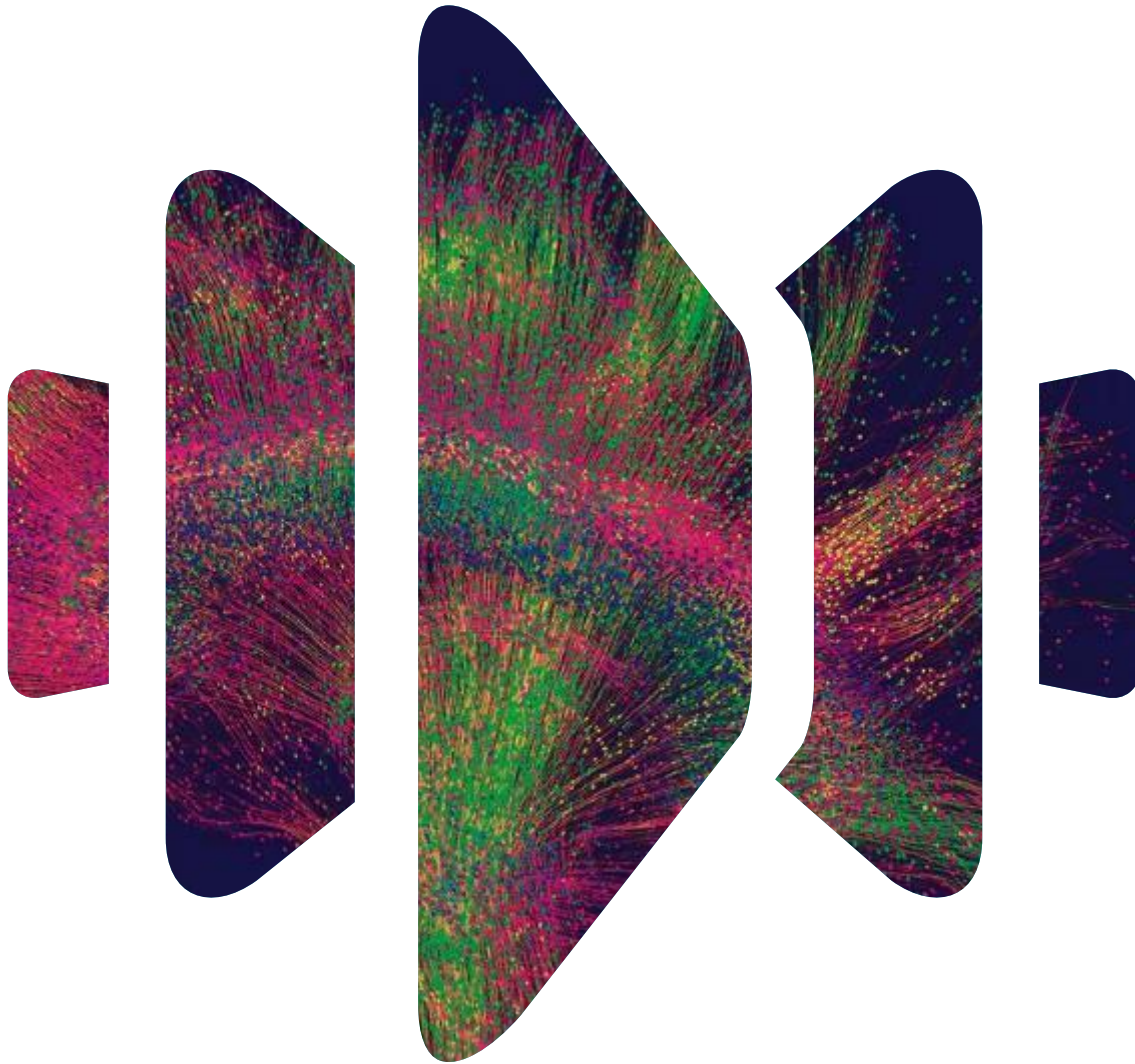




A multi-stage approach to screen Amyloid status using plasma p-Tau217 prior to confirmatory Imaging applied to the Bio-Hermes Trial.

Richard Joules¹, Robin Wolz¹, Lynne Hughes², Richard Mohs², John Dwyer², Douglas Beauregard²

1: IXICO, London, UK

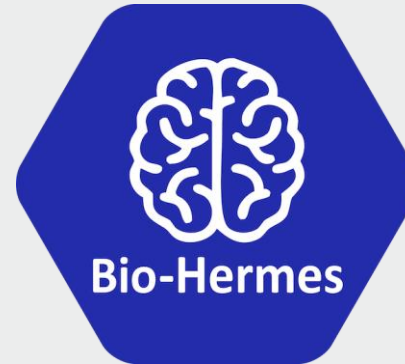
2: Global Alzheimer's Platform Foundation, Washington, DC, USA.

Disclosures

Robin Wolz and **Richard Joules** are employees, and **Lynne Hughes** is an advisor of **IXICO**

Lynne Hughes, Richard Mohs, John Dwyer, Douglas Beauregard are employees of the **Global Alzheimer's Platform Foundation (GAP)**

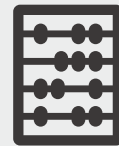
Bio-Hermes study



17
Sites



1001
Enrolled



MMSE
RAVLT



pTau217
pTau181
A β 42/40



18F-AV-45
PET



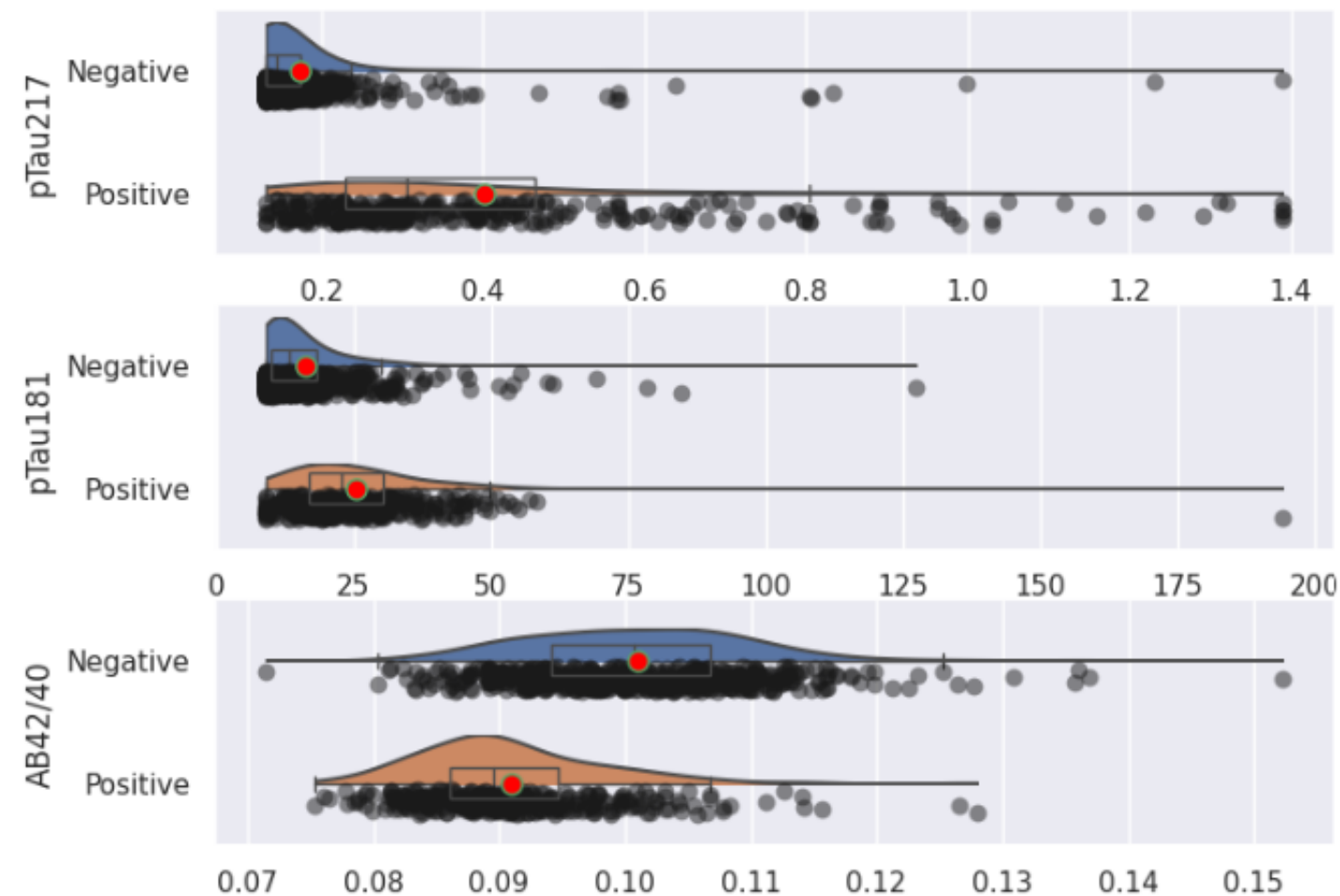
Visual Read

Bio-Hermes study

842 dataset of participants with complete plasma biomarkers, PET reads, and clinical scores were included in this analysis

	Total	White non-Hispanic	Black non-Hispanic	Hispanic	Other
Number	842	620	97	93	32
Age mean (std)	72.3 (6.7)	72.9 (6.6)	70.2 (6.1)	70.4 (6.9)	72.5 (6.4)
Female %	56.9%	53.7%	73.2%	61.3%	56.2%
MMSE mean (std)	26.5 (2.9)	26.9 (2.8)	25.3 (2.8)	25.4 (3.1)	26.4 (3.2)
APOE e4 carries %	37.2%	37.3%	39.2%	30.1%	50.0%
AB+ vis read %	37.5%	39.2%	25.8%	35.5%	46.9%

BBM distribution: amyloid status

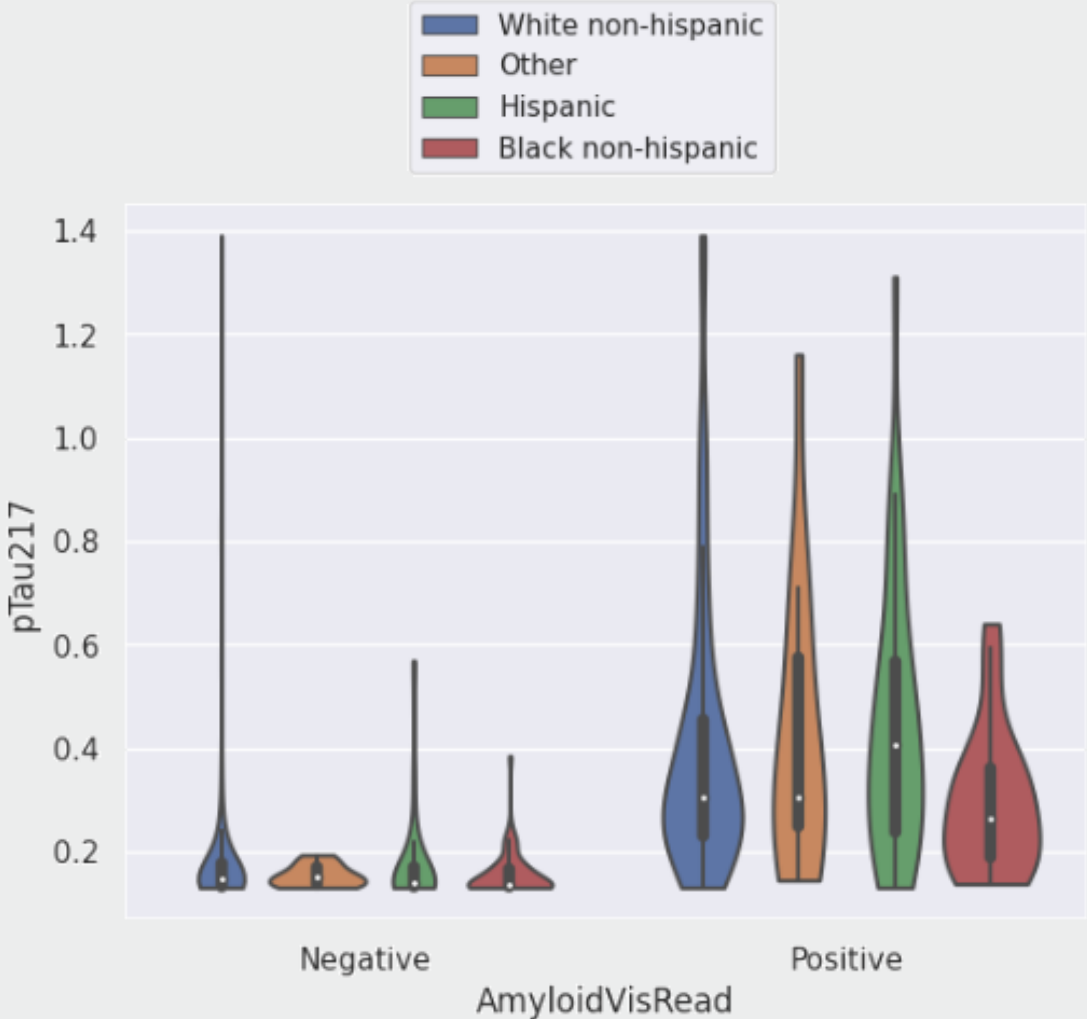


Plasma biomarker	Amyloid Positive	Amyloid Positive	p-value
pTau217 (pg/ml)	0.403 (0.264)	0.174 (0.110)	<0.001
pTau181 (U/ml)	25.269 (14.234)	16.157 (10.528)	<0.001
AB42/40	0.091 (0.008)	0.101 (0.009)	<0.001

BBM distribution: ethnic and racial groups

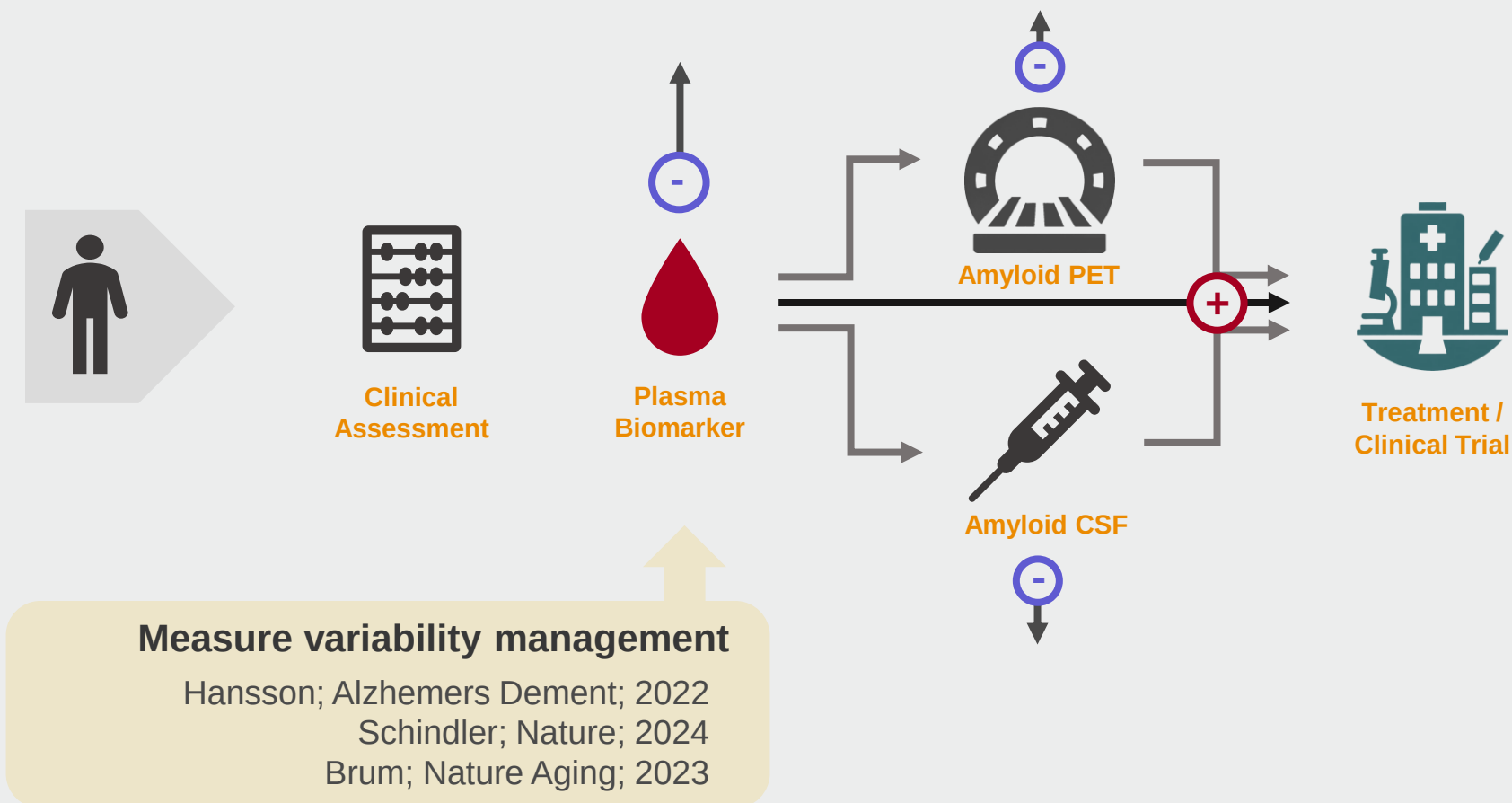
Plasmas Biomarker mean (sd)	White non-Hispanic		Black non-Hispanic	
	AB-	AB+	AB-	AB+
n	377	243	72	25
pTau217 pg/ml	0.178 (0.123)	0.407 (0.271)	0.156 (0.040)	0.293 (0.135)
pTau181 U/ml	17.016 (11.714)	25.940 (15.273)	14.382 (6.440)	21.271 (7.583)
AB42/40	0.100 (0.009)	0.090 (0.007)	0.105 (0.010)	0.095 (0.008)

Differences between AB- and AB+ groups across both populations are significant with Mann-Whitney U test and $p < 0.05$

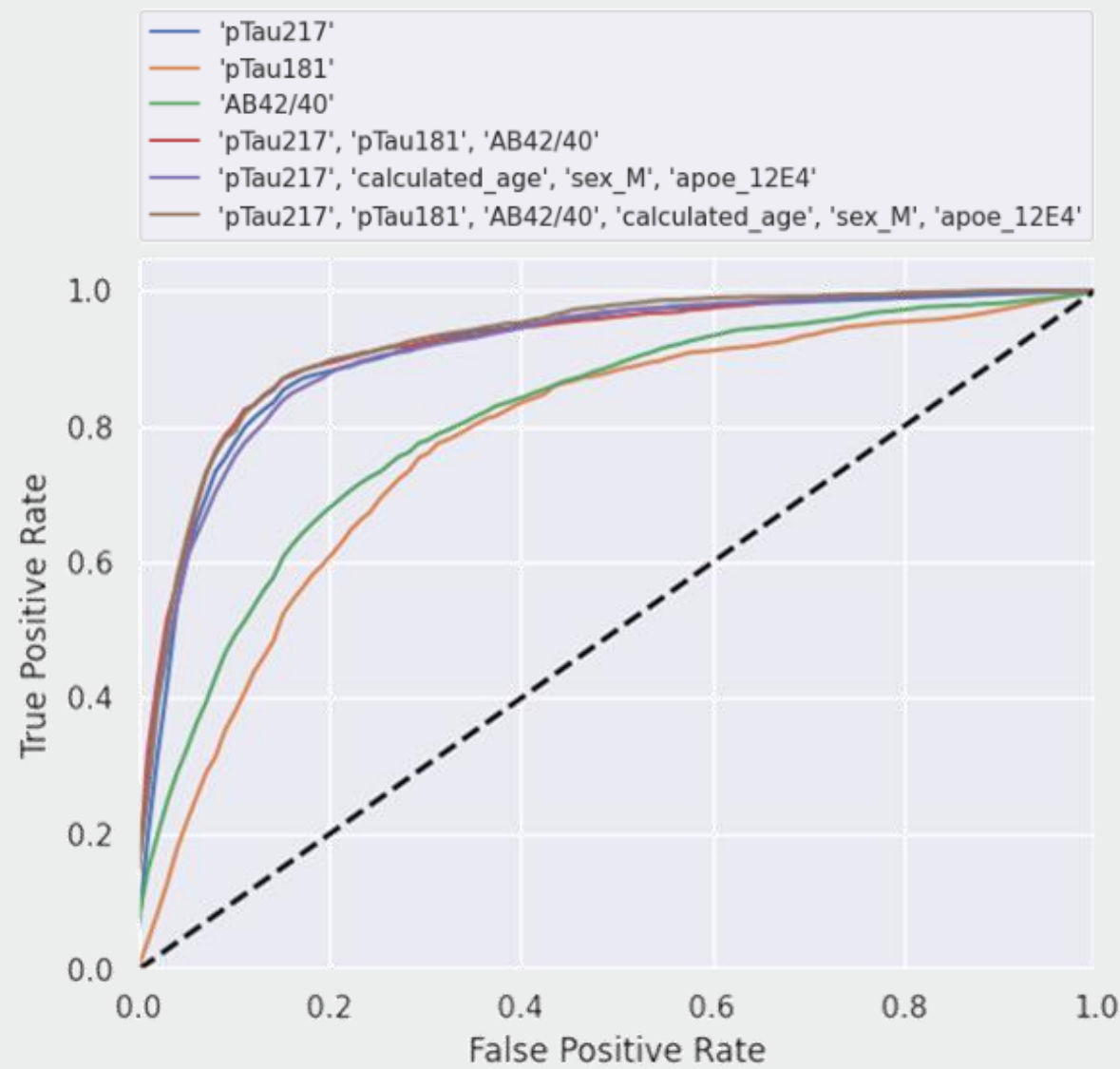


Potential screening process utilising BBMs

Plasma Biomarkers provide an attractive possibility of a **staged screening** approach, **reduce inefficiency** and patient burden



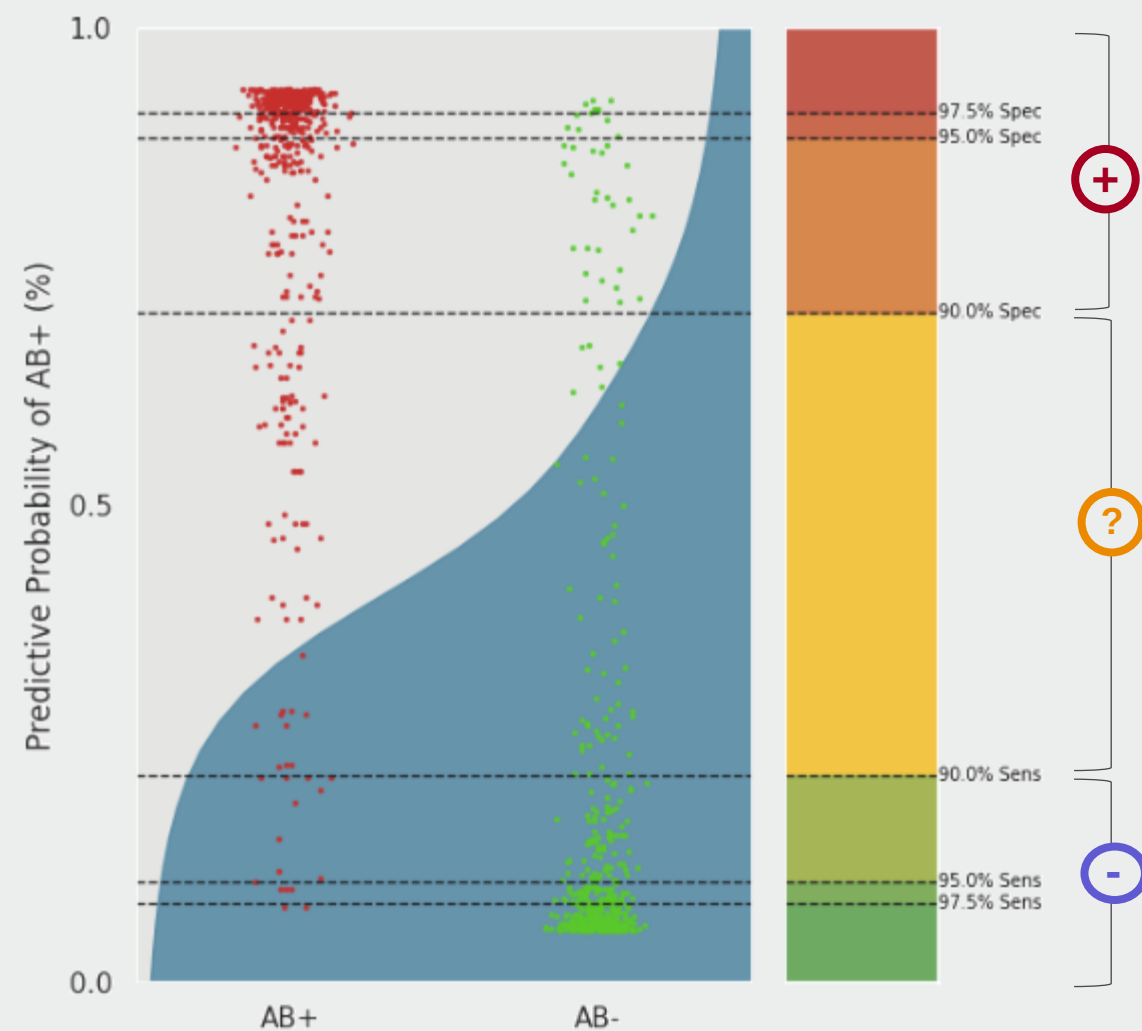
ROC analysis to predict amyloid status



Feature set	AUC	95% Confidence
pTau217	0.908	[0.878 – 0.945]
pTau181	0.777	[0.734 – 0.834]
AB42/40	0.810	[0.739 – 0.860]
pTau217, age, sex, apoE ε4	0.910	[0.875 – 0.941]
pTau217, pTau181, AB42/40	0.917	[0.888 – 0.948]
pTau217, pTau181, AB42/40, age, sex, apoE ε4	0.921	[0.893 – 0.950]

Detailed analysis in:
Mohs et al, *Alzheimers Dement.* 2024 Apr;20(4):2752-2765

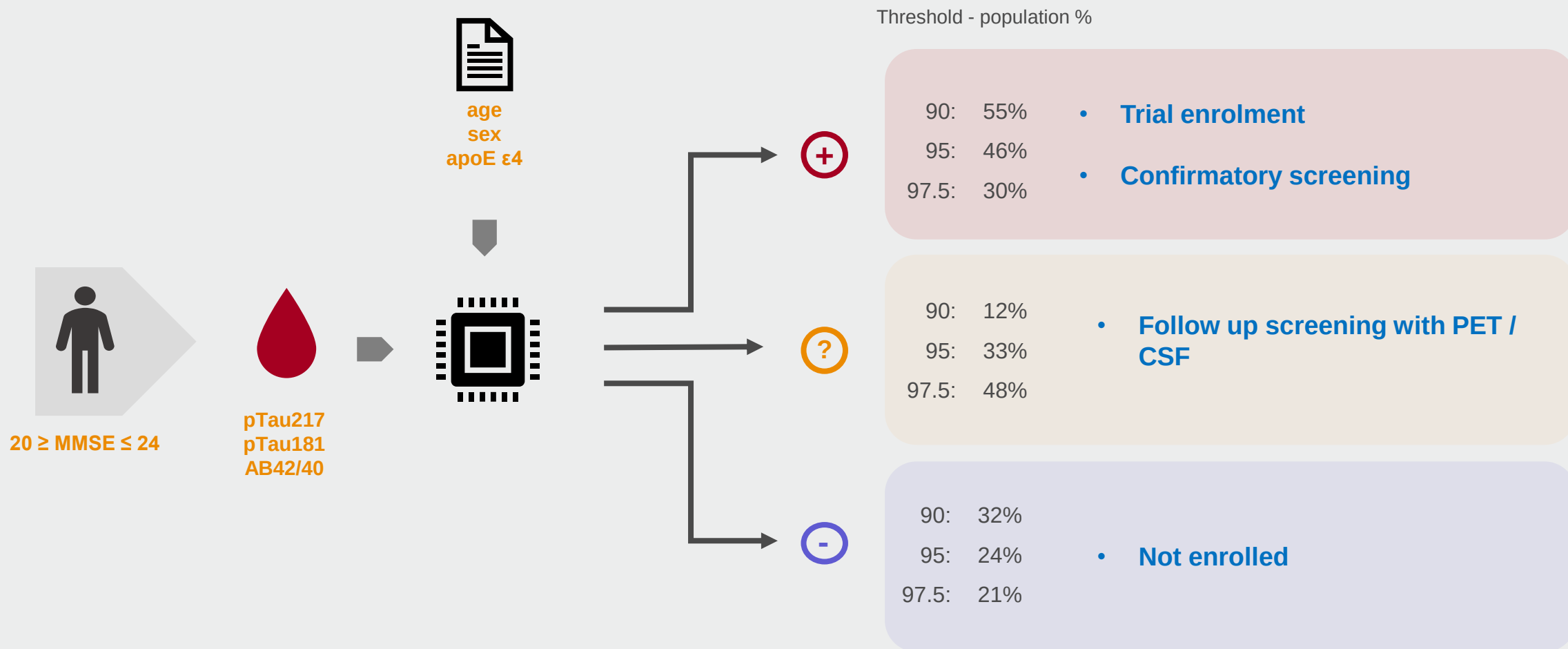
Application of two-stage screening scenarios



Varying thresholds based on patient and care setting
Brum; Nature Aging 3, 1079-1090 (2023)

Threshold	90	95	97.5	90	95	97.5
Model	Accuracy Median (sd)			Ambiguous % Median (sd)		
pTau217	0.88 (0.04)	0.92 (0.03)	0.93 (0.04)	12 (4.3)	33 (5.2)	49 (10.3)
pTau181	0.78 (0.07)	0.76 (0.13)	0.71 (0.18)	49 (7.1)	69 (10.2)	79 (12.3)
AB42/40	0.80 (0.06)	0.82 (0.07)	0.83 (0.10)	38 (7.3)	65 (6.6)	73 (6/7)
pTau217 age, sex, ε4	0.90 (0.04)	0.94 (0.03)	0.96 (0.03)	15 (3.7)	33 (6.4)	53 (8.5)
pTau217, pTau181, AB42/40 Age, sex, ε4	0.91 (0.04)	0.93 (0.03)	0.93 (0.04)	8 (2.7)	31 (5.2)	47 (6.5)

Application of two-stage screening scenarios



Application of two-stage screening scenarios

Example **CSF/PET screening rates for a target recruitment of 1,000 participants**, based on Bio-Hermes population characteristics and an initial clinical screening criteria of $20 \geq \text{MMSE} \leq 24$ and a BBM Model

Threshold	90	95	97.5	90	95	97.5
BBM Model	AB- Rejection, Confirmation of AB+ N Second stage screening			AB+ Enrolment, AB- Rejection N Second stage screening		
pTau217	1174	1243	1346	257	673	1006
pTau181	1404	1525	1568	1000	1361	1462
AB42/40	1407	1563	1607	1008	1434	1529
pTau217 age, sex, ε4	1199	1281	1403	350	783	1138
pTau217, pTau181, AB42/40 Age, sex, ε4	1163	1255	1370	212	709	1063

PET/CSF only screening pass rate = 57%, n screened = 1,750

Summary and conclusion

A **staged screening** process utilising a multi-threshold approach with plasma biomarkers enables potential **savings in screening measures**

Combining **multiple plasma biomarkers** has **minor reduction of uncertainty** in prediction of AB status in the brain depending on thresholds used

Reduction in potential population bias when combining multiple biomarkers?