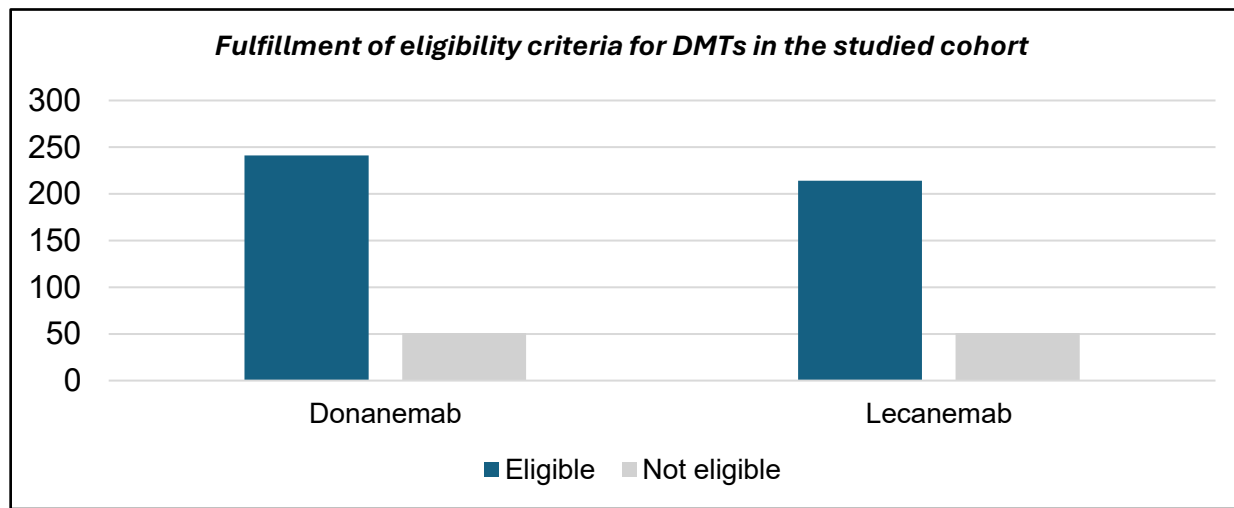


New Treatments in Alzheimer's Disease: A Descriptive Study Of Candidate Eligibility At A Memory Clinic In Argentina

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A substantial proportion of patients evaluated at a memory clinic would be potentially eligible for disease-modifying therapies for Alzheimer's disease if these treatments became available. This highlights the need for healthcare systems to prepare for a significant future demand and improved access to diagnostic biomarkers

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	REFERENCES																																
Alzheimer’s disease (AD) is one of the leading causes of death and disability worldwide. Recently, the monoclonal antibodies lecanemab and donanemab have received regulatory approval for the treatment of early symptomatic AD. Although these therapies are not available in Argentina yet, their potential implementation raises important questions regarding the proportion of patients who might be eligible in routine clinical practice. This study aimed to estimate the proportion of patients attending a memory clinic who could be considered potential candidates for disease-modifying therapies (DMTs) when these treatments become available.	A cross-sectional observational study was conducted including patients who attended our center between June and October 2025. Demographic, clinical, and cognitive data were systematically collected. Descriptive statistical analyses were performed using RStudio software. Eligibility for treatment was assessed by applying the inclusion and exclusion criteria established in the pivotal clinical trials of lecanemab and donanemab.	A total of 313 patients were recruited, with a mean age of 75 ± SD 8 years and 11.7 ± SD 4 years of education. There was a higher proportion of women (59.7%), and the mean Mini-Mental State Examination (MMSE) score was 23 points (Table 1). Of the total sample, 179 patients (57.1%) had mild cognitive impairment (MCI), 72 (23%) had mild dementia, 51 (16.2%) had moderate dementia, and 11 (3.7%) had severe dementia. It should be noted that none of the evaluated patients had available Alzheimer’s disease biomarker testing or ApoEε4 determination. Within the total sample, a considerable proportion, 61.6% (193 patients), met criteria for both therapies; 6.7% (21 patients) met criteria only for lecanemab, and 15.3% (48 patients) only for donanemab. In contrast, 16.3% (51 patients) did not meet eligibility criteria for any of the disease-modifying therapies (DMTs) considered (Figure 1 and Table 2).	Total recruited patients (n): 313 Mean age: 75 ± 8 years (SD) Education: 11.7 ± 4 years (SD) Mean MMSE score: 23 points Table 1 - Demographic and cognitive characteristics of the studied cohort <table><tr><th>Lecanemab</th><th>Nº of Patients</th></tr><tr><td>Dementia not related to Alzheimer’s disease (AD)</td><td>23</td></tr><tr><td>Fazekas grade 3</td><td>10</td></tr><tr><td>Depression or suicidal ideation</td><td>9</td></tr><tr><td>Use of oral anticoagulants</td><td>9</td></tr><tr><td>More than 2 lacunar infarcts or stroke in a major vascular territory</td><td>5</td></tr><tr><td>MMSE < 22</td><td>49</td></tr><tr><td>Age > 90 years</td><td>8</td></tr></table> <table><tr><th>Donanemab</th><th>Nº of Patients</th></tr><tr><td>History of cancer within the past 5 years</td><td>13</td></tr><tr><td>Psychiatric history</td><td>8</td></tr><tr><td>History of allergies</td><td>4</td></tr><tr><td>Neurological diseases other than Alzheimer’s disease (e.g., Parkinson’s disease)</td><td>3</td></tr><tr><td>History of alcoholism or drug use</td><td>3</td></tr><tr><td>MMSE < 20</td><td>45</td></tr><tr><td>Age > 85 years</td><td>23</td></tr></table> Table 2 - Most frequent causes of exclusion and failure to meet inclusion criteria among potential candidates for lecanemab and/or donanemab in the studied cohort Fulfillment of eligibility criteria for DMTs in the studied cohort  Figure 1 This study provides an anticipatory estimate of the proportion of patients who could be considered candidates for DMT’s for AD in Argentina. Compared with international series, this proportion is likely overestimated due to the lack of AD-specific biomarkers and Apoε4 genotyping, mainly related to cost. These limitations represent a major barrier to appropriate patient selection and the safe implementation of these therapies. Nevertheless, a substantial proportion of patients could still be identified as potential candidates.	Lecanemab	Nº of Patients	Dementia not related to Alzheimer’s disease (AD)	23	Fazekas grade 3	10	Depression or suicidal ideation	9	Use of oral anticoagulants	9	More than 2 lacunar infarcts or stroke in a major vascular territory	5	MMSE < 22	49	Age > 90 years	8	Donanemab	Nº of Patients	History of cancer within the past 5 years	13	Psychiatric history	8	History of allergies	4	Neurological diseases other than Alzheimer’s disease (e.g., Parkinson’s disease)	3	History of alcoholism or drug use	3	MMSE < 20	45	Age > 85 years	23	 CONTACT 
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