LECANEMAB APPROPRIATE USE RECOMMENDATIONS

These appropriate use recommendations (AURs) are for the use of lecanemab for the treatment of early AD (ie, MCl due to AD or mild AD dementia) with confirmed brain amyloid pathology based on the clinical guidance developed by the Alzheimer's Disease and Related Disorders Therapeutics Working Group and the FDA Prescribing Information for lecanemab. This piece is part of an appropriate use toolkit independently developed by the Alzheimer's Association for HCPs who have decided to offer lecanemab for a patient meeting eligibility criteria. These AURs apply to lecanemab; other anti-amyloid monoclonal antibodies may have different management requirements. AURs specific to the monoclonal antibody being considered should be referenced.

Review this section of the toolkit to learn more about the radiographic grading and type of ARIA, monitoring and ongoing management, accompanying symptoms, and when lecanemab discontinuation may be appropriate.

Management of ARIA

Microhemorrhage

Superficial Siderosis

ARIA-H



microhemorrhages

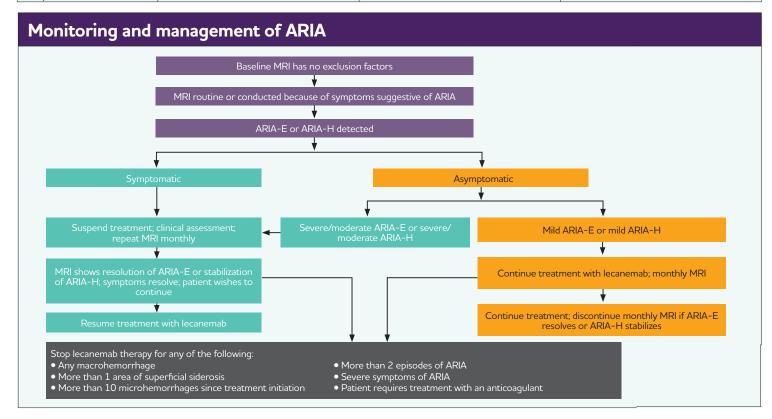
>2 areas of superficial siderosis

A non-contrast MRI, utilizing TI FLAIR and T2*-weighted GRE or equivalent sequences (such as SWI), and DWI, preferably on a 3T magnet should be obtained. Two types of amyloid-related imaging abnormalities (ARIA) can occur: ARIA-E with edema and ARIA-H with hemorrhagic changes. In the CLARITY AD phase 3 trial of lecanemab, rates of ARIA for those on lecanemab were 12.6% for ARIA-E and 17.3% for ARIA-H vs 1.7% and 9.0%, respectively, for those on placebo.

Description of mild, moderate, and severe radiographic ARIA (from the Prescribing Information) Radiographic Severity **ARIA Type** Mild Moderate Severe ARIA-E FLAIR hyperintensity confined to FLAIR hyperintensity >10 cm with FLAIR hyperintensity 5 to 10 cm in sulcus and/or cortex/subcortex single greatest dimension, or more associated gyral swelling and sulcal white matter in 1 location < 5 cm than 1 site of involvement, each effacement. One or more separate/ measuring <10 cm independent sites of involvement may be noted ARIA-H 5 to 9 new incident 10 or more new incident ≤4 new incident microhemorrhages

microhemorrhages

2 focal areas of superficial siderosis



AD, Alzheimer's disease; ARIA, amyloid-related imaging abnormalities; ARIA-E, ARIA with edema; ARIA-H, ARIA with hemorrhagic changes; DWI, diffusion-weighted imaging; FLAIR, fluid attenuated inversion recovery; GRE, gradient recalled echo; HCP, healthcare provider; MCI, mild cognitive impairment; MRI, magnetic resonance imaging; SWI, susceptibility weighted imaging.

Cummings J, Apostolova L, Rabinovici GD, et al. Lecanemab: appropriate use recommendations. J Prev Alzheimers Dis. 2023;10(3):362-377. doi:10.14283/jpad.2023.30

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1 focal area of superficial siderosis

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Management of ARIA (cont'd)



Symptoms observed in patients who develop symptomatic ARIA

- Headache
- Confusion
- Visual changes
- Dizziness
- Nausea
- Gait difficulty

- Serious ARIA
 - Seizures
 - Status epilepticus
 - Encephalopathy
 - Stupor
 - Focal neurological deficits

Management of ARIA depending on the severity of symptoms and the severity of the radiographic ARIA-E or ARIA-H on MRI

	Symptom Description			
	No Symptoms	Mild Symptoms	Moderate Symptoms	Severe Symptoms
Severity of changes observed on MRI	None	Discomfort noted; no disruption of daily activity	Discomfort sufficient to reduce or affect normal daily activity	Incapacitating, with inability to work or to perform normal daily activity
ARIA-E on MRI				
Mild	Continue dosing	Suspend dosing	Suspend dosing	Discontinue dosing
Moderate	Suspend dosing	Suspend dosing	Suspend dosing	Discontinue dosing
Severe	Discontinue dosing	Discontinue dosing	Discontinue dosing	Discontinue dosing
ARIA-H on MRI				
Mild	Continue dosing	Suspend dosing	Suspend dosing	Discontinue dosing
Moderate	Suspend dosing	Suspend dosing	Suspend dosing	Discontinue dosing
Severe	Discontinue dosing	Discontinue dosing	Discontinue dosing	Discontinue dosing

Please scan or click below to view the full Prescribing Information for lecanemab Please scan or click below to view the lecanemab appropriate use recommendations publication

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