Canadian ADNI

- Five sites across Canada
 - University of British Columbia-Vancouver Coastal Health (PI: Robin Hsiung)
 - Western University-London HSC (PI: Elizabeth Finger)
 - Western University-Parkwood Hospital (PI: Michael Borrie)
 - University of Toronto-Sunnybrook HSC (PI: Sandra Black)
 - McGill University-Jewish General Hospital (PI: Howard Chertkow)
 - Total recruitment

ADNI-1: 49

ADNI-GO: 11 (+20 rollover)

ADNI-2: 48 (+24 rollover)

ADNI-2 Recruitment (with partial funding from CIHR)

TOTAL: 48

Normal controls:

■ Subjective complaints: 5 (+1 currently in screening)

Early MCI: 9

Late MCI: 17

■ AD: 10

Screen fails: 24

■ Rollover from ADNI-GO: 24

Canadian Institutes of Health Research: Medical Imaging Trial NEtwork of Canada (MITNEC) Protocol Title: Amyloid and glucose PET Imaging in Alzheimer and Vascular Cognitive Impairment patients with significant White Matter Disease

Background

Small vessel disease often coexists with Alzheimer's disease (AD) and can contribute to cognitive decline and progression to dementia.

Longitudinal imaging using cerebral amyloid labeling may contribute understanding the additive/interactive effects of small vessel disease and AD (?related to reduced amyloid clearance).

Aims

- To determine in patients with significant WMD stratified by apolipoprotein E e4 status:
- baseline prevalence and degree of uptake of amyloid on PET in relation to baseline clinical and multimodal brain imaging measures,
- 2) if baseline amyloid predicts increased amyloid deposition over 1 year
- To evaluate changes, if any, in amyloid uptake in correlation with the changes in clinical and structural and functional brain measures over 1 year.

Research Design

- Multiple sites nationwide Starting with ADNI sites
 - Sunnybrook, London, Calgary, UBC
 - 150 patients (75 from stroke prevention clinics, 75 from memory clinics)
 - NC, MCI, and AD from ADNI-GO and ADNI-2 studies can serve as control groups

Subjects and procedures

- Recruitment period: 6-9 months
- Study protocol
 - 3T-MRI (structural, DTI, TF-MRI), FDG-PET, 18 florbetapir PET, Neuropsychological Testing, Blood Sampling (Apoe E e4) at baseline and at 12 months
 - Analysis pipelines designed to derive total supratentorial intracranial volume, tissue segmentation including grey, white, lesion subtypes (lacunar, deep and periventricular hyperintensities), with adapted free surfer application

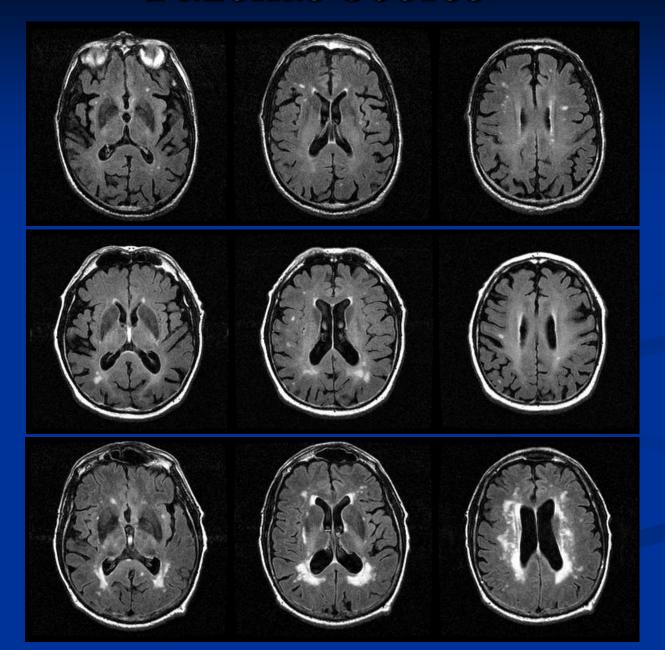
Inclusion Criteria

- \sim > 60 or more years of age
- WMD score =3 on CT/MRI on Fazekas scale
- Memory clinic patients will meet criteria for amnestic or multi-domain MCI and mild early AD (MMSE > 20) using the same criteria as in the ADNI project
- TIA/minor stroke (lacunar, non cortical) with MMSE scores between 20 30

Fazekas Scores

Fazekas 1

Fazekas 2



Fazekas 3

Other Canadian Cohort studies

- Ontario Brain Institute: Integrated Discovery Program in Neurodegeneration(Vascular)-600 patient cohort across AD/MCI, FTD, ALS, PD/LBD, VCI
 - Utilizing 3T MRI, amyloid PET, ocular measures and eye tracking, genomics, neuropsychology, gait and balance

■ Canadian Institutes of Health Research:

 Canadian Consortium for Neurodegeneration and Aging (CCNA)(Howard Chertkow) and ADNI analysis grants

■ Brain Canada:

Prevention clinical trials, support of platforms, cohort study underway in the Toronto Dementia Research Alliance- 320 MCI/early dementia in AD, PD/LBD/subcortical VCI/NC (neuroimaging, Optical Coherence Tomography, lens amyloid)

Canadian Cohort Studies

- More focus on neurodegeneration with co-morbid small vessel disease (SVD) and comparison across different misfolded proteins
 - Note that Cardiovascular Health Study reported that 28% of elderly have silent lacunes, and 95% have white matter hyperintensities (20% severe)
- Structural semiautomatic imaging pipelines to simultaneously quantify atrophy and SVD
- Population cohorts underway are adding harmonized structural brain and body imaging, with comparison potential including midlife