

The Australian Imaging Biomarkers and Lifestyle Flagship Study of Ageing



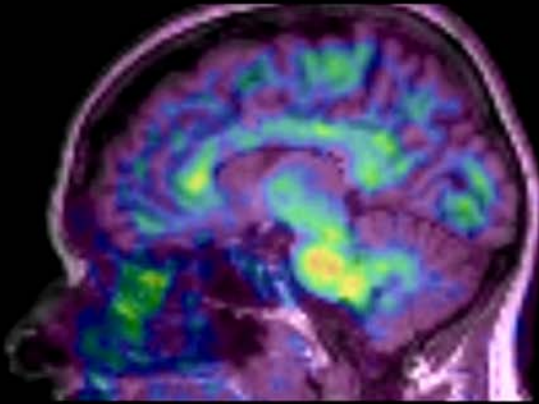
(AUSTRALIAN ADNI)

July 2011 UPDATE – Imaging
Christopher Rowe MD – *Neuroimaging stream leader*

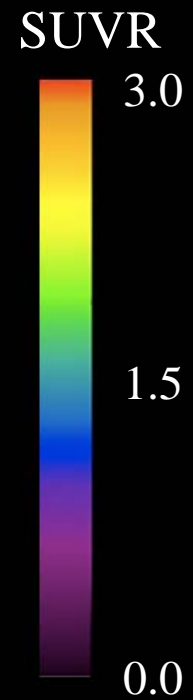
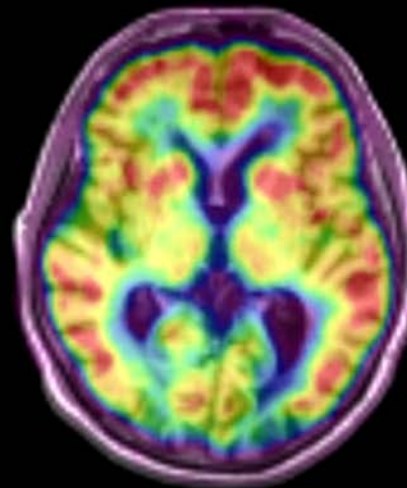
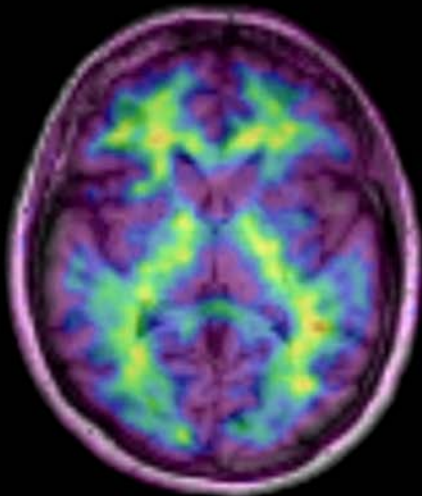
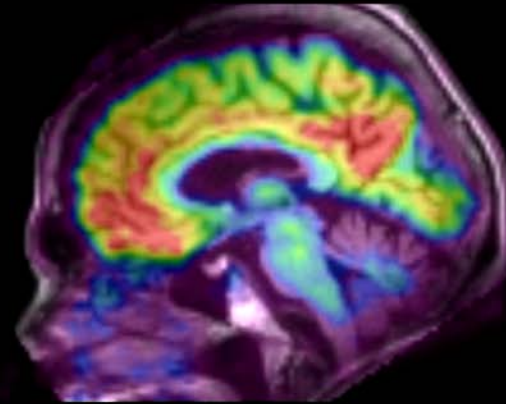


^{11}C -PiB PET commenced at Austin Health in 2004 and expanded in 2006 through the AIBL study of aging

HC

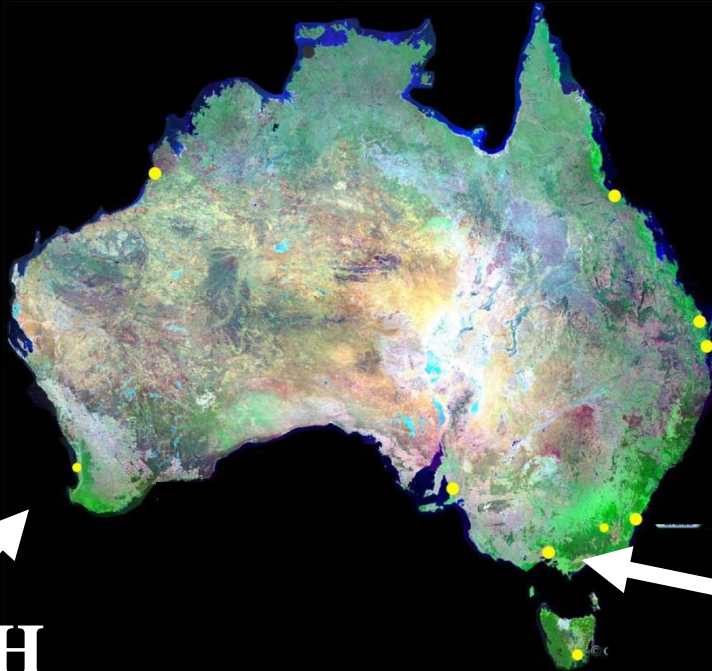


AD





1000 subjects
(25% imaged with PiB PET and MRI)



PERTH

MELBOURNE



Major Sponsor

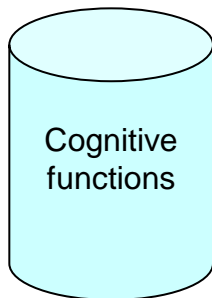




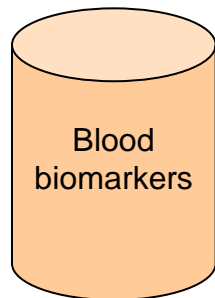
The Australian Imaging
Biomarkers and
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of Ageing.

A multimodality clinical study

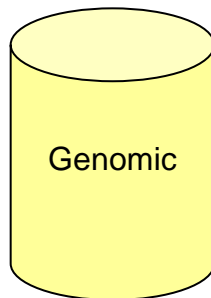
Databases



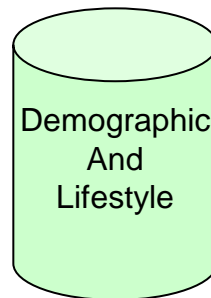
Cognitive
functions



Blood
biomarkers



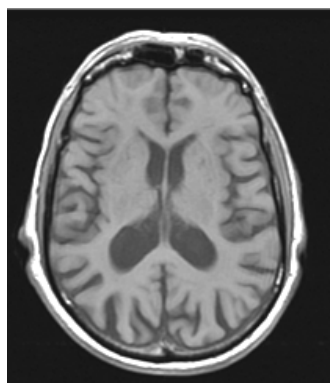
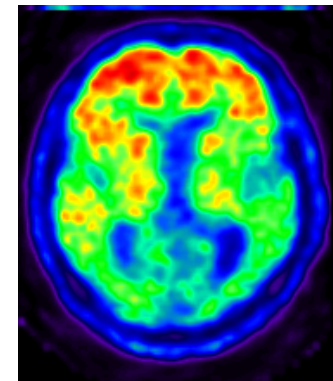
Genomic



Demographic
And
Lifestyle

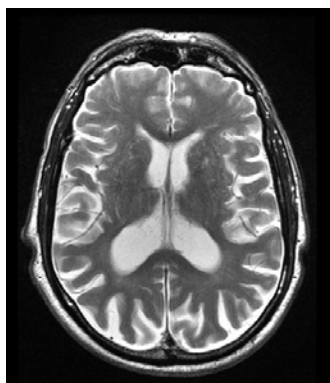
PET-PiB

Amyloid beta load



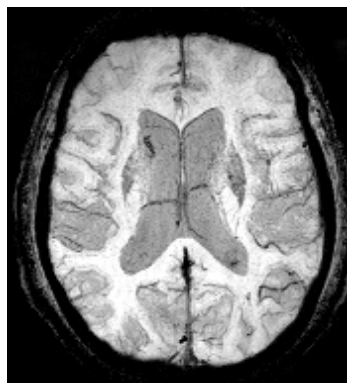
T1W

Anatomy



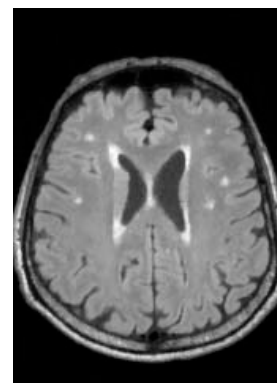
T2W

CSF and structures



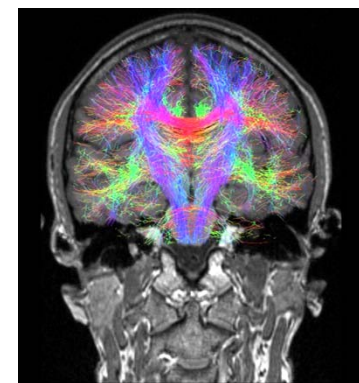
SWI

Venous tree



FLAIR

White matter lesions



DWI

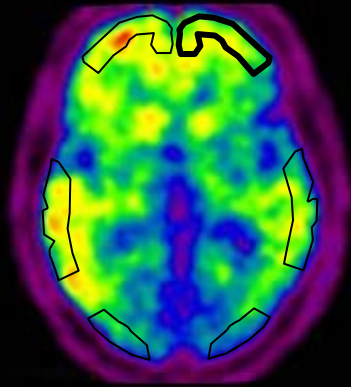
White matter connection

Methods

- 366 Participants
- Neuropsychology: CDR, MMSE, LM, CVLT-II, Rey Figure, etc
- MRI: 3D MP-RAGE, FLAIR, +/- SWI, DTI
- PET: Equilibrium imaging at 40-70 min after 300 MBq of ^{11}C -PiB
- Image Analysis:
 - PiB PET: Standard uptake value ratios (SUVR) i.e. cortex ROIs : cerebellar grey matter
 - MRI: 3 tissue segmentation using expectation maximization probability maps

^{11}C -PiB – Image Quantification

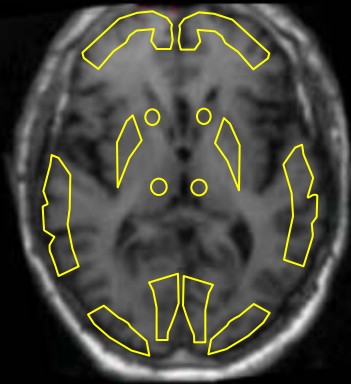
Regions



Neocortical SUVR_{40-70}

= cortical activity / cerebellar grey matter activity from 40 to 70 minutes post injection

Negative is <1.5

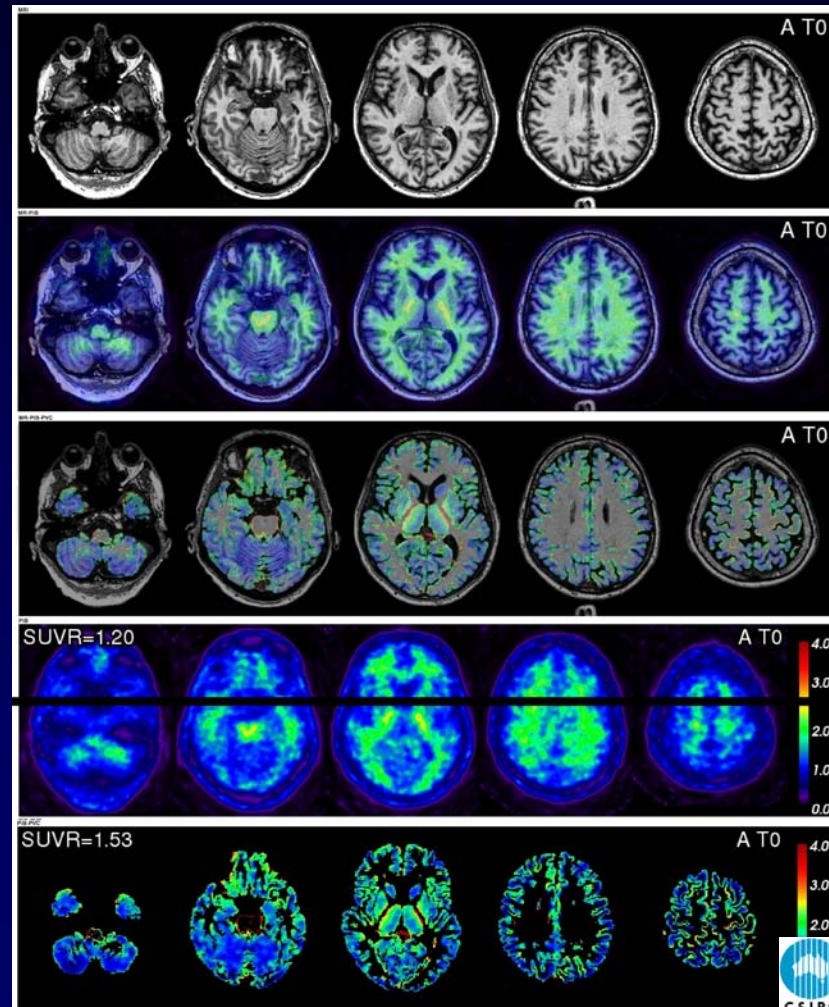


Follow-up PiB co-registered to baseline and saved prior ROI set used.

Single operator for all PiB scans.

Image Analysis

2. Automatic: co-registration + MRI segmentation
(GM, WM, CSF) + AAL template + PVC

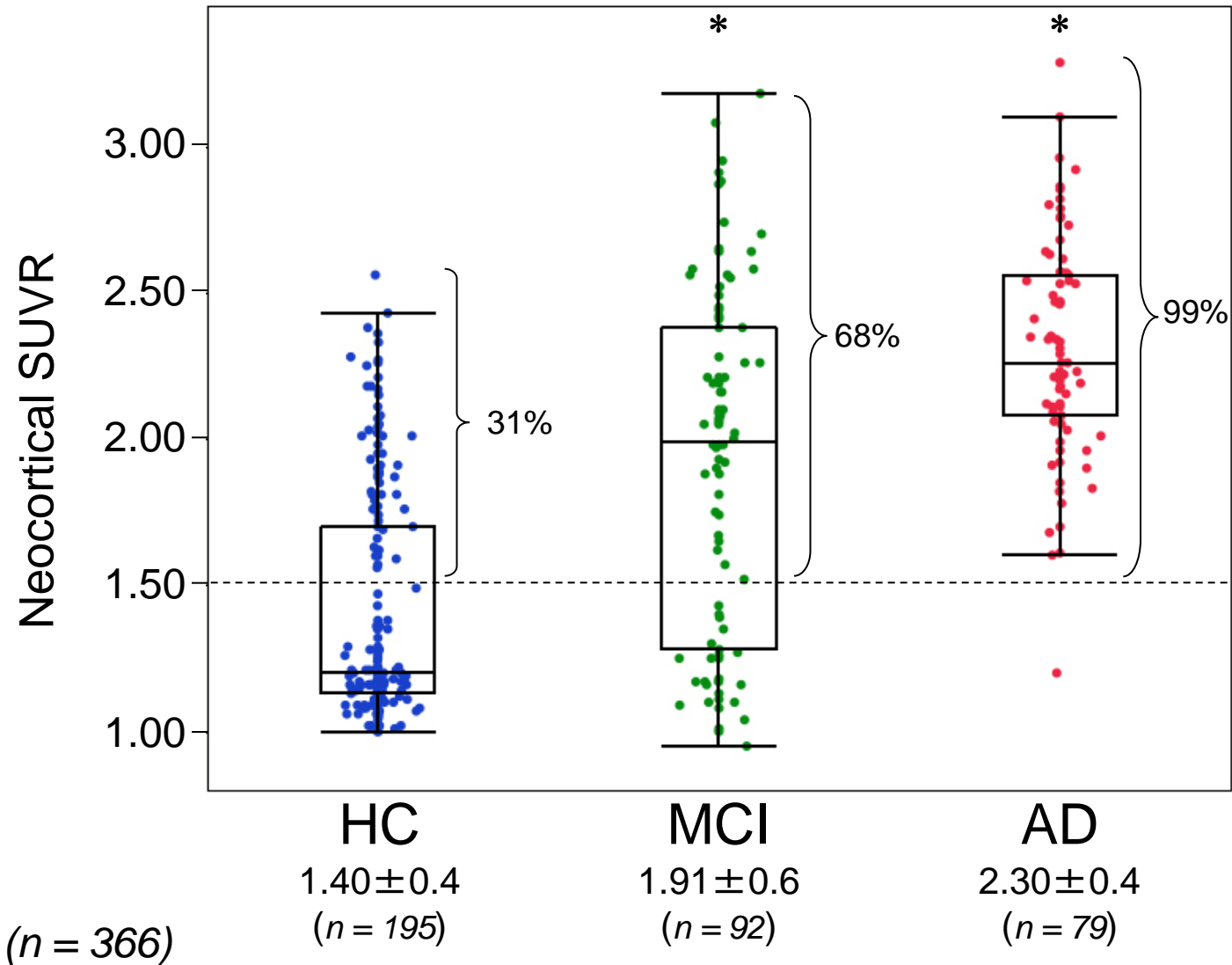


Imaging Cohort Demographics

	HC (n=195)	MCI (n=92)	AD (n=79)
Age	72	74	73
Gender (M:F)	47%	50%	50%
MMSE	29	27	21
CDR	0.0	0.5 ± 0.2	1.0 ± 0.5
CDR SOB	0.06 ± 0.2	1.25 ± 0.9	4.36 ± 1.7
% ApoE ε4	41%	61%	65%
Years of Education	13.4	12.5	12.4

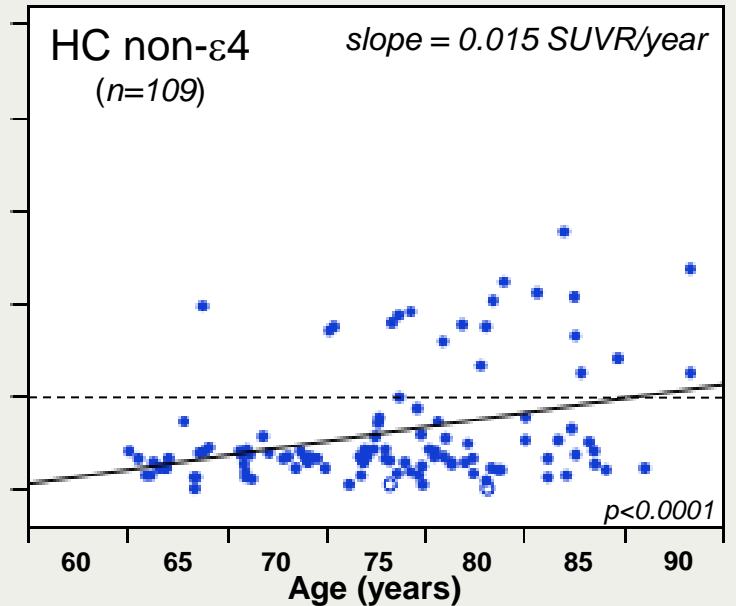
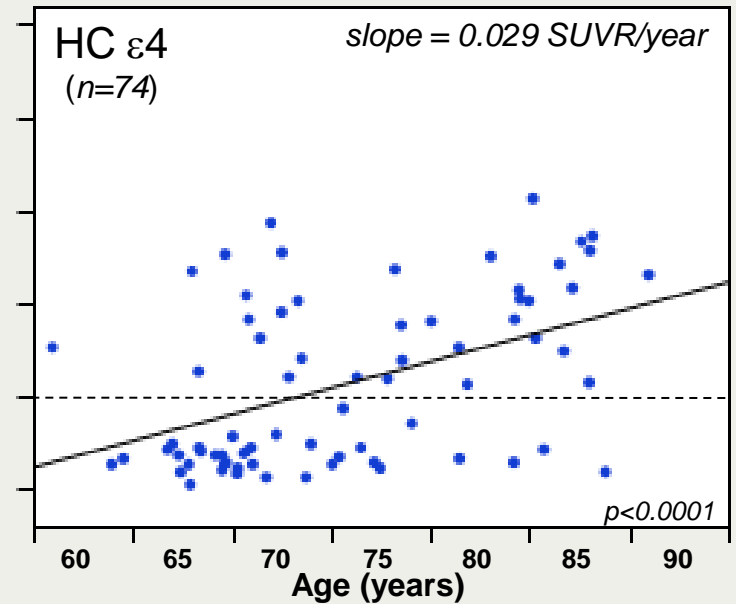
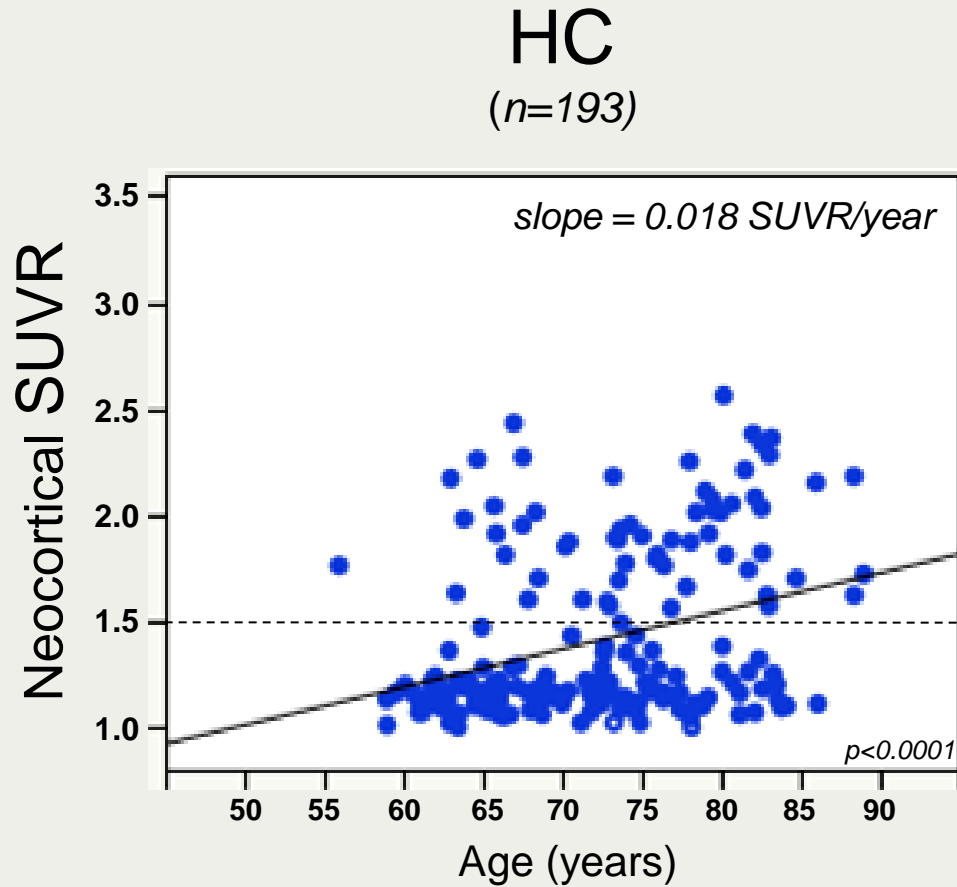
Baseline Imaging Findings

PiB neocortical SUVR in AIBL+

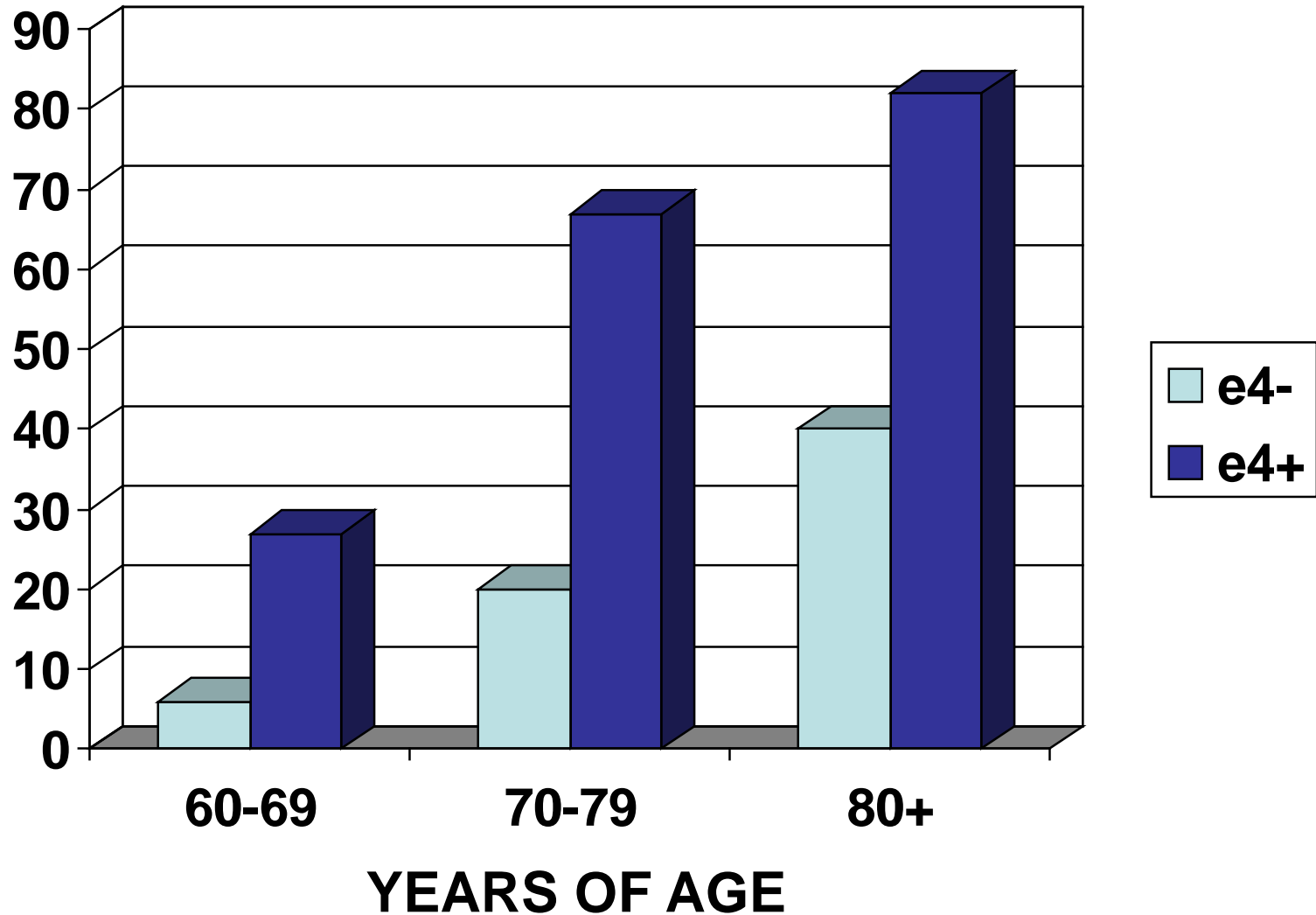


*Statistically significant results compared to controls ($p < 0.0001$)

Relation between ApoE, age, and A β burden

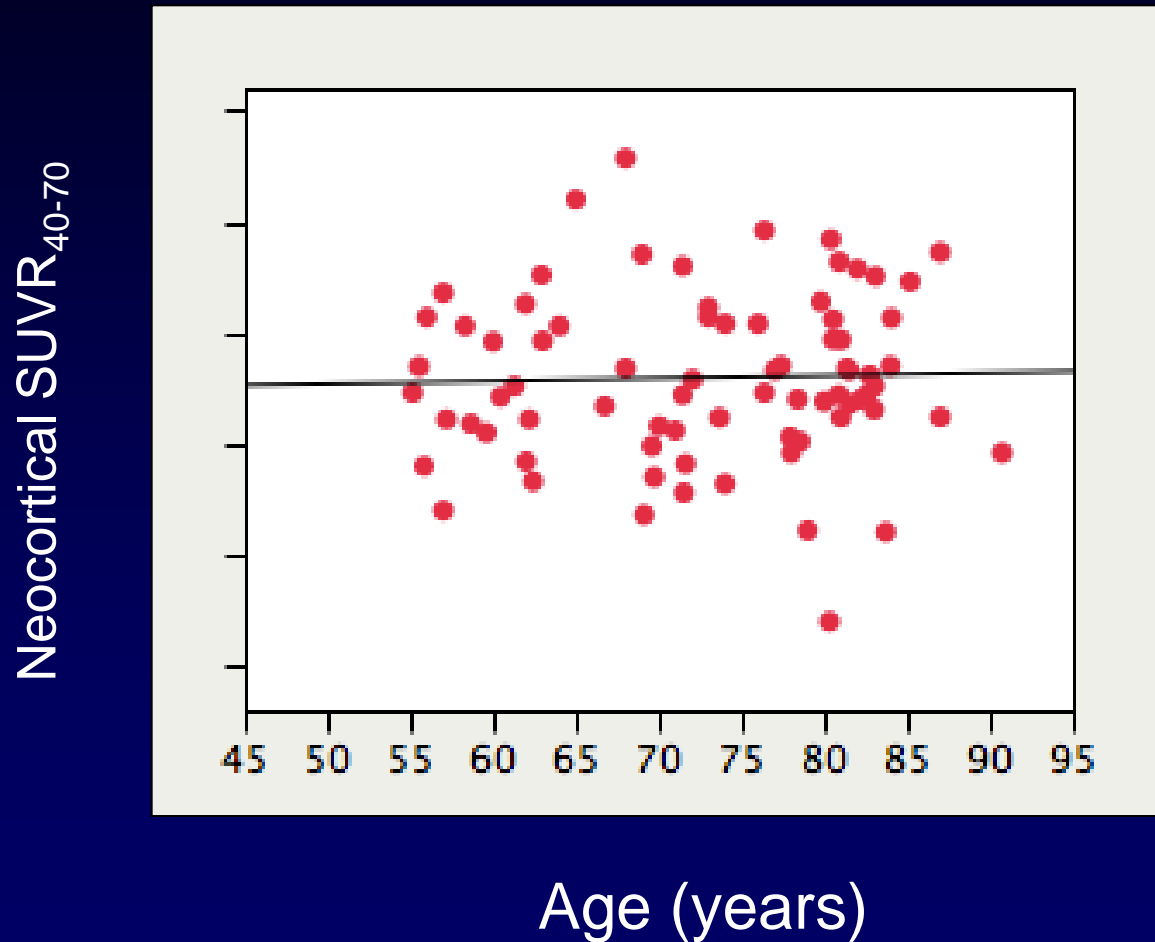


% Healthy Elderly PiB+ve



A β burden vs Age

Older AD do not have less PiB binding

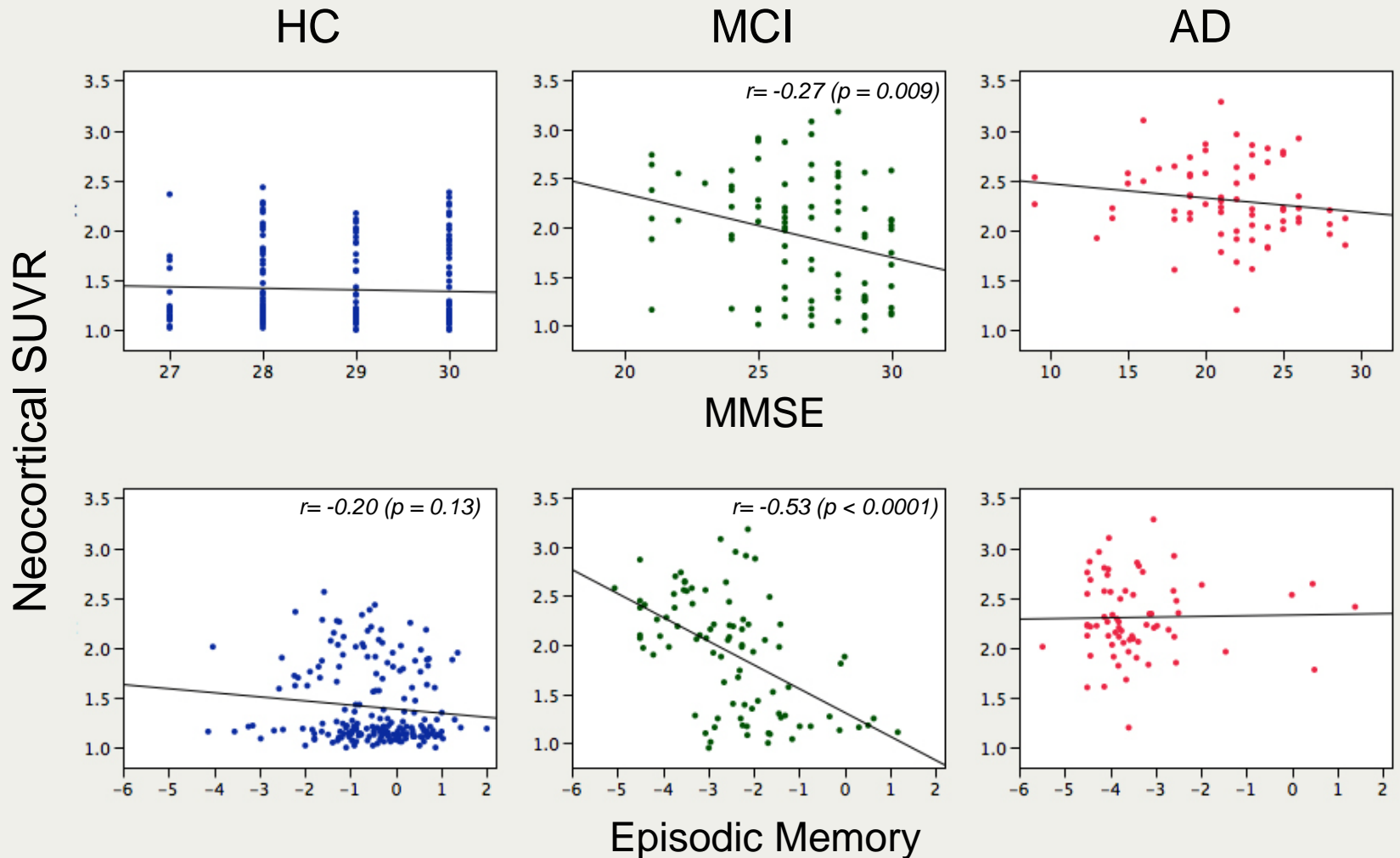


Calculated accuracy for PiB (AD vs HC)

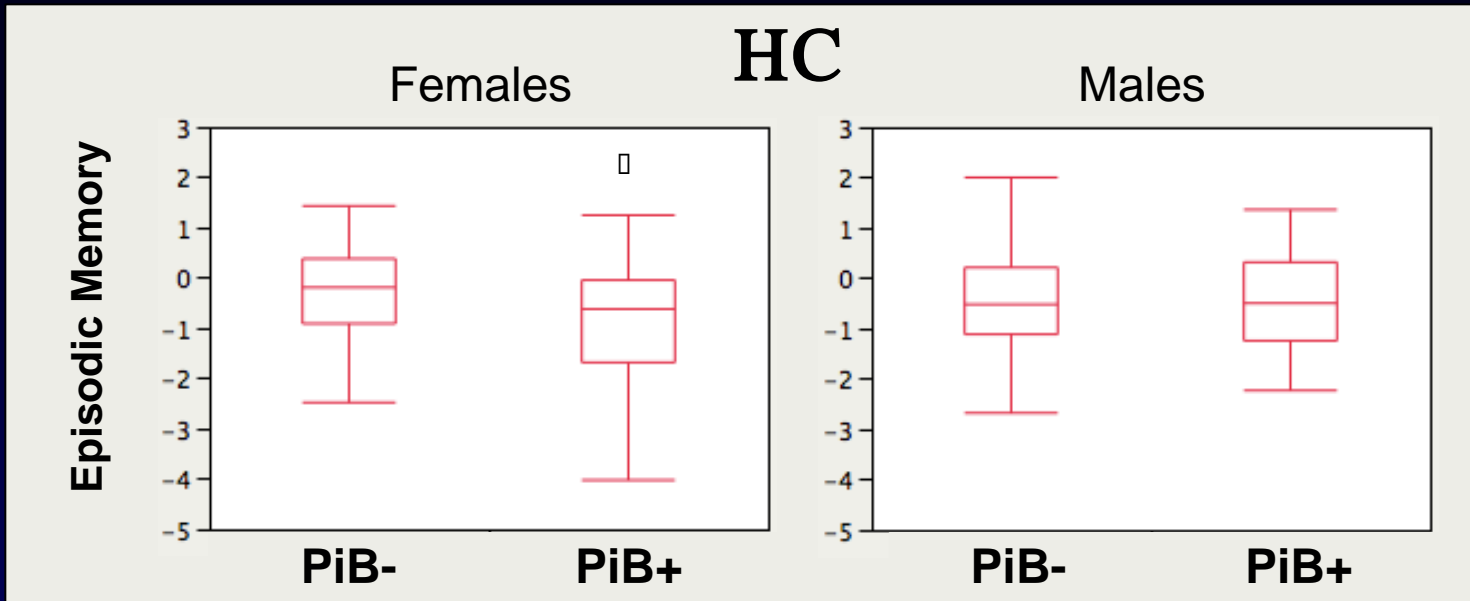
HC PiB+: **11%** in 60's, **32%** in 70's, **51%** in 80's
(e4 prevalence corrected)

Age	Sens.	Specif.	Accuracy	PPV	NPV
60-69	95	88	92	89	95
70-79	95	68	84	75	93
80+	95	49	78	65	91

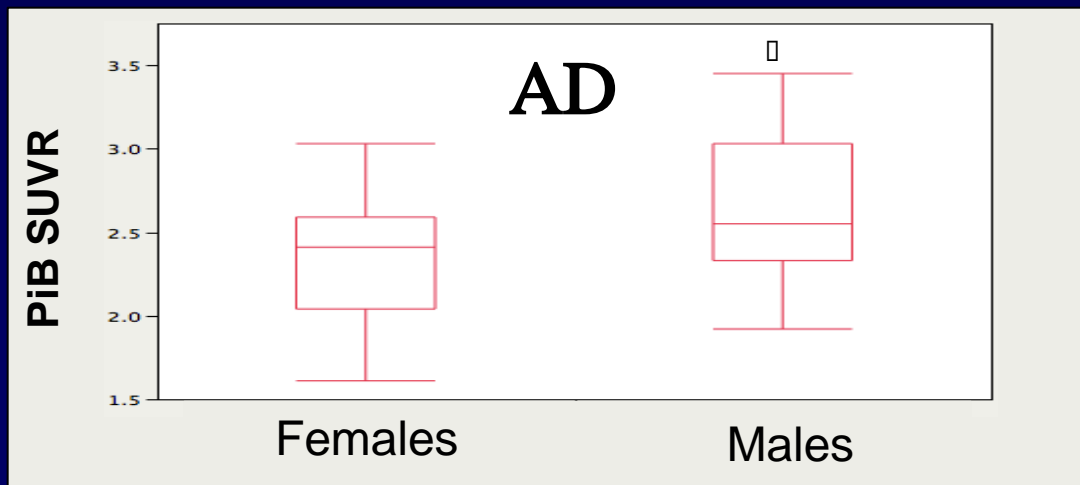
A β burden vs cognition



Gender Differences

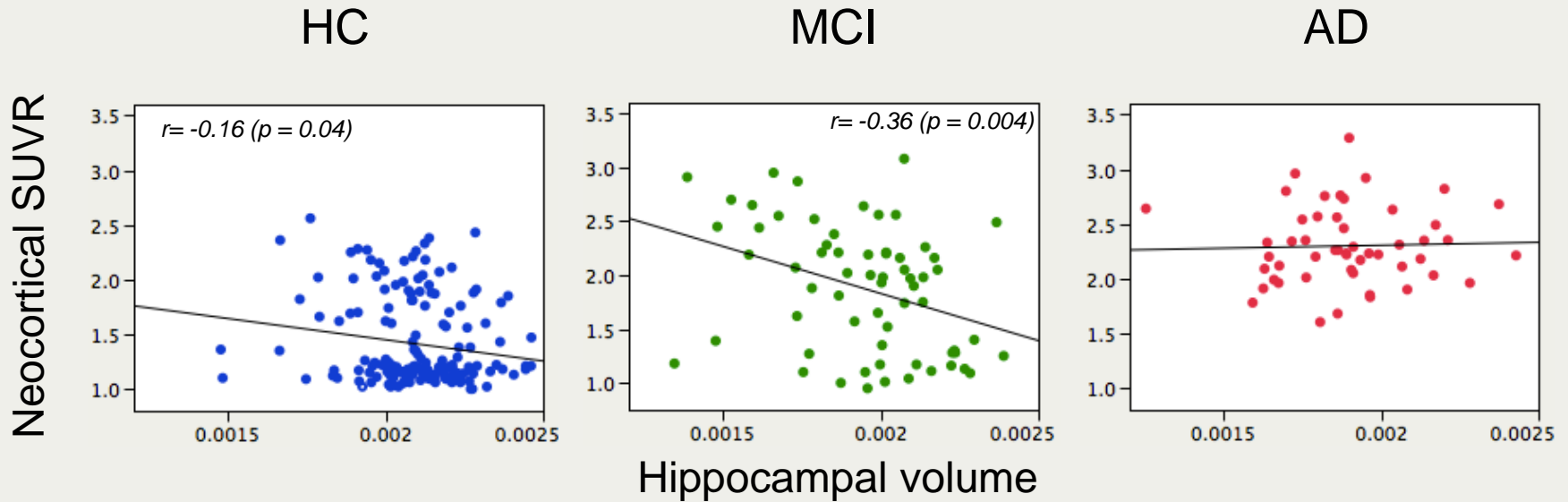


Female but not male PiB+ HC have lower memory scores



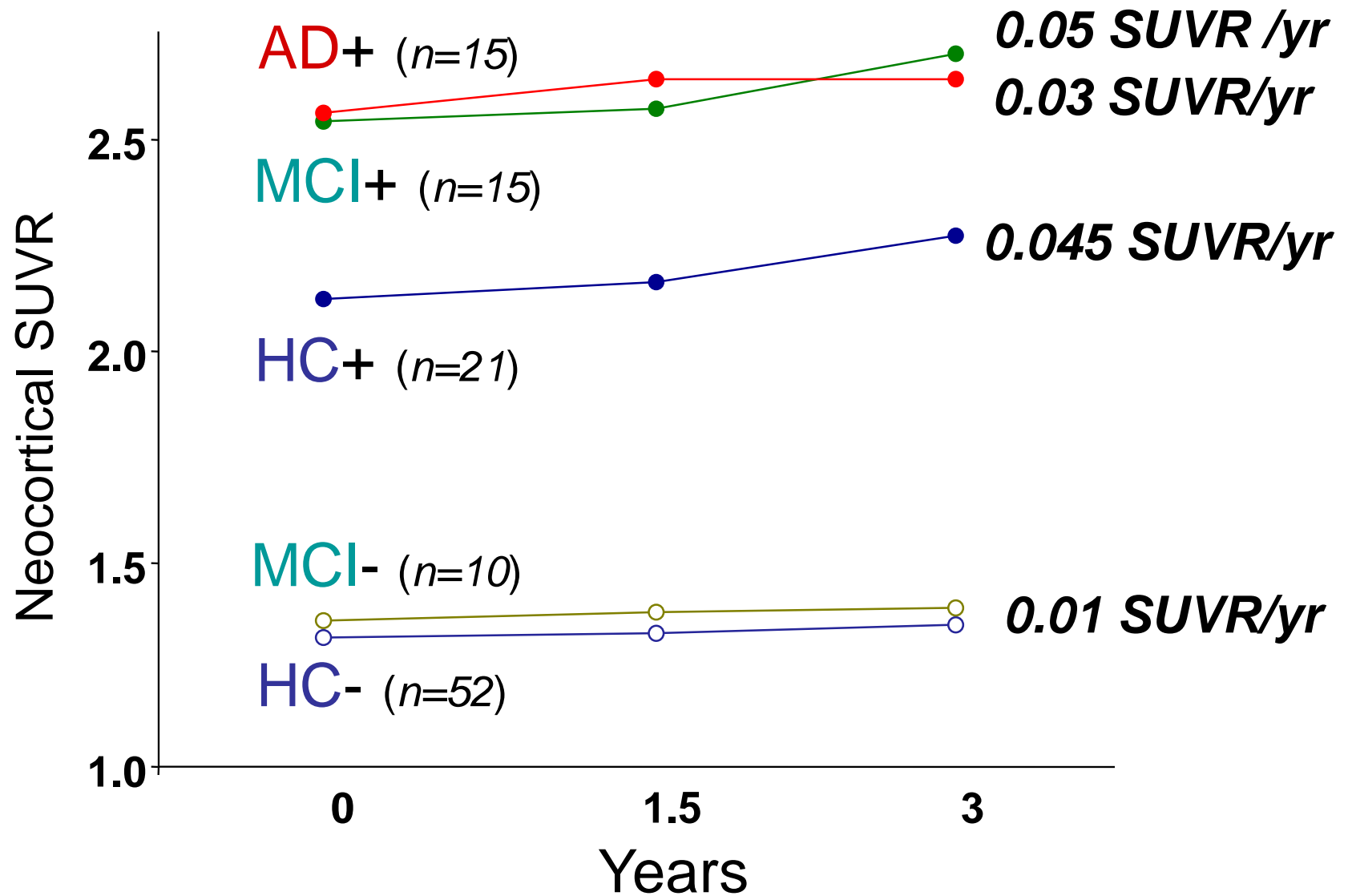
Male AD have higher PiB

A β burden vs hippocampal volume



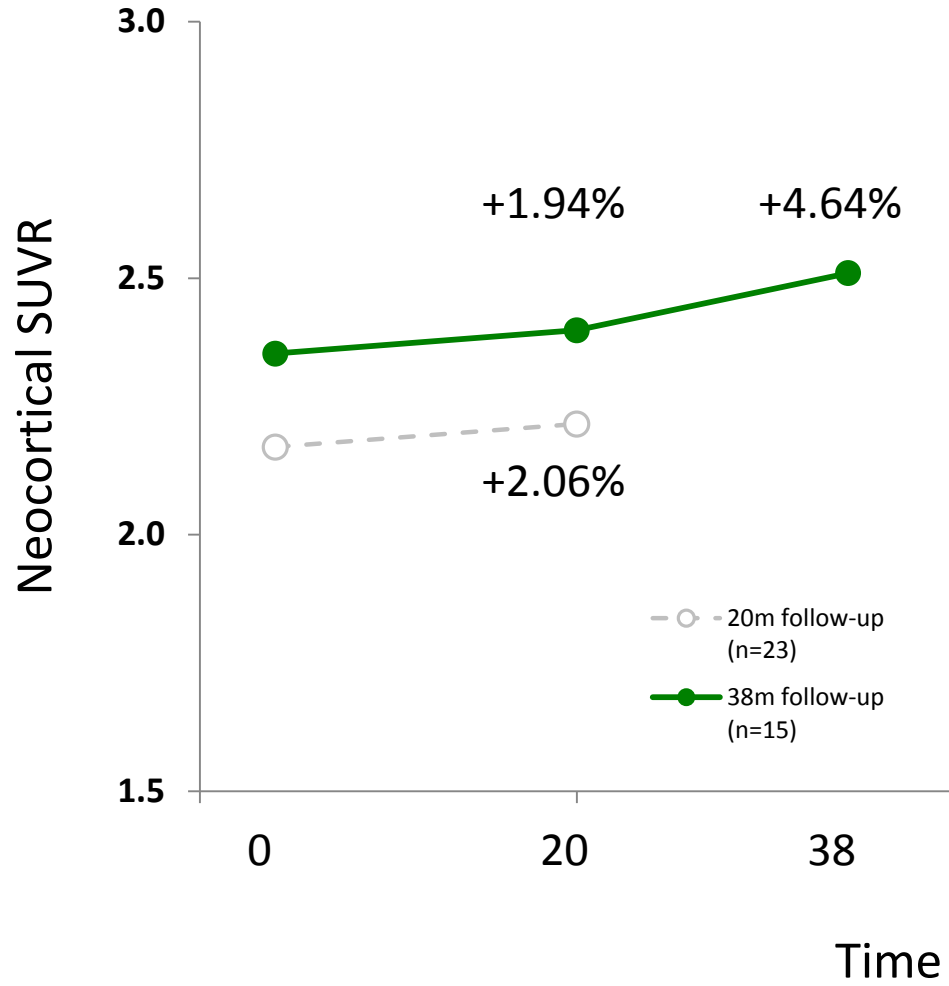
Follow-up Data

3 year PiB PET

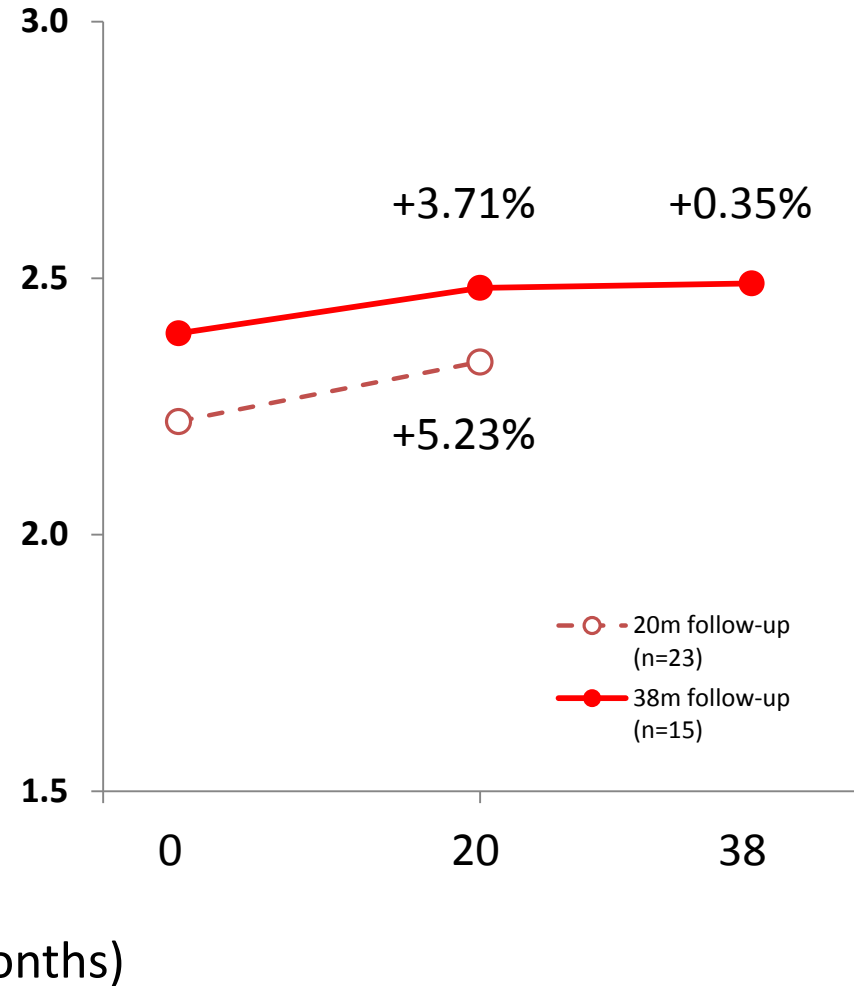


Note: Atrophy correction did not change shape of graphs

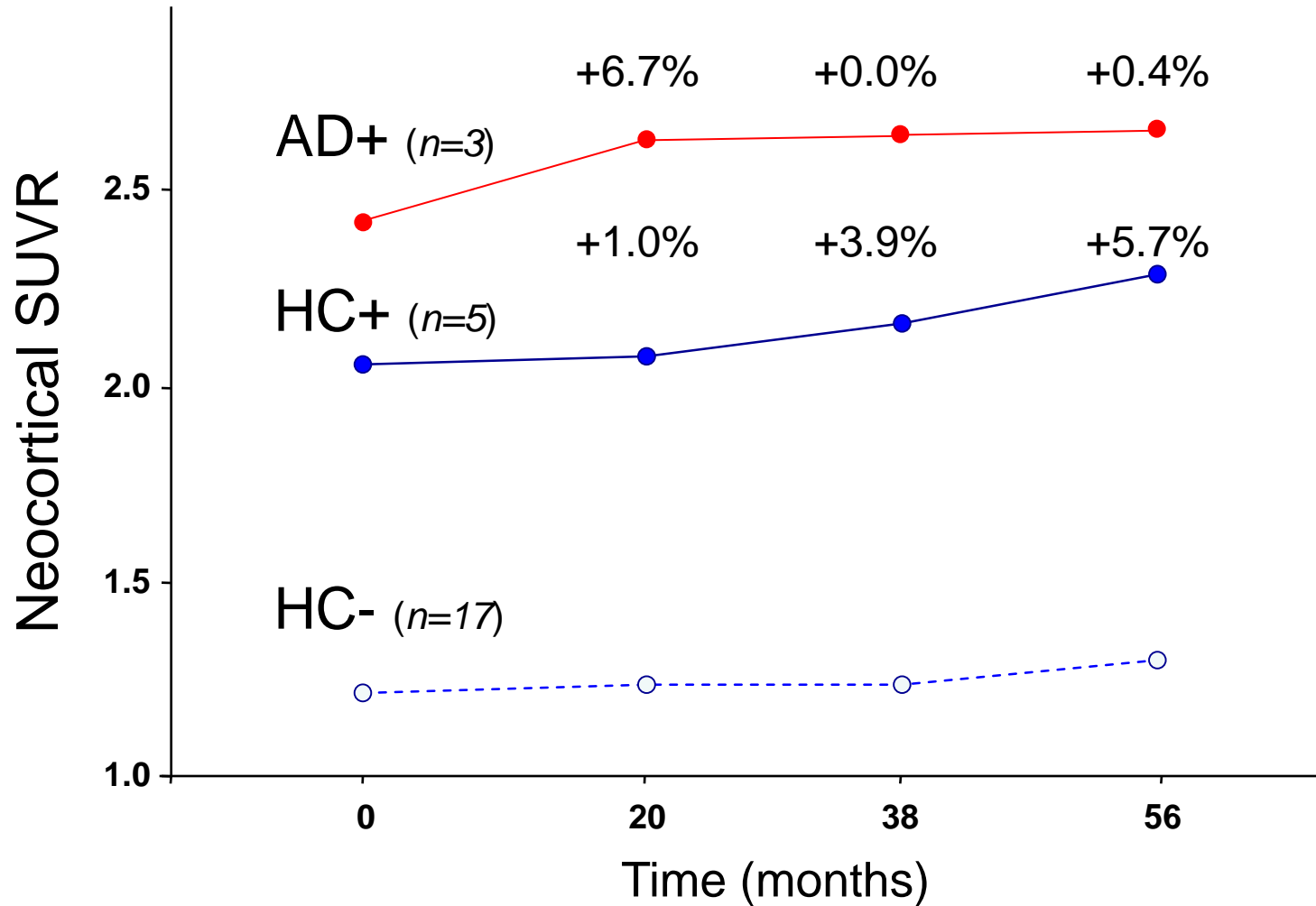
MCI+



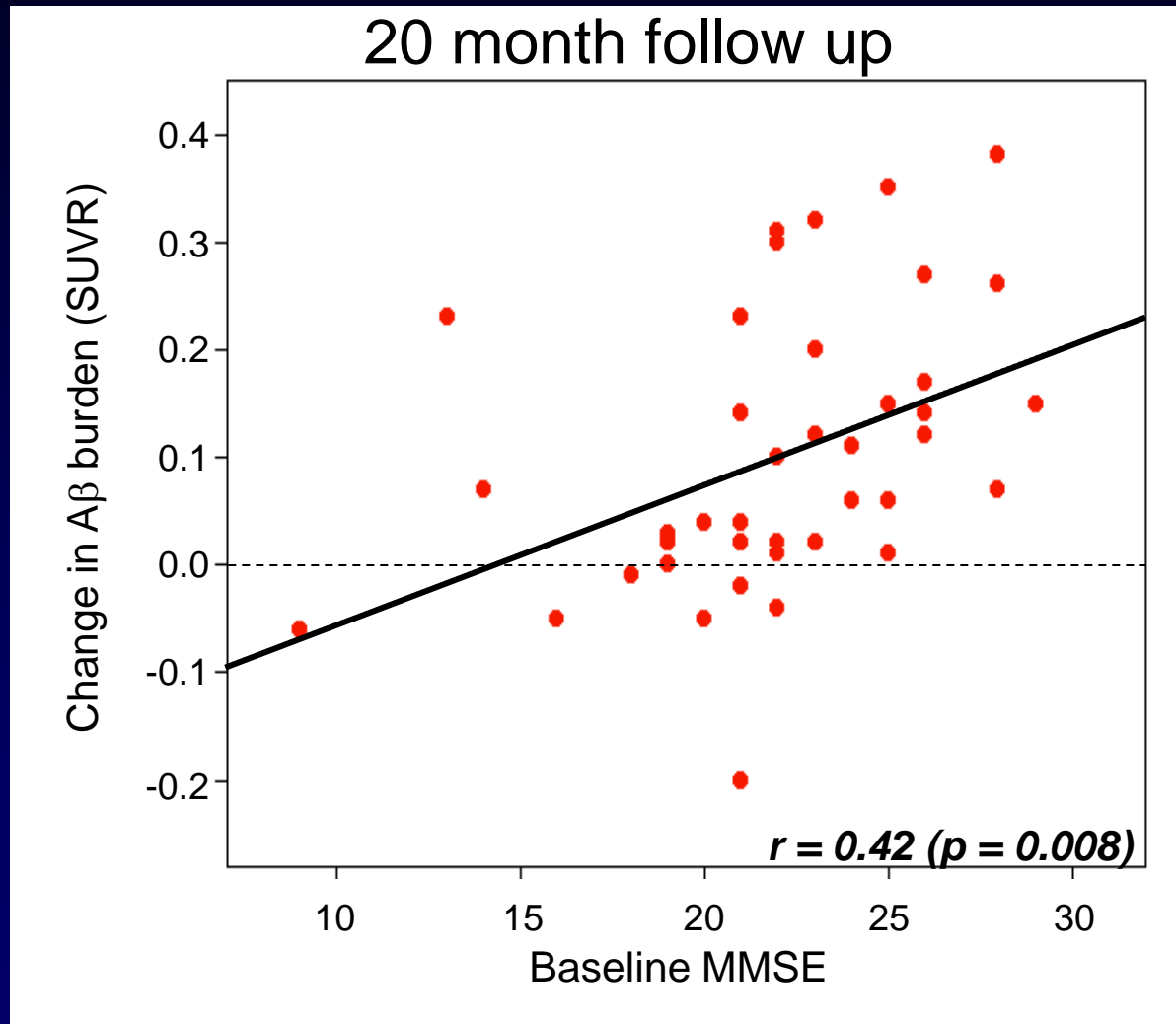
AD+



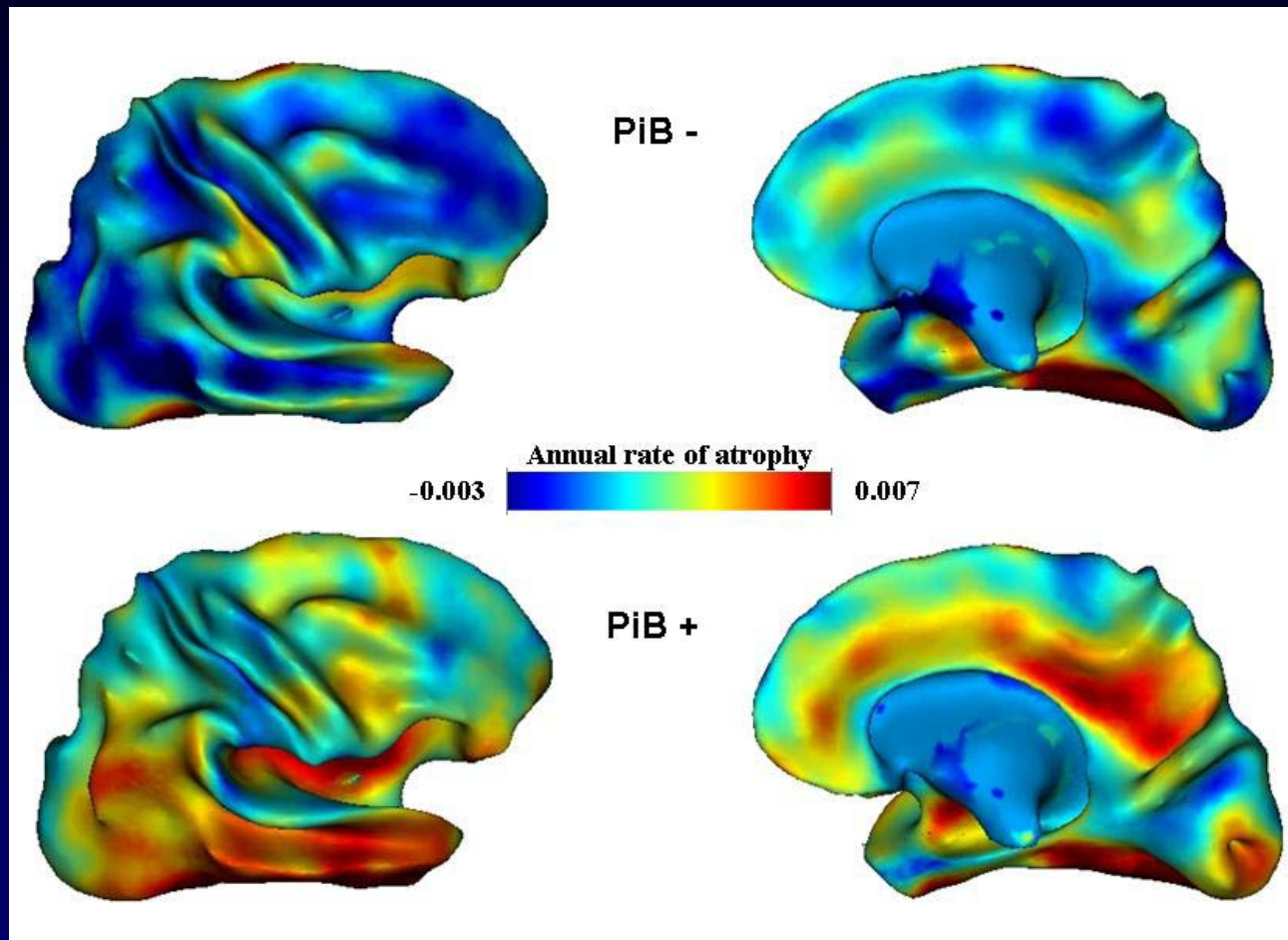
5-year follow-up



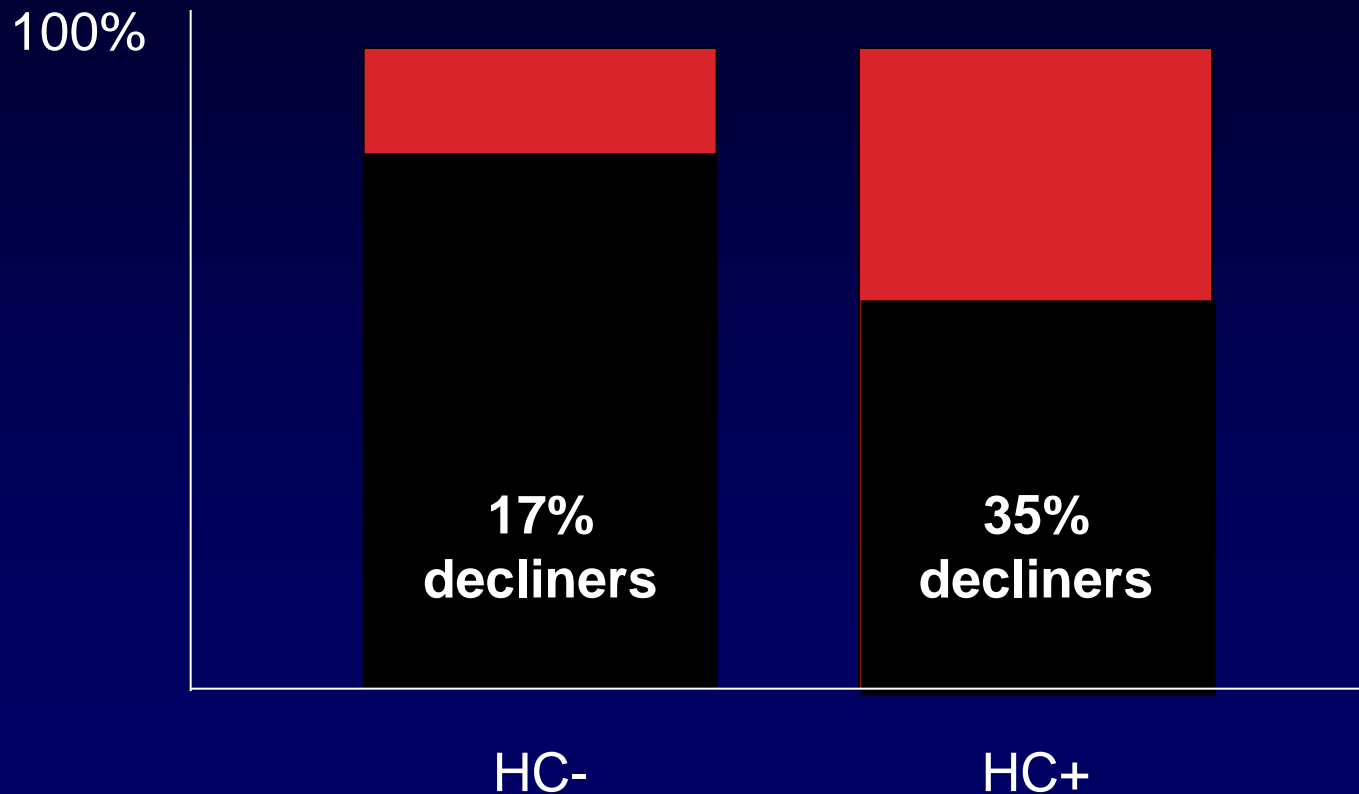
AD with lower MMSE have slower PiB rise ($n=40$)



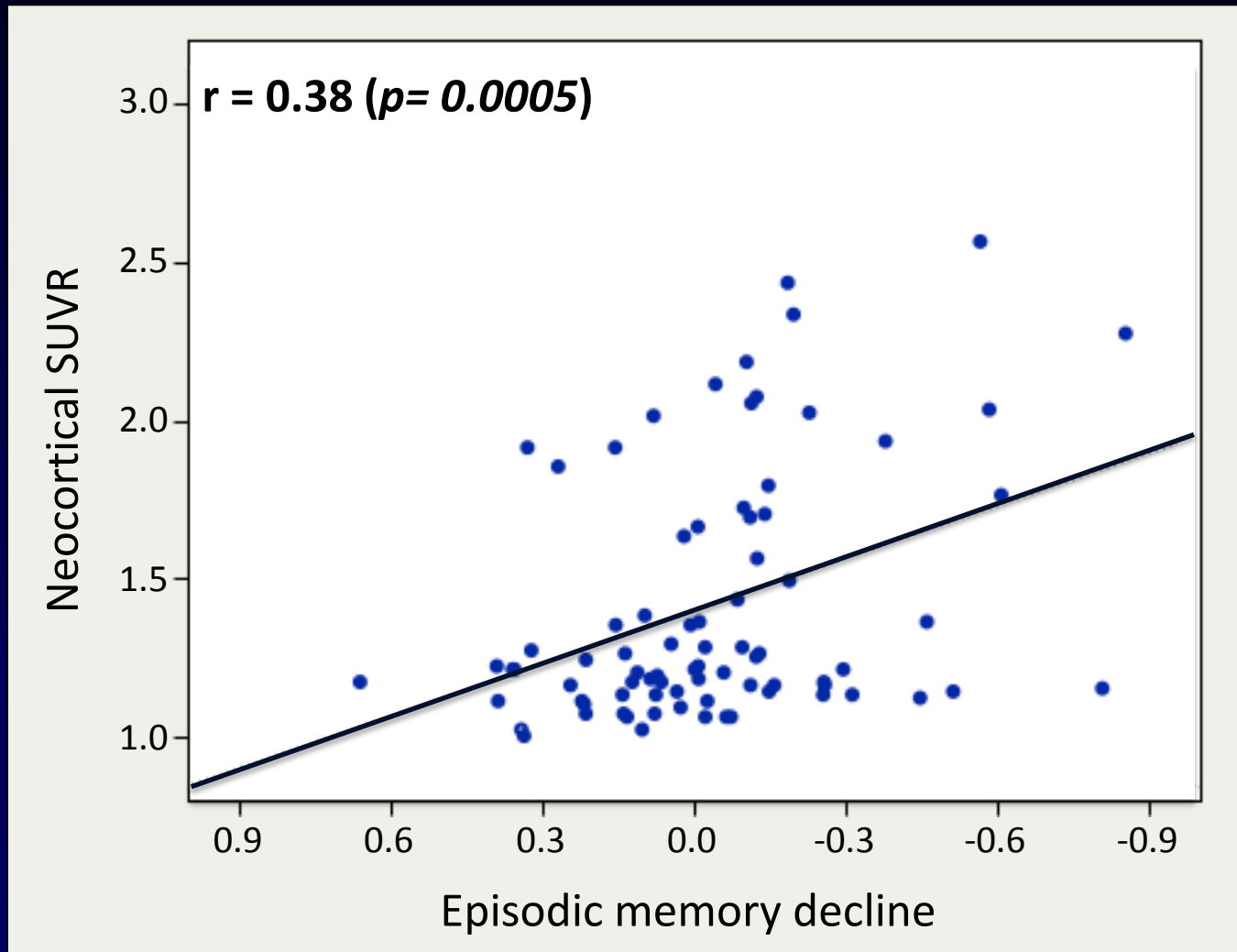
Average rate of atrophy over one year in HC PiB- vs PiB+.



Change in memory vs Baseline PiB:
Decline $>0.5 SD$
in HC with a 3 year follow-up
($n=80$)

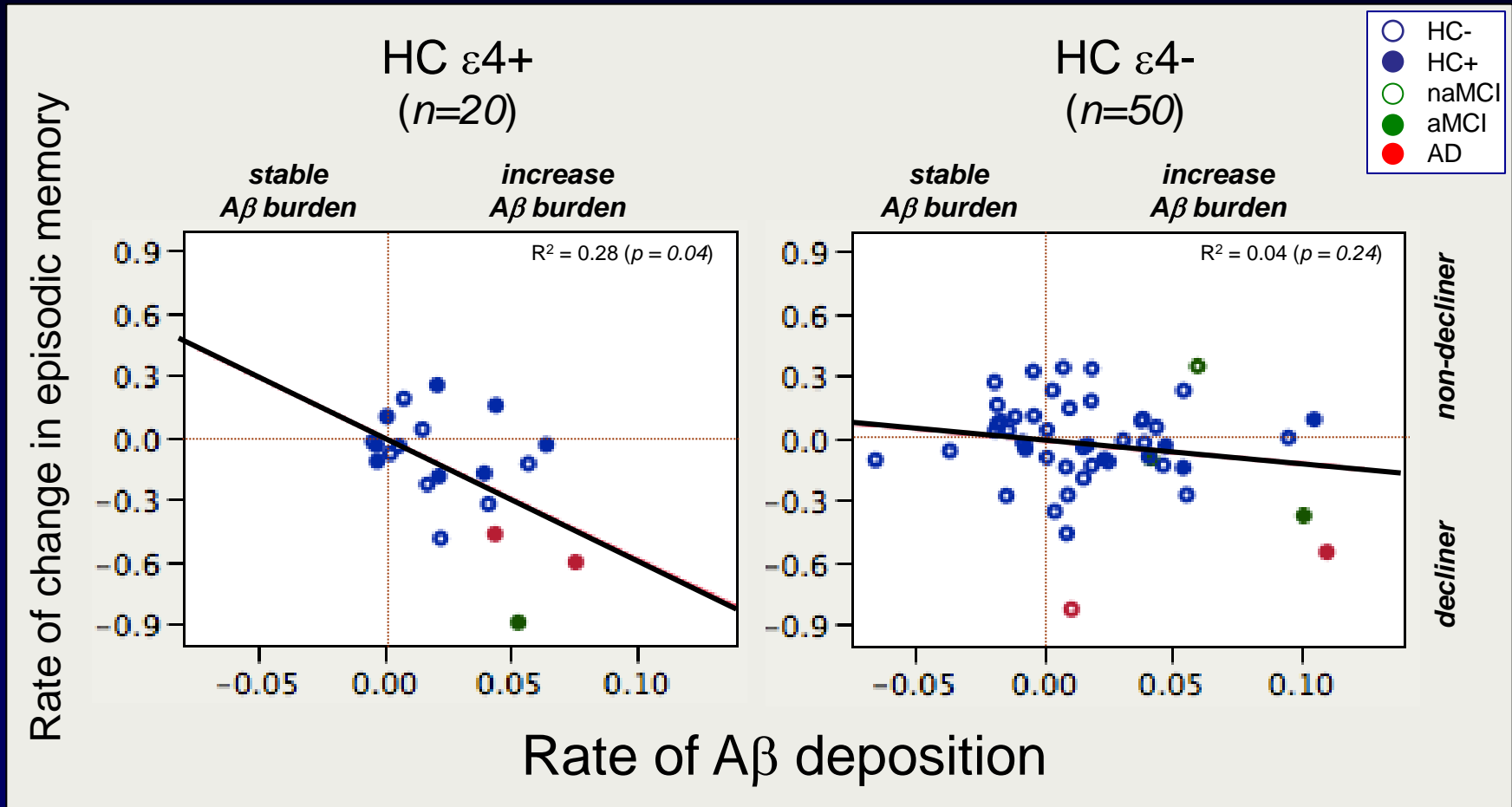


Relation between baseline A β burden and memory decline in healthy controls (36 months follow-up)



Relation between rate of A β deposition and rate of memory decline

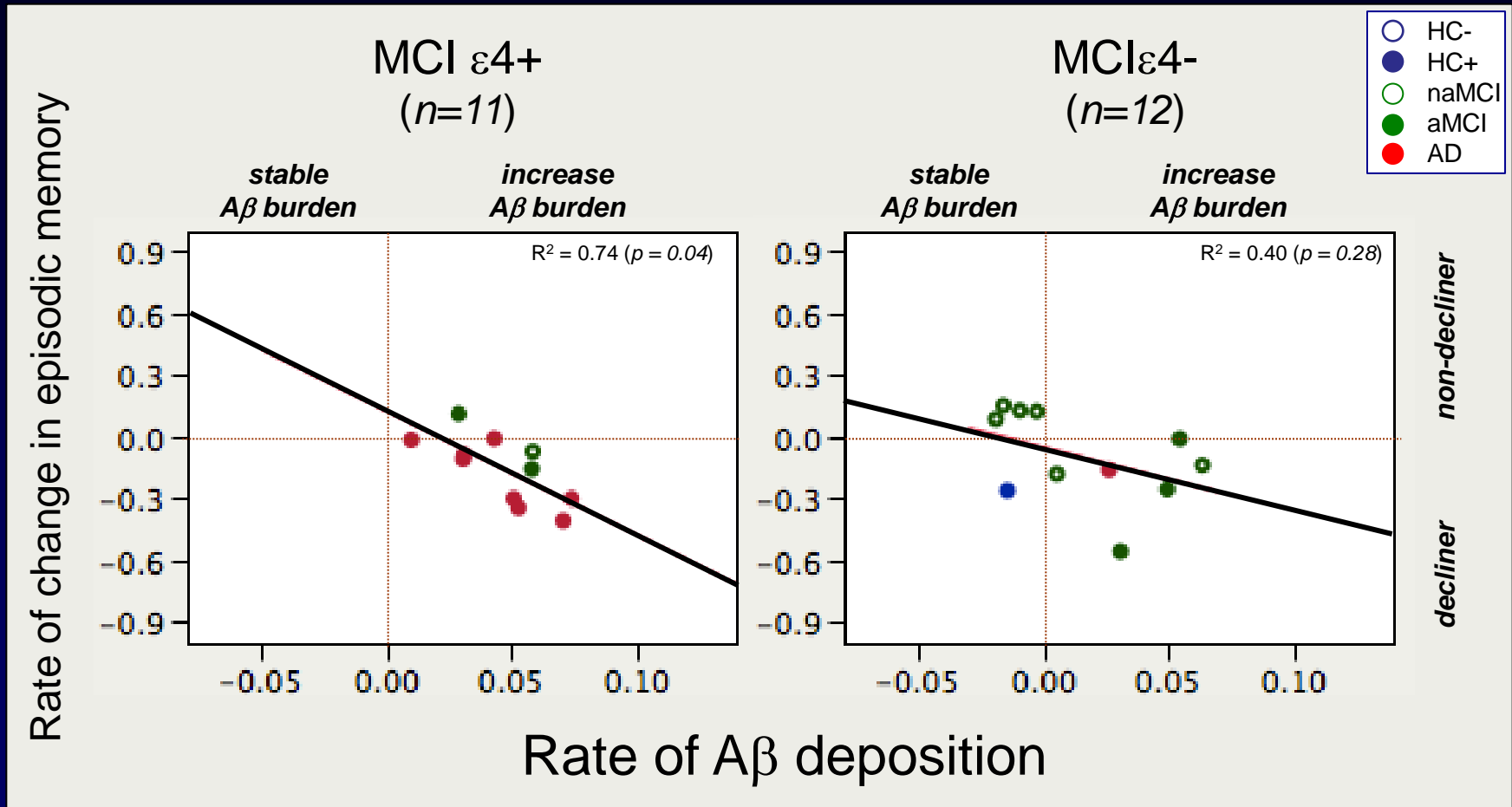
3-5 year follow-up



effect of ApoE status

Relation between rate of A β deposition and rate of memory decline

3-5 year follow-up



effect of ApoE status

Prediction of Progression: HC to MCI/AD

20 months
n=195

36 months
n=178

PiB-ve Subjects: 135
Converters to MCI/AD 3 (2%)

PiB-ve Subjects: 124
Converters to MCI/AD 8 (6%)

PiB+ve Subjects: 60
Converters to MCI/AD 6 (10%)

PiB+ve Subjects: 54
Converters to MCI/AD 9 (17%)

Prediction of Progression: HC to MCI/AD

20 months

	<i>ACCURACY</i>	<i>NPV</i>	<i>OR</i>
Neocortical PiB+ve (SUVR >1.5)	0.54	0.98 (CI 0.93-0.99)	4.9

36 months

	<i>ACCURACY</i>	<i>NPV</i>	<i>OR</i>
Neocortical PiB+ve (SUVR >1.5)	0.56	0.94 (CI 0.87-0.97)	3.0

Prediction of Progression: MCI to Dementia

20 Months
n=92

PiB -ve: **29**
Converters to AD 2 (7%)
DLB 1 (3%)
FTD 2 (7%)
VaD 1 (3%)

PiB +ve: **63**
Converters to AD 32 (**51%**)

36 Months
n=72

PiB -ve : **19**
Converters to AD 3 (16%)
DLB 1 (5%)
FTD 2 (10%)
VaD 1 (5%)

PiB +ve : **53**
Converters to AD 39 (**74%**)

Prediction of Progression: MCI to Dementia (at 36 months follow-up)

	<i>ACCURACY</i>	<i>Odds Ratio</i>	<i>NPV</i>
PiB+ve (SUVR >1.5)	0.79	15	0.83 (CI 0.58-0.96)
ApoE ϵ 4+	0.78	11	0.77 (CI 0.50-0.92)
Composite Memory (<2.0)	0.68	5	0.64 (CI 0.36-0.86)
Hippocampal atrophy (<0.0021)	0.60	2	0.57 (CI 0.34-0.77)
PiB + Hipp Vol (n=30, ++ vs --)	0.86	>20	1.00 (CI 0.52-1.00)

Summary

AIBL+ Findings

- A β deposition is slow and of similar rate in PiB+ HC and MCI (2% SUVR per year).
- A plateau occurs with advancing dementia.
- A β is common in older HC
 - 11% if 60-69
 - 32% if 70-79
 - 51% if 80+ years

and strongly related to genetics i.e. ApoE- ϵ 4 status (risk 2-3X)

Over 3 Years

- $A\beta$ in HC is associated with faster cognitive decline and grey matter atrophy.
- 17% of PiB+ HC develop MCI/AD (*c.f.* 6% of PiB-)
- 74% PiB+ MCI develop AD *c.f.* 16% of PiB-
Odds Ratio = 12 (*but 20% PiB- develop other dementias*)
- Combination of biomarkers provides better prediction (*e.g. if PiB+ and hippocampal atrophy = 86% accuracy*)