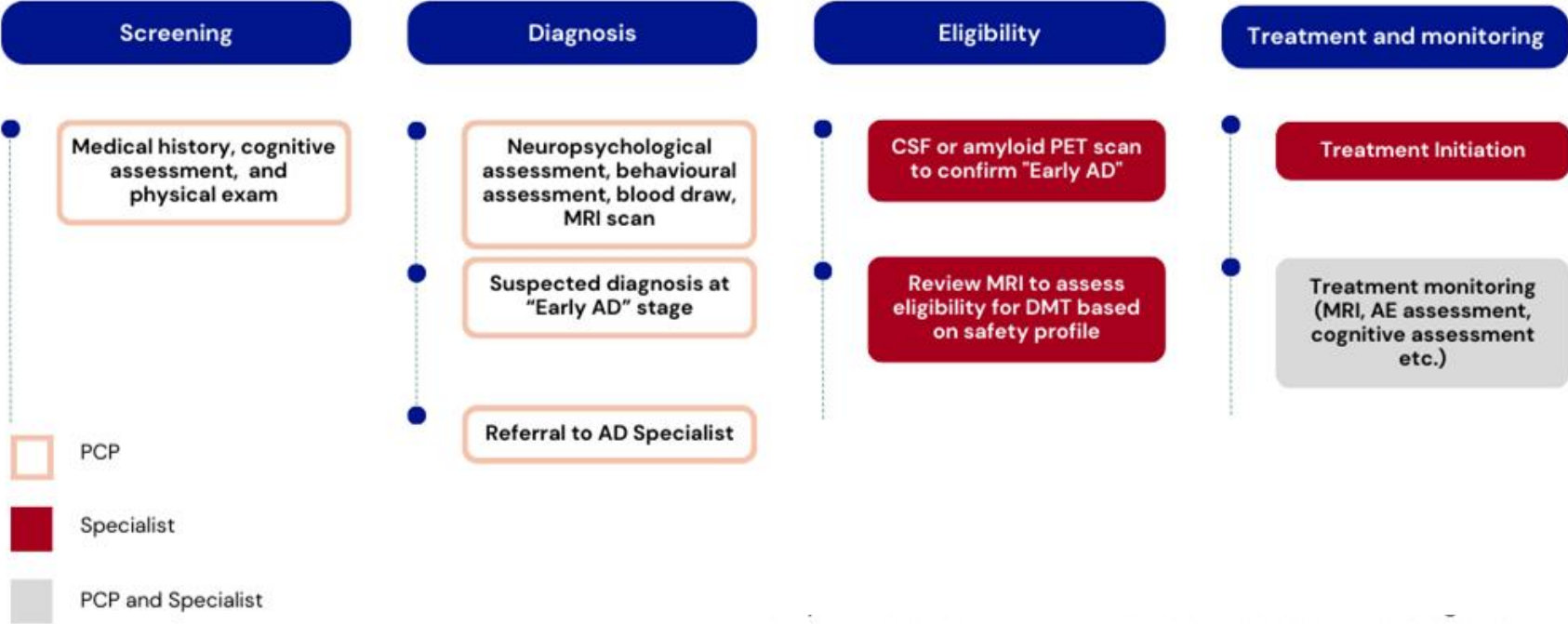


# Health System Change for Alzheimer's Disease-Modifying Therapies in Canada: First Steps

Canadian Conference on Dementia

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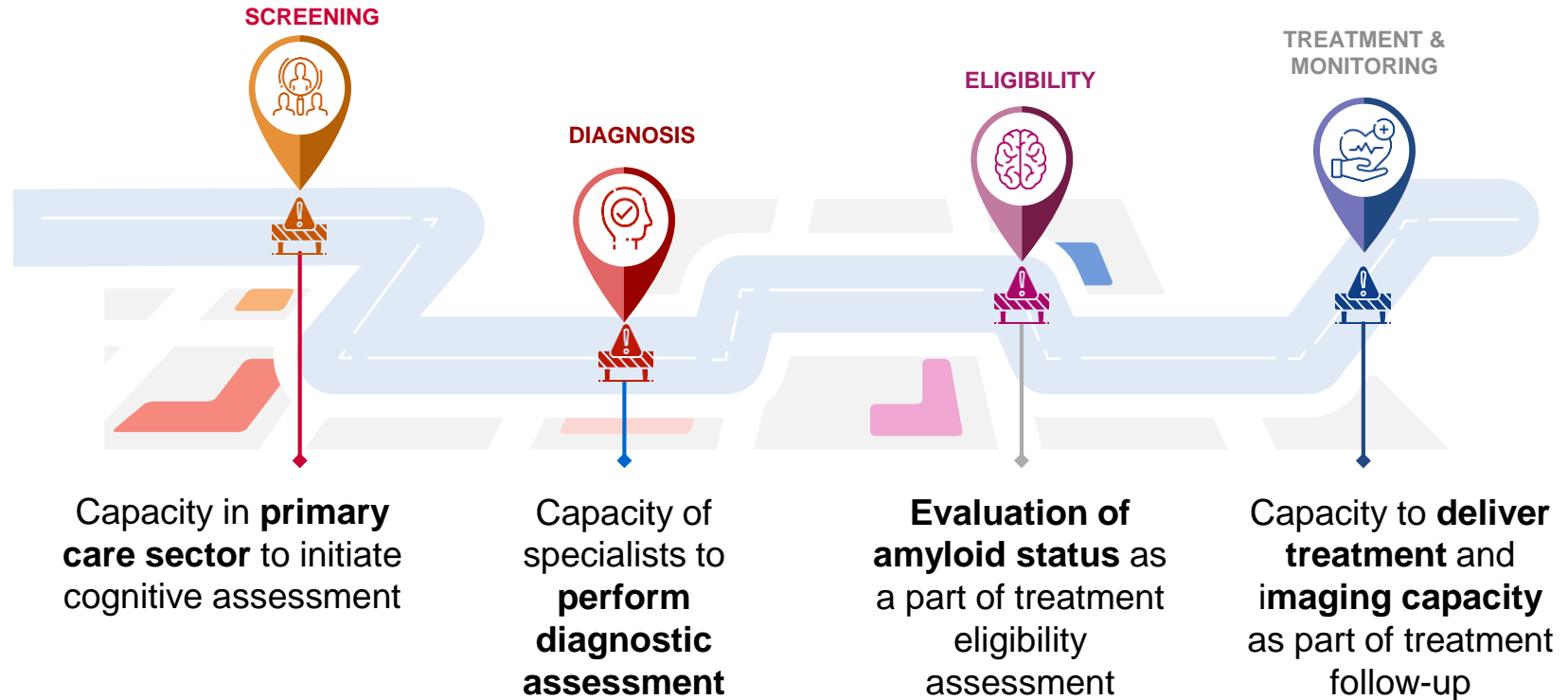
# Patient pathway for anti-amyloid DMTs: Screening, diagnosis, assess eligibility, initiate treatment, and monitoring



"Early AD" refers to NIA-AA Alzheimer's Disease Clinical Stages 3 or 4

# Bottlenecks in the Canadian AD health care system

*Impact following the entry of DMTs*



# National Recommendations

High Impact Actions to Address in the Next Year	Regional Forum that Made Recommendation
1. Develop an official “AD Treatment Community Network” to incorporate learnings from prior introduction of DMTs in other therapeutic areas	All Regions (Western, ON, and QC)
2. Collect evidence from the Multispecialty Interprofessional Team (MINT) model to support advocacy efforts and best practice sharing	Western and ON Regions
3. Continue to expand the work of the Quebec Alzheimer Plan	QC Region
4. Educate health care providers and the general public on early identification of AD and the role of biomarkers	All Regions
5. Expand amyloid PET and CSF biomarker access for Canadian patients, while building stronger evidence for future blood-based biomarkers	All Regions
6. Improve MRI monitoring capacity and DMT administration infrastructure	All Regions

## 5. Expand amyloid PET and CSF biomarker access for Canadian patients, while building stronger evidence for future blood-based biomarkers

### Optimize access to current resources & secure resources for expansion

- Determine current PET capacity nationally with nuclear medicine sites and assess future capacity
- Increase utilization of lumbar punctures for CSF biomarkers
  - Strengthen national sample processing site at UBC

### Increase capacity and access for PET/CSF testing

- Increase access to PET and CSF testing for A $\beta$  and tau through provincial reimbursement pathways
- Increased access will lead to patients potentially eligible for DMTs receiving a diagnosis sooner <sup>2</sup>

### Build further evidence for blood based biomarkers\*

- Partner with research groups and industry to accelerate the R&D to establish blood-based biomarkers as future tools to assess DMT eligibility
- Leverage NIA-AA Research Framework and Clinical Staging to assess how to best incorporate blood-based biomarkers into future AD care

1. Stiffel M, Bergeron D, Mourabit Amari K, et al. Use of Alzheimer's Disease Cerebrospinal Fluid Biomarkers in A Tertiary Care Memory Clinic. Can J Neurol Sci. 2022;49(2):203-209; 2. Black SE, et al. A Model Predicting Healthcare Capacity Gaps For Alzheimer's Disease-Modifying Treatment in Canada. Can J Neurol Sci. 2023 Aug 18:1-8. doi: 10.1017/cjn.2023.270.

## 6. Improve MRI monitoring capacity and DMT administration infrastructure

### Neuroradiologist Forum

Host a national neuroradiology forum in order to:

- Develop standardized MRI sequencing protocols and ARIA interpretation guidelines
- Develop new solutions to optimize MRI access via shorter time slots, pre-filled requisition forms and systems to forecast capacity and automatically book appointments

### Infusion Clinic Capacity

Expand IV capacity by evolving current models:

- Look towards MS clinic examples, and other therapeutic areas that have established these models
- Leverage already existing community based infusion centres
- Investigate home-based infusion capacity