

Antibody treatment and early detection of dementia - how prepared are Germany's specialists?

#12879

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INTRODUCTION

- Early detection of dementia can help to reduce risk factors [1], support early care planning and apply (non-) pharmacological treatment [2, 3]
- Antibody treatments are now available in Germany (Leqembi & Kinsula)
- Preparedness of German specialists for expanded The study investigates current practices in the early detection and diagnosis of dementia in Germany
- the study explores German specialists' perspectives on the introduction of new antibody therapies for dementia

METHODS

- Online survey among German specialist doctors from memory clinics and private practices

Recruitment:

- from September 2024 to February 2025:
- Email invitation distributed to n=1293 neurologist and psychiatrists
- Study advertisement at congresses
- Press releases in physicians' newspapers

Survey's content:

- Attitude towards early detection & antibody treatment
- Application of biomarker-based diagnostics
- Diagnostic routines and applied diagnostic tools

Evaluation method:

- Descriptive statistical analysis

RESULTS

- **Entire study:** 107 out of 185 surveys fully completed (see Figure 2)
- Response rate 8.3 percent
- **Participants:** Private practice (n=82) and Memory Clinics (n=32, of which 16 are university institutions (multiple mentions allowed))
- **Medical Specialty:** neurology (n=88), psychiatry (n=37), multiple mentions allowed, see Table 1

Participants per federal state of Germany	Memory Clinics			
	Psychiatric Outpatient Clinic	Geriatric Outpatient Clinic	University Outpatient Clinic	Personal/Institutional Authorization
	21	1	8	2
Years of experience				
	5-10 years	11-20 years	21-40 years	>40 years
	10	34	61	2
Outpatient Clinics				
	Private practice physician	Outpatient specialist care	Other	
	71	2	7	
Medical specialty				
	Neurology	Psychiatry	Geriatrics	
	88	37	2	
	Internal medicine	General practice		
	2	1		

Table 1: Sociodemographic and geographical data from the participants (n=107)

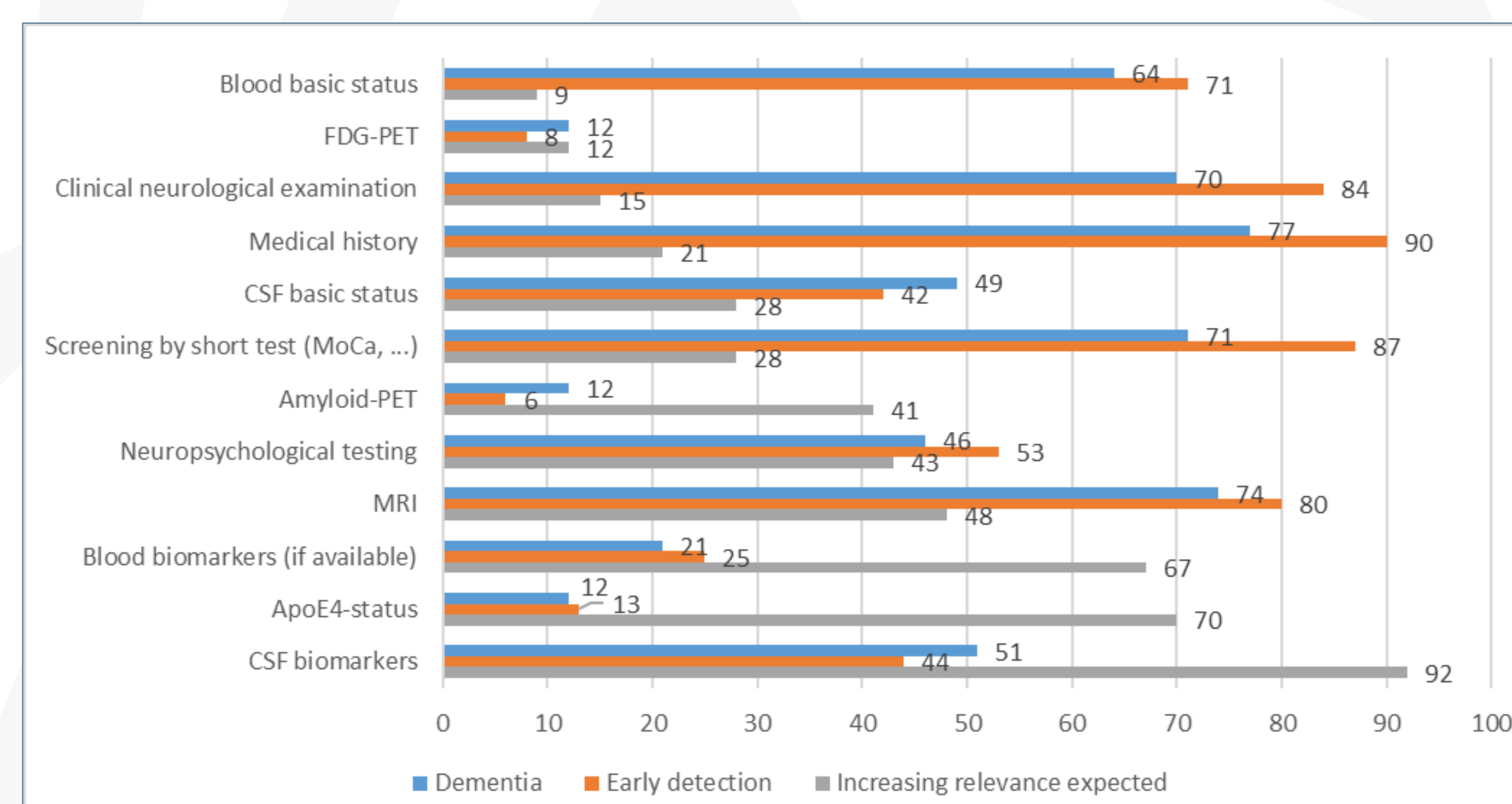


Figure 1: Diagnostic methods used to detect MCI or dementia due to AD (absolute numbers, n=107)

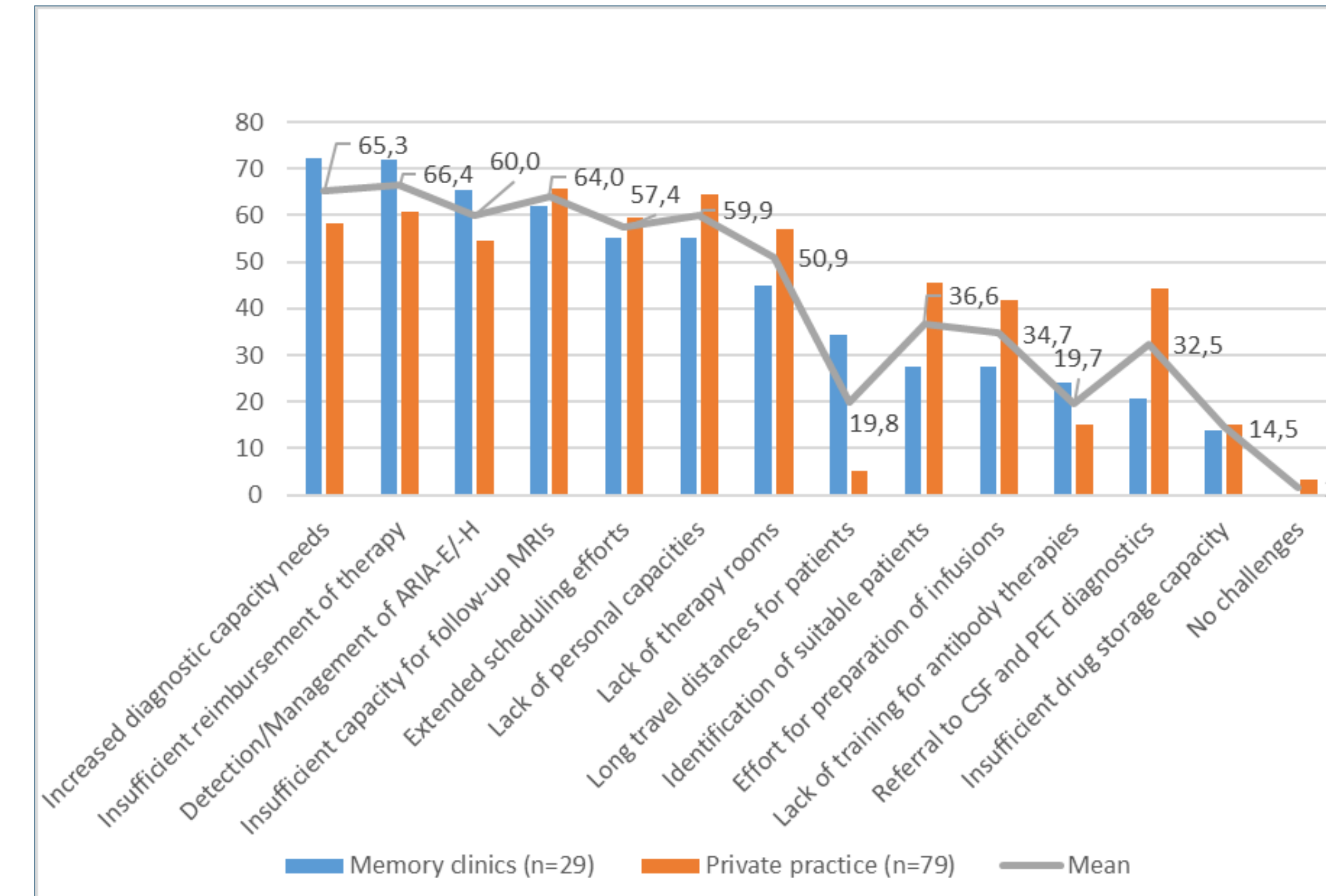


Figure 2: Challenges participants see with regards to the anti-amyloid antibody treatments (relative numbers in percent, n=107)

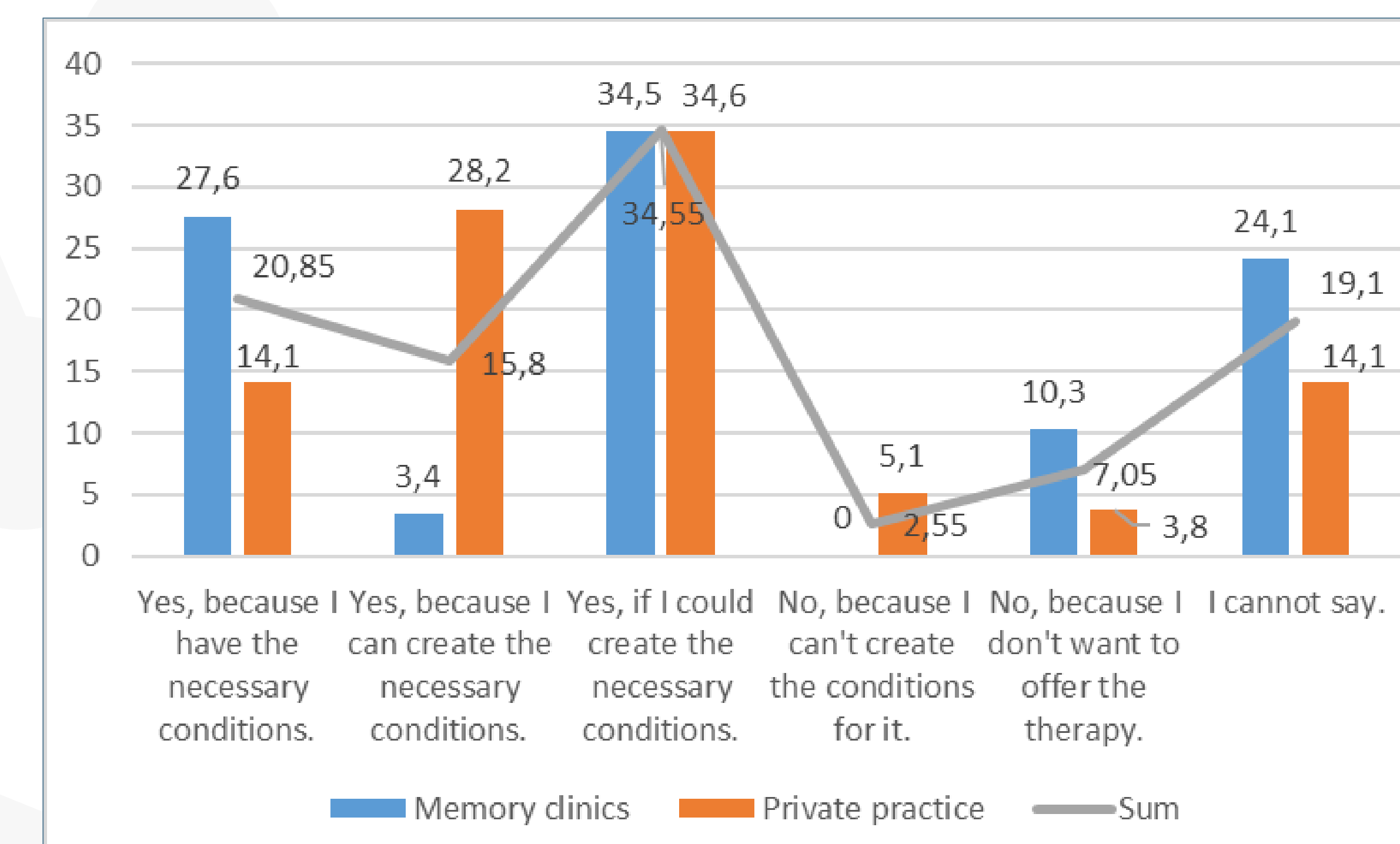


Figure 3: Attitude towards the offer of anti-amyloid antibody treatments (relative numbers in percent, n=107)

CONCLUSION

- Response rate low but comparable with other studies [4, 5]
- Blood basic status, clinical examination, medical history, short tests, NPT, and MRI are mostly used for early detection or dementia screening
- Higher relevance expected for ApoE4-status & CSF biomarkers, blood biomarkers (if applicable) and MRI
- Bottlenecks are diagnosis capacities, sufficient reimbursement, detection of ARIA-E/-H as well as room and personal capacities

Recommendations for the practice:

- Expansion of diagnostic capabilities such as MRI and lumbar punctures
- Ensuring adequate financial compensation
- Freeing up personnel resources through digitizing practice management
- Raising specialists' awareness and knowledge of potential adverse drug reactions

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