

DISEASE-MODIFYING THERAPIES IN ALZHEIMER'S DISEASE:

Assessment of Knowledge, Educational Needs, and Practice Readiness for Implementation in Geriatricians in Canada

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BACKGROUND

- Two disease modifying therapies (DMTs), lecanemab and donanemab, have recently received approval.
- DMTs are novel intravenous treatments that require significant work up and monitoring.
- While geriatricians provide a majority of specialized dementia care in Canada, most do not have experience with DMTs.
- This study aimed to assess knowledge, identify educational needs and evaluate practice readiness among physicians specializing in geriatric medicine.

METHODS

- Online survey between March to April 2026.
- Respondents: Care of the Elderly physicians and residents; geriatricians and residents
- Recruitment through the following:
 - Programs Directors of Canadian Care of the Elderly and Geriatric Medicine programs;
 - Canadian Geriatric Society's Disease Modifying Therapy Special Interest Group;
 - onsite in the 45th Canadian Geriatrics Society Annual Scientific Meeting (April 2026)
- Analysis: Descriptive statistics

RESULTS

- 162 surveys completed.
- Approximate Response Rate: 26%.
- 61% Female; 67.7% in the 31-50 years age category
- 83.5% were from Ontario, Alberta, BC, and Quebec
- 60.1% Geriatricians; 36.1% Care of the Elderly MDs

Knowledge	% Correct
Primary imaging to follow patients on DMTs? Answer: MRI – Head	84.6%
Examples of ARIA-H? Answers: hemorrhage, superficial siderosis, ICH	82.7%
Indicators for DMT's? Answers: Alzheimer's; mixed dementia; MCI	80.9%
Amyloid can be confirmed by which of the following? Answer: CSF Biomarkers	69.8%
# DMTs seeking approval or have been approved? Answer: 2	67.9%

Availability of Imaging/Labs	%
Blood Biomarkers – Unavailable or No Public Funding	70.0%
Amyloid PET Scan – Unavailable or No Public Funding	68.7%
APOE Gene Test – Unavailable or No Public Funding	67.4%
CSF Biomarkers – Unavailable or No Public Funding	60.0%
Lumbar Puncture – Unavailable or No Public Funding	31.3%

Is your practice
ready to
implement DMTs?

Yes.
24%

Educational Needs	%
Logistics	24.4%
Cost and Benefits	22.0%
Prescribing Information	19.5%
Treatment and Monitoring	16.1%
Evidence	10.2%
Patient Education and Support	7.8%

Barriers	%
Cost	82.7%
Logistics	81.3%
Concern on Treatment Success	52.7%
Concern about Safety	51.3%
Knowledge Gap	38.0%

CONCLUSION

- Substantial care, infrastructure gaps and cost restrict DMT delivery in Canada, with fewer than one in five geriatric medicine specialists currently prescribing these therapies.
- To successfully integrate DMTs into clinical practice, significant changes to existing processes and infrastructure will be required.
- Longitudinal follow-up will be useful to monitor healthcare capacity and progress over time.

