Transcript Details
This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/neurofrontiers/diagnostic-gap-blood-biomarkers-alzheimers/40004/

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Bridging the Diagnostic Gap: Blood Biomarkers in Alzheimer's Care

Announcer:
This is *Neurofrontiers* on ReachMD. On this episode, we'll hear from Dr. Ashvini Keshavan, who's a Senior Clinical Research Fellow and Honorary Consultant Neurologist specializing in Alzheimer's disease biomarkers at the University College London. She'll be discussing the ADAPT trial, which is evaluating the real-world impact of integrating blood-based biomarkers for Alzheimer's disease into community memory services. This topic was presented as a poster at the 2025 CTAD conference.

Here's Dr. Keshavan now.

Dr. Keshavan:
Most patients in UK memory services access their services by referral from a general practitioner because they're concerned about their cognition, and fewer than two percent of those people in those memory services have access to an Alzheimer's disease diagnosis that's supported by molecular testing with either lumbar punctures or PET scans. So the gap that we're seeking to address in the ADAPT study, to bring a molecular biomarker—a blood-based test—into community memory services and assess its impact on the onward care of patients in the standard National Health Service pathways in the UK.

So the ADAPT randomized controlled trial is a multicenter, United Kingdom-based trial which will include patients attending UK memory services for the first time at age 50 years or above who have a cognitive complaint and have objective cognitive impairment as judged by their clinicians that could be due to the presence of Alzheimer's disease, either manifesting as a mild cognitive impairment or as dementia. And it is designed with the primary outcome of assessing the proportion of patients who have an Alzheimer's disease diagnosis amongst the arm that have access to the blood test result as compared with the proportion in the arm who do not have access to the blood test result at three months after they're initially seen by their clinician. So the randomized aspect is actually in the disclosure of the information from the result to the patient and their clinician, and the outcome—the primary outcome—is how it influences diagnosis. But we're also looking at several secondary outcomes, including how the blood test influences changes in medication prescriptions and onward referrals for specific types of support, clinical trials, or other testing, and we're also looking at how it impacts the health economics of the healthcare service—so how patients' quality of life is impacted and how their resource utilization is impacted to derive cost-effectiveness measures of integrating the blood test into standard care pathways.

Given that most patients are currently receiving a diagnosis late in their clinical journey, a long time after they've had symptom onset, and their access to tests that confirm the presence of Alzheimer's disease pathology is so low in the UK—and that confirmation is actually what is required to increase the access of patients to disease-modifying treatments, such as amyloid-lowering therapies, which have recently been licensed for use in the UK by the MHRA even though they're not clinically approved by our funding body, NICE—it's really important that more people are given the benefit of knowing whether they have Alzheimer's pathology in their brain through the use of molecular tests.

I'm just really grateful to the funders of the Blood Biomarker Challenge, which is the grant program that is funding the ADAPT study, which are the Alzheimer's Society, Alzheimer's Research UK, and the players of the People's Postcode Lottery, because these blood tests, we're looking to robustly implement them in the UK National Health Service and see whether they can be adopted into the standard of care. It's really important that the participants in the trial come from community memory services, and we're aiming for widespread representation of the demographic that the National Health Service covers, which is a multiethnic and geographically diverse population.

Announcer:

That was Dr. Ashvini Keshavan talking about how blood-based biomarkers could transform Alzheimer's diagnosis within UK memory services. To access this and other episodes in our series, visit *Neurofrontiers* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!