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Chinese Preclinical Alzheimer's Disease Study (C-PAS): Design and Preliminary Findings

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Overview



01

Introduction of C-PAS cohort

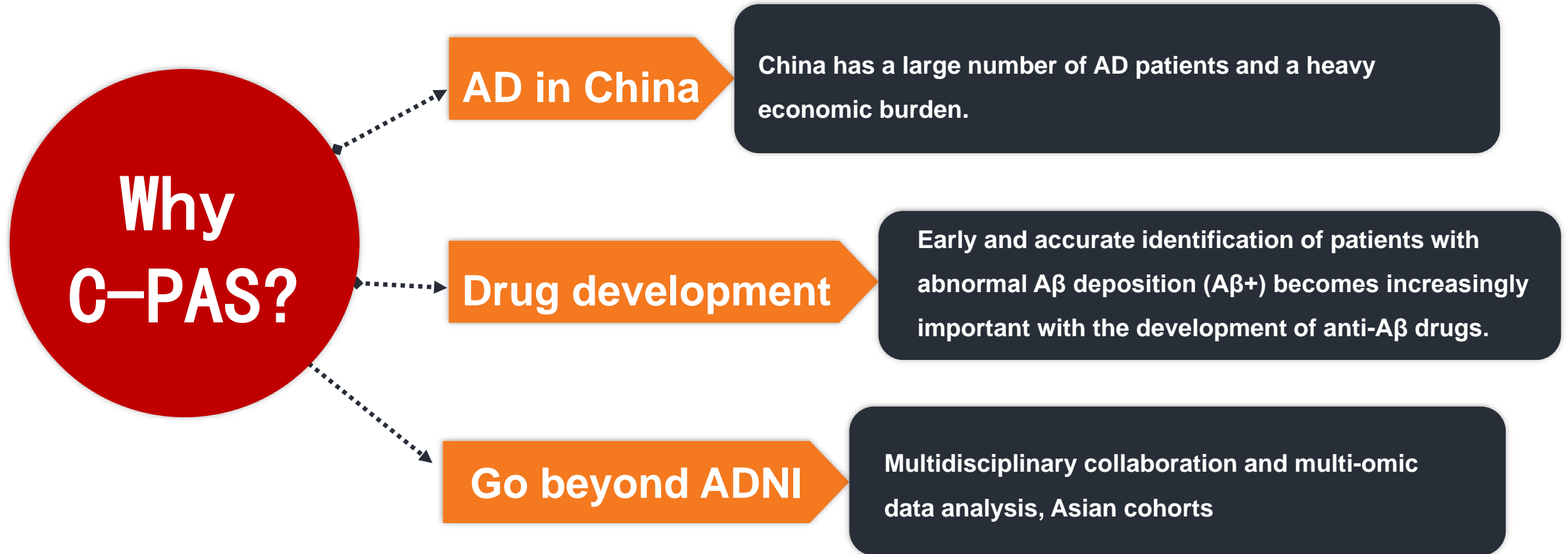
02

Preliminary findings of C-PAS

03

Experiences and perspectives

Chinese Preclinical Alzheimer's Disease Study (C-PAS)



C-PAS design and recruitment

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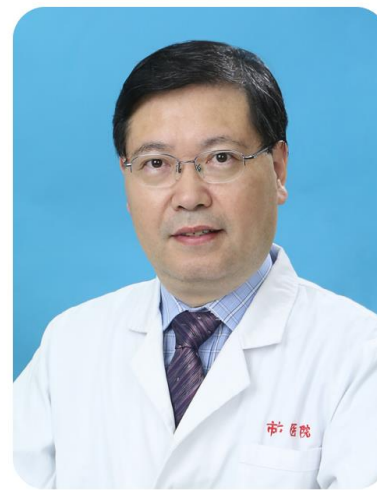
Original Research

Chinese Preclinical Alzheimer's Disease Study (C-PAS): Design and Challenge from PET Acceptance

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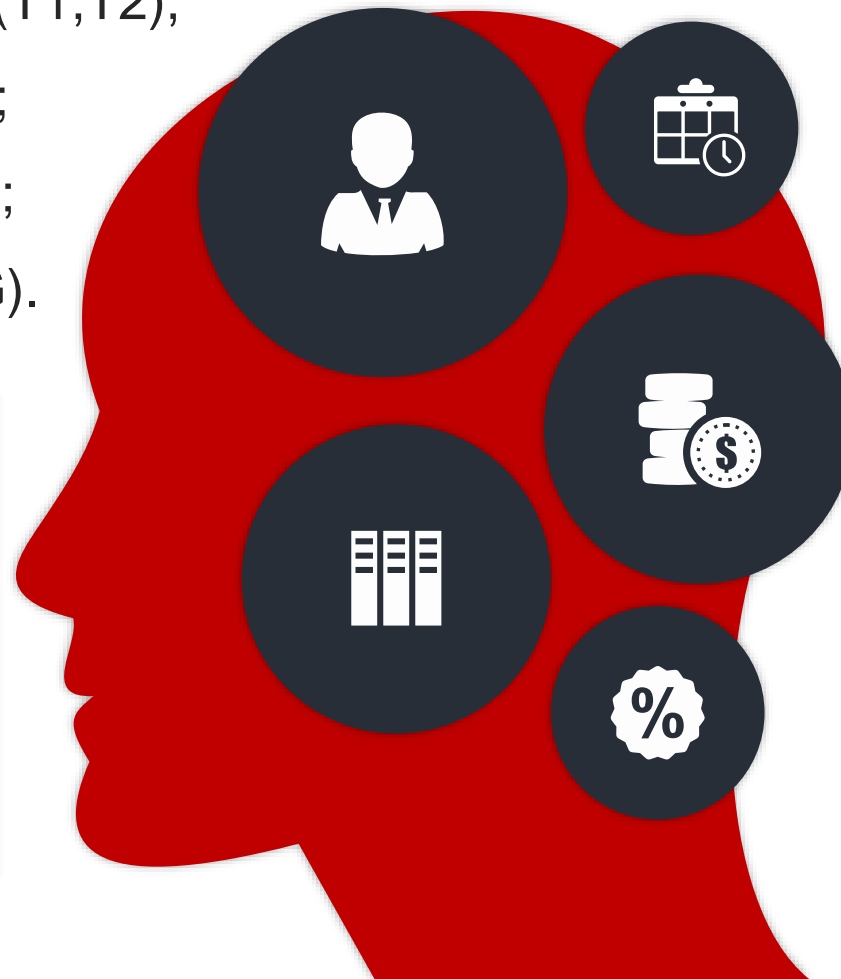
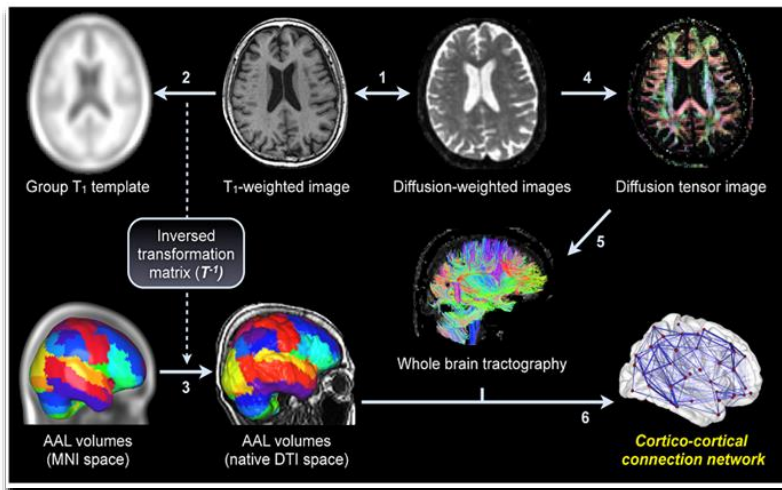
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- A **longitudinal** study in **Shanghai, China**, starting in April 2019;
- Volunteers were recruited from Memory Clinics and local communities, including **preclinical and prodromal AD** (Cognitively normal, SCD, MCI, and dementia);
- The **baseline** participants with completion of A β PET scanning is expected to reach **2000**.
- Participants in the non-demented groups were followed every two years, while those in the dementia group were followed up every six months. The follow-up will continue for **10 years**.

Highlights of C-PAS

Multi-modal brain imaging:

- PET: amyloid/tau/FDG-PET;
- MRI(prisma 3.0T): structural(T1,T2), functional (BOLD), ASL, DTI;
- Retinal imaging: OCT, RNFL;
- Electroencephalograph(EEG).



Peripheral biomarkers:

- Blood tests: $A\beta_{42}$, $A\beta_{40}$, p-tau181, t-tau, NfL measured via SIMOA;
- Genetic testing: APOE, GWAS
- Urine tests: urinary metabolites, proteins and DNA;
- Fecal tests: gut microbes and their metabolites.

Neuropsychological tests :

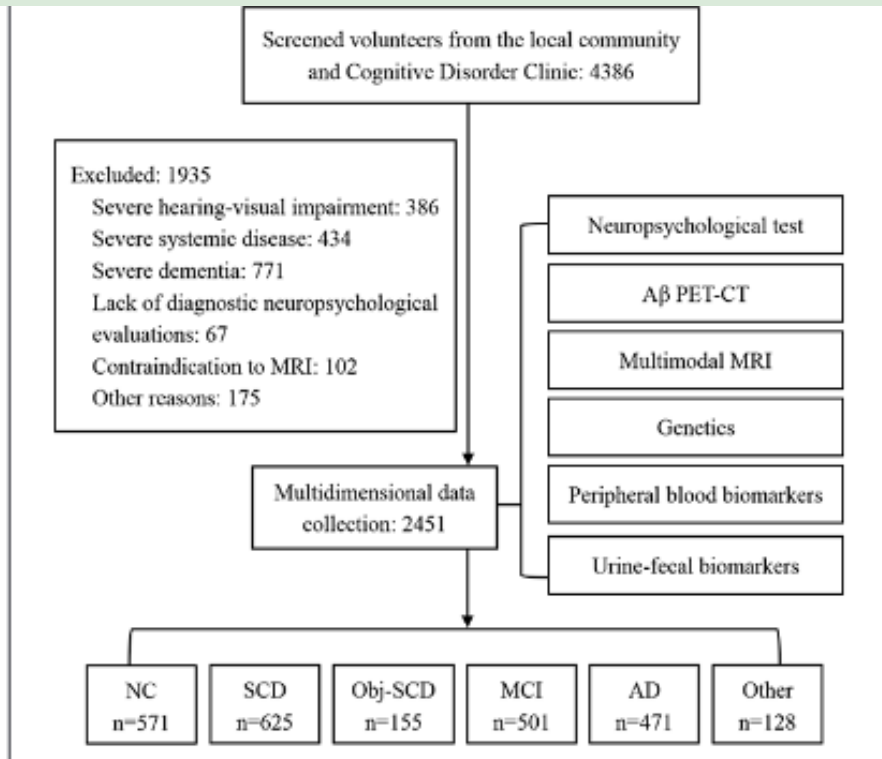
- Global function and different cognitive domains(memory, language, attention, executive function...);
- “ $A\beta$ -sensitive” tests;
- Electronic assessment tools;
- Digital behavioral markers(gait, eye movement, speech...)

C-PAS demography and PET acceptance

Table 1. Demography, biomarkers, and basic assessments

	NC (n=571)	SCD (n=625)	Obj-SCD (n=155)	MCI (n=501)	AD (n=471)	P-value
Age (years)	59.31±14.05 ^{abc}	62.82±9.59 ^{bc}	66.08±6.44 ^a	66.31±8.24 ^a	70.86±7.95 ^{abc}	<0.001
Gender (female, %)	358 (62.7%) ^a	455 (72.8%)	97 (62.6%)	326 (65.1%)	301 (63.9%) ^a	0.001
Education (years)	13.18±3.79 ^{abc}	12.58±3.31 ^{bc}	11.02±3.02 ^a	11.06±3.36 ^a	9.69±3.94 ^{abc}	<0.001
PET acceptance (accept n, %)	167 (29.2%) ^a	241 (38.6%)	61 (39.4%)	173 (34.5%)	118 (25.1%) ^{abc}	<0.001
Florbetapir PET (positive/total, %)	53/167 (31.7%) ^c	80/241 (33.2%) ^c	27/61 (44.3%)	84/173 (48.6%) ^a	107/118 (90.7%) ^{abc}	<0.001
ApoE (e4 carrier/total, %)	84/462 (18.2%)	137/578 (23.7%)	25/152 (16.4%)	118/478 (24.7%)	225/440 (51.1%) ^{abc}	<0.001
Cognition						
MMSE					16.90±5.11 ^{abc}	<0.001
MoCA-B					11.86±5.01 ^{abc}	<0.001
ACE III					46.58±13.39 ^{abc}	<0.001
Non-cognition						
ECOG					30.68±10.7 ^{abc}	<0.001
FAQ					7.13±7.21 ^{abc}	<0.001
ADL					24.68±7.22 ^{abc}	<0.001

a. corrected P<0.05 comj SCD, subjective cognitv State Examination. MoC Activity Questionnaire.



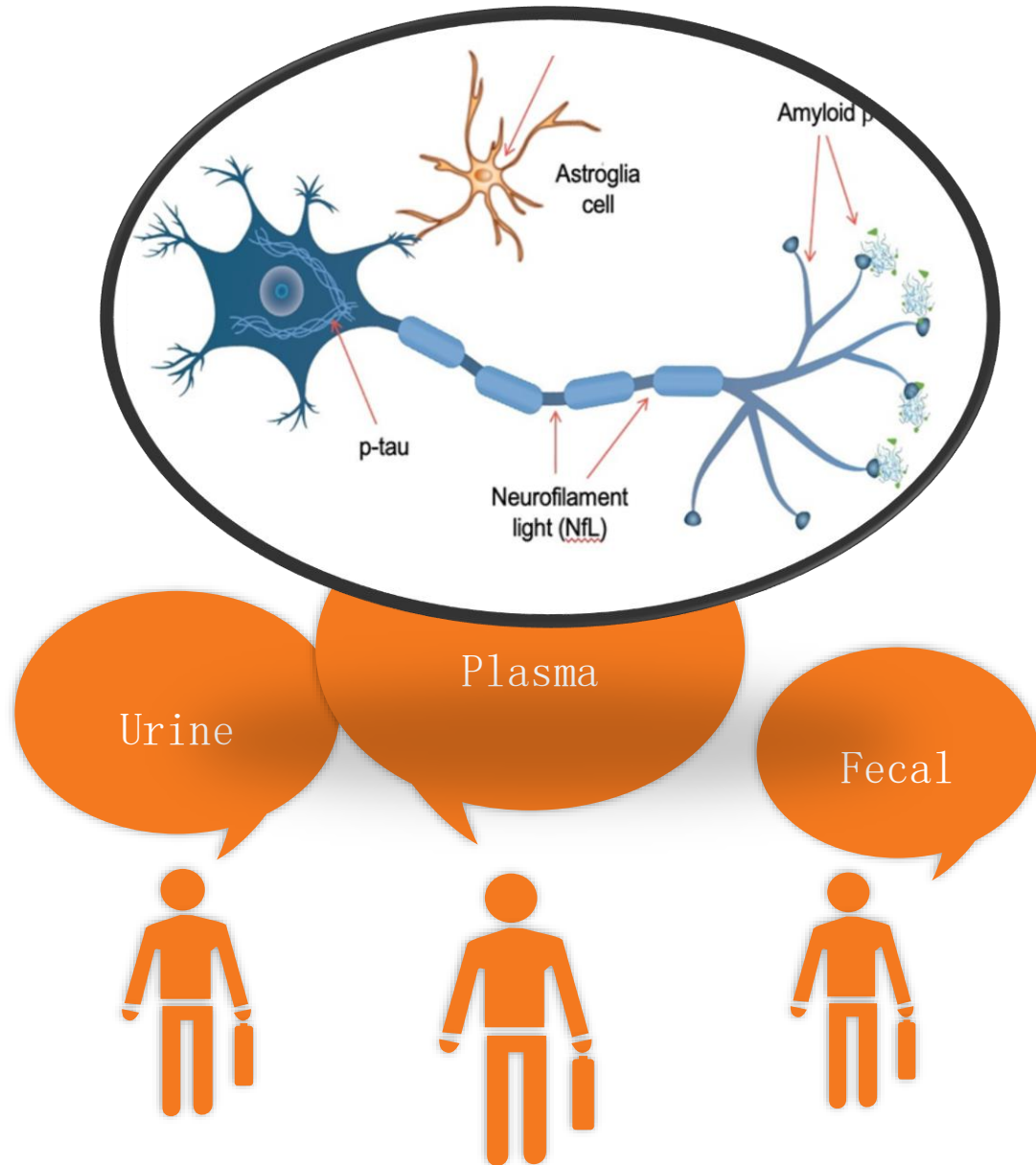
NC, normal cognition. SCD, subjective cognitive decline. Obj-SCD, objectively defined subtle cognitive decline, MCI, mild cognitive impairment. AD, Alzheimer's disease.

From April 2019 to March 2022, we screened **4386** volunteers and enrolled a total of **2451** participants.

817 participants (**33.3%**) underwent the amyloid PET scanning. Acceptance rates of the NC and AD group were lower than that of the SCD, Obj-SCD, and MCI groups.

Compared with ADNI cohorts, participants in C-PAS have **younger age (mostly <80 years old)** and **lower APOE 4 carrier rates..**

C-PAS results from Peripheral biomarkers



1. Integrated algorithm combining plasma biomarkers and cognitive assessments accurately predicts brain β -amyloid pathology. *Commun Med (Lond)*. 2023 May 10;3(1):65. **IF>10**
2. The potential impact of clinical factors on blood-based biomarkers for Alzheimer's disease. *Transl Neurodegener* 12, 39 (2023). **IF=12.6/Q1**
3. Associations of plasma phosphorylated tau181 and neurofilament light chain with brain amyloid burden and cognition in objectively defined subtle cognitive decline patients. *CNS Neurosci Ther*. 2022 Dec;28(12):2195-2205. **IF=5.5/Q1**
4. Non-linear character of plasma amyloid beta over the course of cognitive decline in Alzheimer's continuum. *Frontiers in Aging Neuroscience*. 2022 Mar 23;14:832700. **IF= 4.8 /Q2**
5. Wang Y, Pan F, Xie F, He R, Guo Q. Correlation Between Urine Formaldehyde and Cognitive Abilities in the Clinical Spectrum of Alzheimer's Disease. *Frontiers in Aging Neuroscience*. 2022 Feb 10;14:820385. **IF= 4.8 /Q2**
6. Wang Y, Wang Y, Zhu J, Guan Y, Xie F, Cai X, Deng J, Wei Y, He R, Fang Z and Guo Q (2022) Systematic evaluation of urinary formic acid as a new potential biomarker for Alzheimer's disease. *Front. Aging Neurosci*. 14:1046066. doi: 10.3389/fnagi.2022.1046066 **IF= 4.8 /Q2**

Thanks!

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