

Amyloid PET predicts atrophy in older adults without dementia: Results from the AMYPAD Prognostic & Natural History study

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Abstract:

The impact of amyloid- β (A β) accumulation on regional brain atrophy in preclinical Alzheimer's disease (AD), and its interaction with risk factors like sex and APOE- ϵ 4 carriership, remains unclear. In this study, we examined these associations in a population of older adults without dementia and evaluated the potential of A β -PET for risk stratification.

We included 1329 participants (56 % female) with an age of 68.2 ± 8.78 years from the prospective multi-center AMYPAD Prognostic and Natural History Study who underwent [18F]Flutemetamol or [18F]Florbetaben A β -PET and T1-weighted MRI, with longitudinal data for 684 participants (median follow-up = 3.4 years). Linear mixed models assessed the effect of baseline A β burden through the Centiloid approach on longitudinal changes in regional gray matter volume and thickness. Sensitivity analyses were performed in cognitively normal only (CDR = 0) individuals and while correcting for CSF p-tau181 and t-tau. A second model investigated the effects of sex or APOE- ϵ 4 carriership.

Baseline global A β was predictive of widespread atrophy in several brain regions, most strongly in the fusiform (β Volume = -0.006, β Thickness = -0.009), hippocampus (β Volume = -0.005), posterior cingulate (β Volume = -0.006), and precuneus (β Volume = -0.004, β Thickness = -0.007), also when investigating only in cognitively normal individuals. Only fusiform atrophy (β p-tau = -0.011; β t-tau = -0.011) remained predicted by A β when correcting for p-tau181 or t-tau. Temporal atrophy was exacerbated in women, while frontal, lateral-temporal and hippocampal atrophy was exacerbated by carriership of at least one APOE- ϵ 4 allele, with volumetric loss more sensitive to sex effects and thinning more sensitive to APOE- ϵ 4 effects.

Our findings suggest that in older adults with mostly preserved cognition, baseline A β -PET predicts future brain atrophy, with fusiform atrophy showing independence from tau pathology and A β -dependent atrophy being exacerbated in region-dependent manners in females and APOE- ϵ 4 carriers. Regional cortical volume and thickness may serve as sensitive markers for early A β -related neurodegeneration and aid in stratifying risk in AD prevention trials.

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