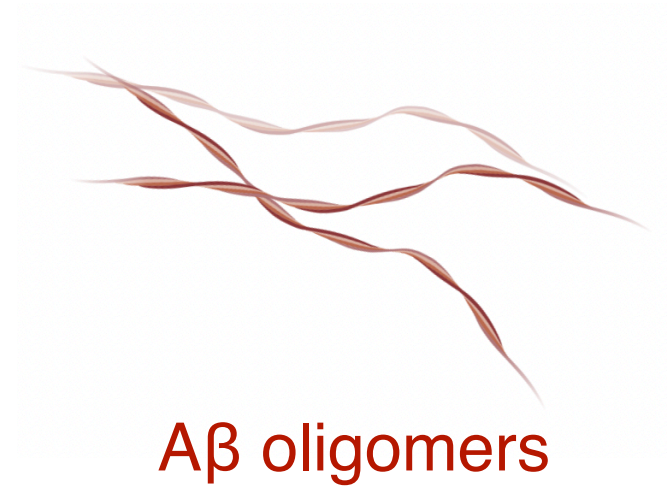
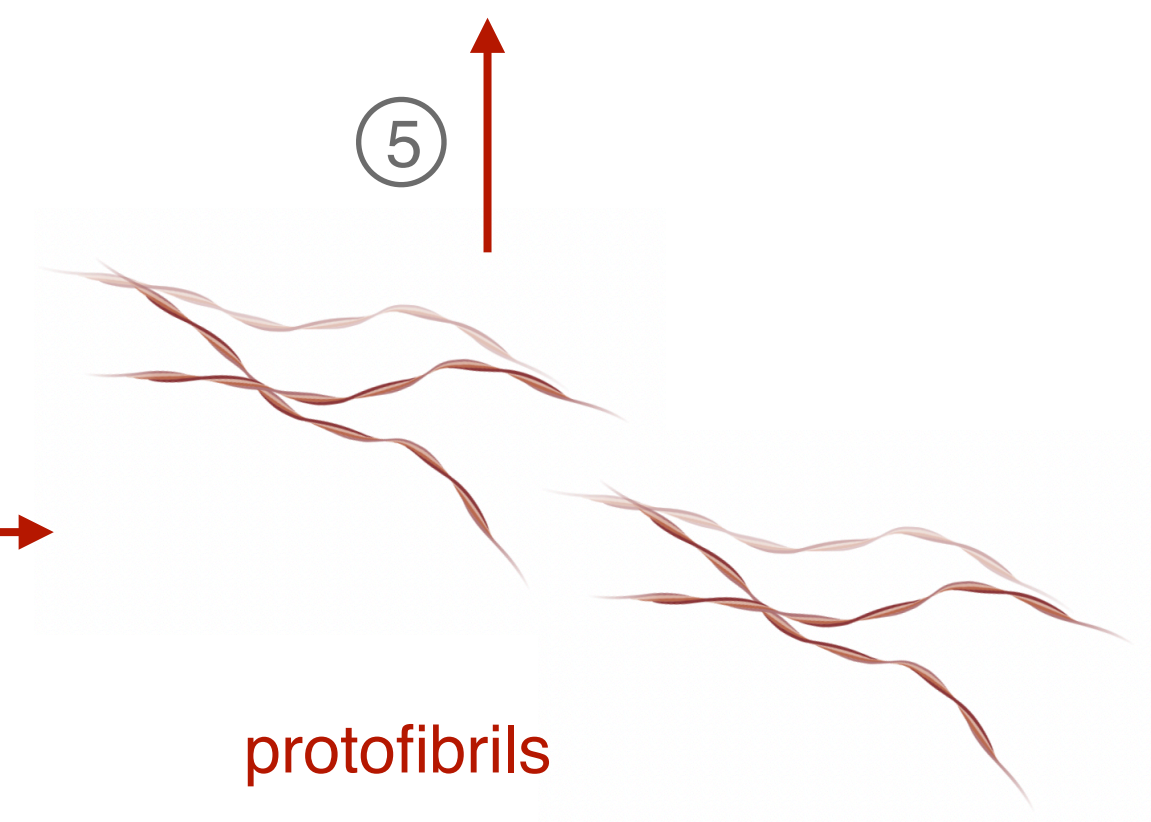
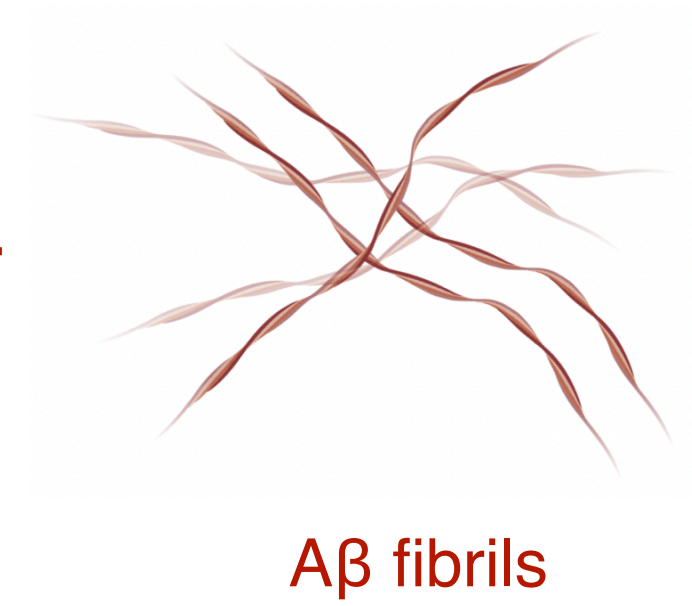
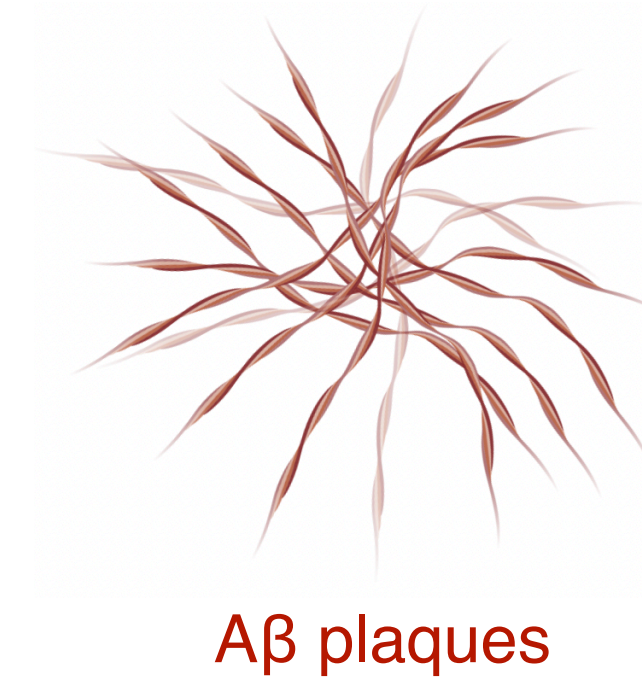
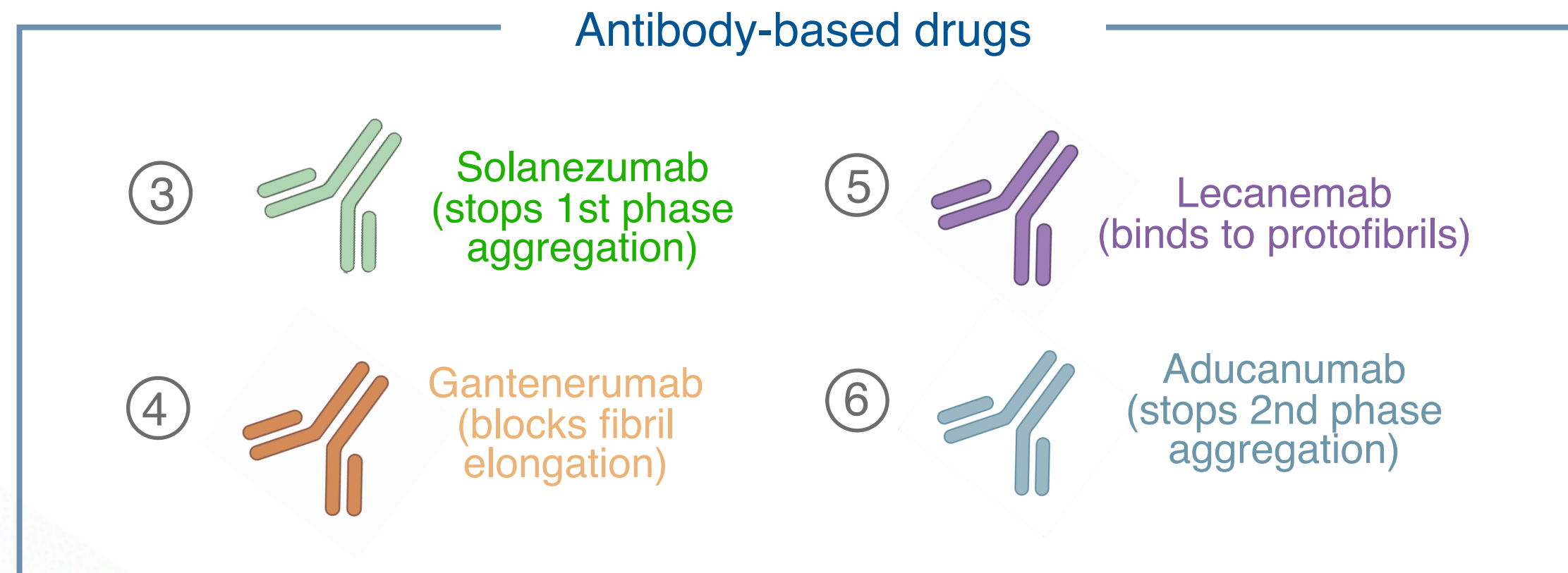
Cognitive symptom management



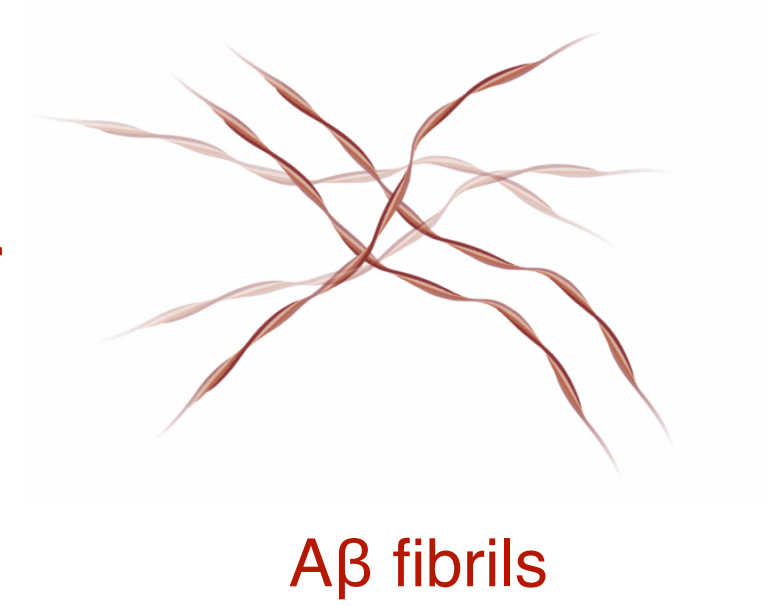
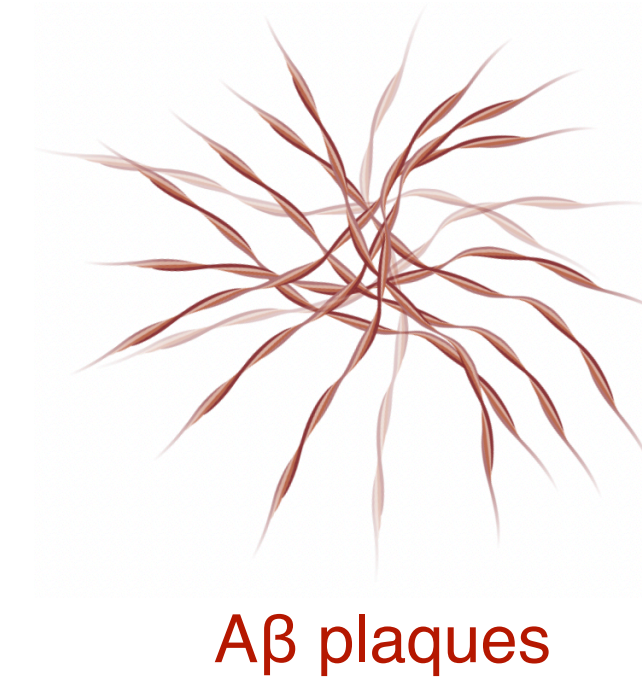
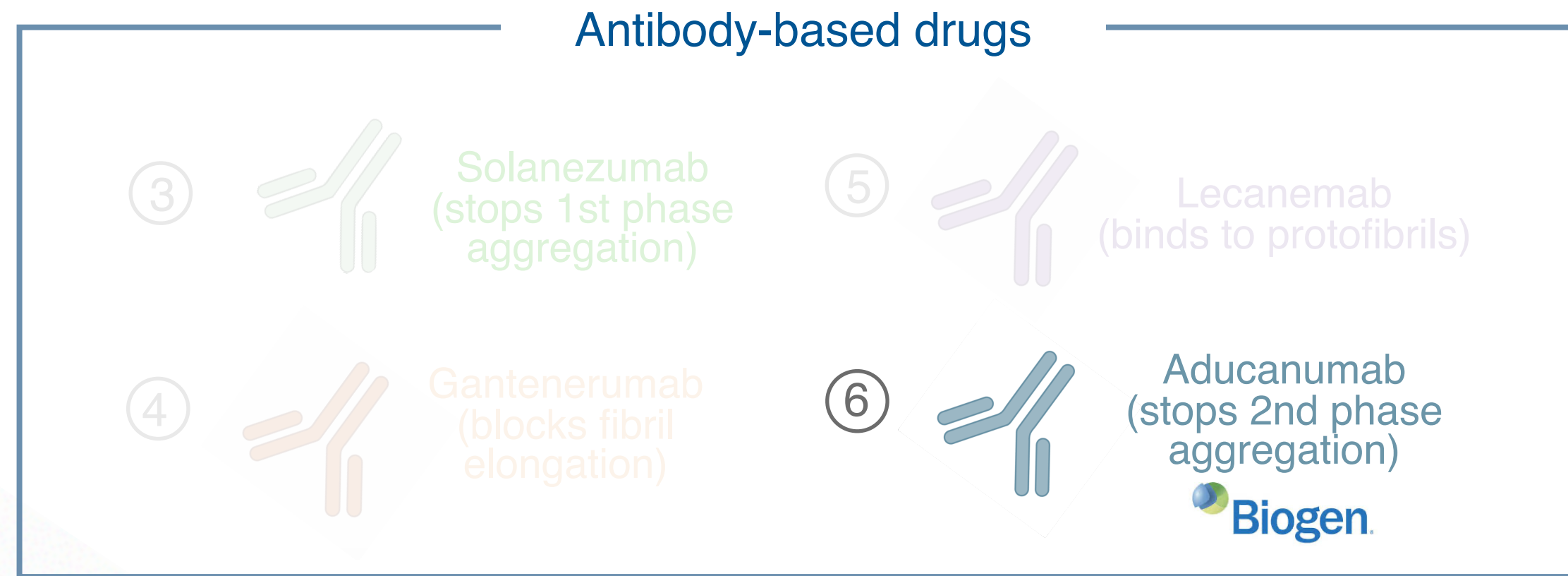
Disease-modifying treatments (DMTs)



Alzheimers treatments & cures - A β plaques

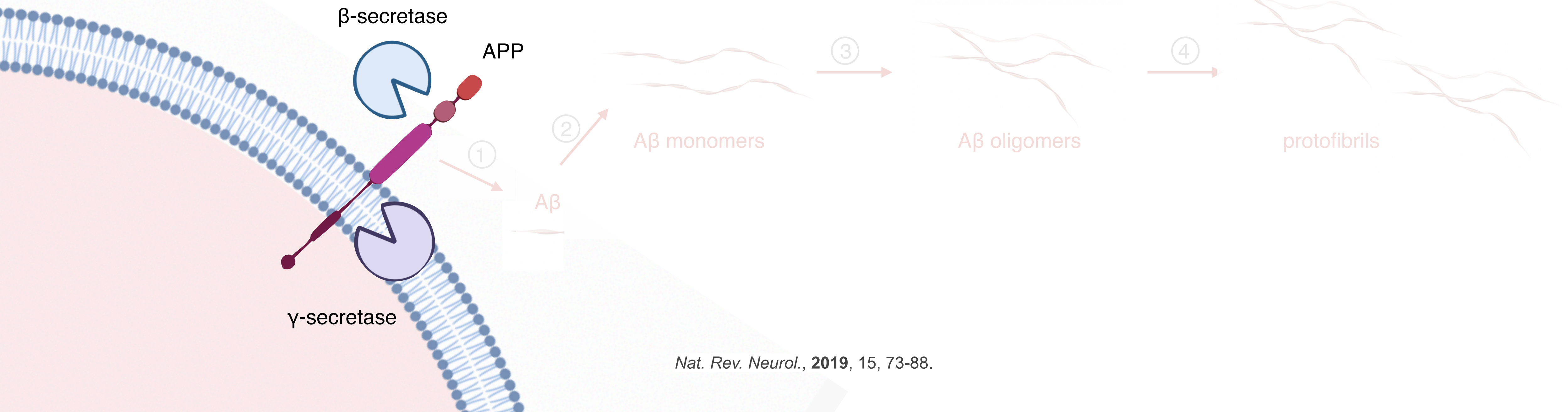


Alzheimers treatments & cures - A β plaques

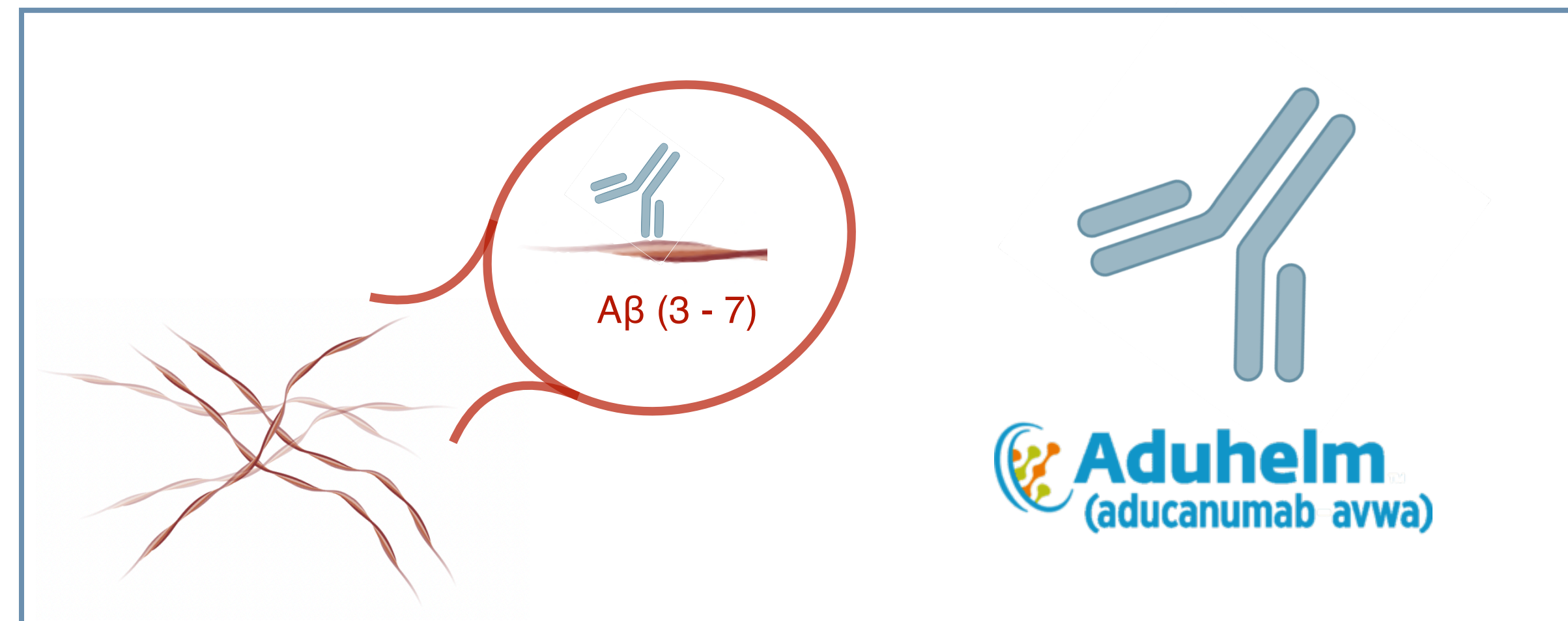
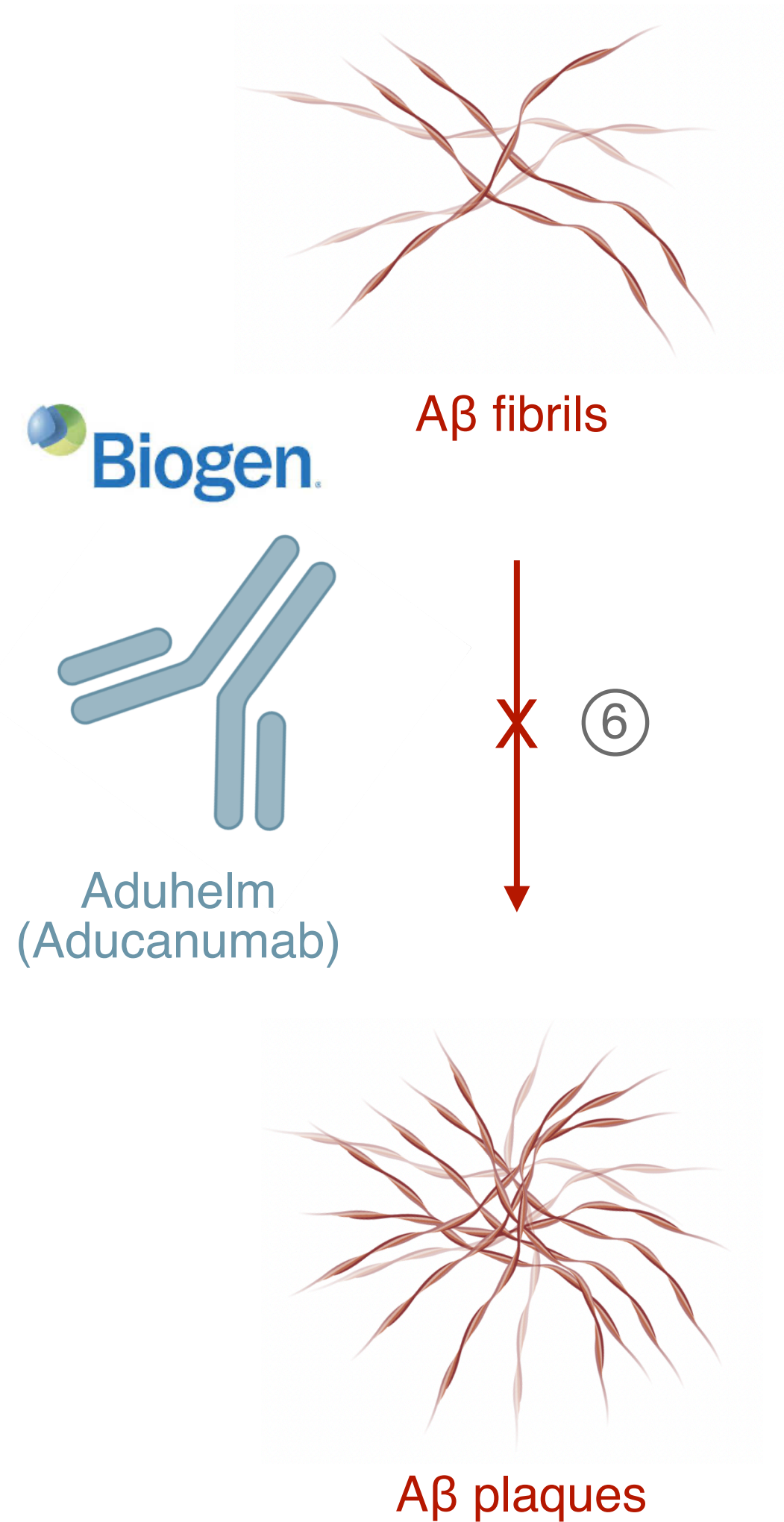


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⑤ ↑



Case study - Aducanumab (Aduhelm)



monoclonal AB - FDA approved in 2021



- 1st Alzheimer's drug approved in **18 years**
- 1st **disease-modifying** Alzheimer's drug

Predicted to be best-selling drug of all time
(\$10 billion by 2028)

Case study - Aducanumab (Aduhelm)



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Case study - Aducanumab (Aduhelm)

"FDA Approves Alzheimer's Drug Aduhelm, the First New Treatment for Disease in Nearly Two Decades"

The New York Times (June 2021)

The New York Times

"FDA Approves Aduhelm, First Drug to Target the Root Cause of Alzheimer's"

Reuters (June 2021)



"FDA Approval of Aduhelm: A Step Toward Changing the Course of Alzheimer's"

Washington Post (June 2021)

The Washington Post

"Aduhelm's Approval Marks Historic Milestone for Alzheimer's Disease"

NBC News (June 2021)



"Aduhelm Approval Offers New Hope for Alzheimer's Patients"

CNN (June 2021)



Predicted to be best-selling drug of all time
(\$10 billion by 2028)

Case study - Aducanumab (Aduhelm)

"FDA Approval of Aduhelm Draws Criticism for Lack of Solid Evidence"

The New York Times (June 2021)

The New York Times

"FDA's Approval of Aduhelm Sparks Legal Action and Calls for Reassessment"

Politico (June 2021)

POLITICO

"FDA's Approval of Aduhelm Raises Concerns Among Experts"

The Wall Street Journal (June 2021)

THE WALL STREET JOURNAL.

"Aduhelm Approval: Growing Rejection Among Medical Community"

BBC News (June 2021)

BBC

"Alzheimer's Drug Aduhelm Faces Strong Backlash From Medical Experts"

The Guardian (June 2021)

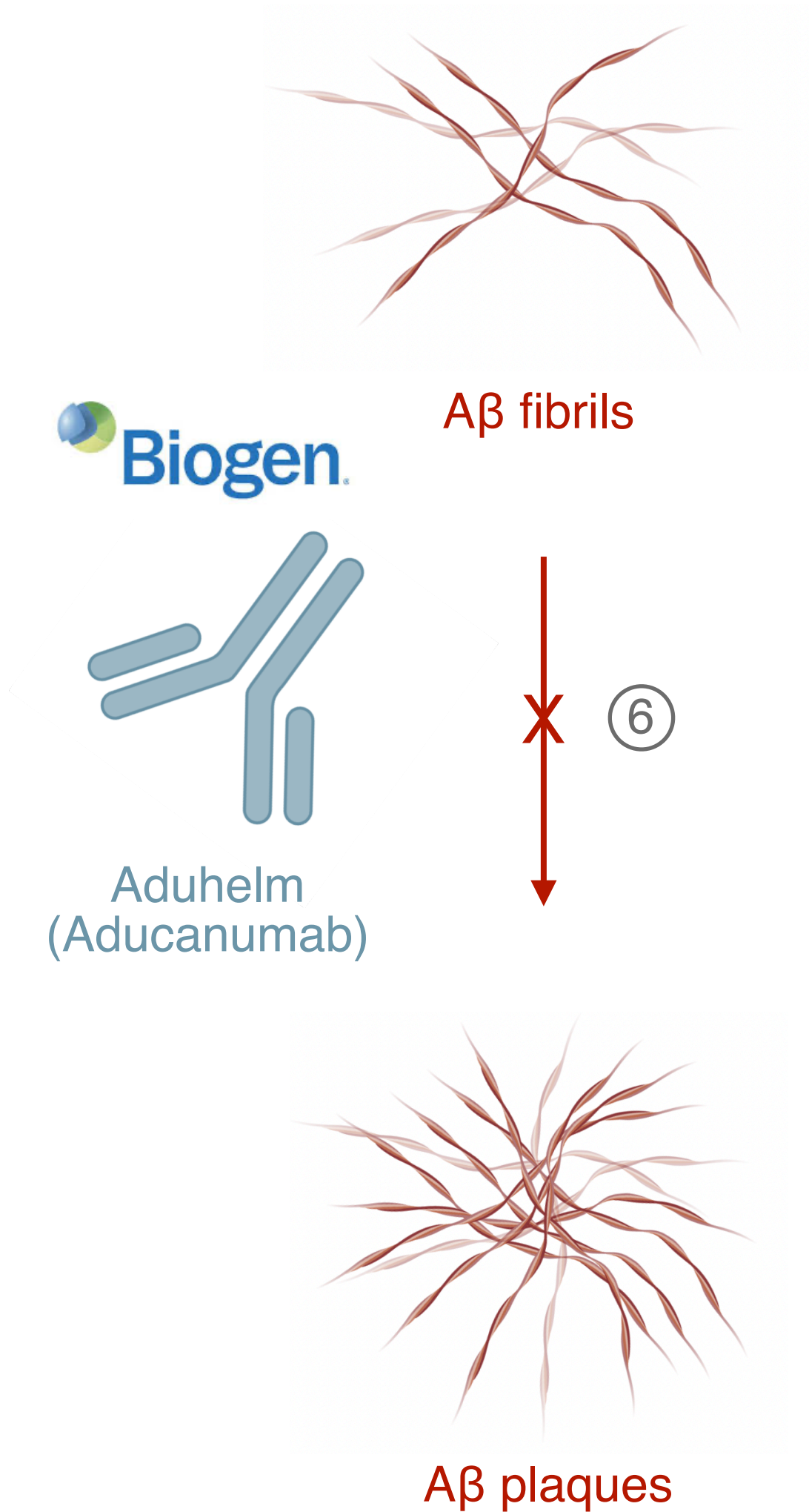
The Guardian

"FDA's Approval of Aduhelm Stirs Concerns Over High Cost and Effectiveness"

NBC News (June 2021)

NBC NEWS

Case study - Aducanumab (Aduhelm)



monoclonal AB - FDA approved in 2021



- 1st Alzheimer's drug approved in **18 years**
- 1st **disease-modifying** Alzheimer's drug

absence of evidence in clinical trials that the medication was effective

3 FDA advisers resigned

Case study - Aducanumab (Aduhelm)

The New York Times

Three F.D.A. Advisers Resign Over Agency's Approval of Alzheimer's Drug

The drug, Aduhelm, a monthly infusion priced at \$56,000 per year, was approved this week despite weak evidence that it helps patients.

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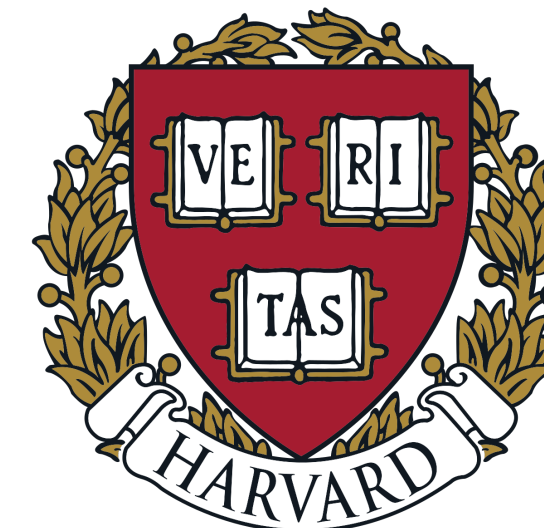
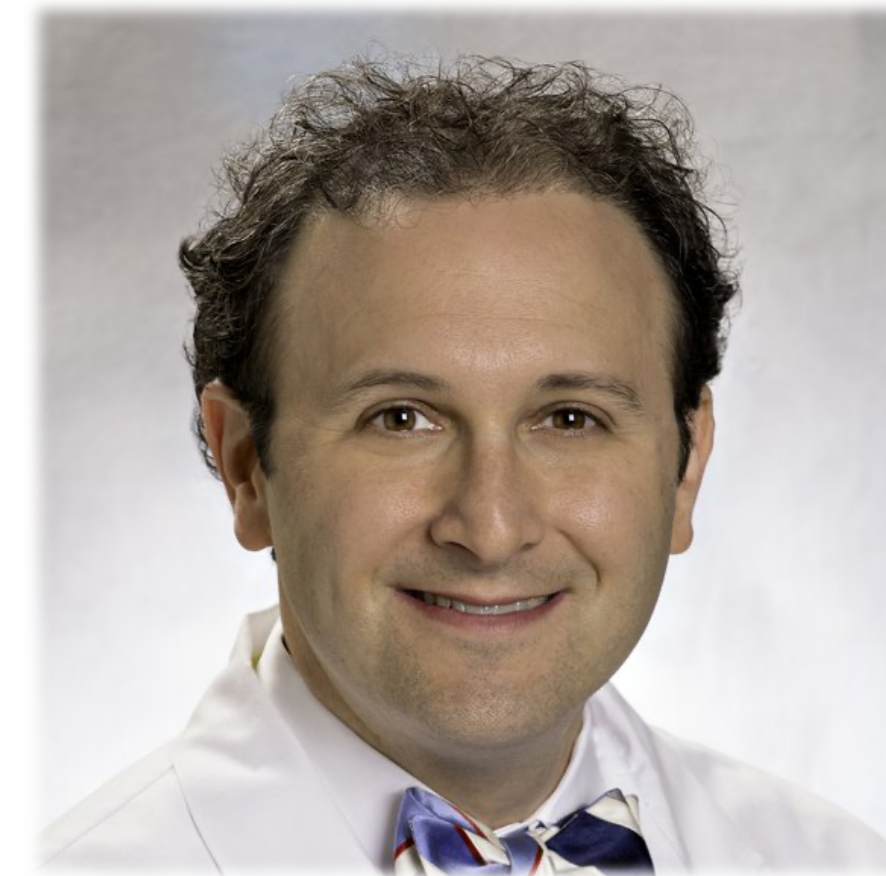
Dr. Aaron Kesselheim, who resigned this week from an F.D.A. advisory committee, speaking at a panel in 2018. "This might be the worst approval decision that the F.D.A. has made that I can remember," he said Thursday. Scott Eisen/Associated Press

By Pam Belluck and Rebecca Robbins

Published June 10, 2021 Updated Sept. 2, 2021

Prof. Aaron Kesselheim - Harvard

Harvard - undergraduate 1996
University of Pennsylvania Medicine - M.D. 2002
University of Pennsylvania Law School - J.D. 2002
Harvard - M.P.H. 2007



Case study - Aducanumab (Aduhelm)



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Program On Regulation, Therapeutics, And Law



Division of Pharmacoepidemiology and Pharmacoeconomics
Harvard Medical School and Brigham & Women's Hospital
Aaron S. Kesselheim, M.D., J.D., M.P.H., Director
Jerry Avorn, M.D., Co-Director

Phone: 617-278-0930
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www.PORTALresearch.org

June 10, 2021

Dear Acting Commissioner of Food and Drugs Janet Woodcock, M.D.,

I am hereby resigning from the FDA's Peripheral and Central Nervous System Advisory Committee. I was honored to have served the Committee since 2015 because I believed in the value of Advisory Committees to provide a way for outside experts to provide science-based guidance to the agency on its drug approval decisions. But after my experience on this Advisory Committee for both the eteplirsen and now the aducanumab discussions, it is clear to me that FDA is not presently capable of adequately integrating the Committee's scientific recommendations into its approval decisions.

With eteplirsen, the AdComm and FDA's own scientific staff reported that there was no convincing evidence that the drug worked; both groups were overruled by FDA leadership, which approved the drug based on considerations (including concerns about the sponsor's finances) that were not part of the Advisory Committee's discussions. This week, the aducanumab decision by FDA administrators was probably the worst drug approval decision in recent U.S. history. At the last minute, the agency switched its review to the Accelerated Approval pathway based on the debatable premise that the drug's effect on brain amyloid was likely to help patients with Alzheimer's disease. But this pivotal question was not discussed at the Advisory Committee meeting, and its premise was specifically excluded from discussion, as the FDA said: "We're not using the amyloid as a surrogate for efficacy." At our public meeting, concerns about trial data from one of the FDA's own reviewers were not given adequate time for discussion, and some of the questions FDA asked the Committee to answer were worded in a way that seemed slanted to yield responses that would favor the drug's approval.

For both eteplirsen and aducanumab, the decisions by FDA administrators to ignore the Advisory Committee's clear recommendations led to their approval of two highly problematic drugs that offered little evidence that they would meaningfully benefit patients suffering from these devastating conditions. This will undermine the care of these patients, public trust in the FDA, the pursuit of useful therapeutic innovation, and the affordability of the health care system.

For these reasons, I feel I can no longer make a useful contribution as a member of this Advisory Committee. The aducanumab and eteplirsen debacles demonstrate that the agency needs to reassess its decision-making processes, including how drug candidates are selected for AdComm review, which questions are put to the Committee and how those questions are worded, how anecdotal patient experience with drugs is presented to the committee, and how Committee recommendations are used (or ignored) by FDA officials. When clear AdComm recommendations against a drug are overruled by FDA administrators, as occurred in both these instances, the agency owes it to the nation to provide a detailed justification.

In the future, reforms in these areas could allow outside experts to be better able to provide meaningful input into the FDA approval process. Should this occur, I would look forward to the possibility of rejoining a committee if and when it becomes clear that our input as experts will be fairly sought and help support appropriate decision-making that is truly in patients' best interests.

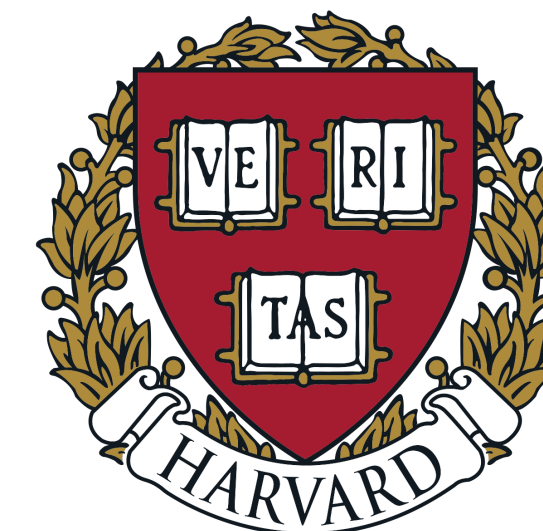
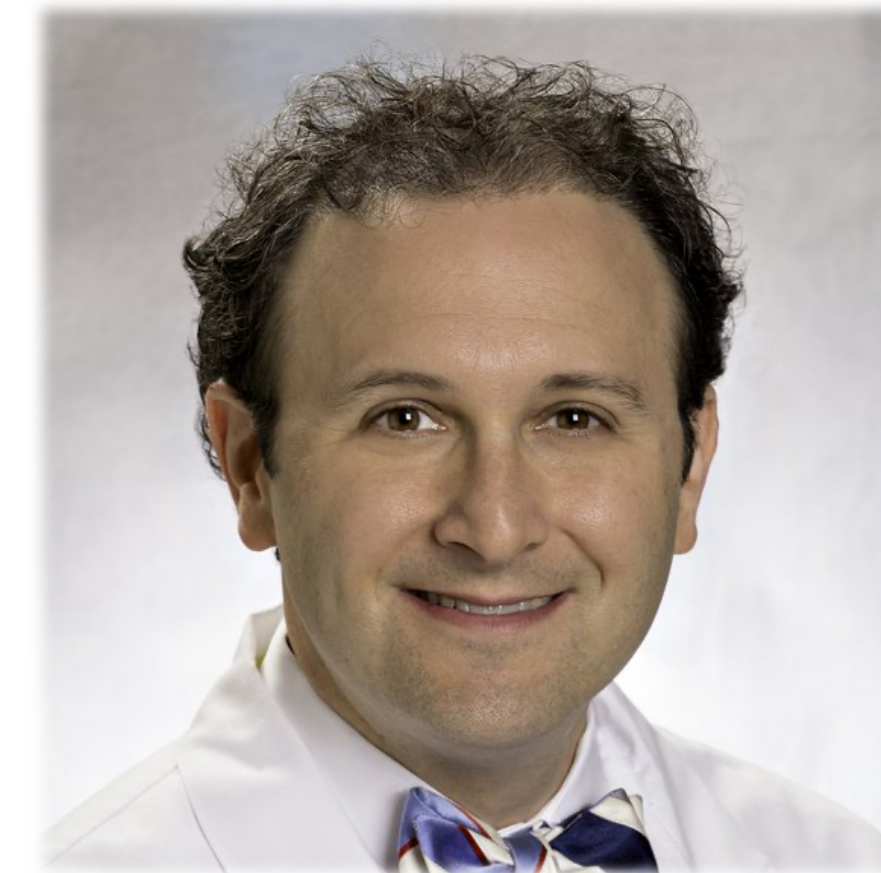
Sincerely,

Aaron S. Kesselheim, M.D., J.D., M.P.H.
Professor of Medicine, Brigham and Women's Hospital/Harvard Medical School

Cc: Nathan Fountain, Xavier Becerra

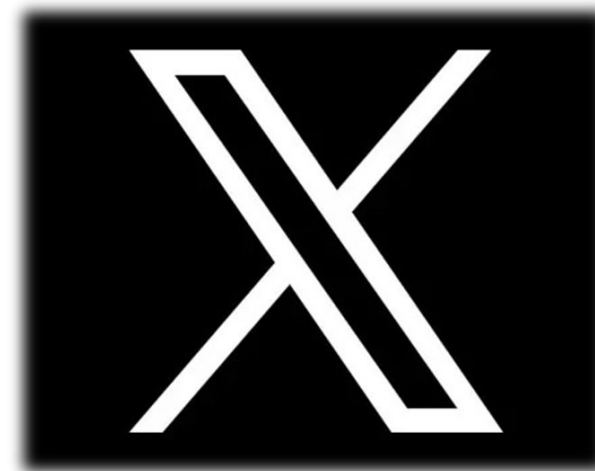
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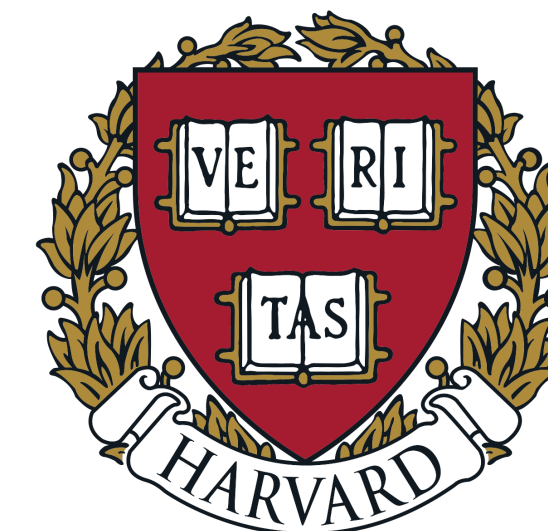
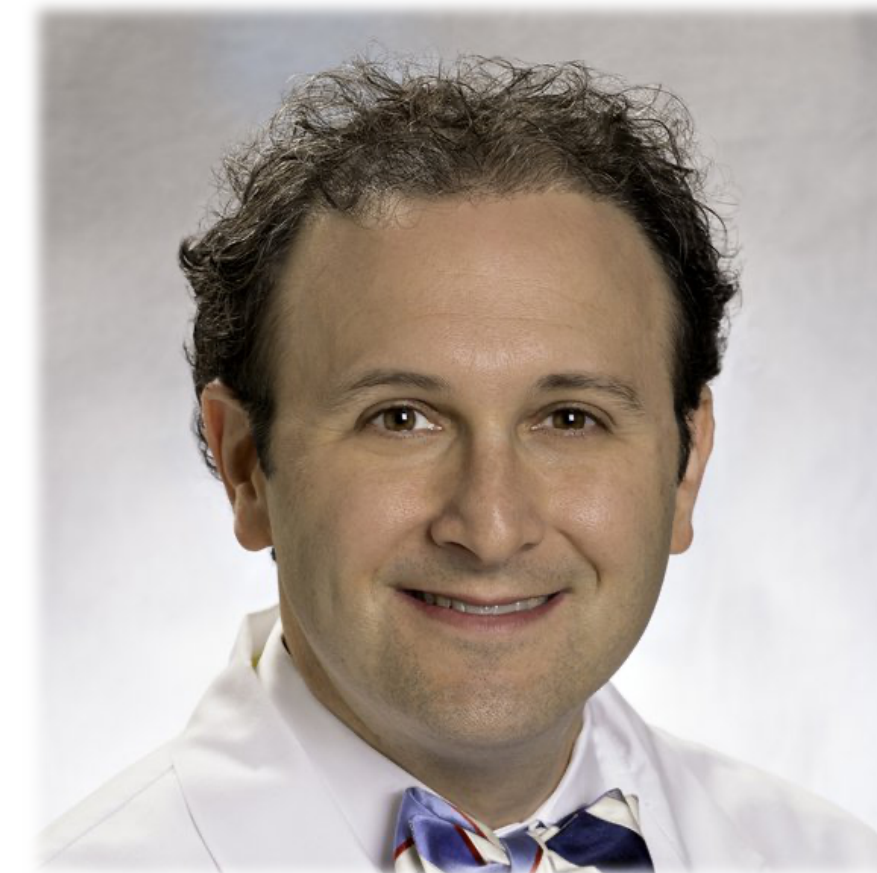
“...the aducanumab decision by FDA administrators was probably the **worst drug approval decision** in recent U.S. history...”

Case study - Aducanumab (Aduhelm)



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Dr. Aaron Kesselheim, who resigned this week from an F.D.A. advisory committee, speaking at a panel in 2018. "This might be the worst approval decision that the F.D.A. has made that I can remember," he said Thursday. Scott Eisen/Associated Press

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"...the aducanumab decision by FDA administrators was probably the **worst drug approval decision** in recent U.S. history..."

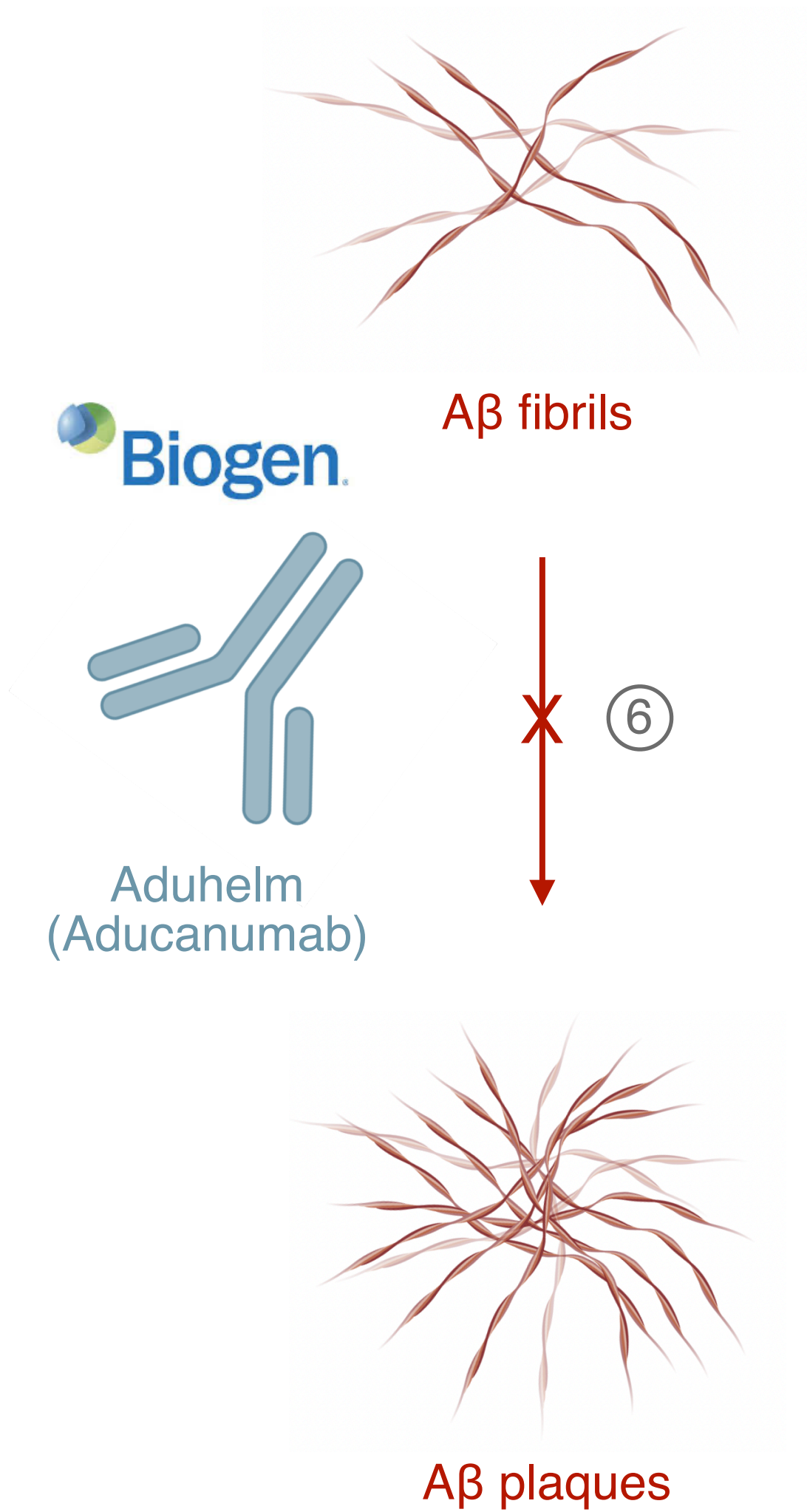
David Knopman, M.D. - Mayo Clinic neurologist

"...disappointed at how the advisory committee input was treated by the FDA..."

Joel Perlmutter, M.D. - Washington University neurologist

"...ruling by the FDA without further discussion with our advisory committee..."

Case study - Aducanumab (Aduhelm)



phase IV confirmatory trials - 2021

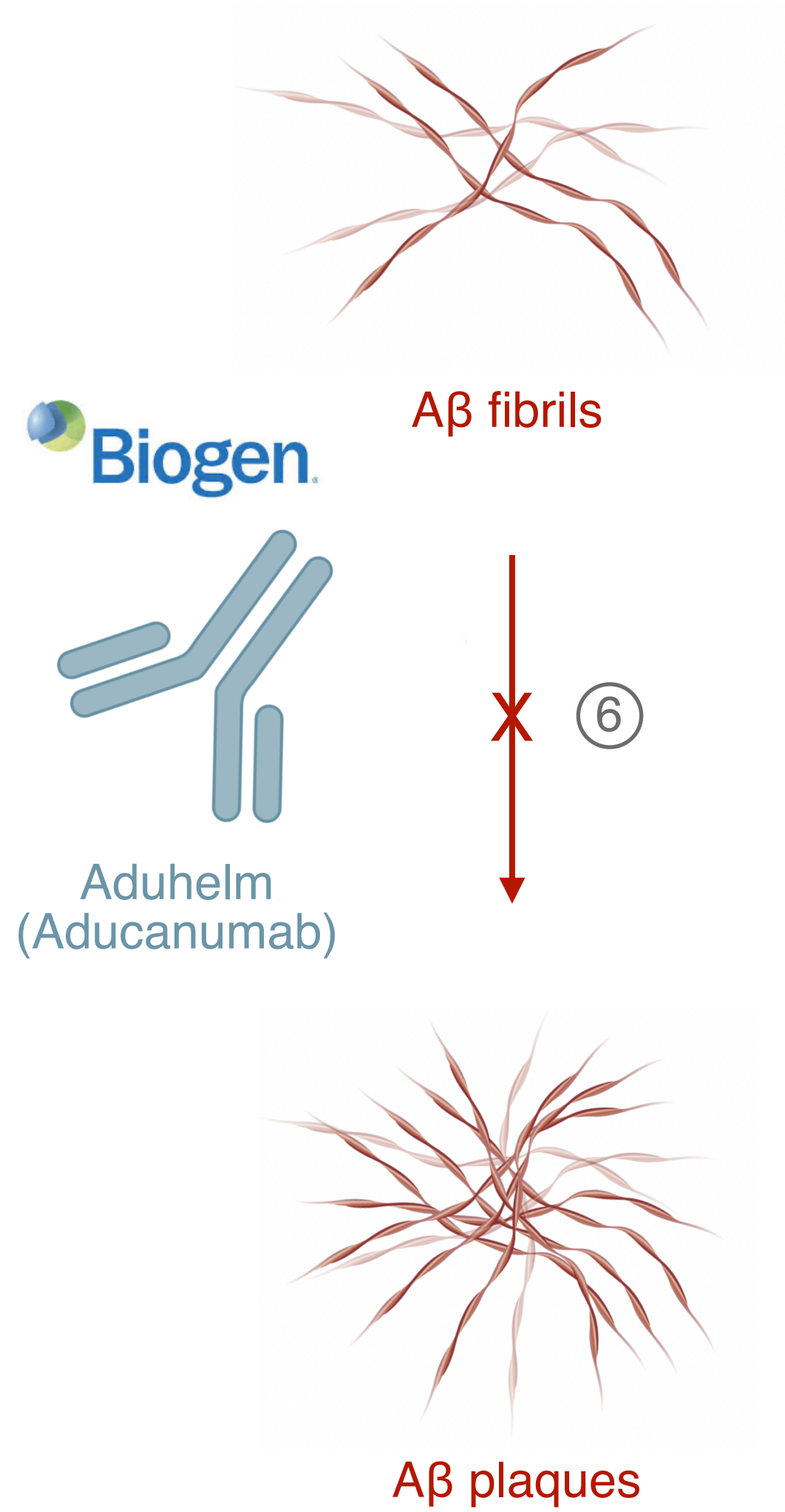


Biogen CEO Michel Vounatsos

“...the company has up to nine years to deliver the final results...”

(results in 2030)

Case study - Aducanumab (Aduhelm)



absence of evidence that the medication was effective

Case study - Aducanumab (Aduhelm)



2015 - Phase III



2 identical 18-month-long randomized, doubleblind, placebo-controlled, parallel-group studies (EMERGE and ENGAGE)



3,285 participants



348 sites



20 countries

criteria: 50-85 years of age, had a diagnosis of early symptomatic AD and were positive for brain amyloid pathology as assessed by PET

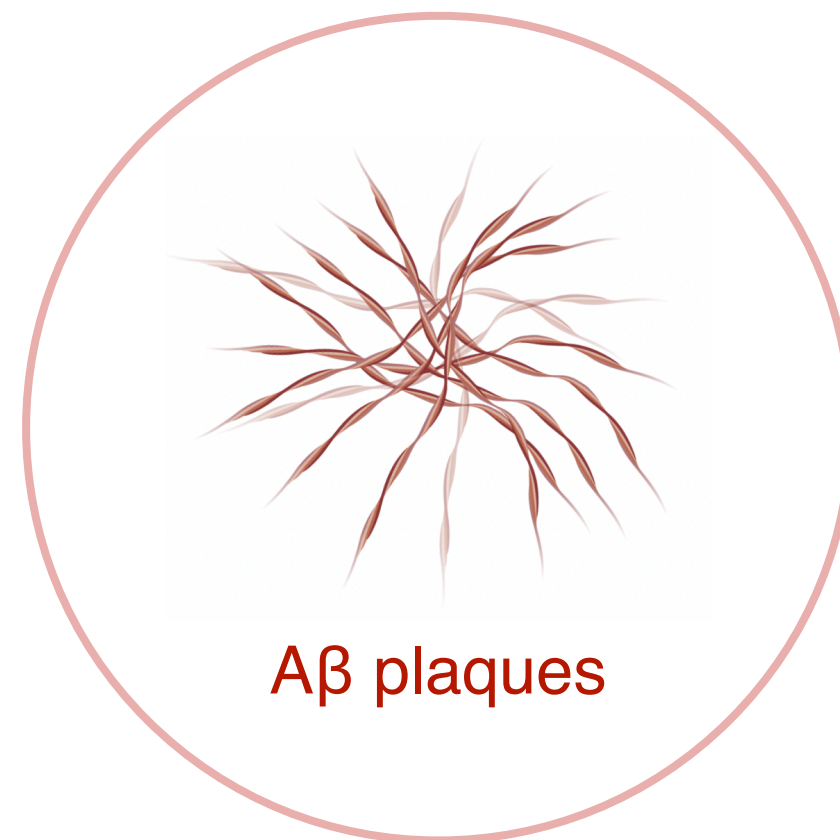
Case study - Aducanumab (Aduhelm)



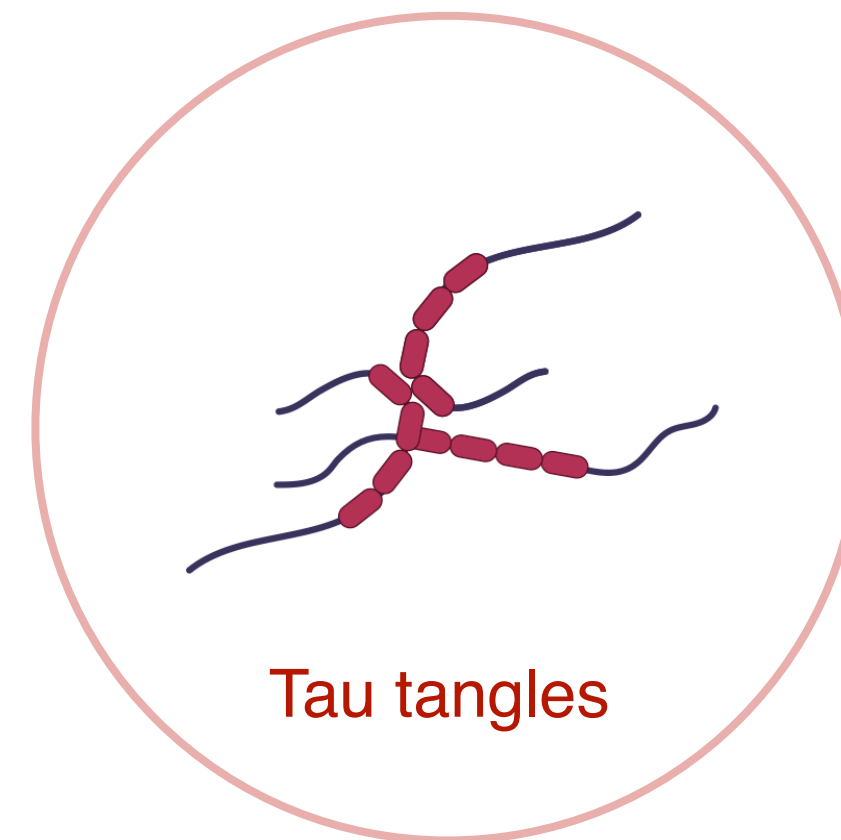
2015 - Phase III



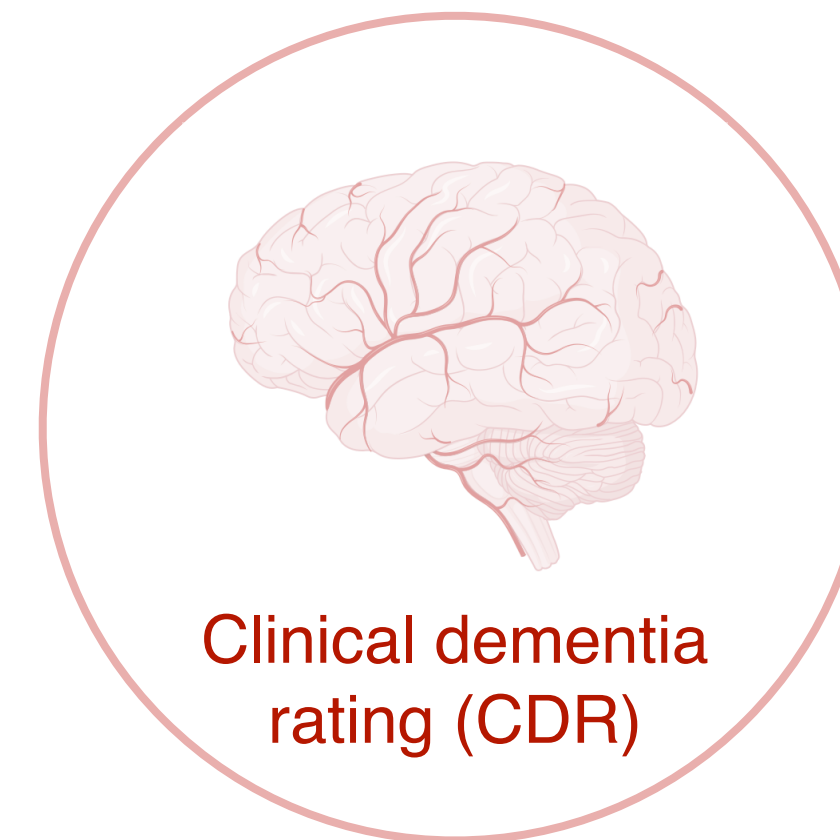
2 identical 18-month-long randomized, doubleblind, placebo-controlled, parallel-group studies (EMERGE and ENGAGE)



Aβ plaques

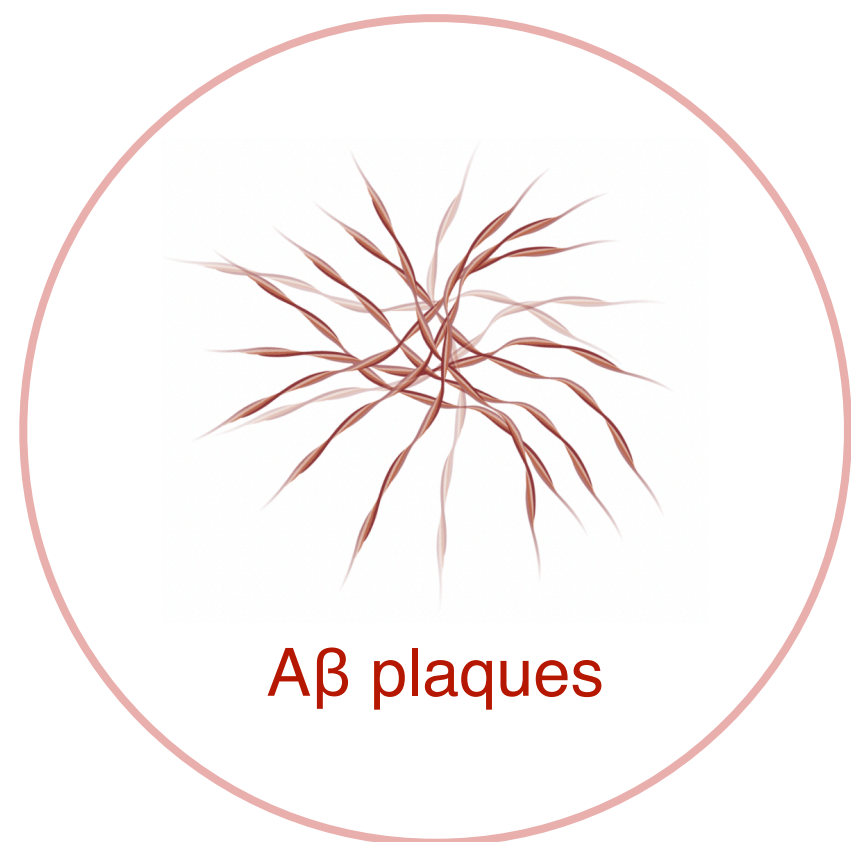


Tau tangles



Clinical dementia rating (CDR)

Case study - Aducanumab (Aduhelm)

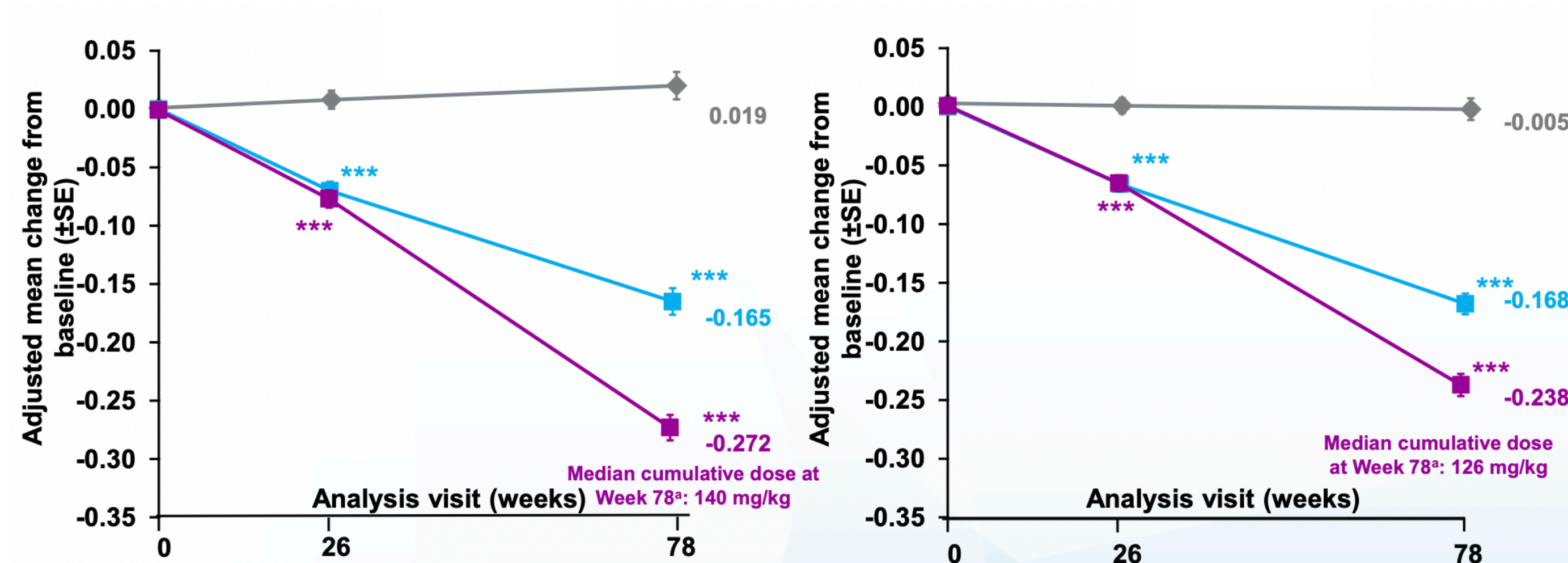


2015 - Phase III



EMERGE

ENGAGE

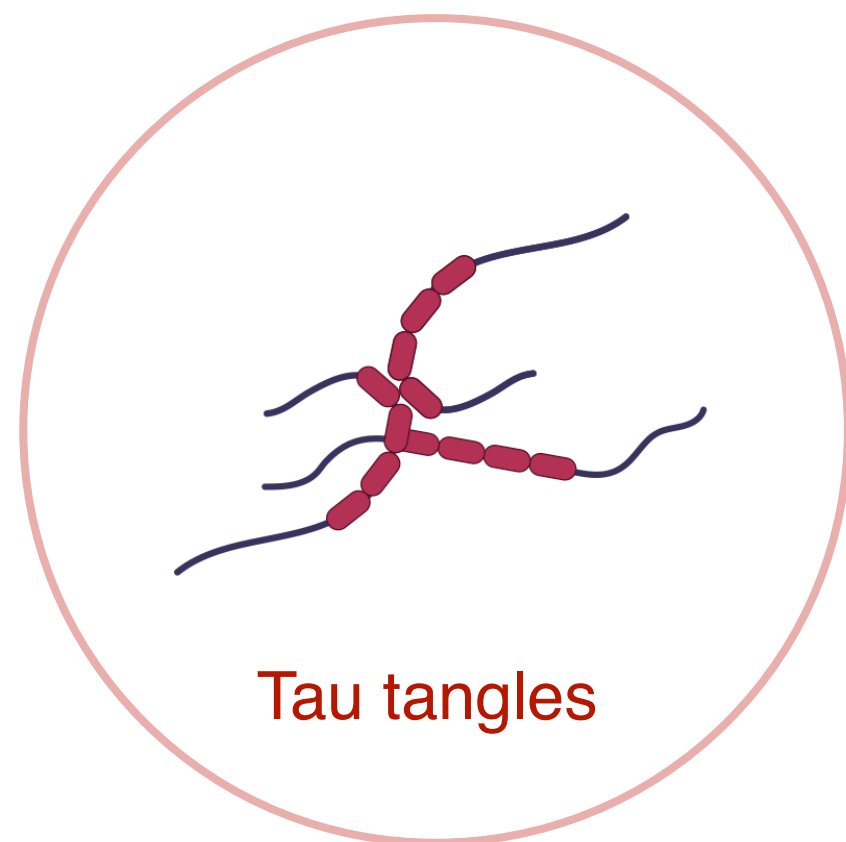


Placebo
Low dose
High dose

Case study - Aducanumab (Aduhelm)

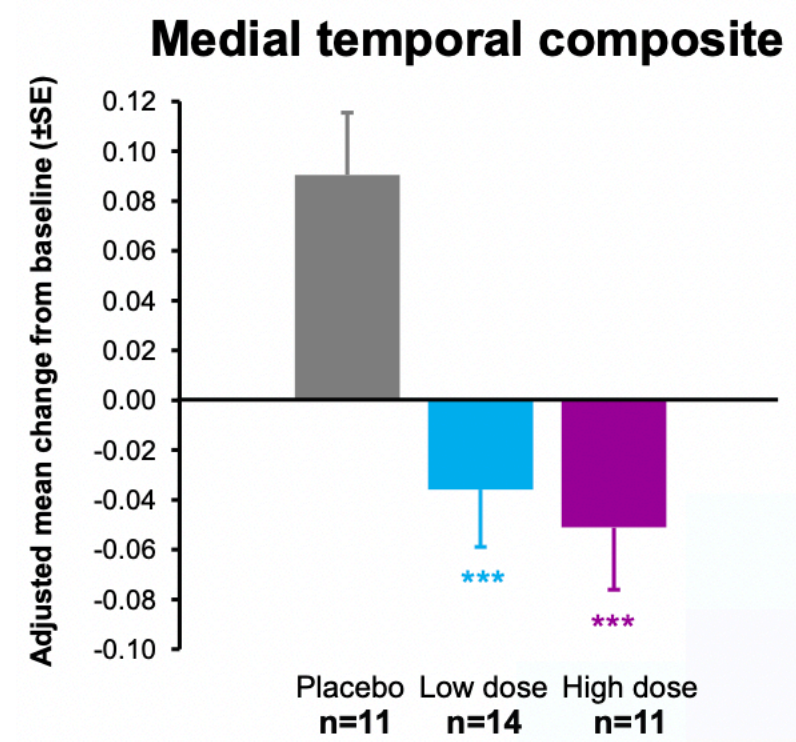


2015 - Phase III

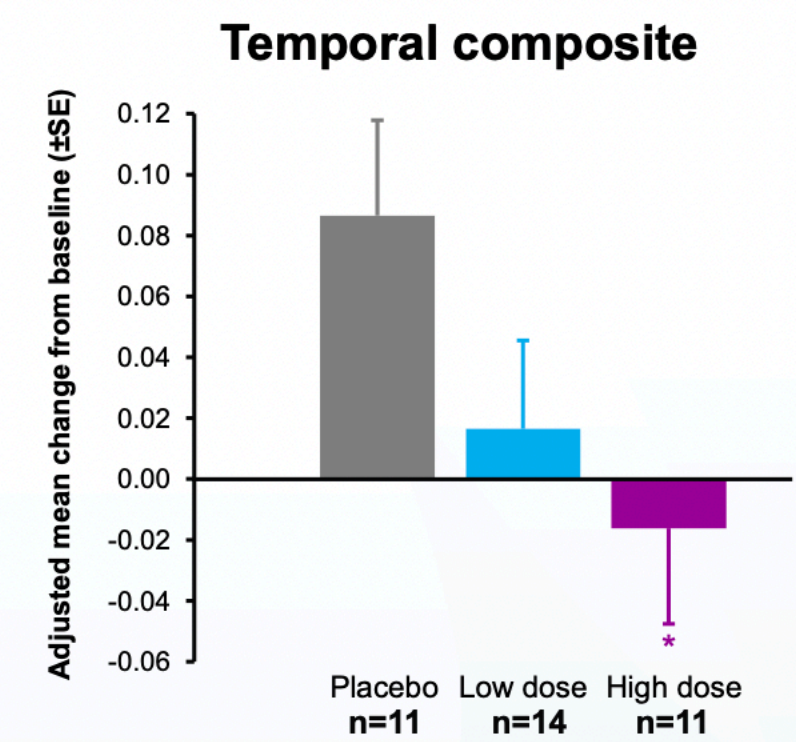


EMERGE

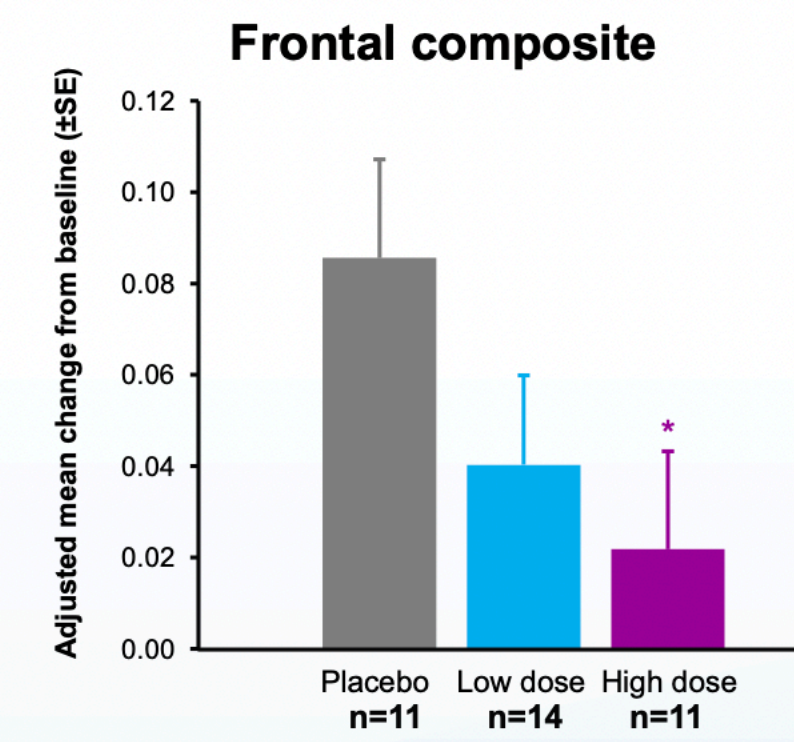
ENGAGE



HIPPOCAMPUS
 PARAHIPPOCAMPAL
 TEMPORAL LOBE ANTERIOR MEDIAL
 (includes Entorhinal and Amygdala)
 TEMPORAL LOBE ANTERIOR LATERAL



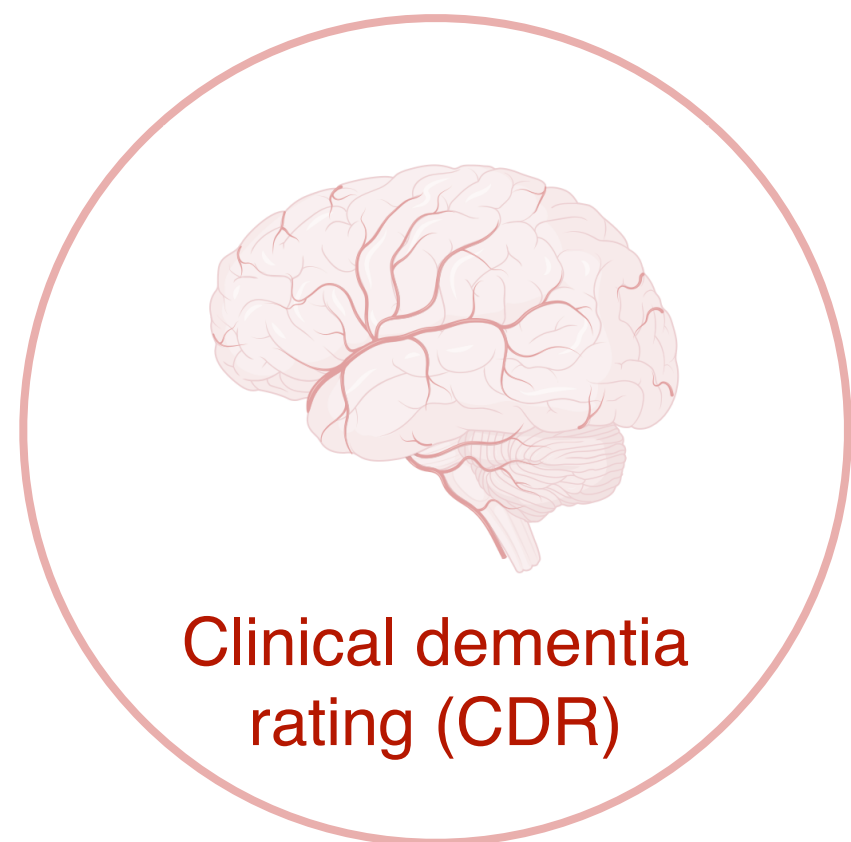
TEMPORAL LOBE Comprised of:
 SUPERIOR, POSTERIOR, MIDDLE INFERIOR
 POSTERIOR, SUPERIOR ANTERIOR,
 FUSIFORM GYRUS



FRONTAL LOBE Comprised of:
 MIDDLE, PRECENTRAL, STRAIGHT GYRUS
 INFERIOR, SUPERIOR
 ORBITOFRONTAL CORTEX Comprised of:
 ANTERIOR, MEDIAL, LATERAL, POSTERIOR

Placebo
 Low dose
 High dose

Case study - Aducanumab (Aduhelm)

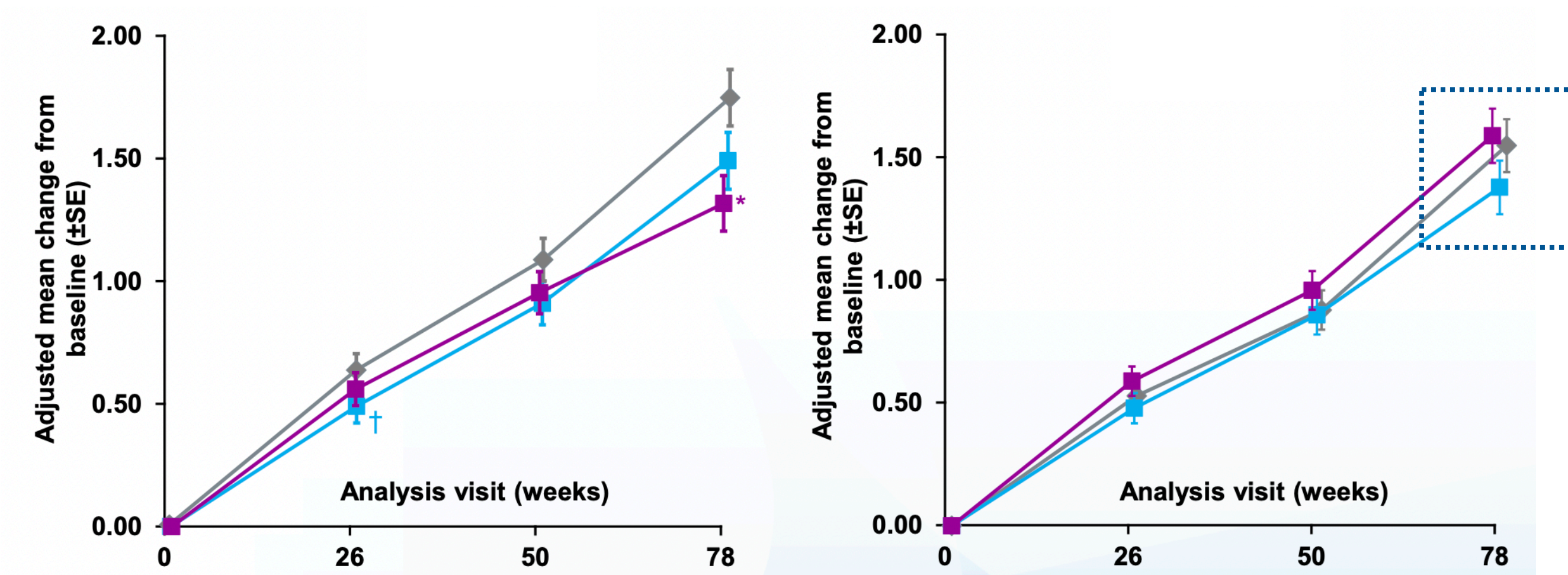


2015 - Phase III



EMERGE

ENGAGE

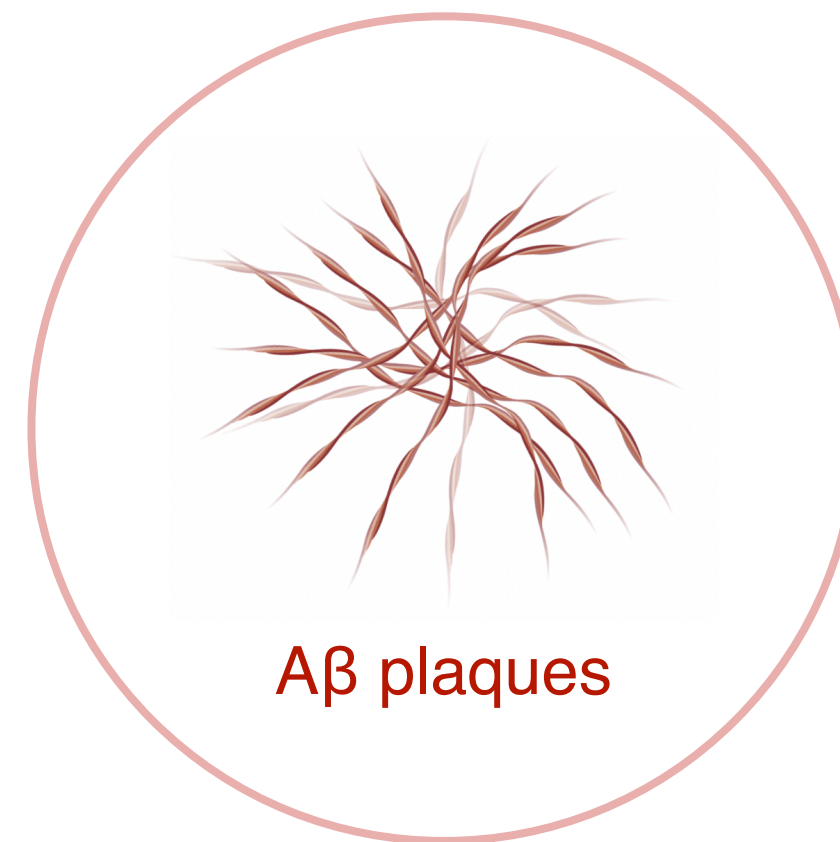


Placebo
Low dose
High dose

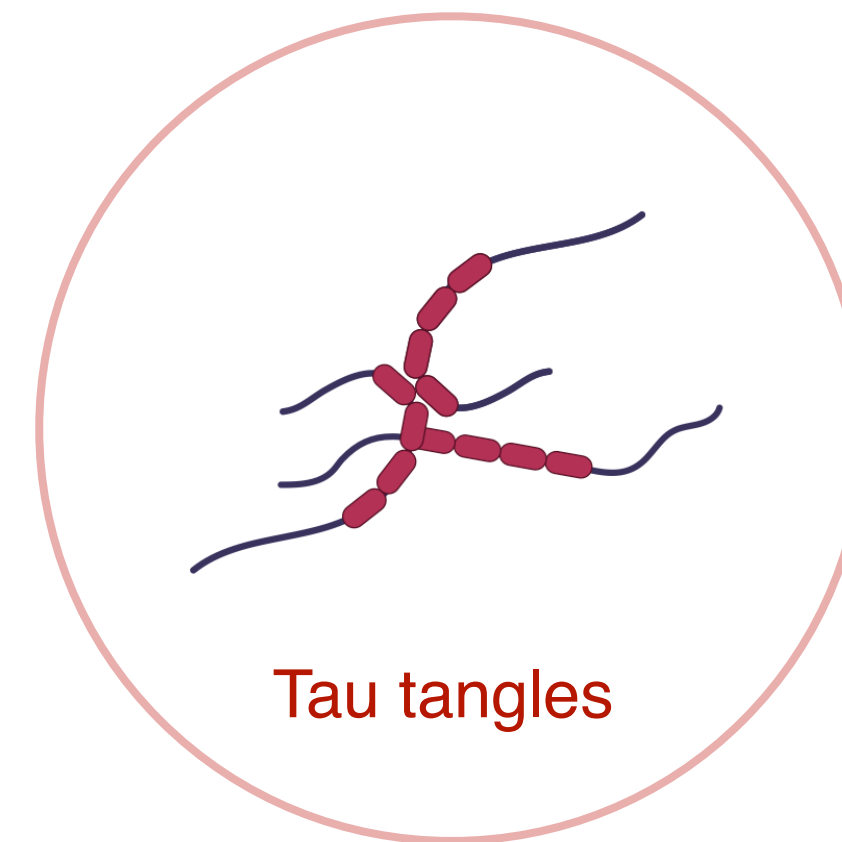
Case study - Aducanumab (Aduhelm)



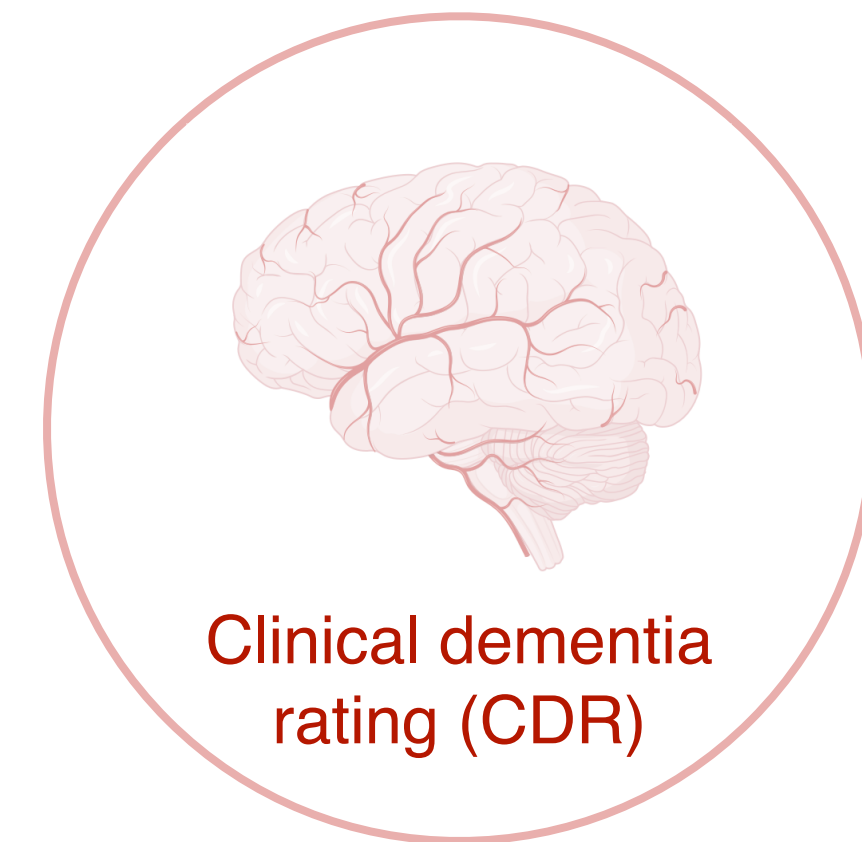
2015 - Phase III



Aβ plaques



Tau tangles



Clinical dementia rating (CDR)

EMERGE	✓	✓	~
ENGAGE	✓	✓	✗

Case study - Aducanumab (Aduhelm)



2015 - Phase III



March 2019 - Biogen stopped development of Aduhelm



Biogen spent **\$2.4 billion** on Alzheimer's-related research toward **Aduhelm**

Case study - Aducanumab (Aduhelm)



2015 - Phase III



March 2019 - Biogen stopped development of Aduhelm



Biogen spent \$2.4 billion on Alzheimer's-related research toward **Aduhelm**

Case study - Aducanumab (Aduhelm)



2015 - Phase III



October 2019 - announcement for FDA approval

Case study - Aducanumab (Aduhelm)



2015 - Phase III



October 2019 - announcement for FDA approval

Case study - Aducanumab (Aduhelm)



2015 - Phase III



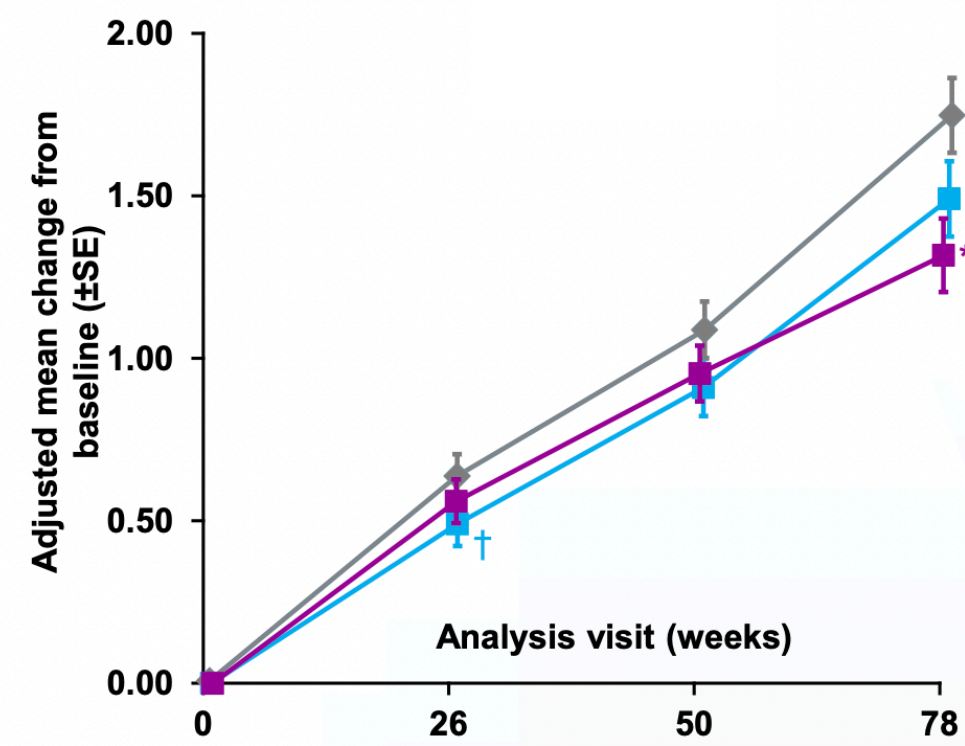
October 2019 - announcement for FDA approval

- US\$100 billion + US\$60 billion

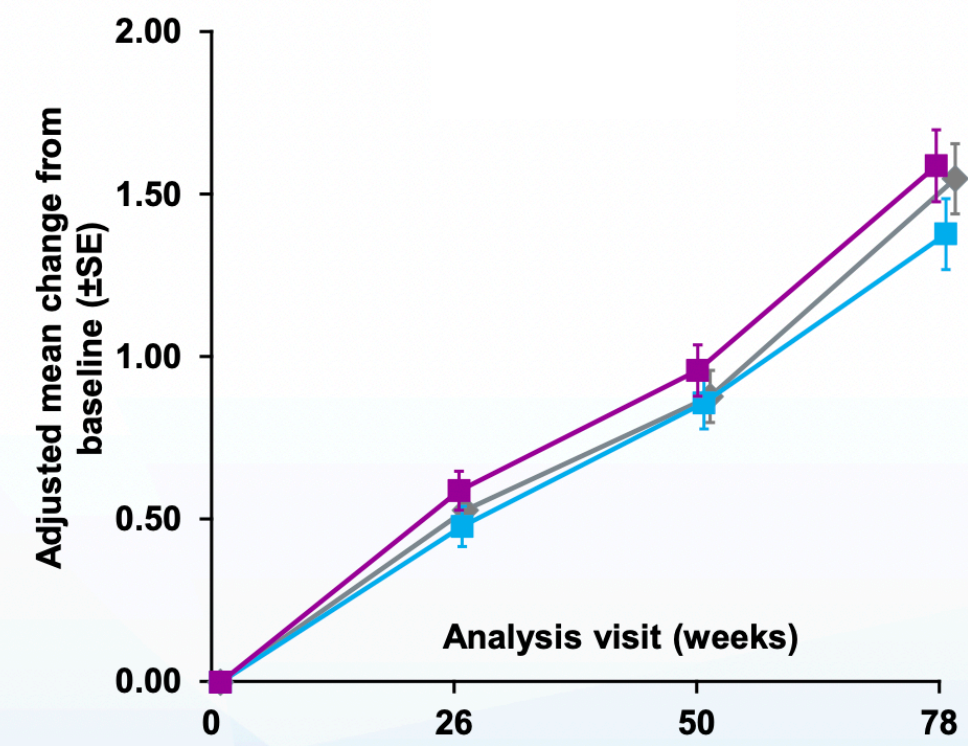
Case study - Aducanumab (Aduhelm)



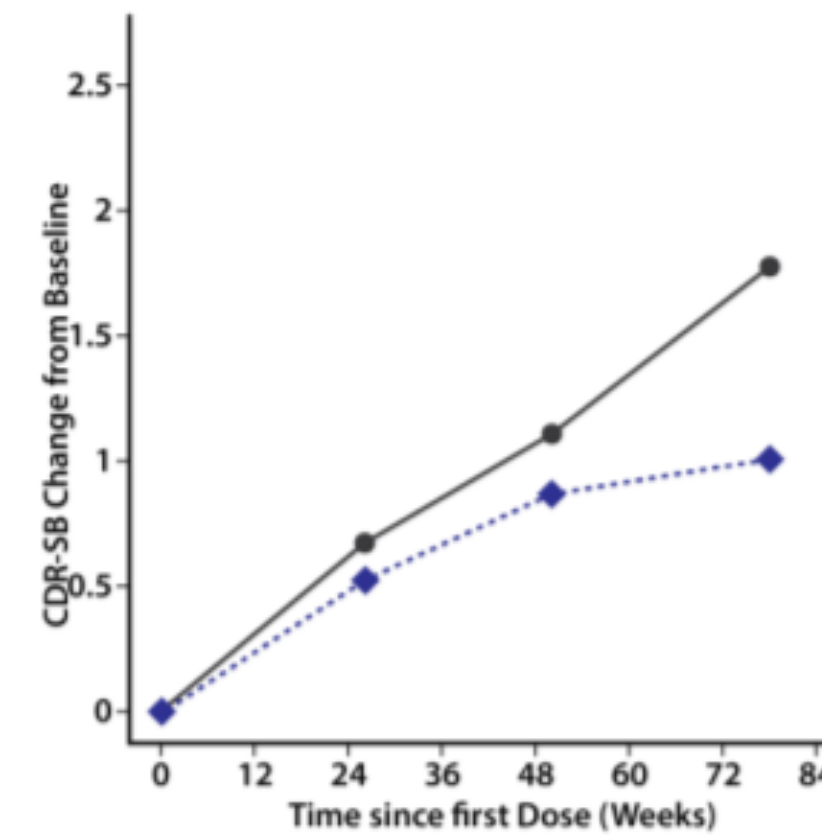
EMERGE



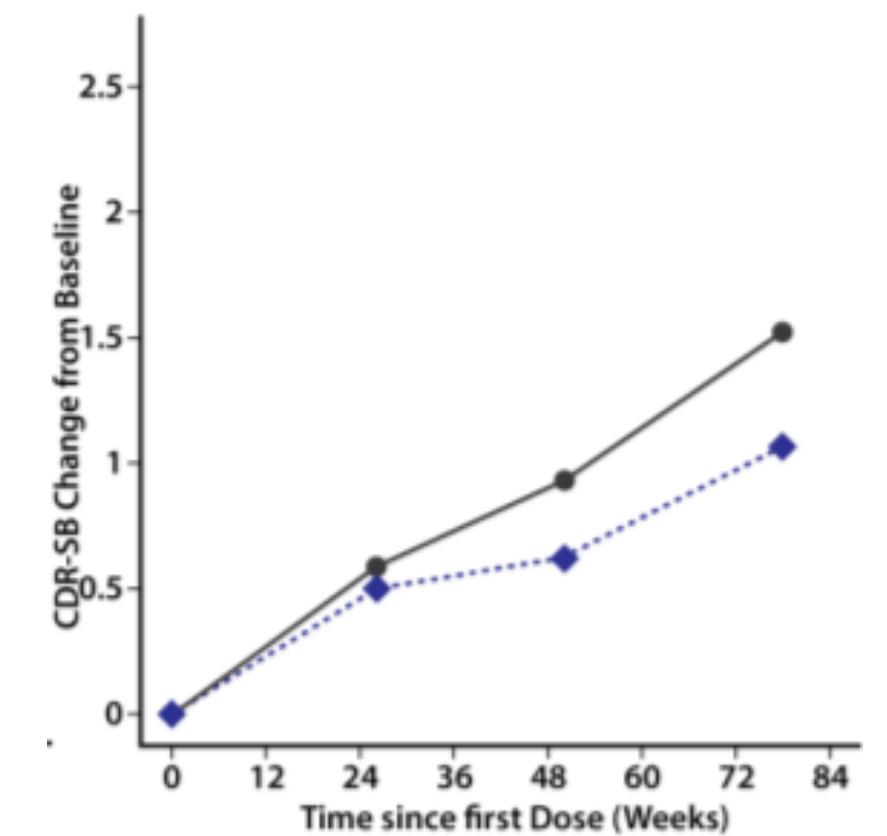
ENGAGE



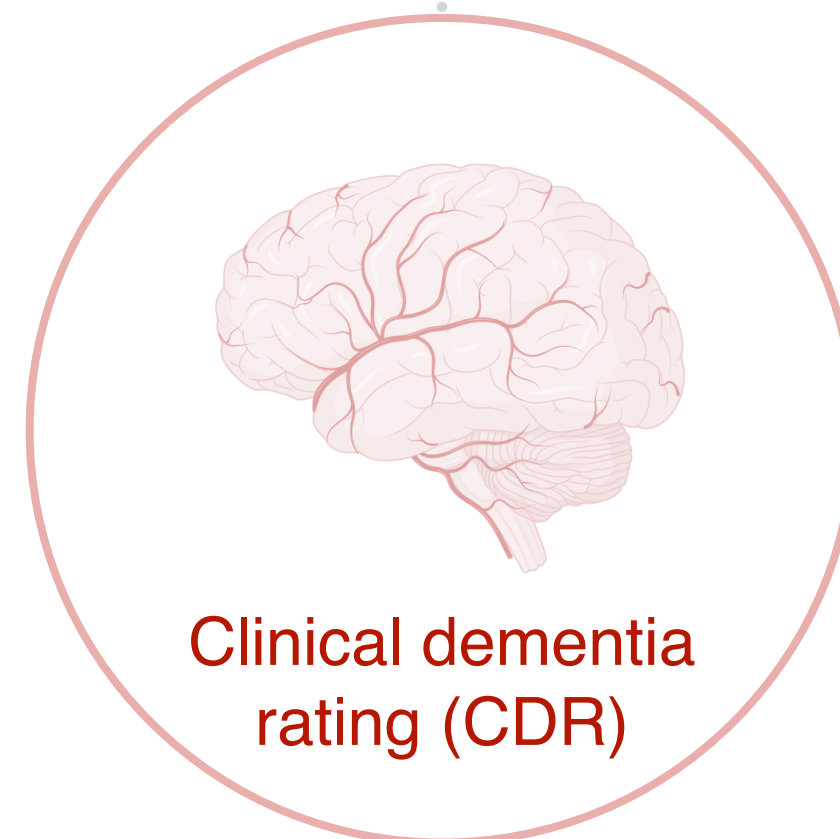
EMERGE



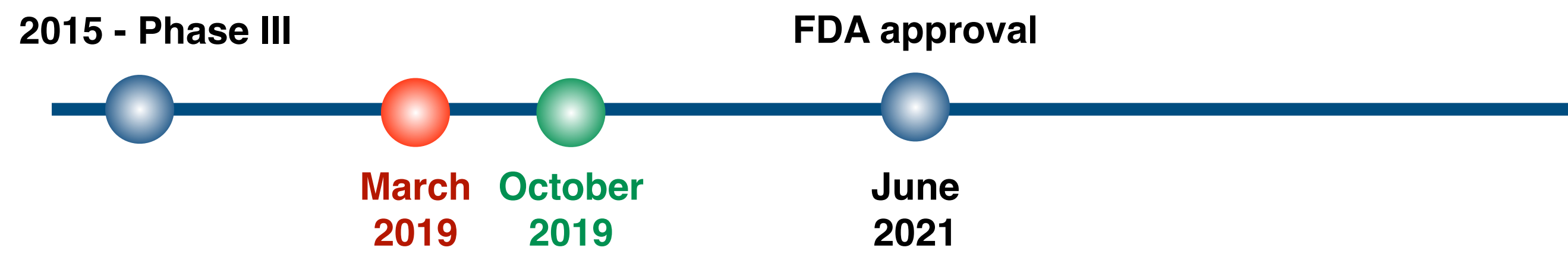
ENGAGE



Placebo
Low dose
High dose



Case study - Aducanumab (Aduhelm)



FDA accelerated approval - approval June 2021



IV every 4 weeks



US\$56,000 a year

Case study - Aducanumab (Aduhelm)

The New York Times

Three F.D.A. Advisers Resign Over Agency's Approval of Alzheimer's Drug

The drug, Aduhelm, a monthly infusion priced at \$56,000 per year, was approved this week despite weak evidence that it helps patients.

[Share full article](#) [↗](#) [🔖](#) [💬 64](#)



Dr. Aaron Kesselheim, who resigned this week from an F.D.A. advisory committee, speaking at a panel in 2018. "This might be the worst approval decision that the F.D.A. has made that I can remember," he said Thursday. Scott Eisen/Associated Press

By Pam Belluck and Rebecca Robbins

Published June 10, 2021 Updated Sept. 2, 2021

"FDA Approval of Aduhelm Draws Criticism for Lack of Solid Evidence"

The New York Times (June 2021)

The New York Times

"FDA's Approval of Aduhelm Raises Concerns Among Experts"

The Wall Street Journal (June 2021)

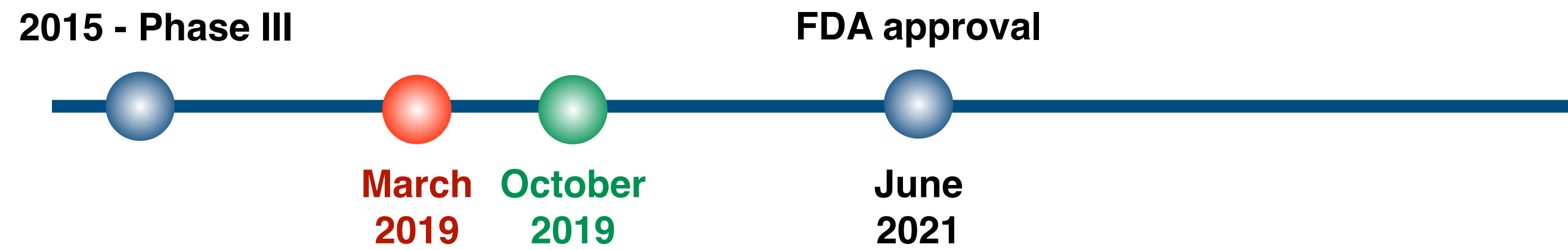
THE WALL STREET JOURNAL.

"Alzheimer's Drug Aduhelm Faces Strong Backlash From Medical Experts"

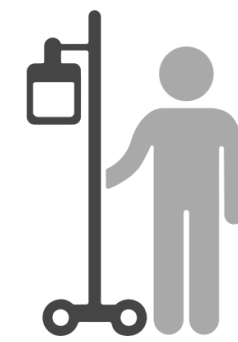
The Guardian (June 2021)

The Guardian

Case study - Aducanumab (Aduhelm)



2022 - total sales \$2.8 million
(predicted to be +\$1 billion)



IV every 4 weeks



social media

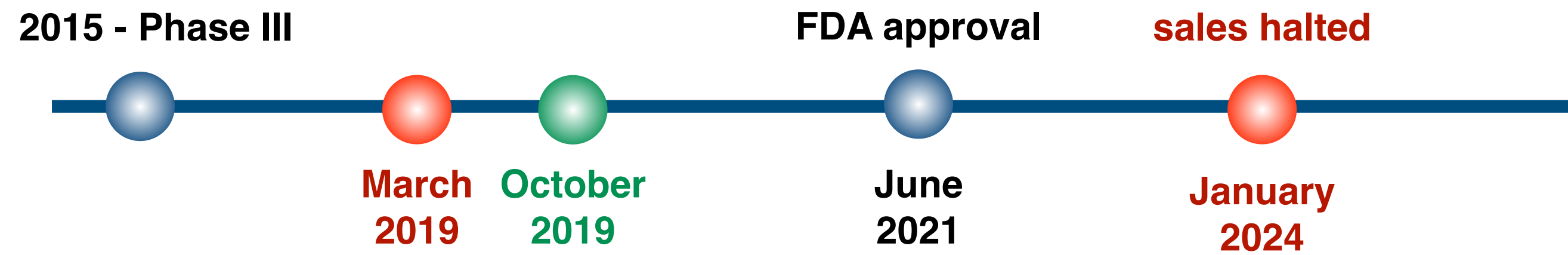


US\$56,000 a year



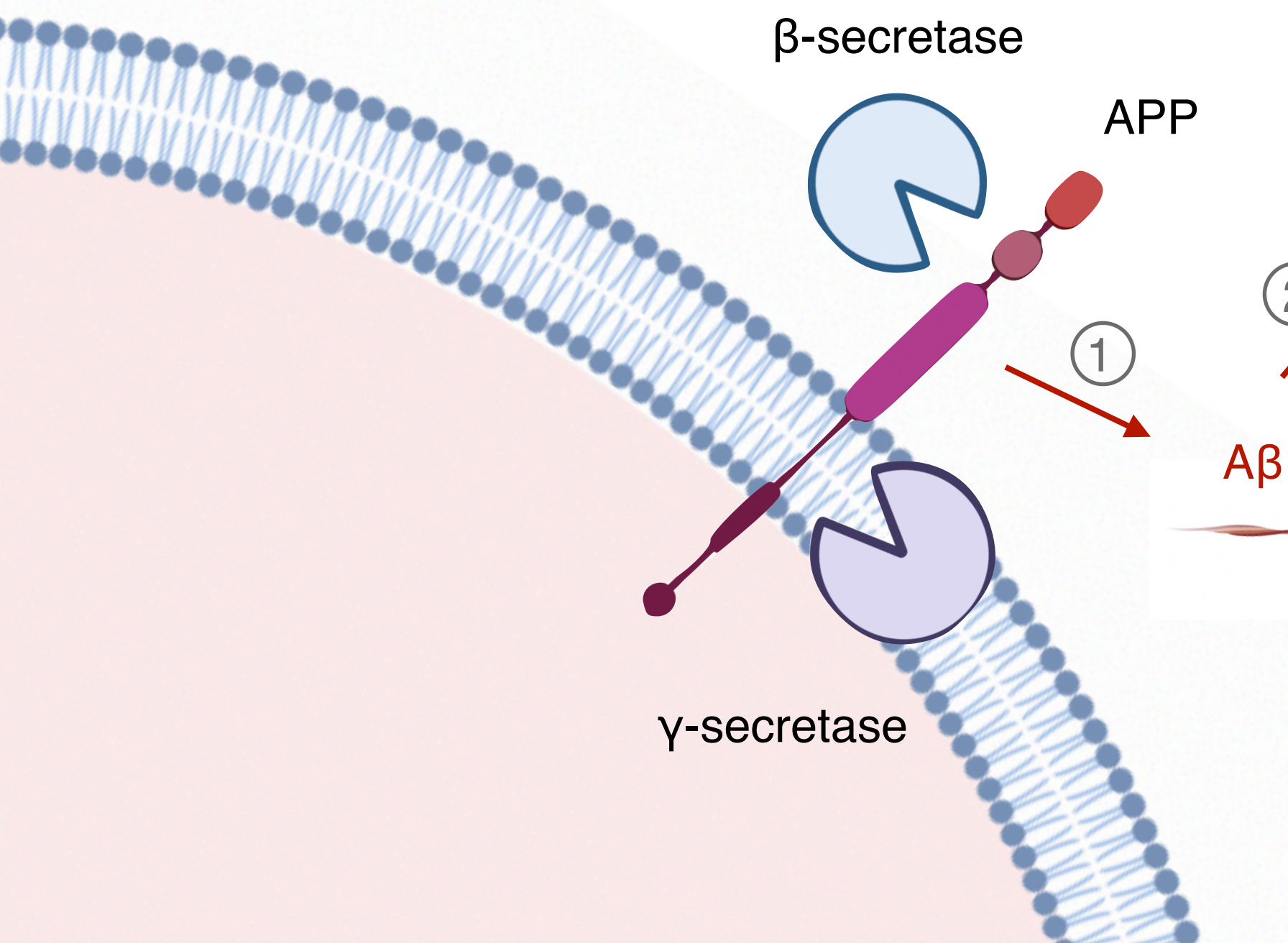
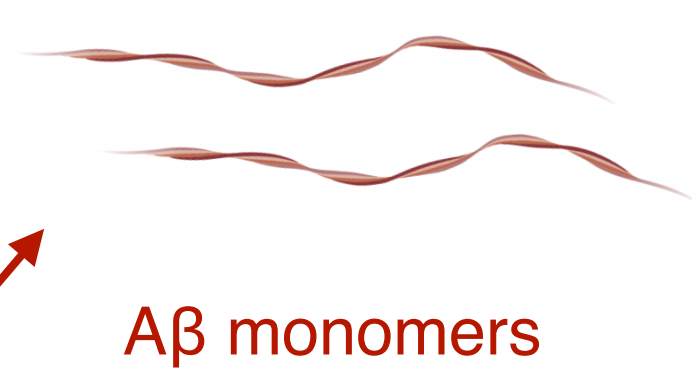
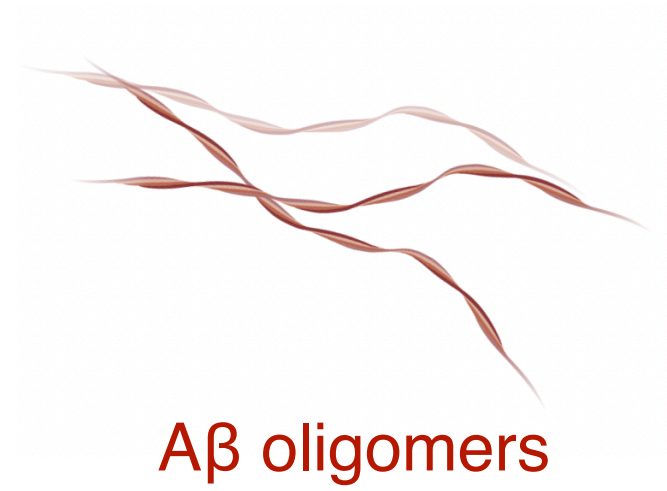
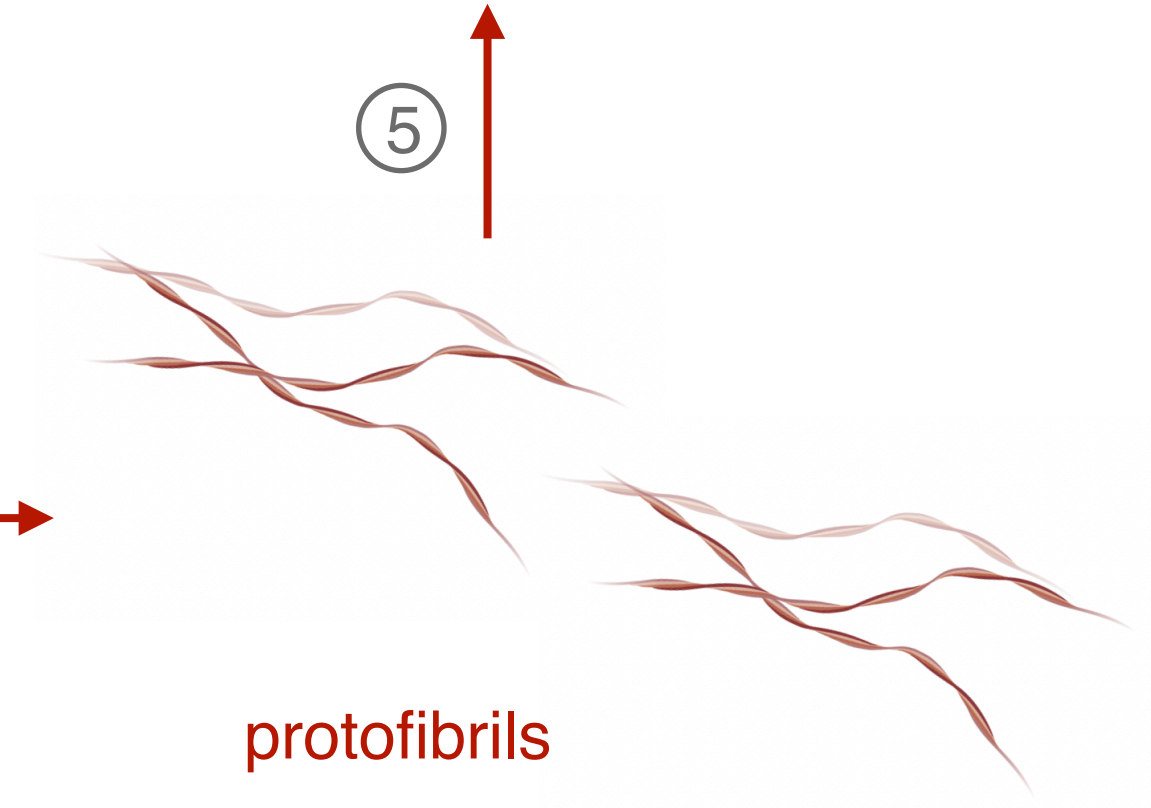
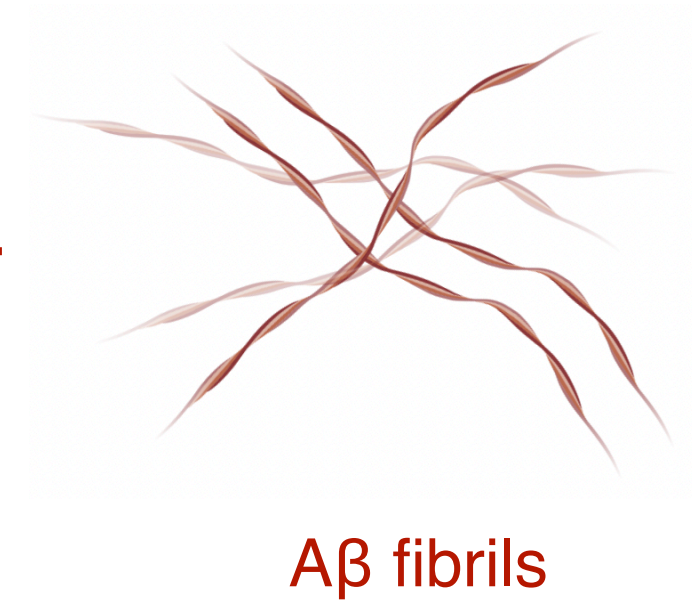
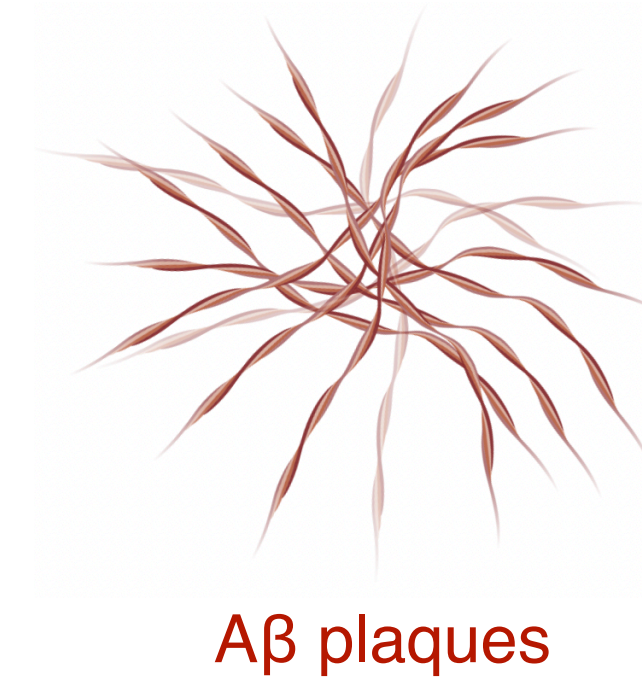
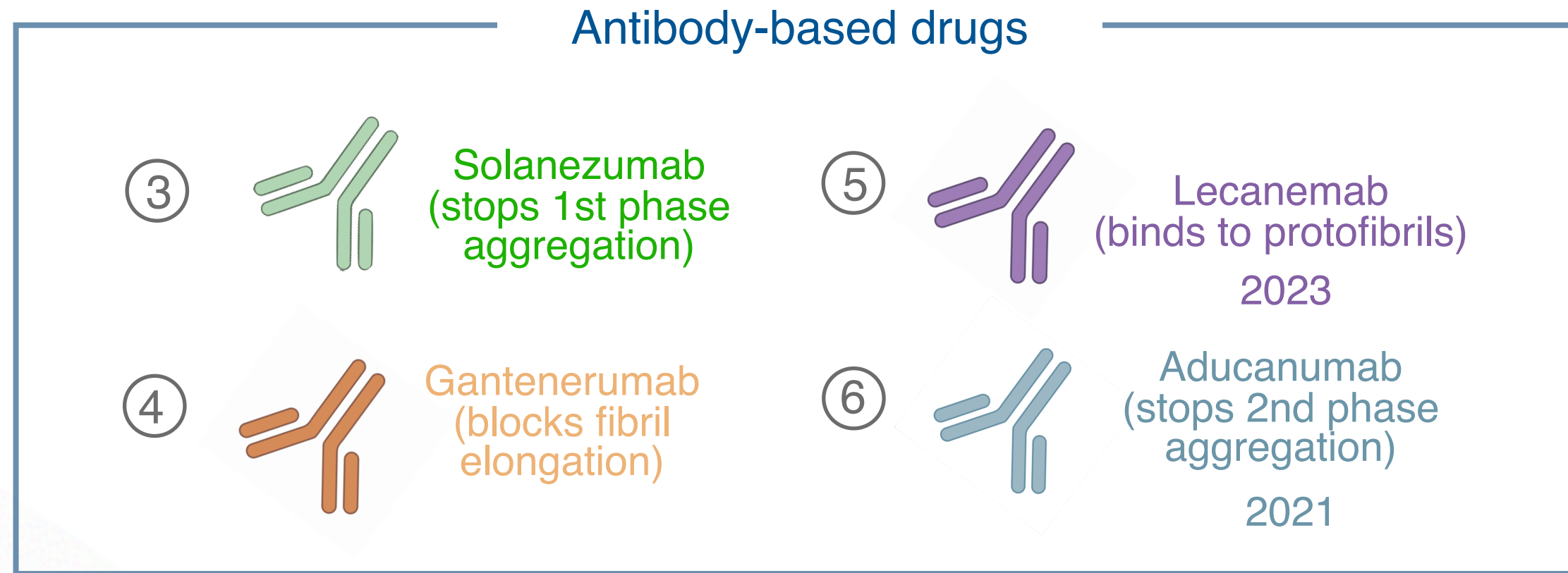
safety concerns
ARIA-E (Edema) -
brain swelling

Case study - Aducanumab (Aduhelm)



January 2024 - Biogen removed Aduhelm from the market

Alzheimers treatments & cures - A β plaques



③

④

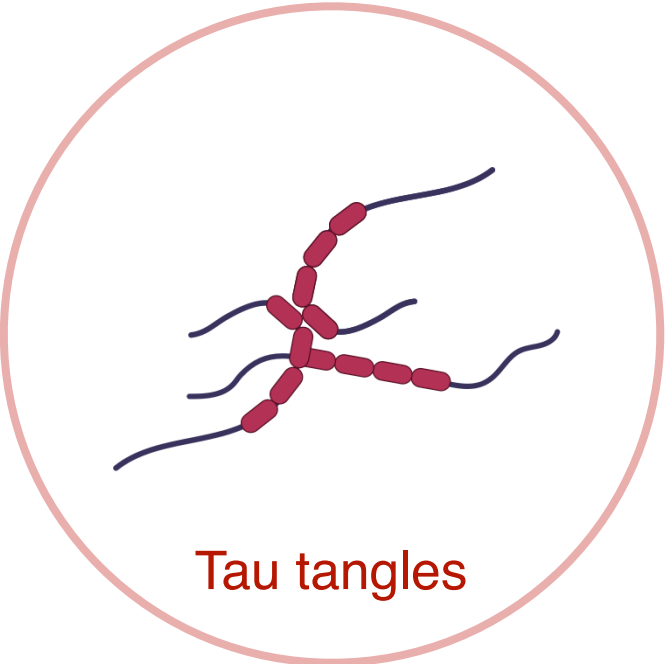
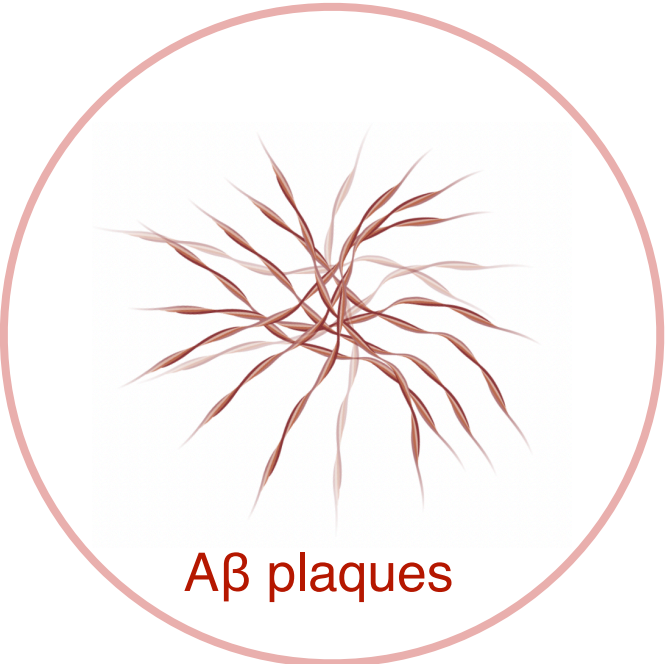
⑤

⑥

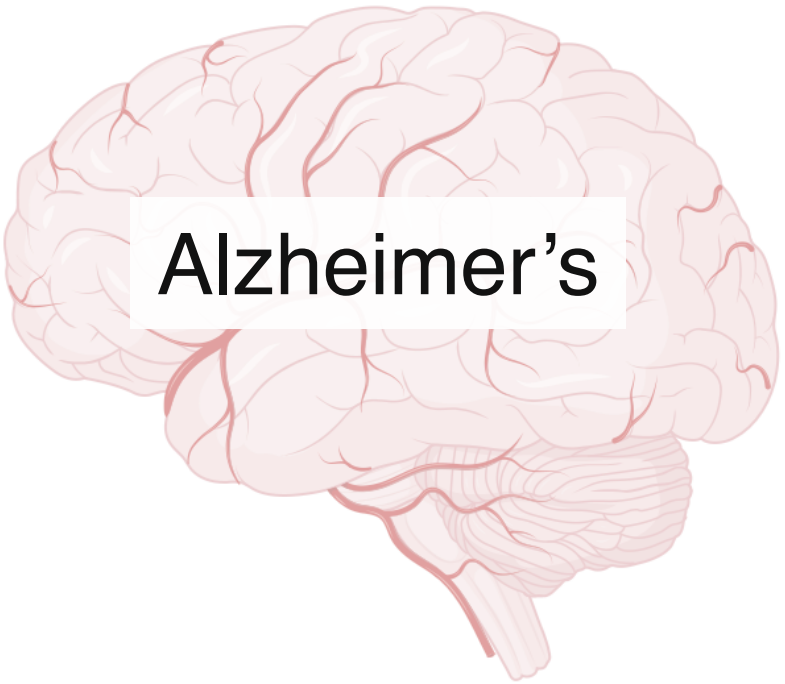
Have we been trying to drug something irrelevant?

Alzheimers treatments & cures - Aβ plaques

Aβ plaques:
“Correlation vs Causality”

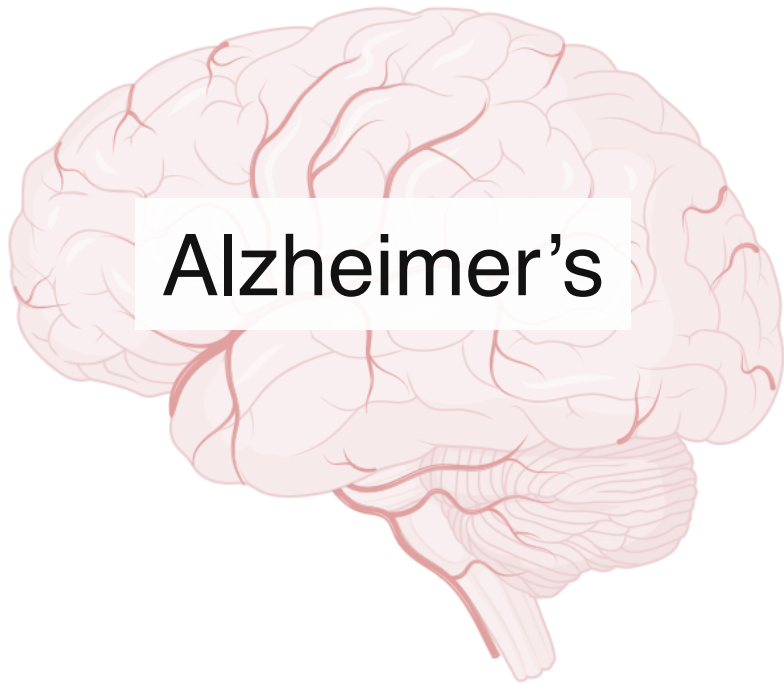


causes →

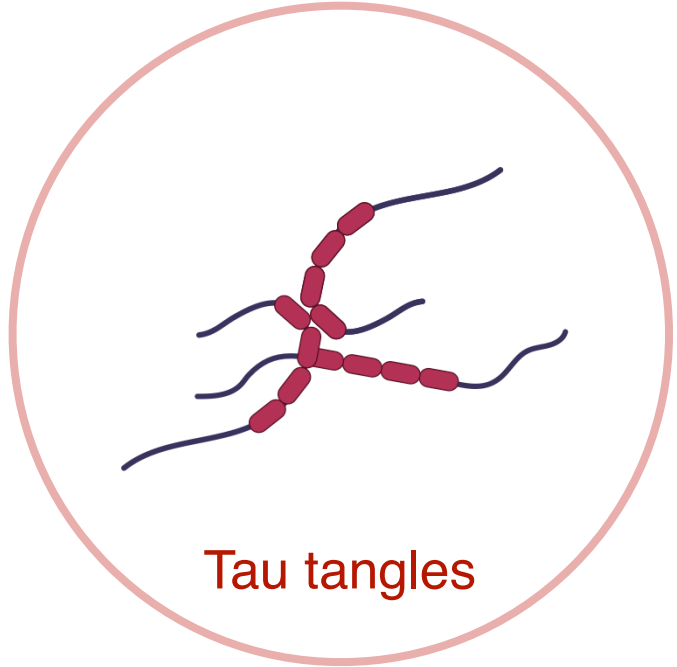
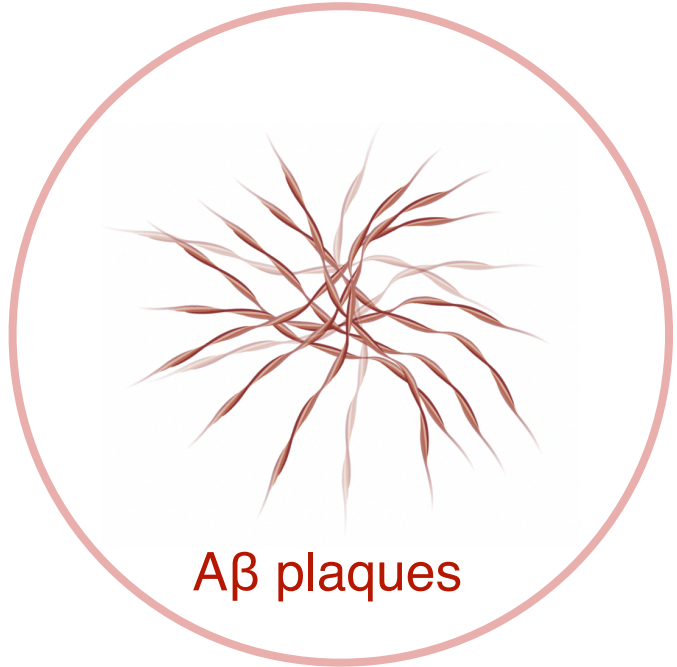


Alzheimers treatments & cures - Aβ plaques

Aβ plaques:
“Correlation vs Causality”



causes →

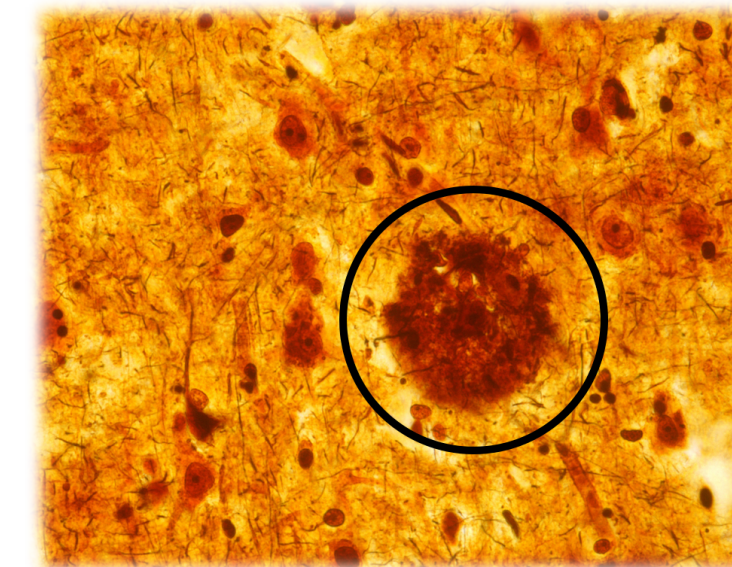
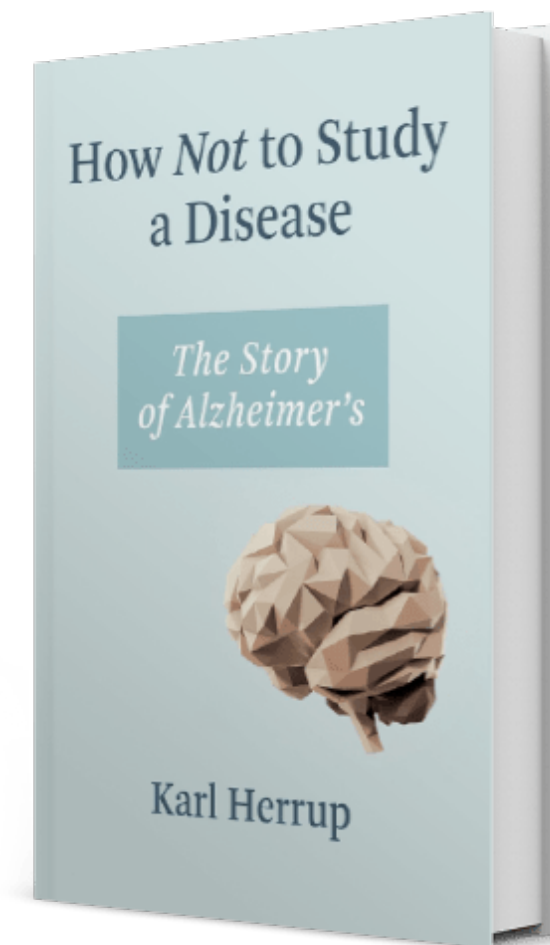


Where has Alzheimer's research gone wrong?

“Alzheimer's research direction likely went wrong right back at the very beginning, in **1906 with Auguste Deter**”



Karl Herrup
(neurobiologist)



“...when **two things occur together**, it doesn't necessarily mean that **one causes the other...**”

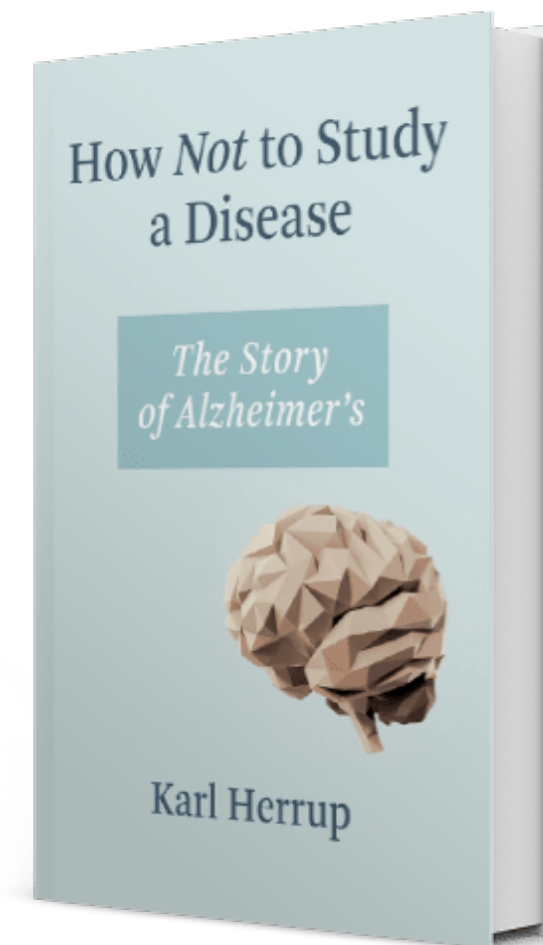
“...in confusing correlation with causality, the field has been trapped into this model of the disease...”

(we may have gone down a big rabbit hole!)

Where has Alzheimer's research gone wrong?



Karl Herrup
(neurobiologist)

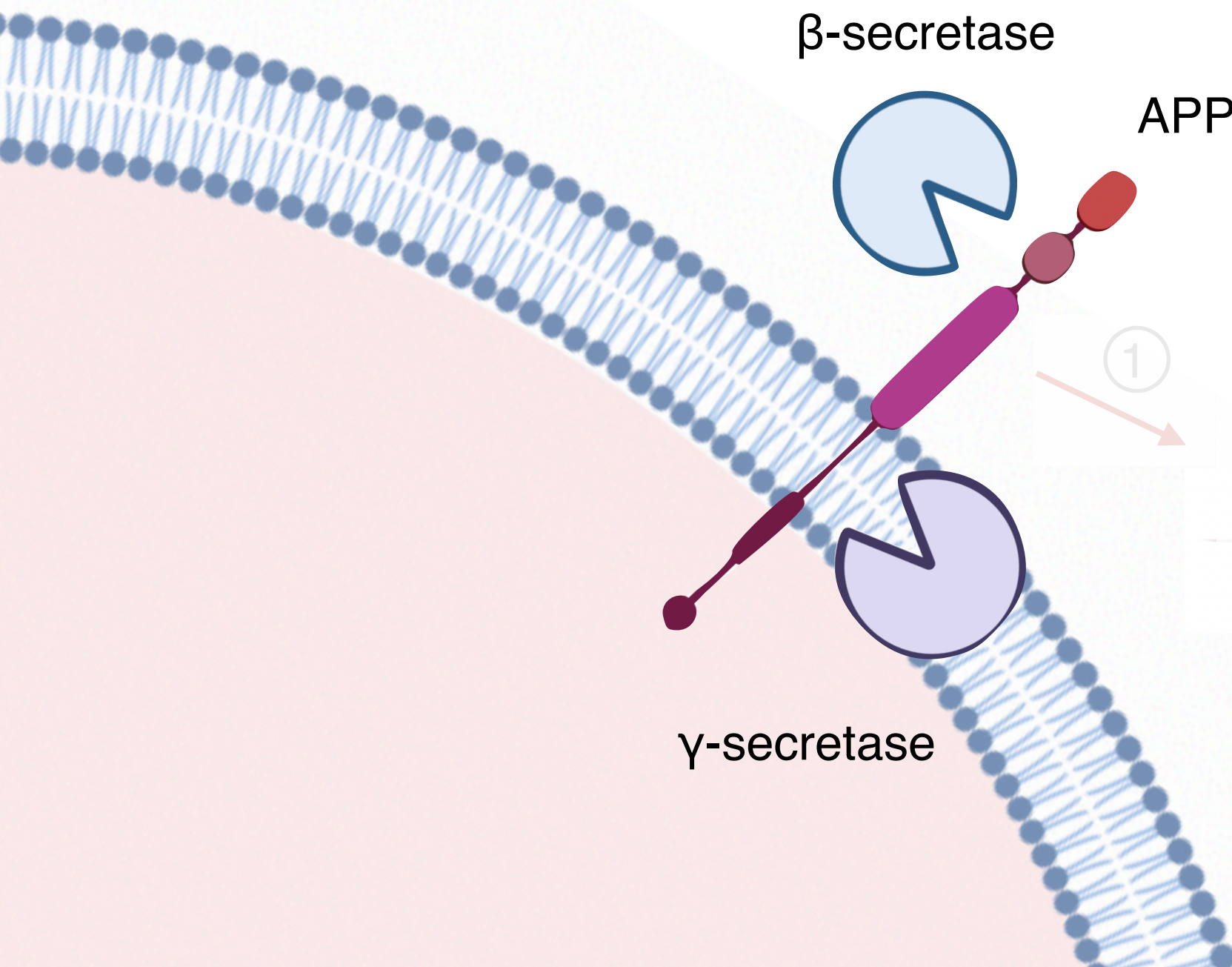
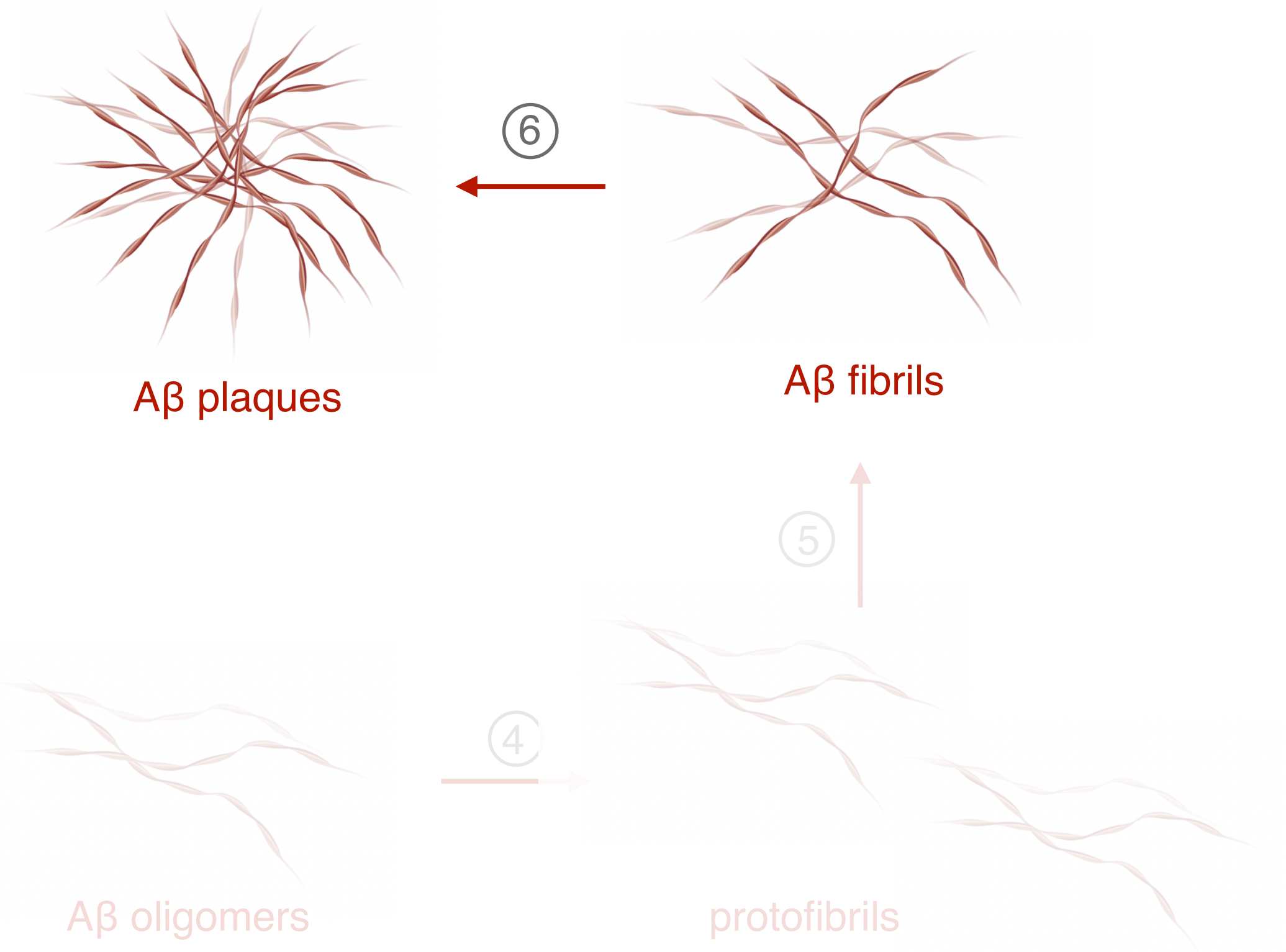
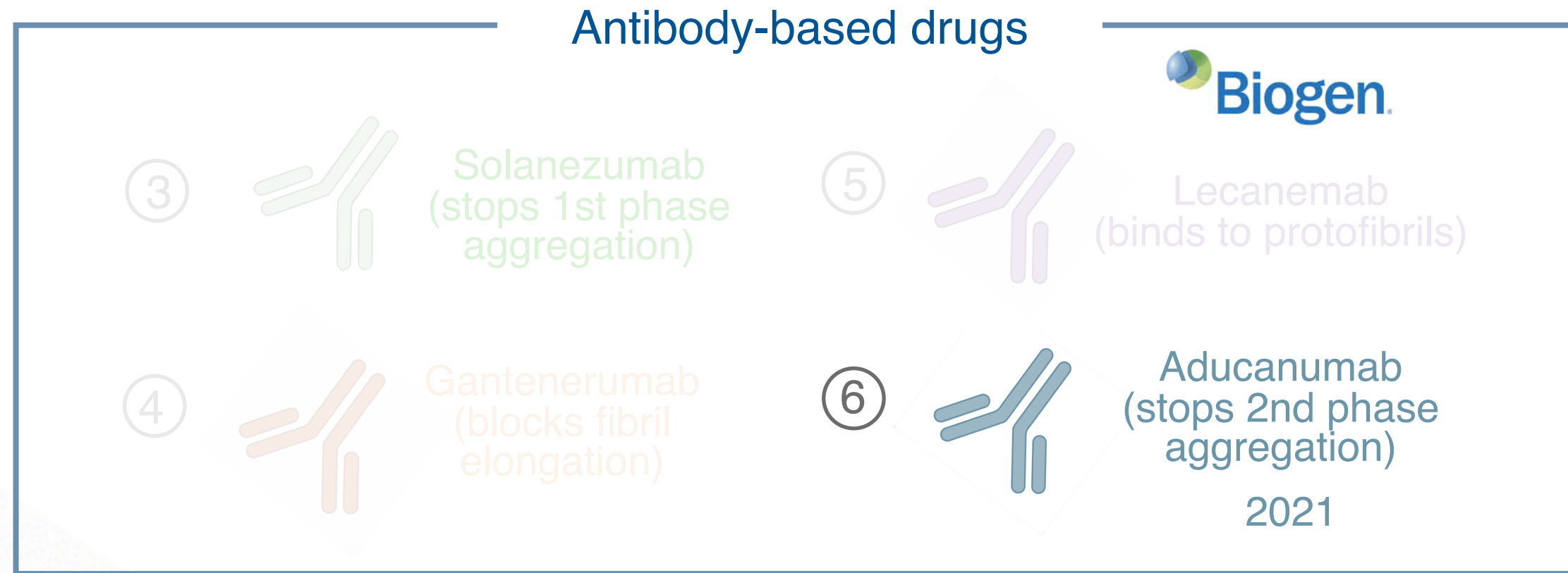


National Institute
on Aging

- “...decided they had to do something to **attract the funding dollars**, and they realized that the idea of aging is not really scary...”
- “...they needed a **boogeyman**, and they decided that, of all the diseases of aging, **dementia was probably the most feared**...”
- “...what was argued by the founders of the NIA was that, well, if you look at the brains of anyone with **dementia**, you can find these **plaques**...”
- “...the **pharmaceutical industry** stands to make **so much money**, if they can have proprietary rights on a drug...”

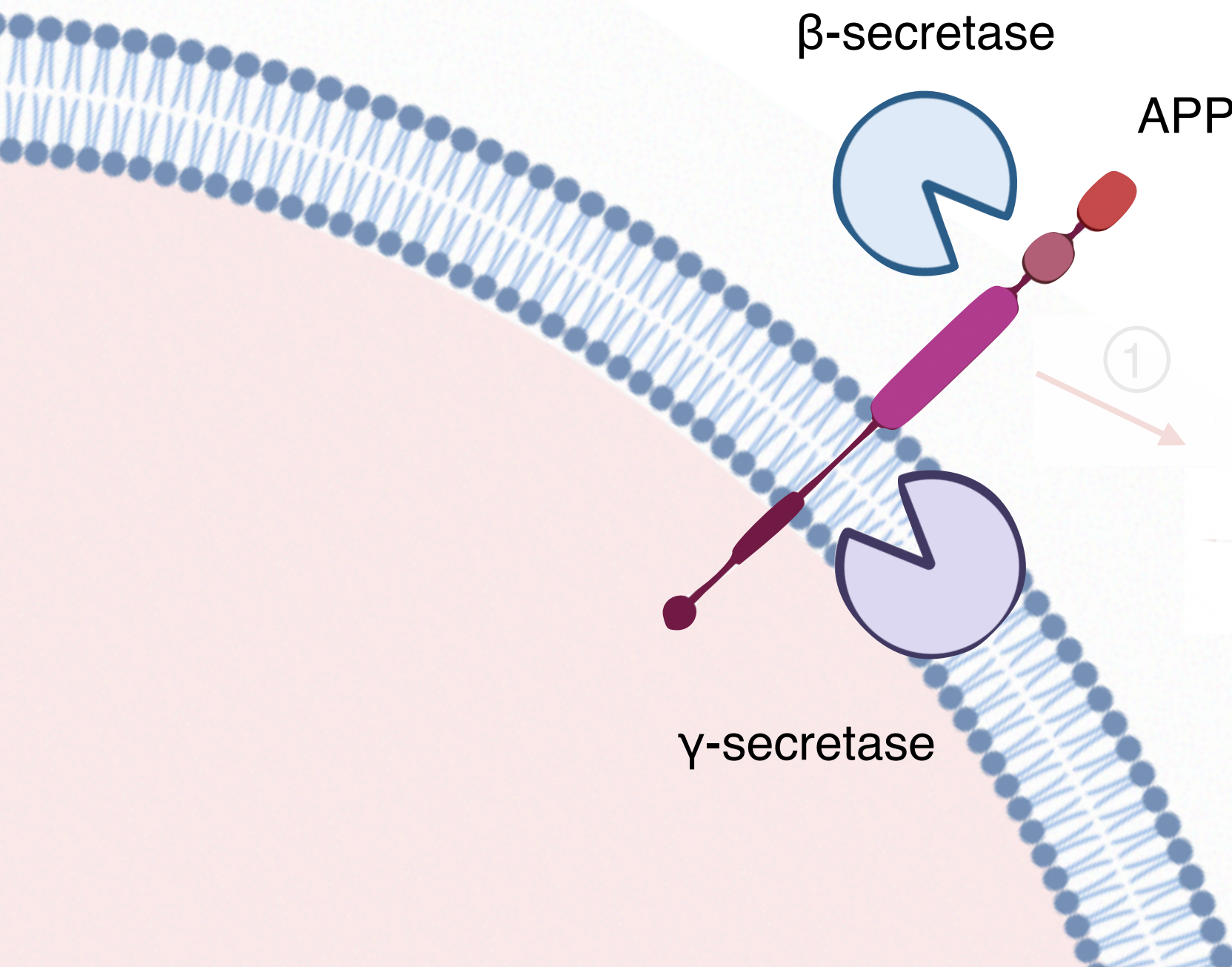
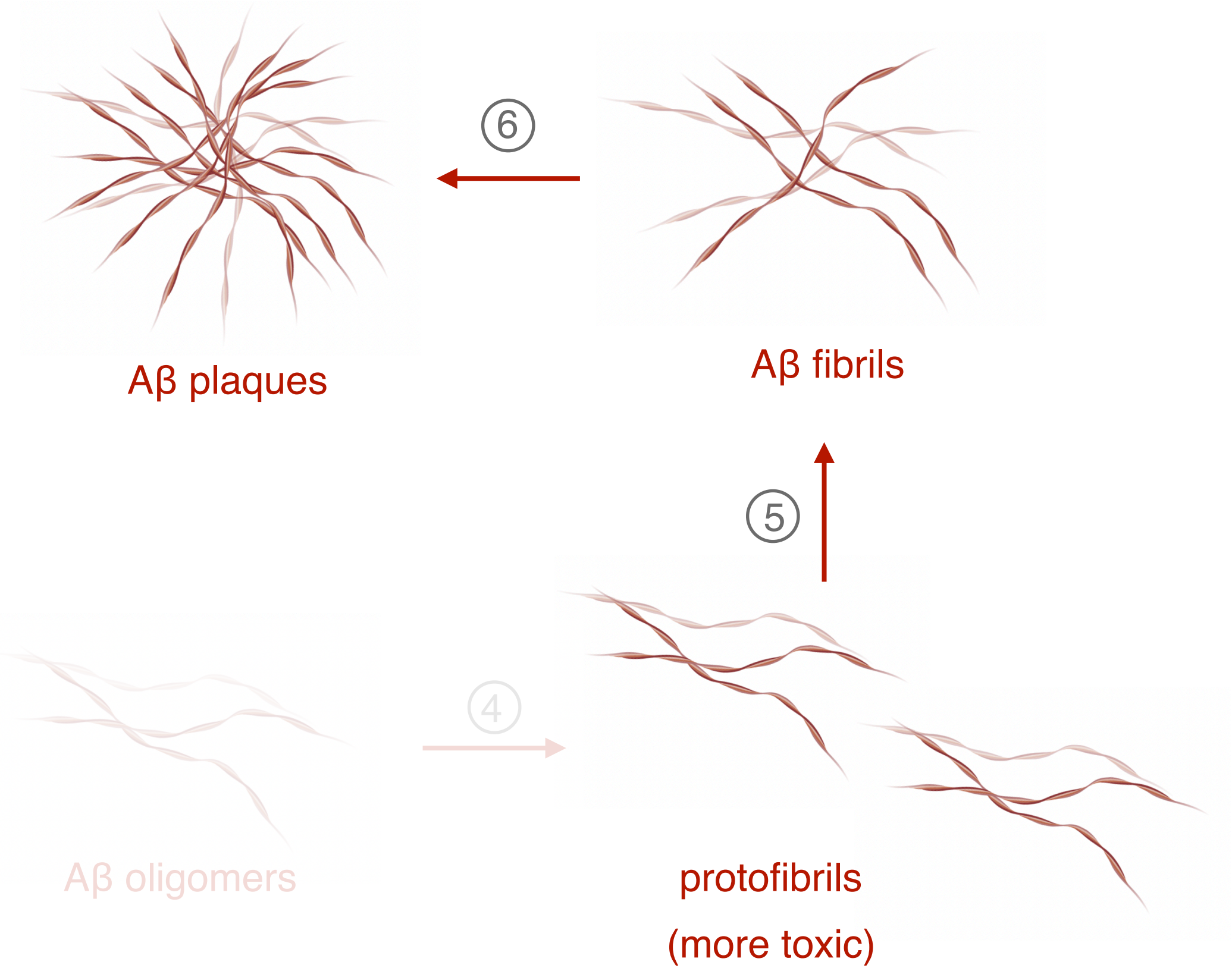
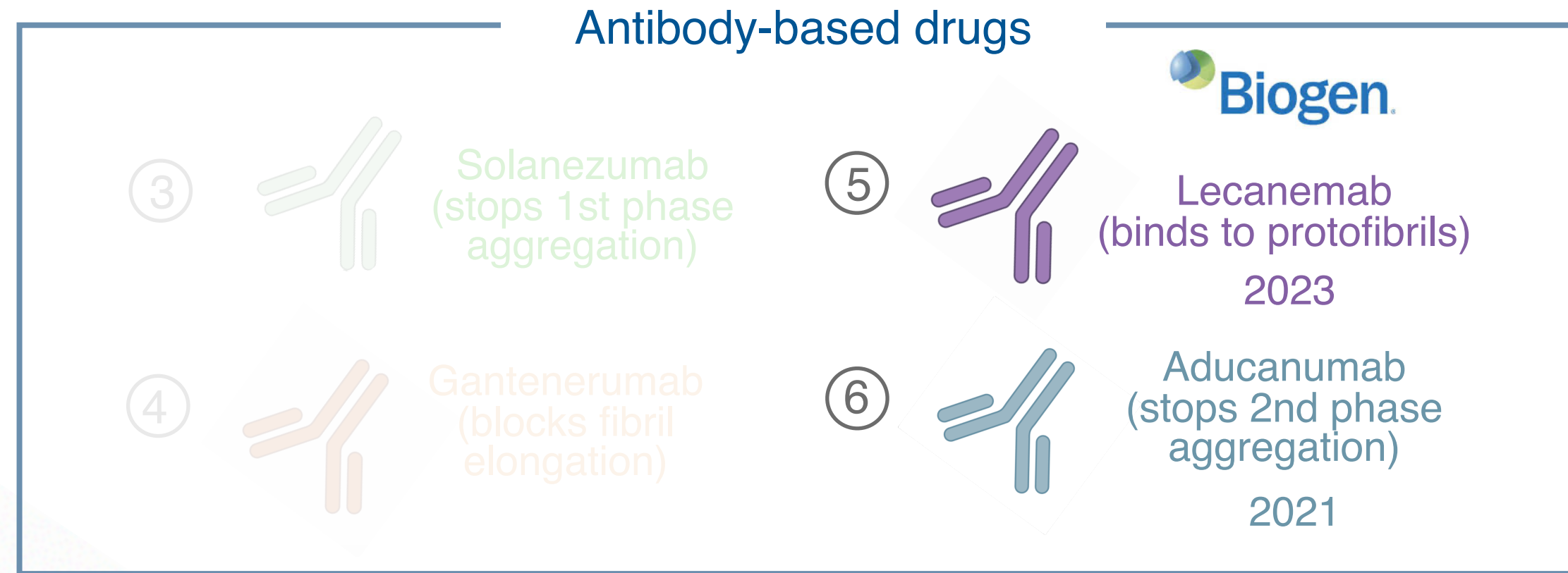


Alzheimers treatments & cures - A β plaques



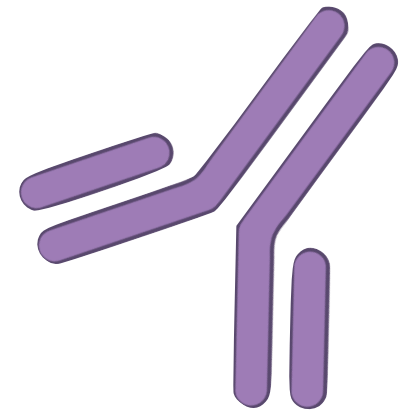
Biogen spent **\$2.4 billion** on Alzheimer's-related research toward **Aduhelm**

Alzheimers treatments & cures - A β plaques

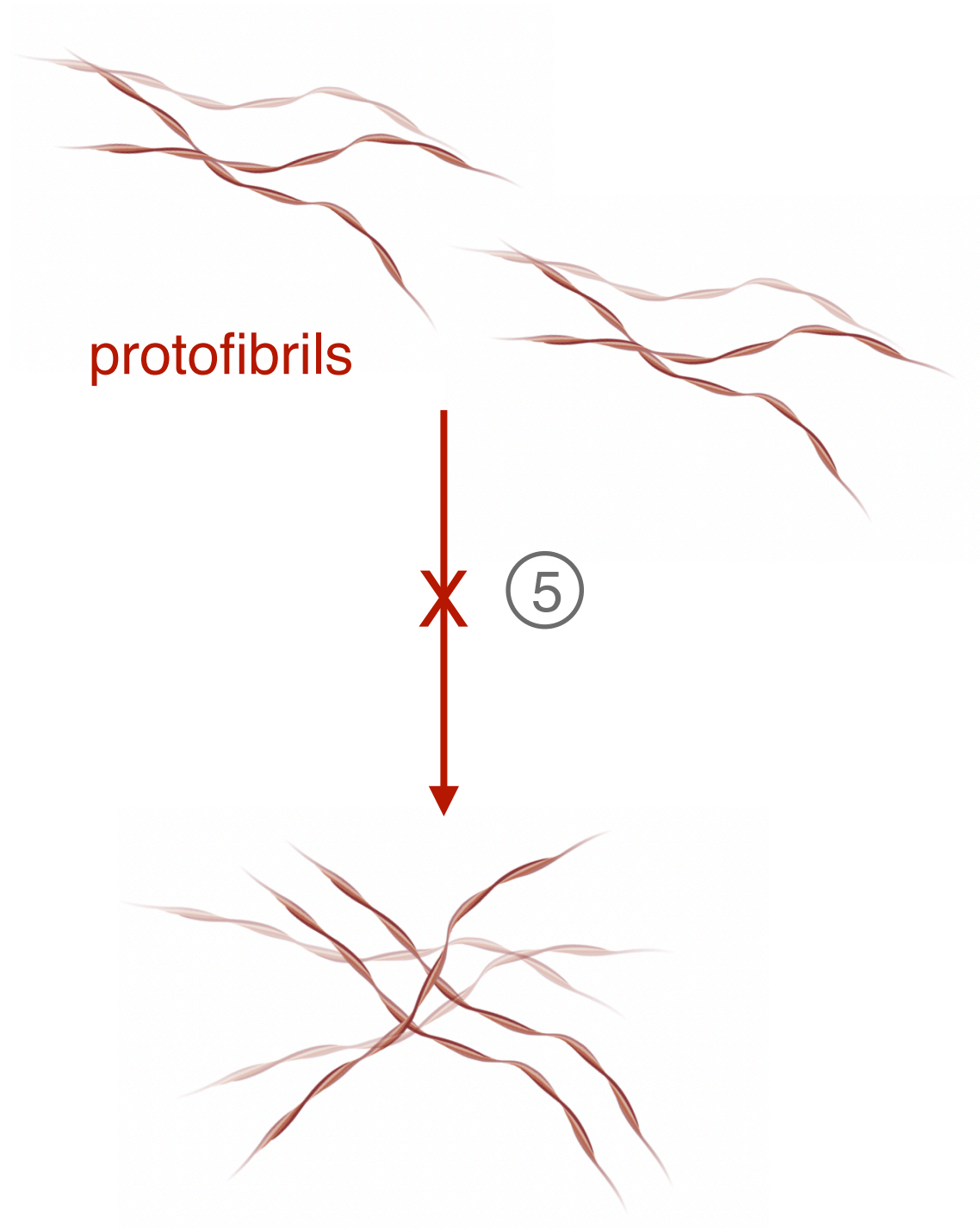


Biogen spent **\$2.4 billion** on Alzheimer's-related research toward **Aduhelm**

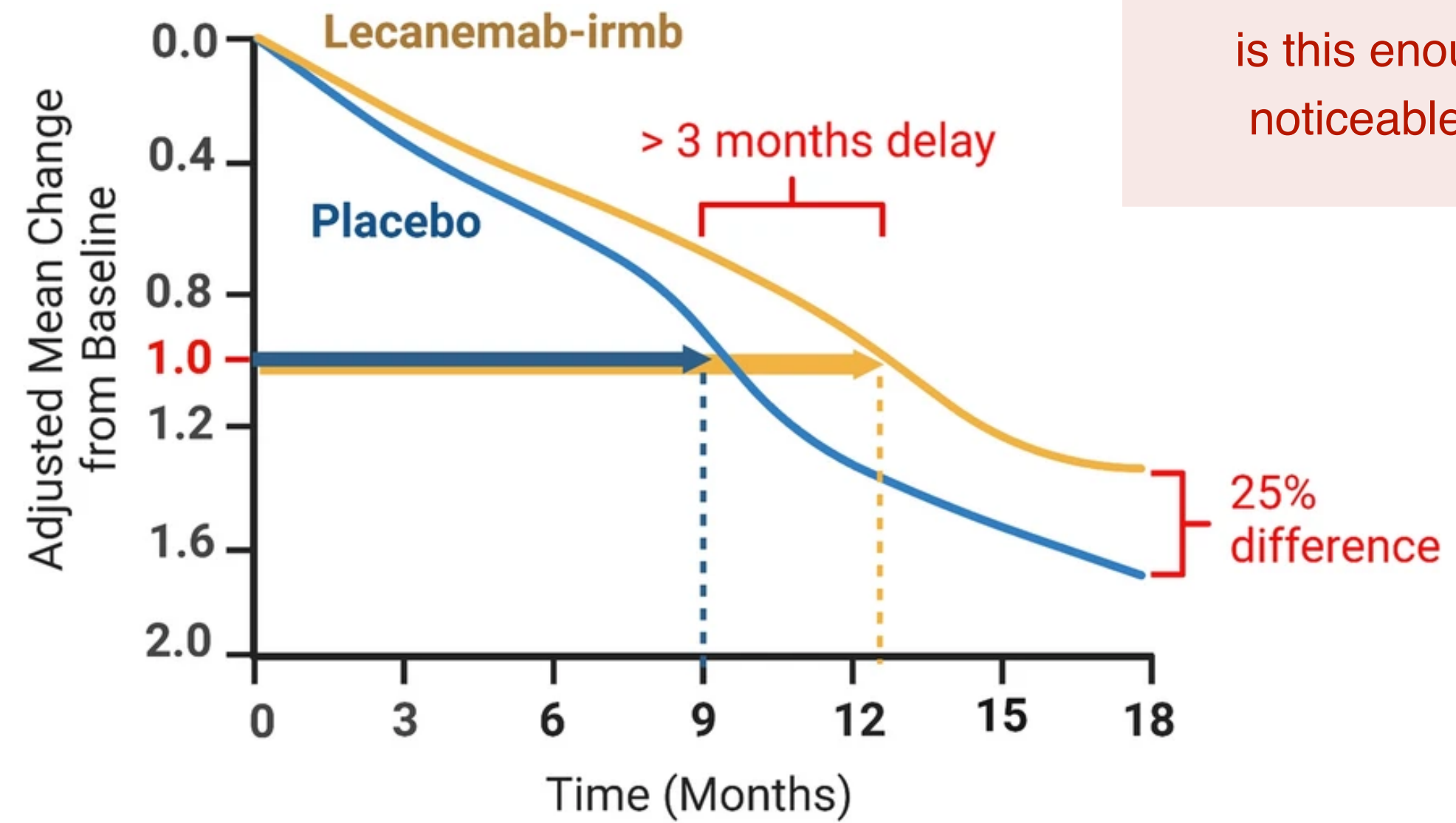
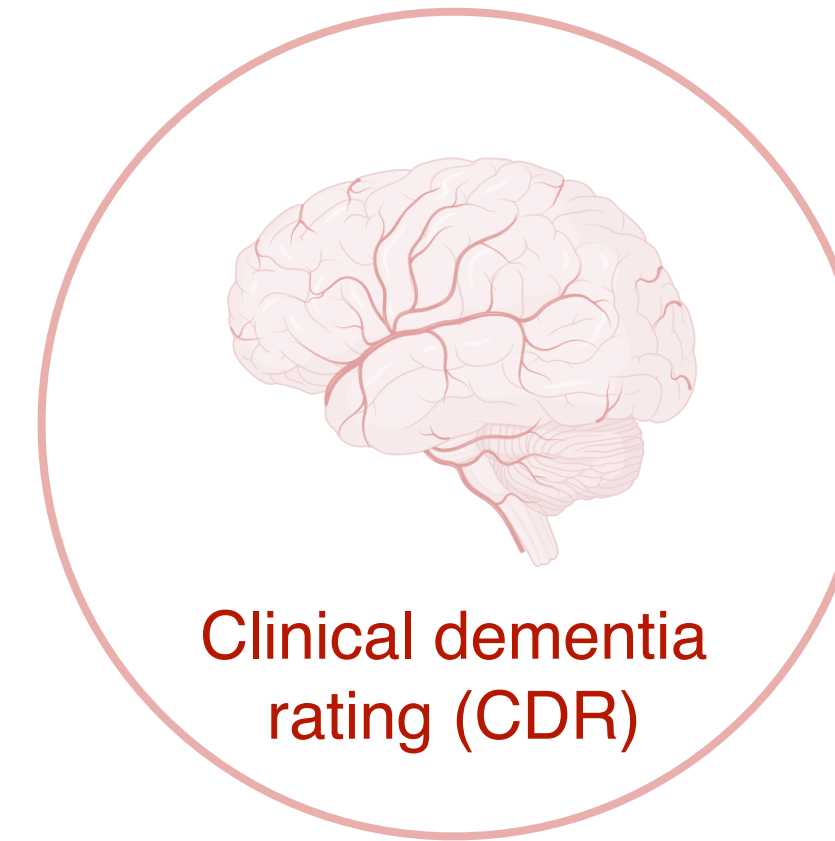
Case study - Lecanemab (Leqembi)



Leqembi
(2023)

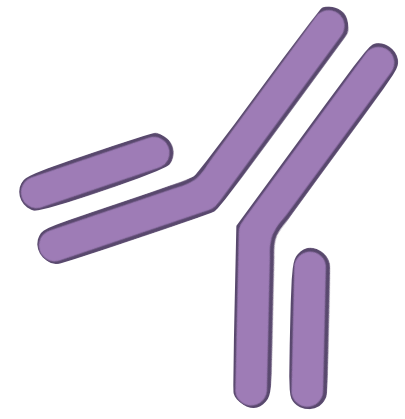


Aβ fibrils

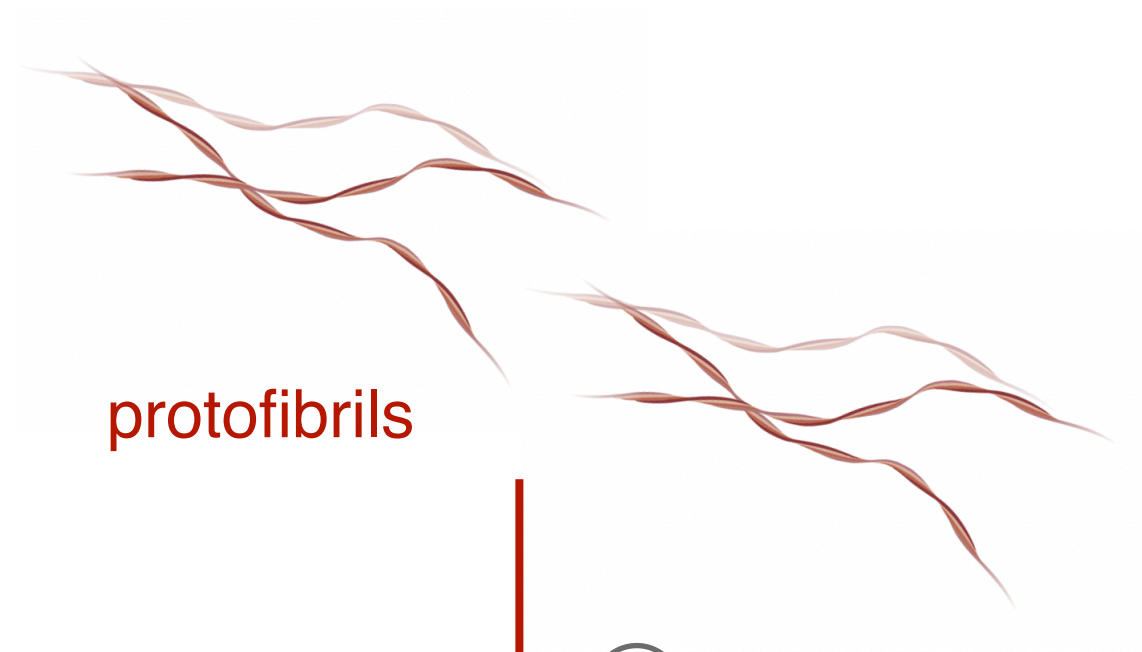


is this enough to make it a noticeable difference... ?

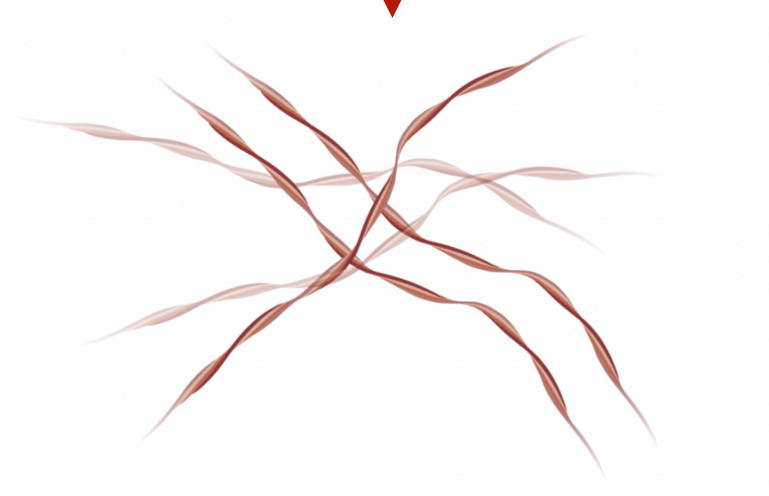
Case study - Lecanemab (Leqembi)



Leqembi
(2023)



protofibrils



Aβ fibrils

2024 - Leqembi total sales \$280 million

(sales expected to decline in 2025)

Alzheimers treatments & cures - A β plaques

Antibody-based drugs

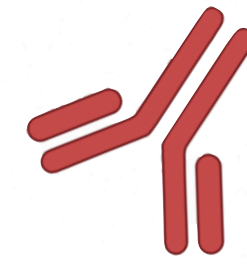
③ Solanezumab
(stops 1st phase
aggregation)

⑤ Lecanemab
(binds to protofibrils)
2023

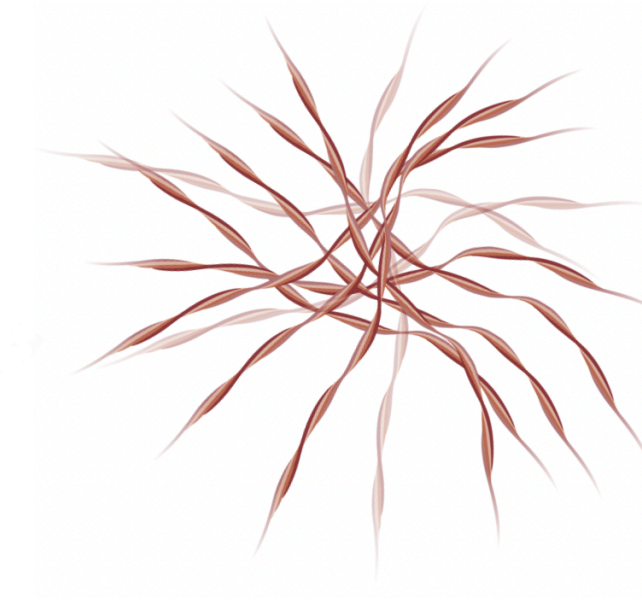
④ Gantenerumab
(blocks fibril
elongation)

⑥ Aducanumab
(stops 2nd phase
aggregation)
2021

Lilly



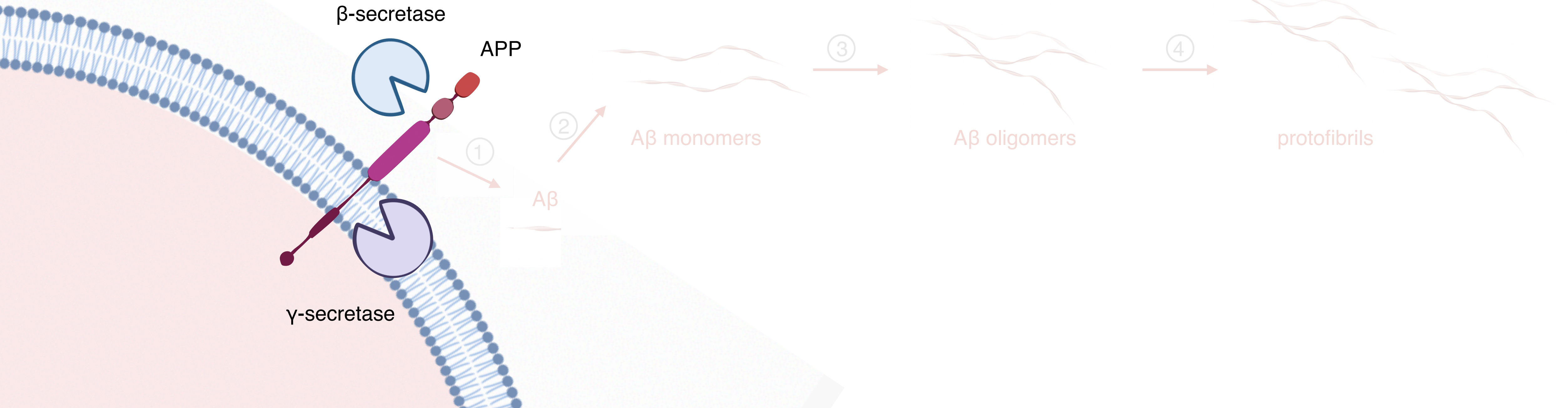
Kisunla
(2024)



A β plaques



A β fibrils

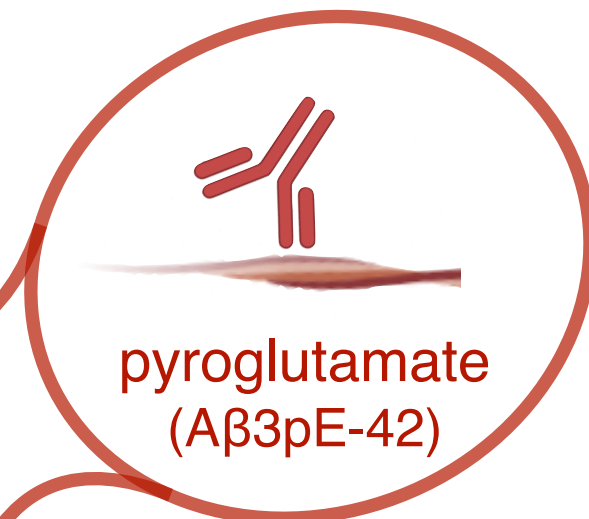


Case study - Donanemab (Kisunla)



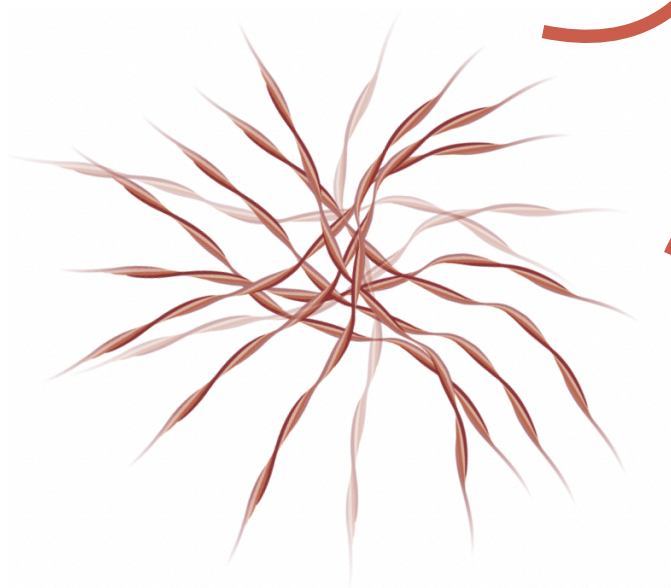
Kisunla
(2024)

Lilly

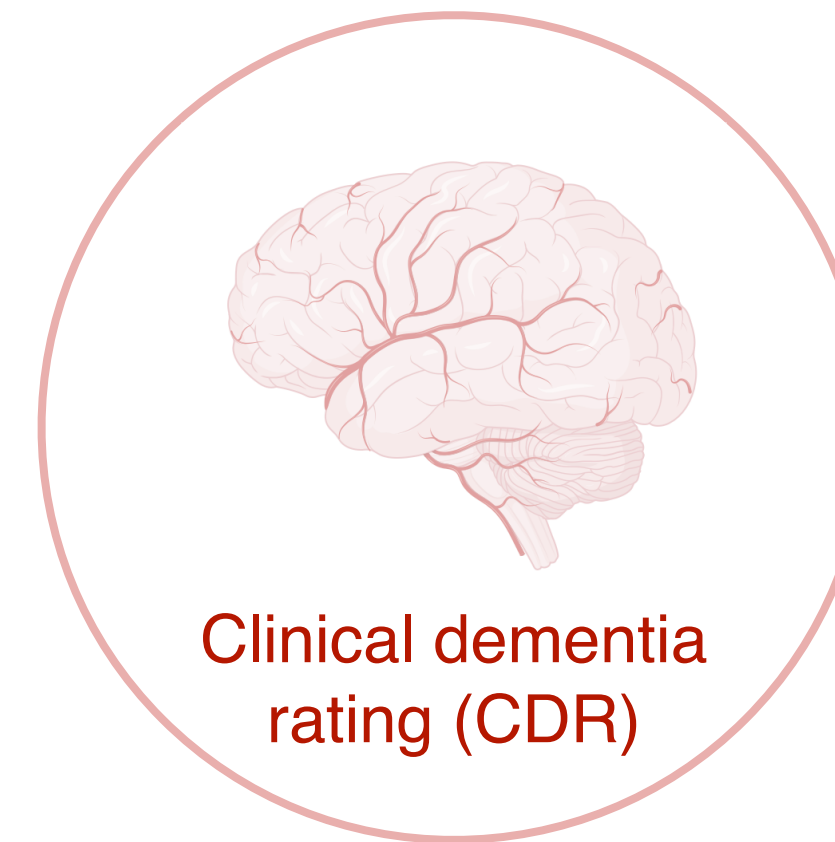


pyroglutamate
(Aβ3pE-42)

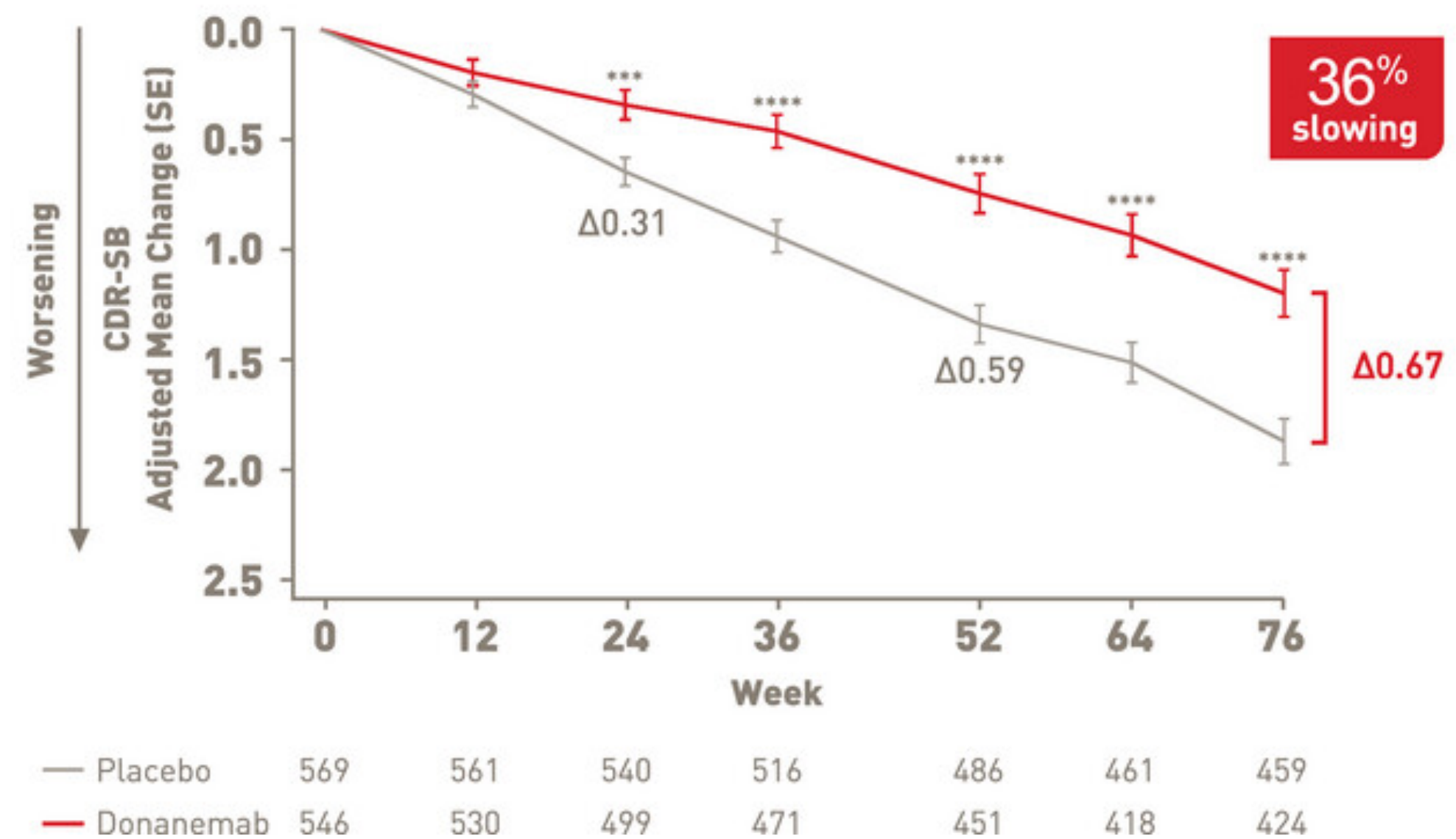
more selective
(better safety profile)



Aβ plaques



Clinical dementia
rating (CDR)



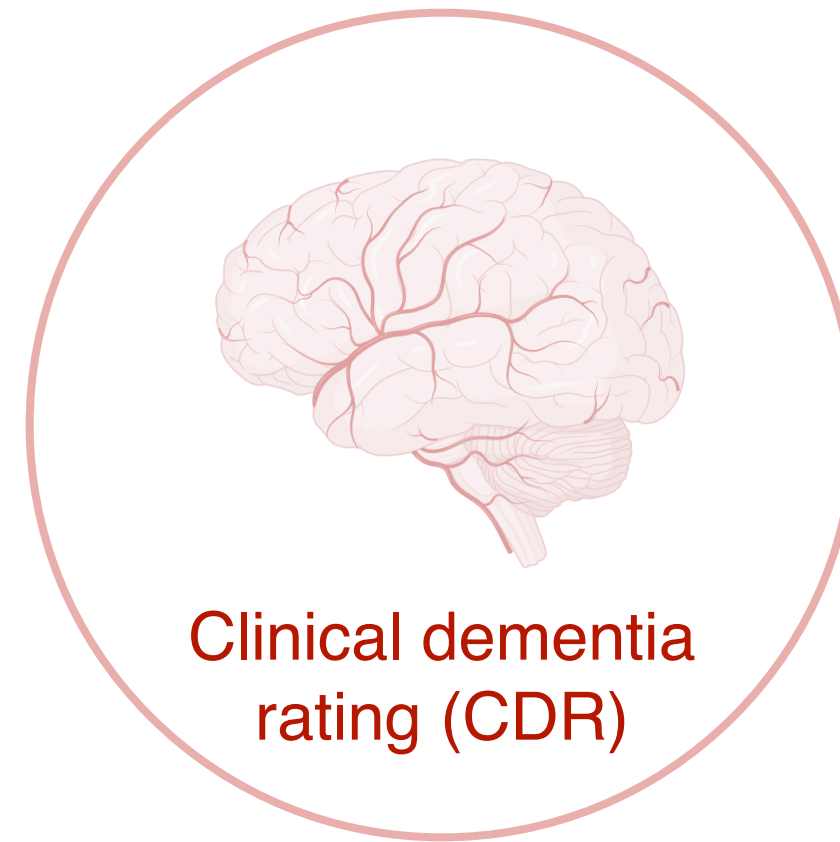
JAMA., 2023, 330(6):512-527.

Alzheimers treatments & cures - Aβ plaques

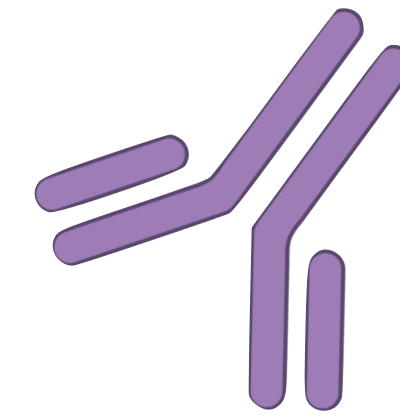


Kisunla
(2024)

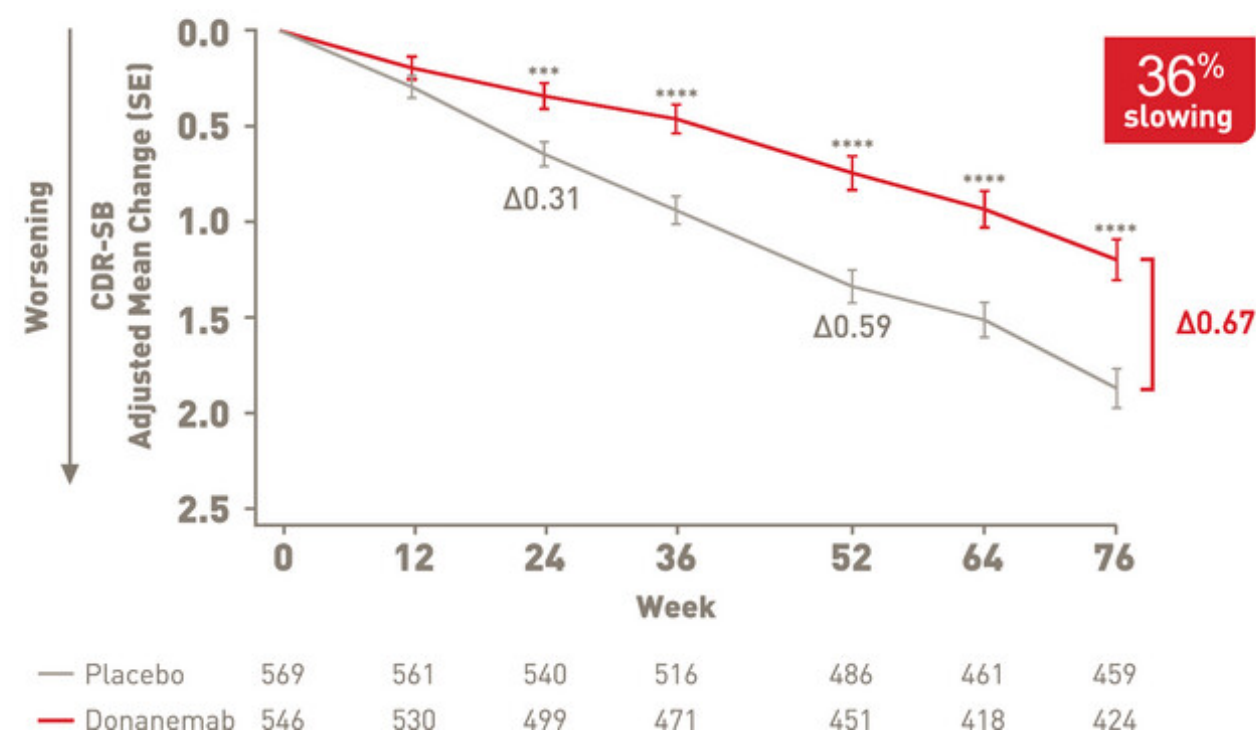
Lilly



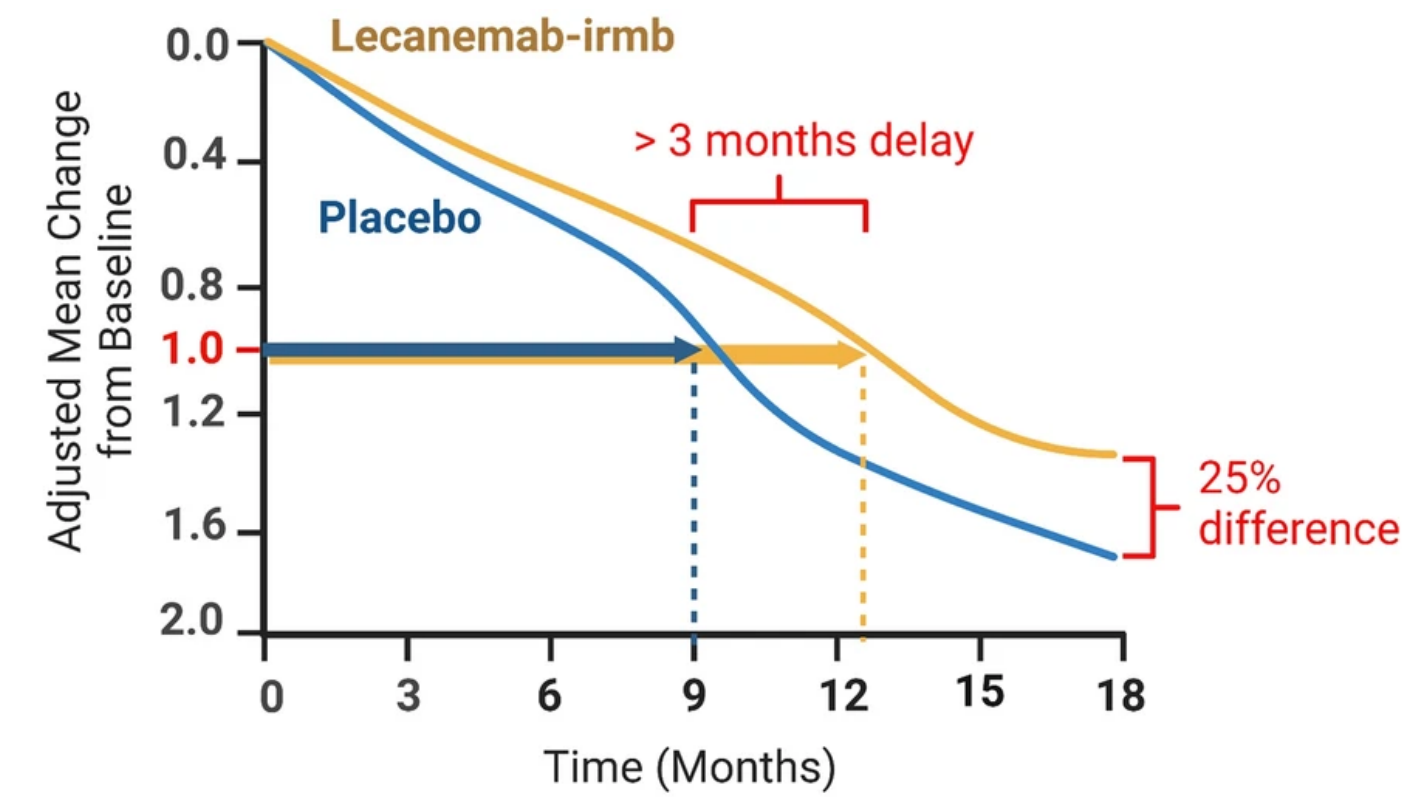
Clinical dementia
rating (CDR)



Leqembi
(2023)



Clinical trials have not been entirely satisfactory...



Talk outline

Part I

- History of Alzheimer's - Alois Alzheimer
- Alzheimer's disease causing hypotheses

Part II

- Alzheimer's drug treatment strategies
- Clinical case studies (controversial FDA approvals)

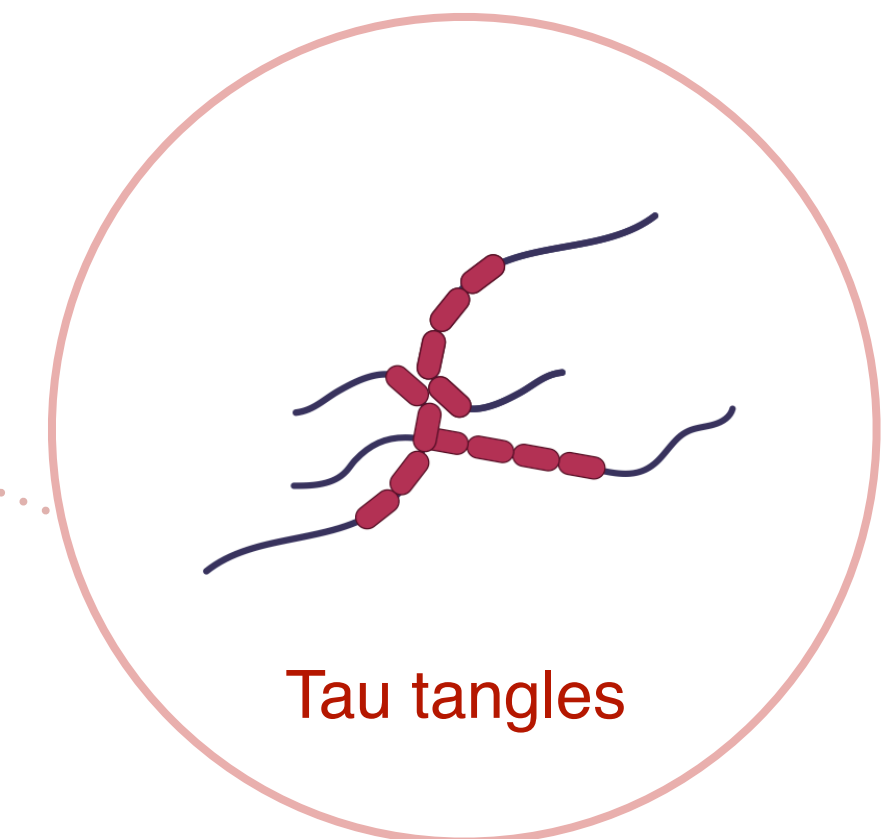
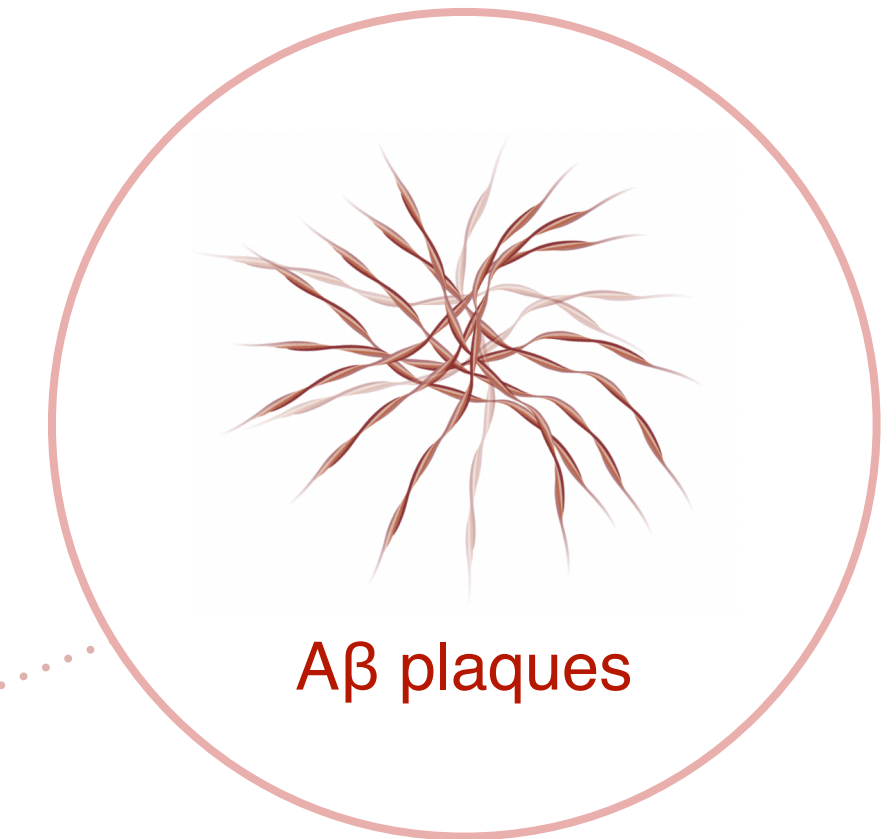
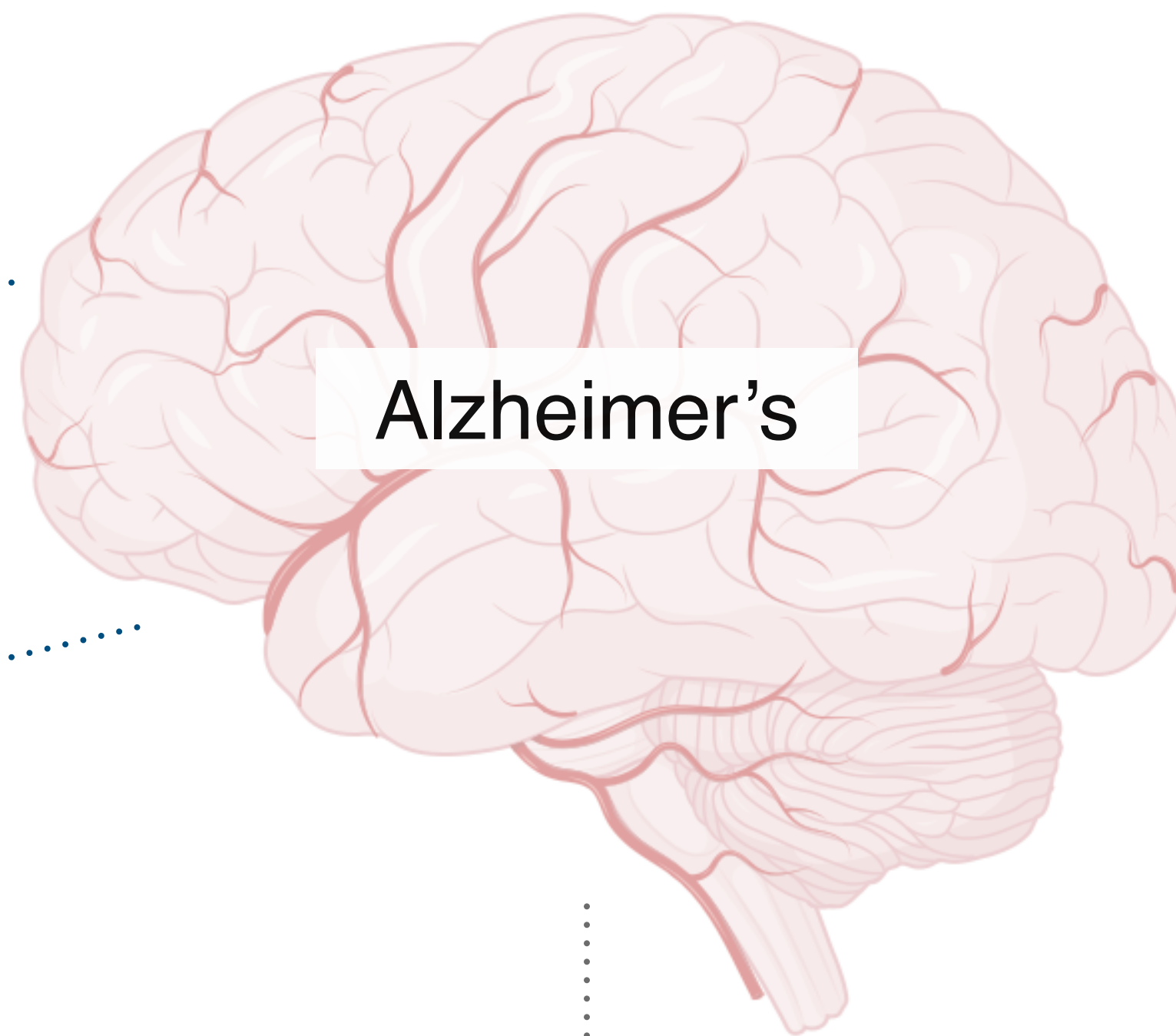
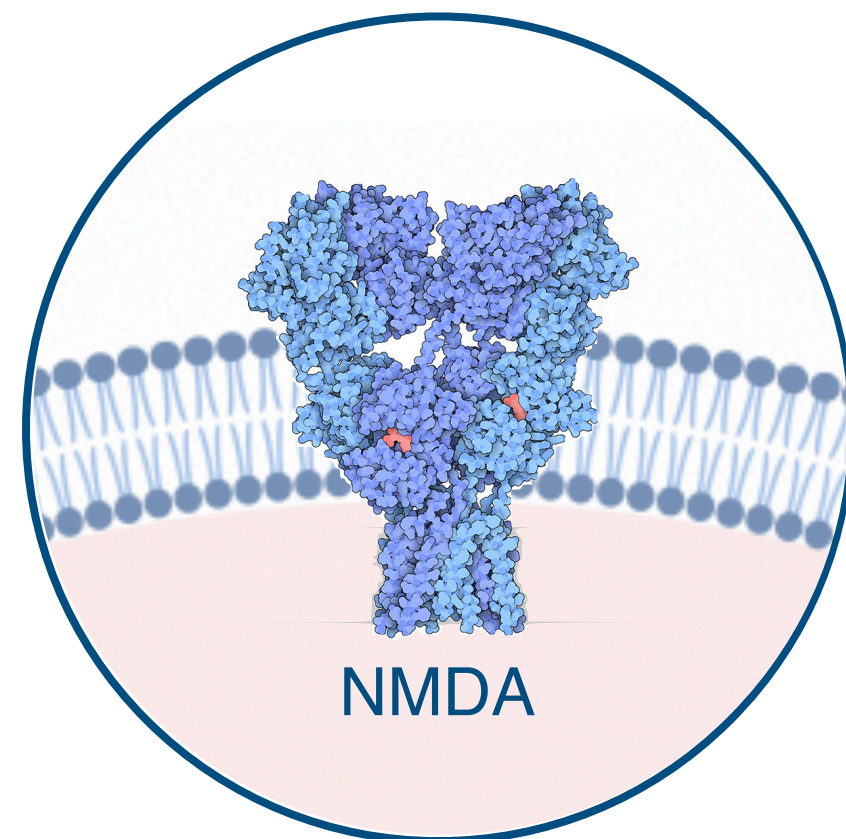
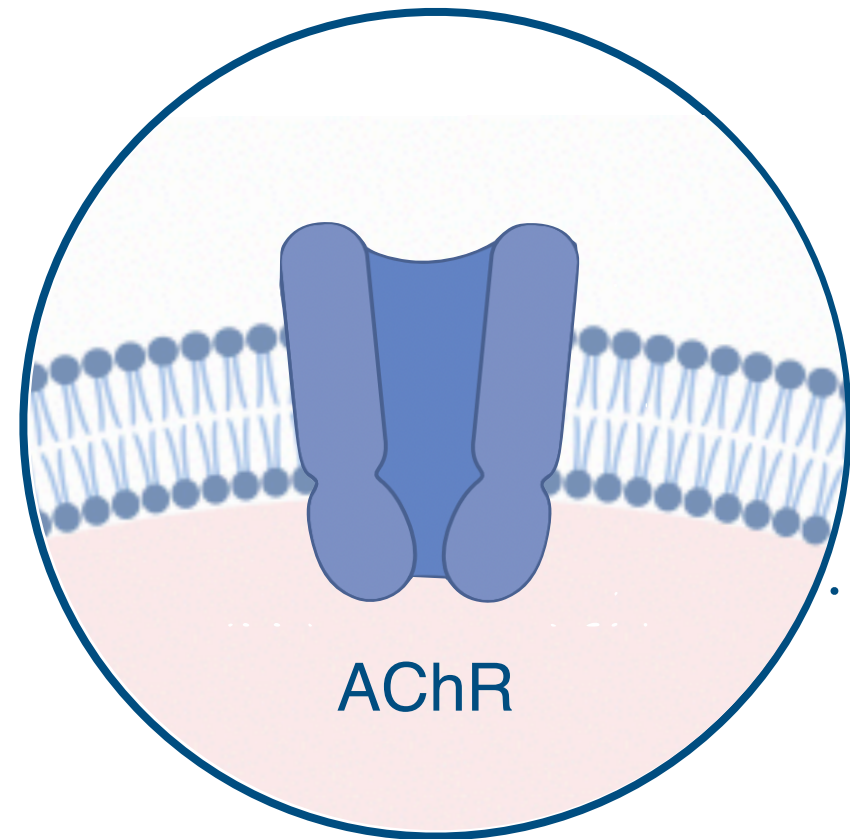
Part III

- Outlook & future directions - how are Pharma companies tackling Alzheimer's

Alzheimers treatments & cures

Cognitive symptom management

Disease-modifying treatments

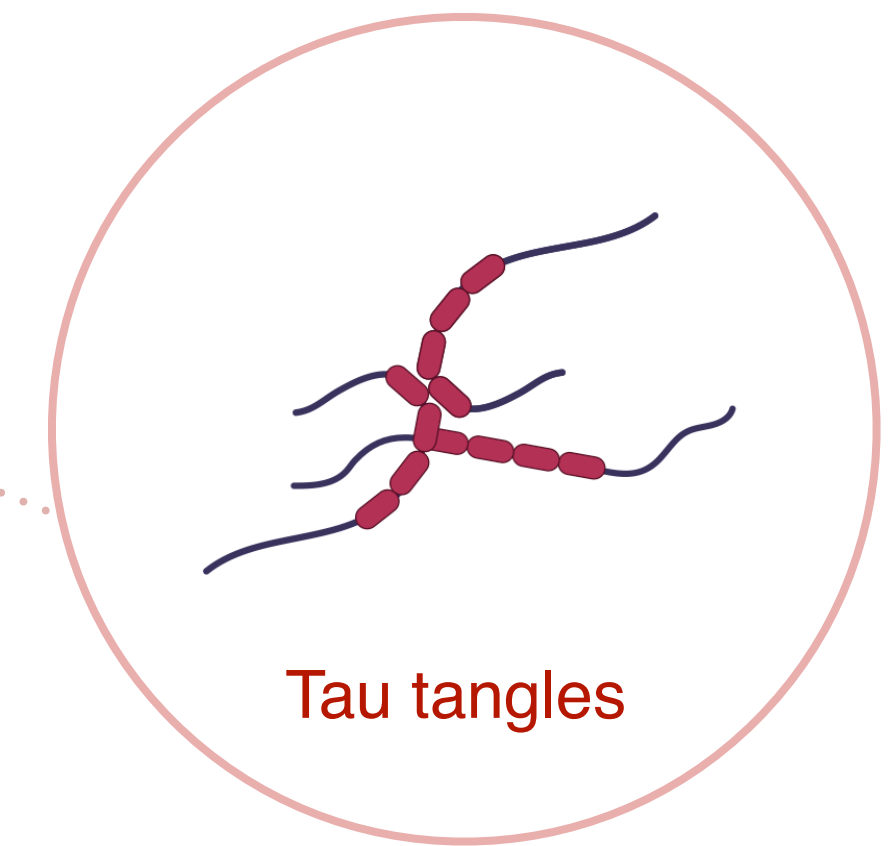
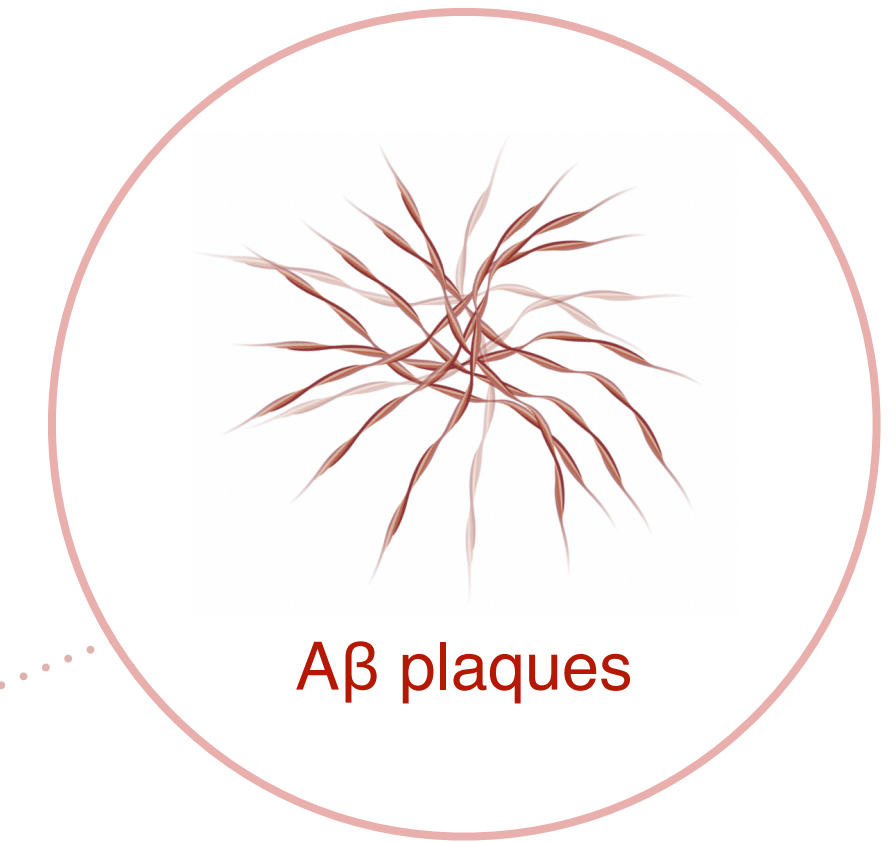
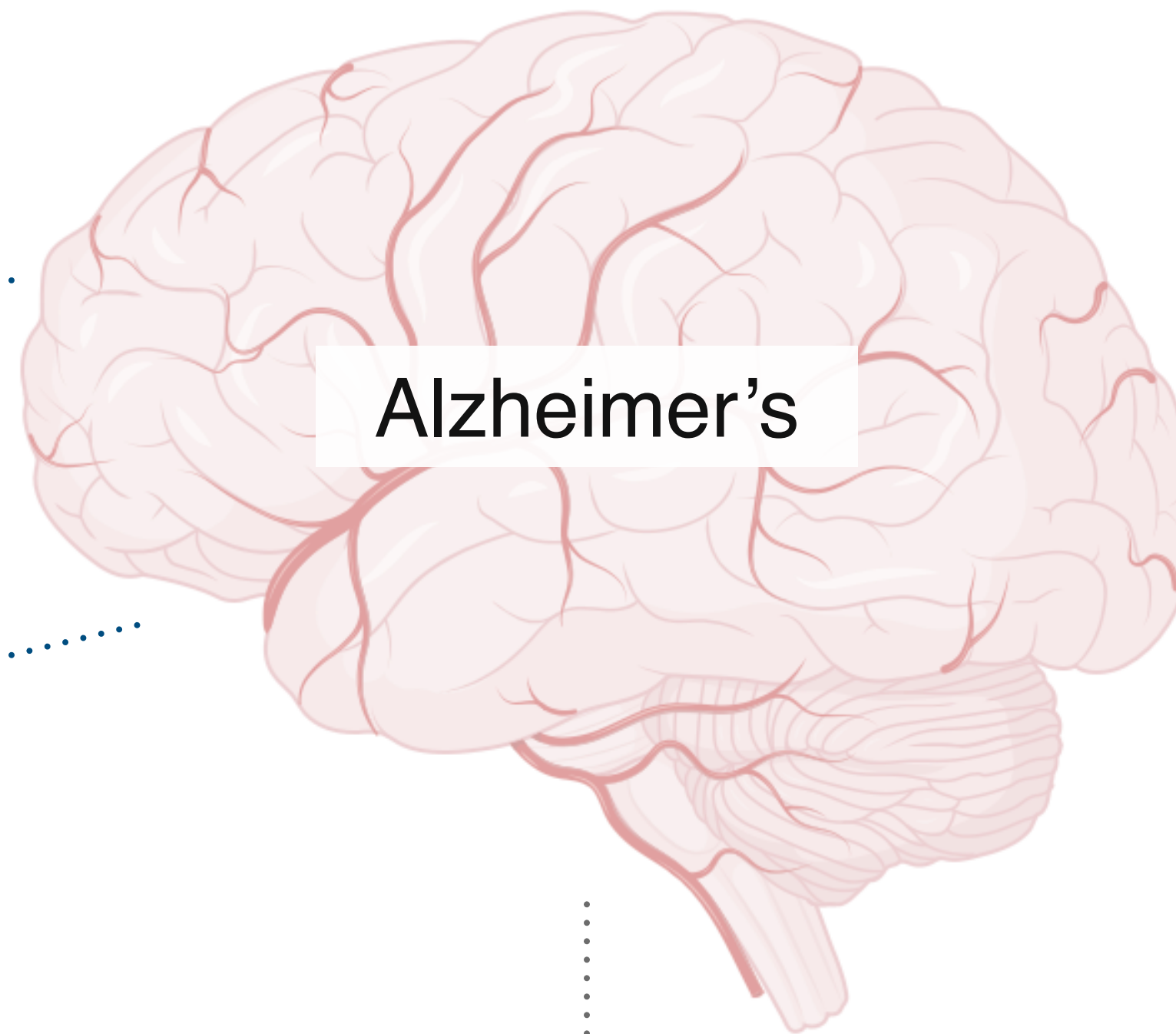
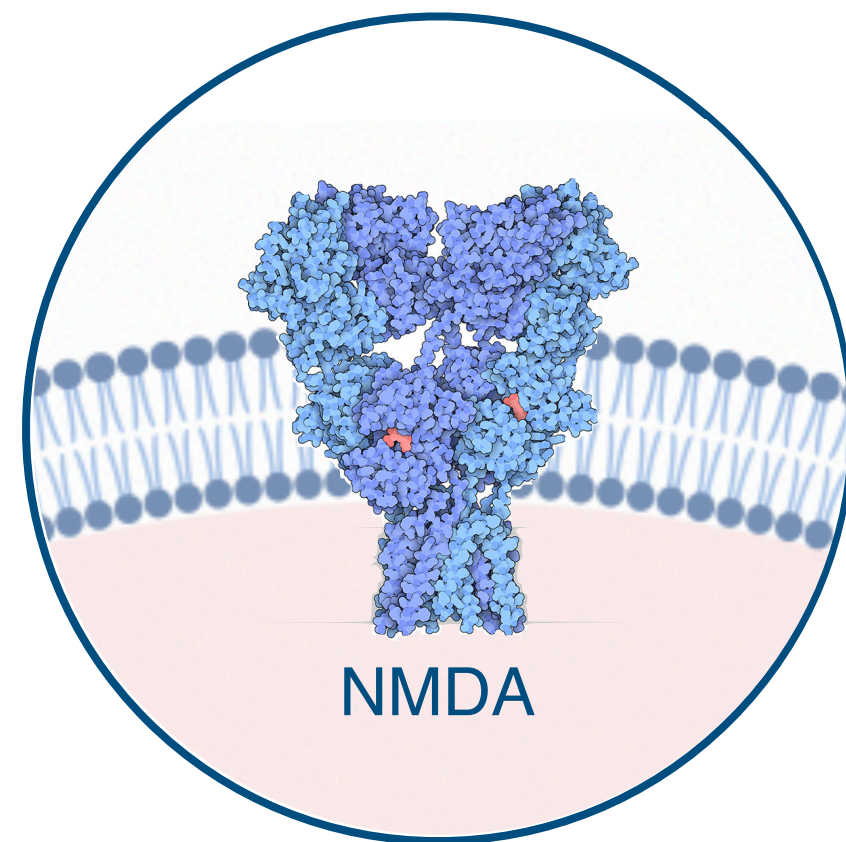
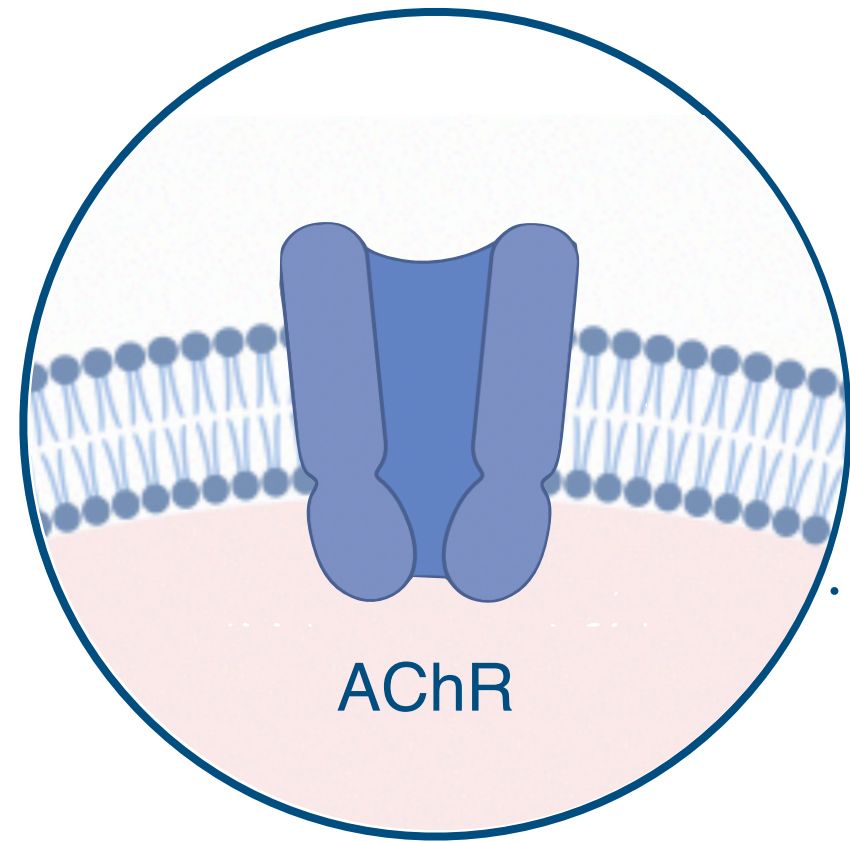


Alternative treatment strategies?

Alzheimers treatments & cures

Cognitive symptom management

Disease-modifying treatments



Familial Alzheimer's Disease (fAD)

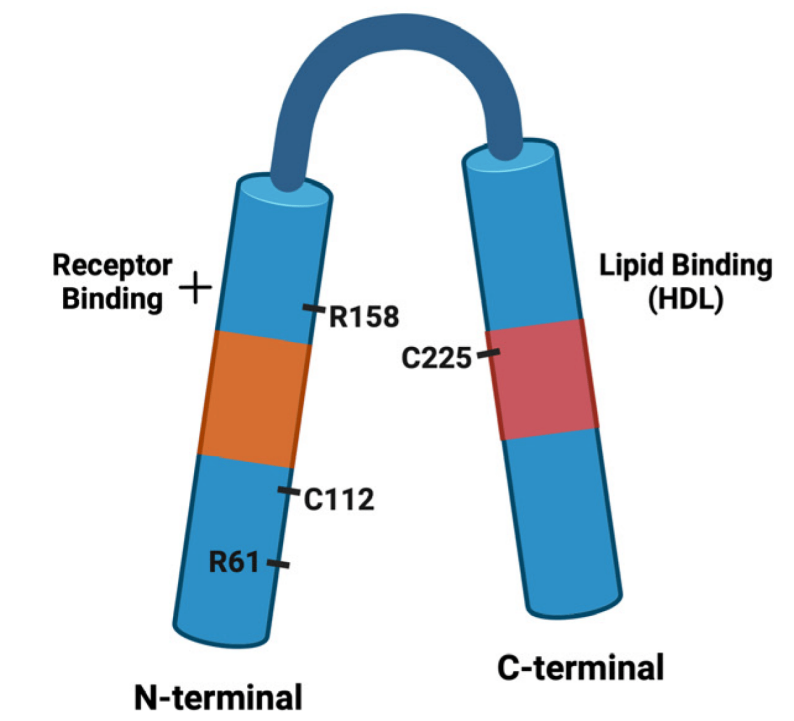
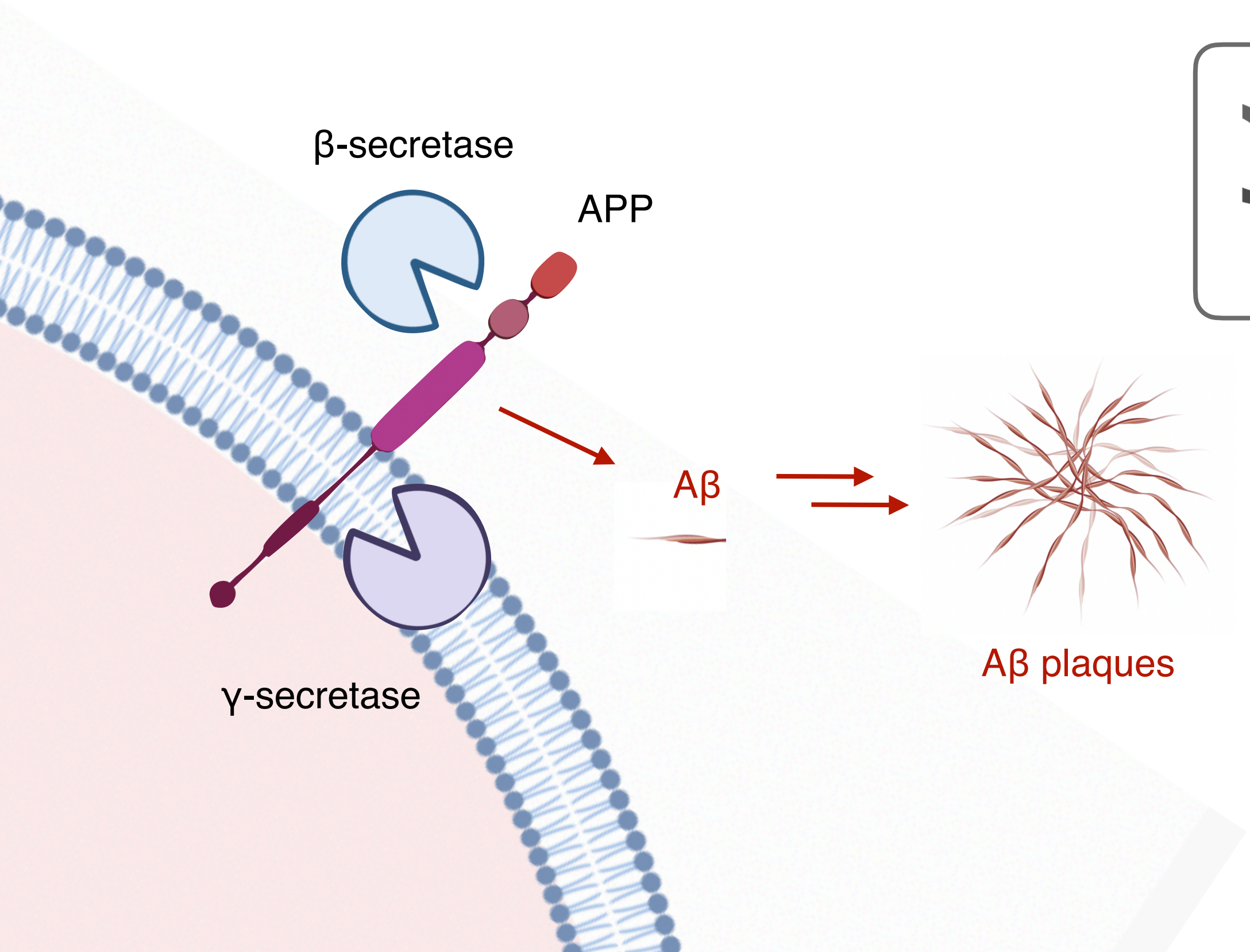
inherited genetic mutations

APP
β-secretase (BACE)
γ-secretase (PSEN1 & PSEN2)

Sporadic Alzheimer's Disease (sAD)

random genetic mutations

APOE



lipid transport

cellular uptake of cholesterol & lipoproteins



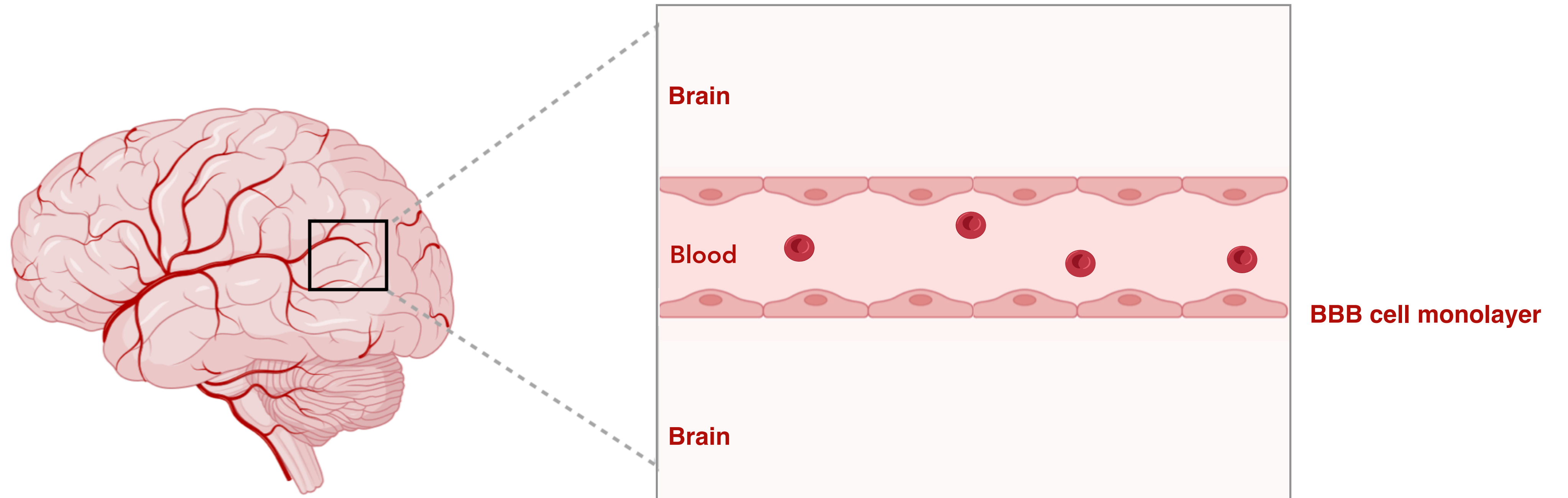
Bottleneck in brain drug development: the BBB

“...>98% of all small molecule drugs do not cross the BBB,
and ~100% of biologic drugs do not cross the BBB...”

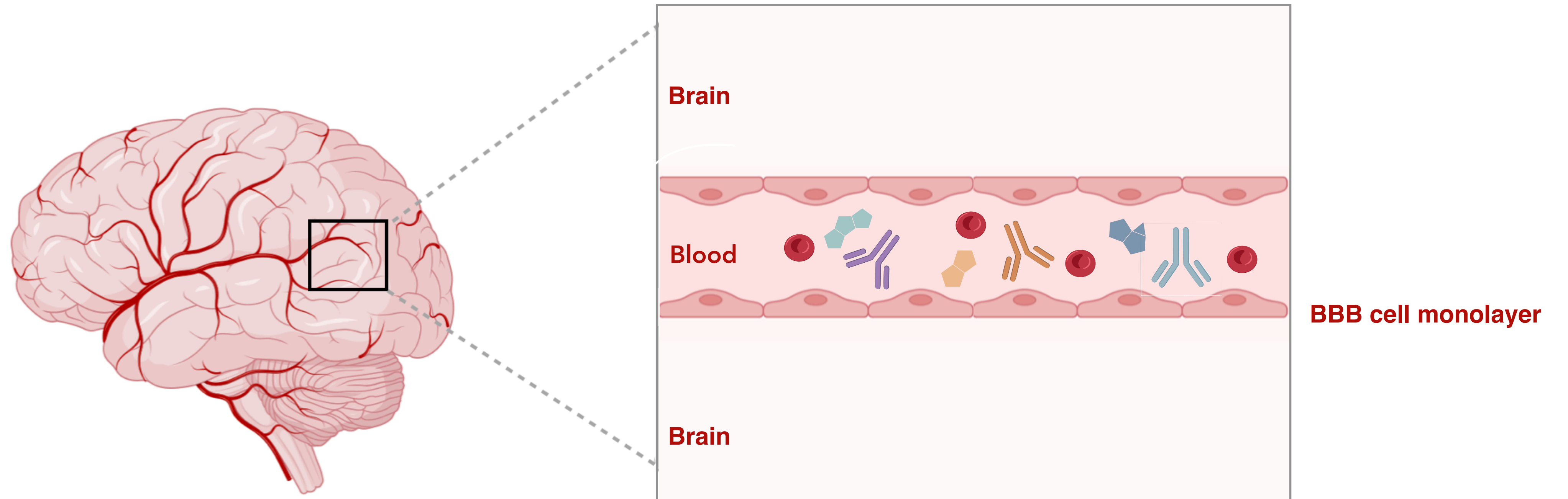
By 2025, pharmaceutical companies are expected to invest
over \$2 - \$3 billion annually in **BBB delivery mechanisms...**



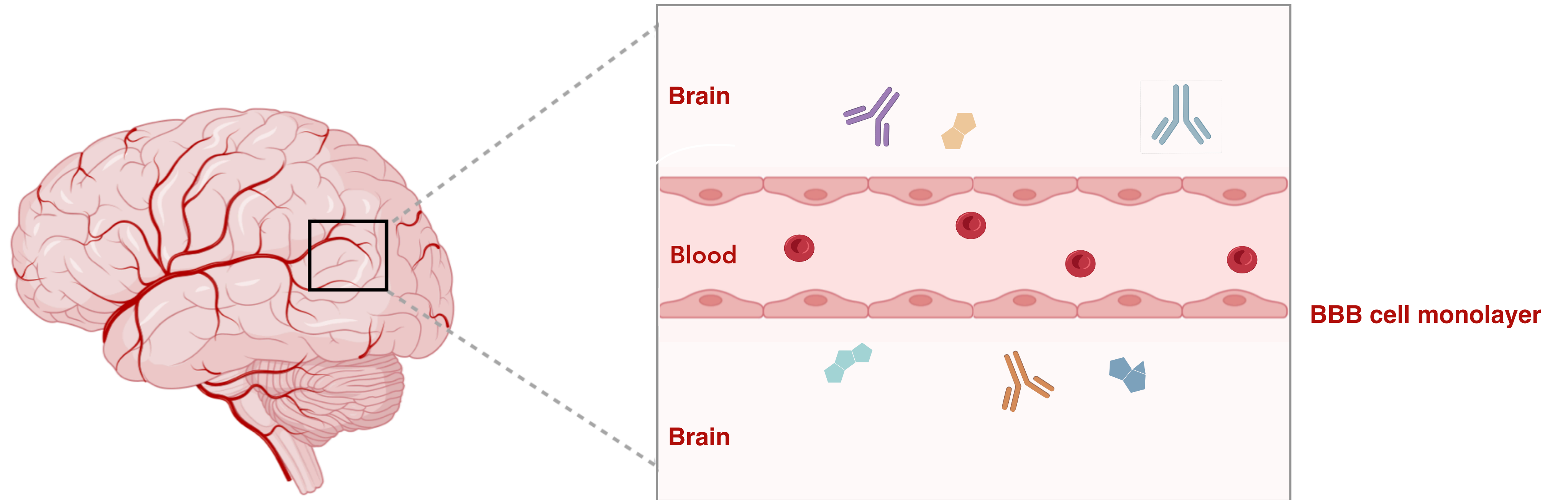
The Blood-Brain Barrier (BBB)



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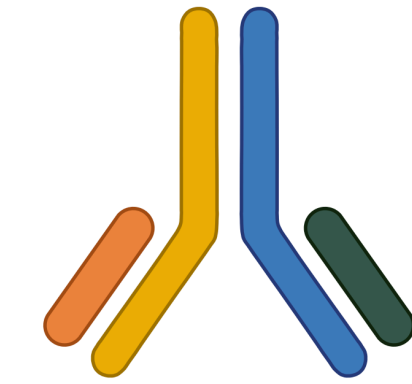


Strategies to overcome the BBB

↑ rigidity ↑ lipophilicity



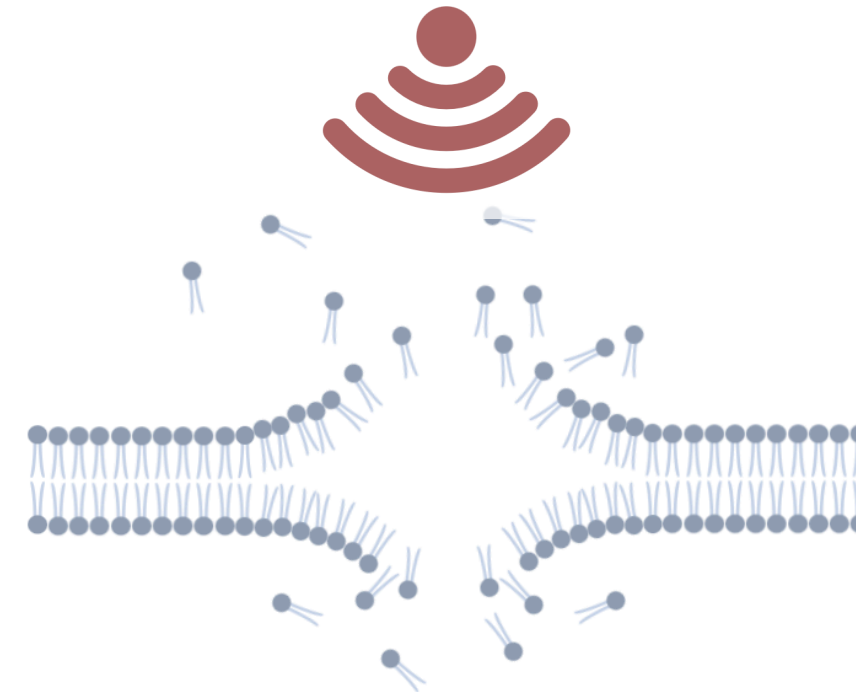
Chemical Alterations



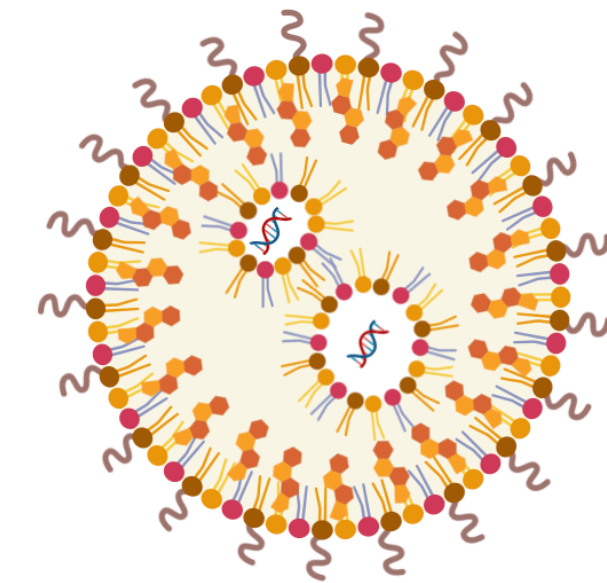
Antibody-Engineering



Cranial Injections

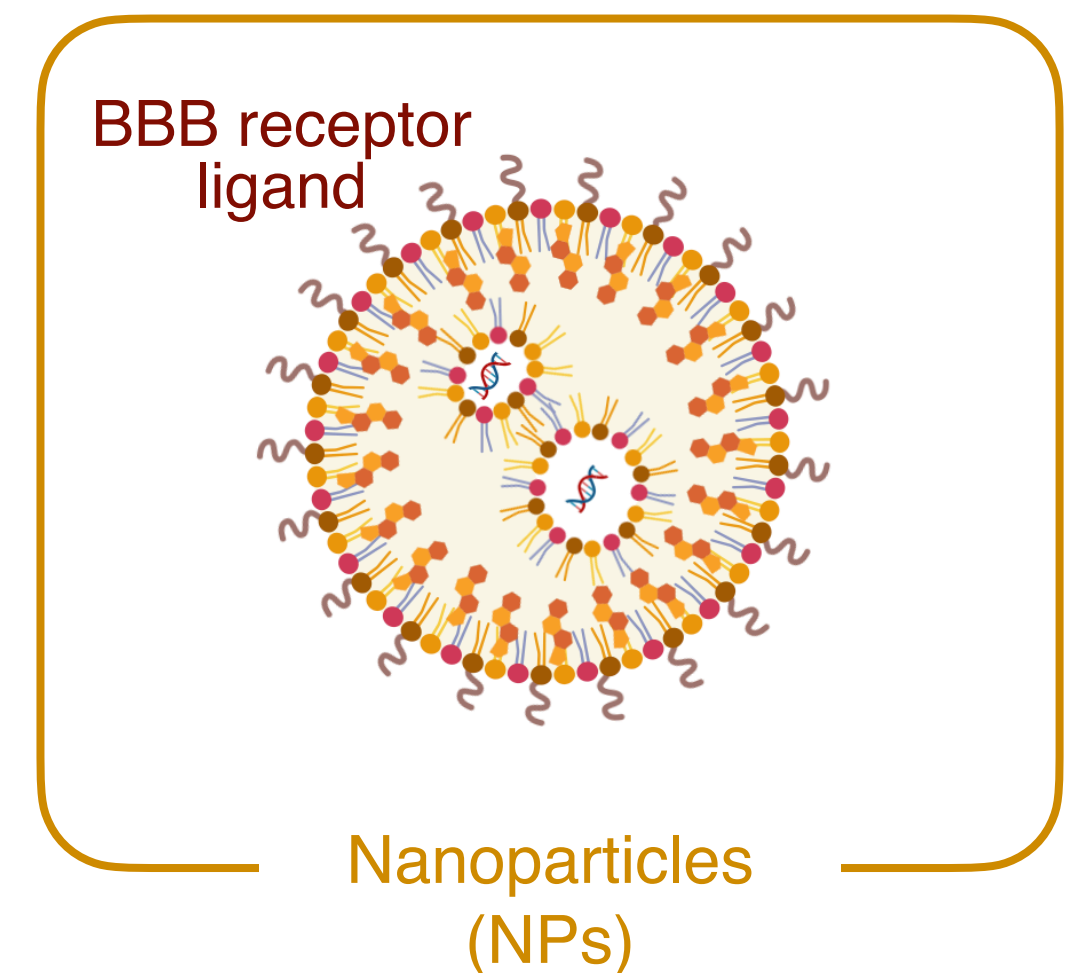
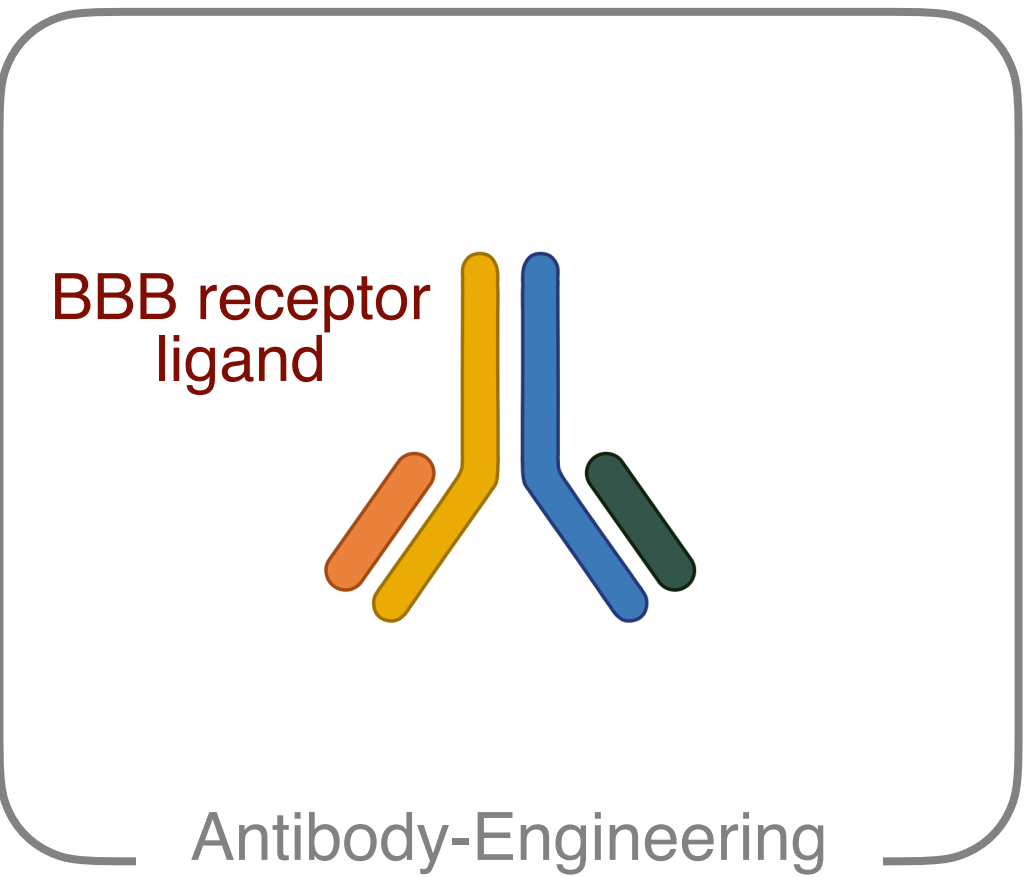
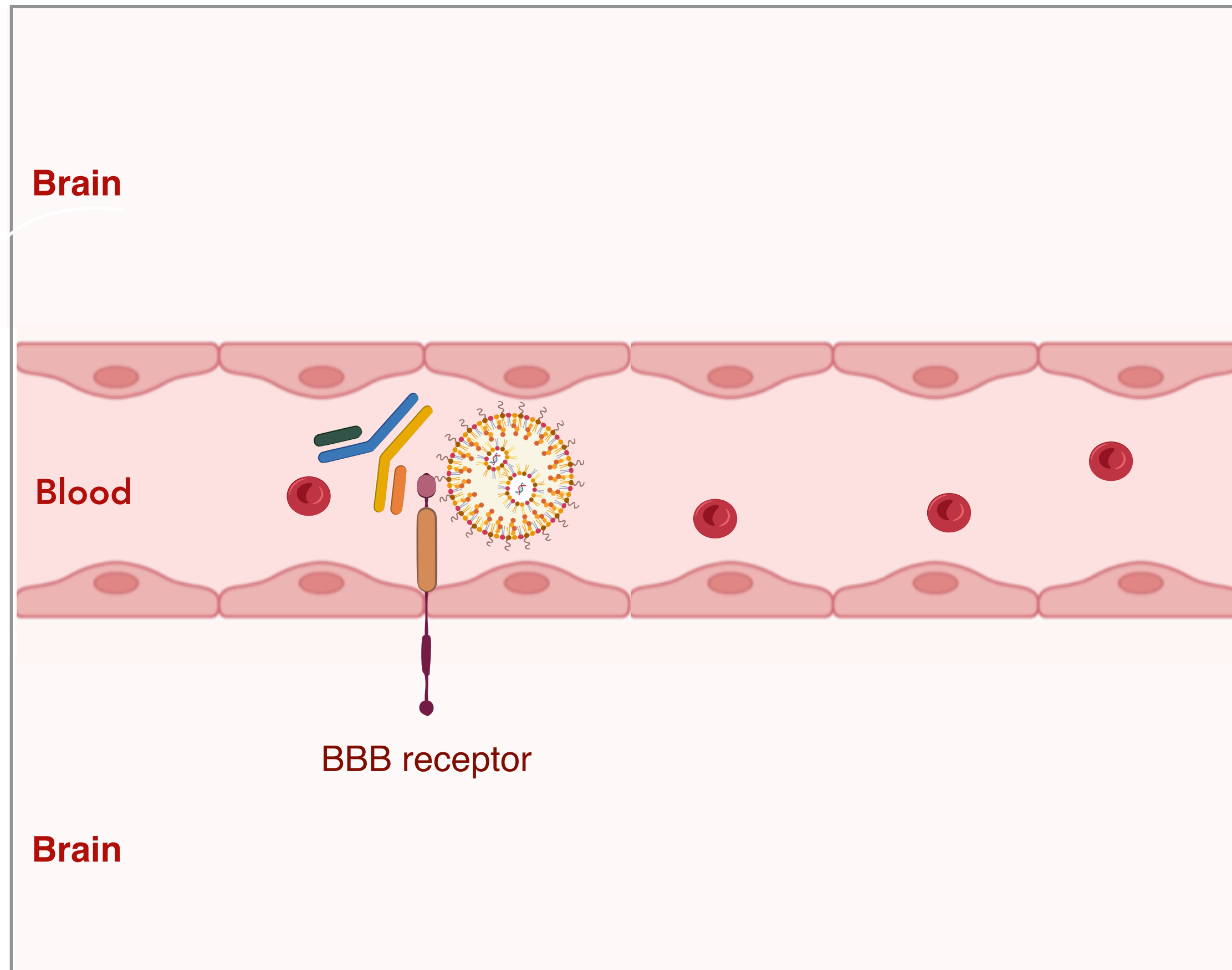


Focused Ultrasound
(FUS)



Nanoparticles
(NPs)

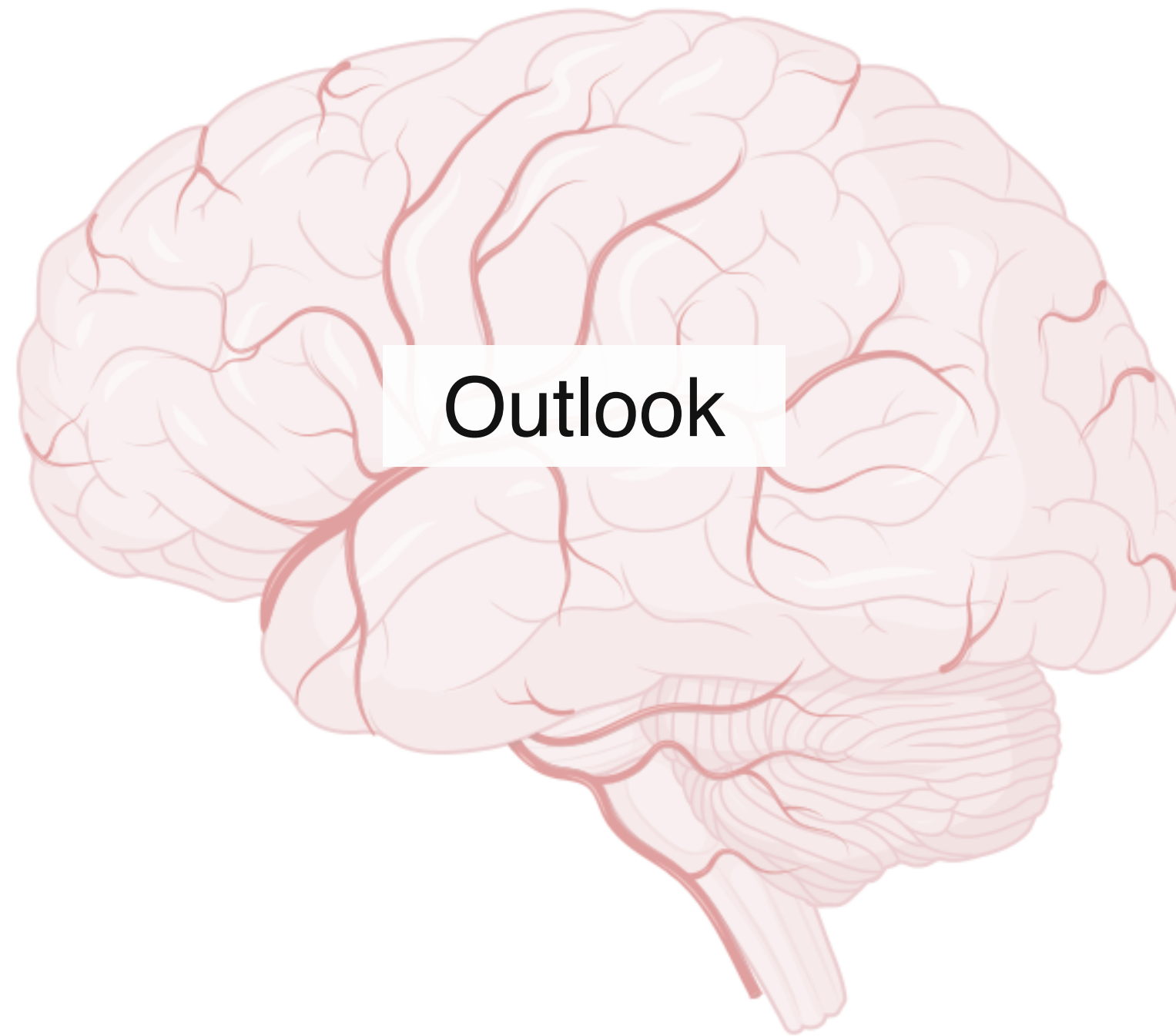
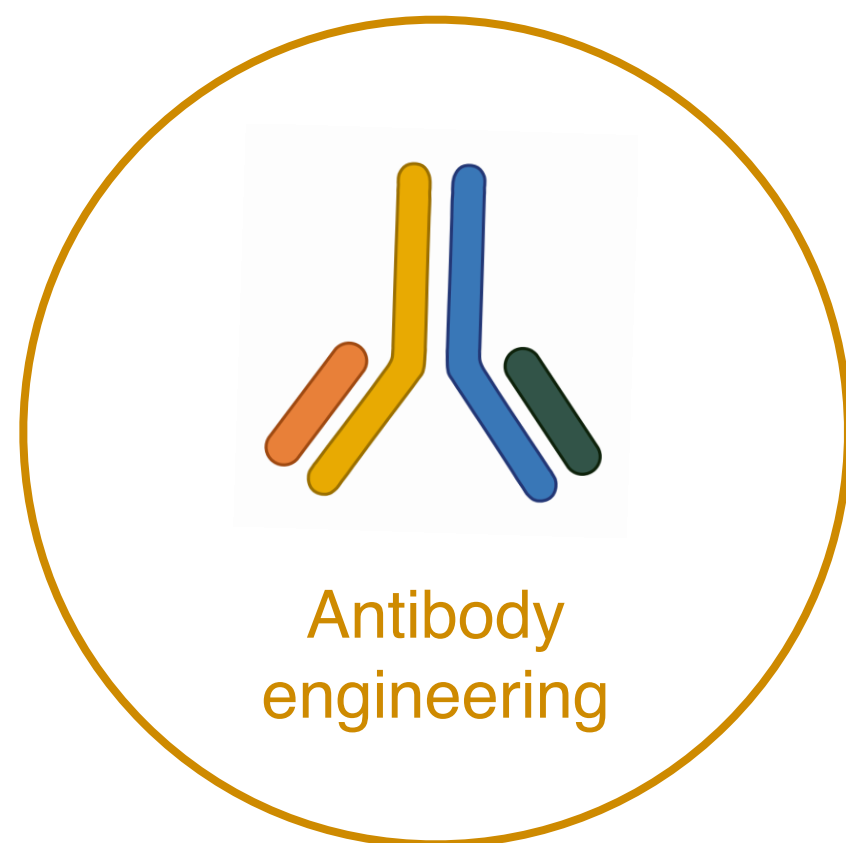
Strategies to overcome the BBB



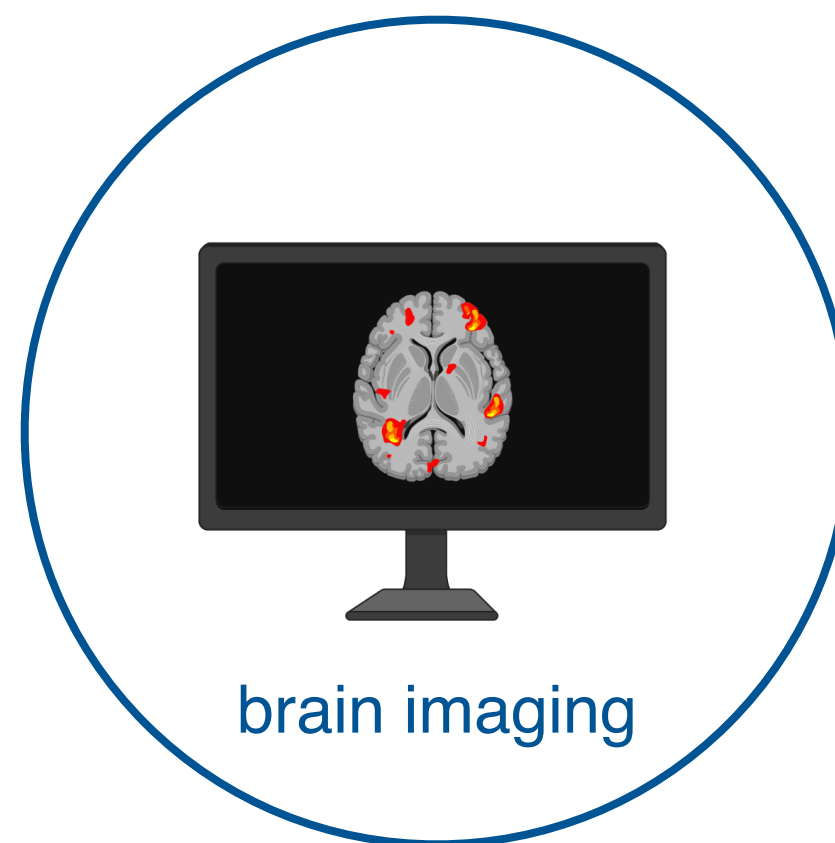
Alternative treatment strategies



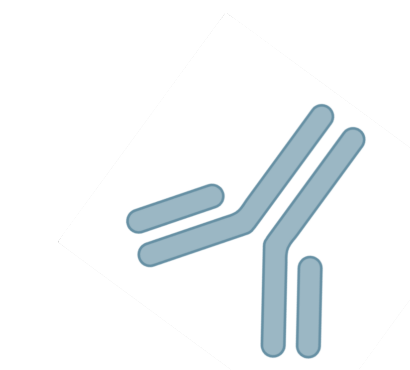
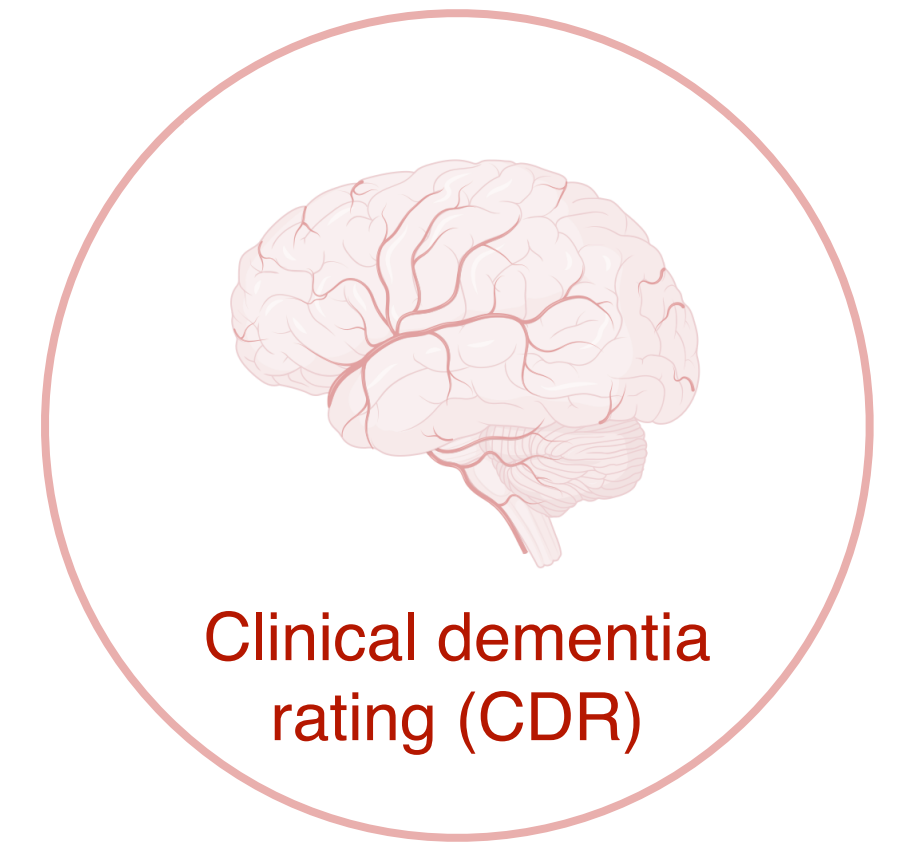
Tackling the BBB



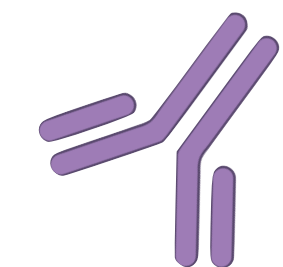
Early detection



Disease-modifying treatments (DMTs)



Aduhelm (2021)



Leqembi (2023)



Donanemab (2024)



Aβ plaques:
Correlation vs Causality

Thank you!

Any Questions?

