



Real-World Safety and Cognitive Outcomes of Lecanemab: One-Year Experience from a Korean Memory Clinic

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INTRODUCTION

To investigate the real-world safety and cognitive outcomes of lecanemab in a single-center Korean memory clinic cohort

METHODS

We retrospectively reviewed **59 patients with early AD** who initiated lecanemab treatment between **December 2024 and December 2025** at **Gangnam Severance Hospital**. Safety outcomes, including amyloid-related imaging abnormalities (ARIA), and cognitive outcomes, including the Mini-Mental State Examination (MMSE) and Clinical Dementia Rating Sum of Boxes (CDR-SB), were evaluated.

RESULTS

Among 59 patients who initiated lecanemab, the mean number of infusions was 17.8 ± 7.0 over a mean treatment period of 7.8 ± 3.4 months. All patients underwent at least one follow-up MRI scan. Treatment was discontinued in 11 patients (18.6%), including 5 due to ARIA, 3 due to transfer to another facility, and 3 due to unrelated medical illness.

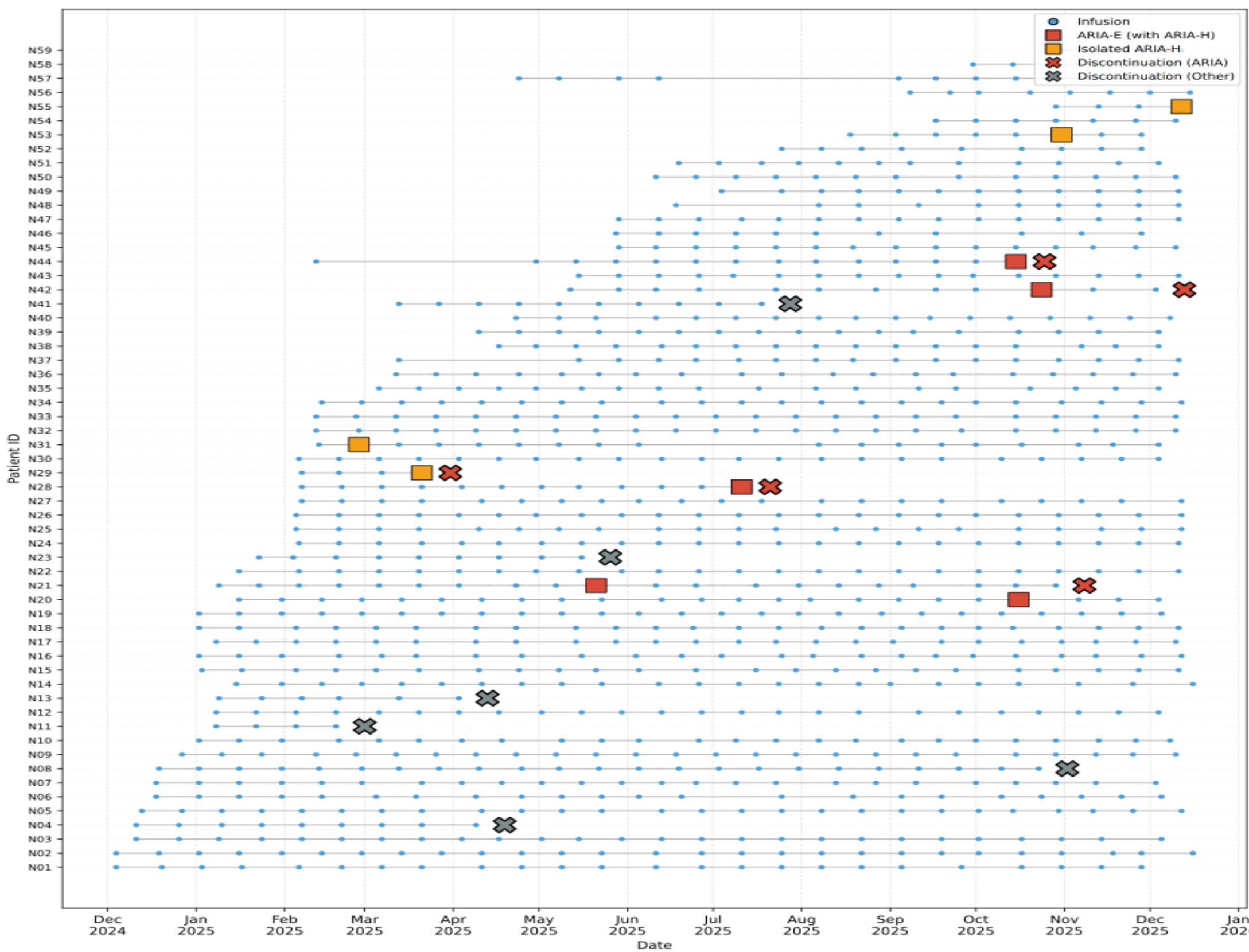


Figure 1. Treatment timeline

RESULTS

Table 1. Demographics of participants

Characteristic	CLARITY-AD		CLARITY-AD-Asian		GN_SEV
	PBO	LEC	PBO	LEC	
	N=897	N=898	N = 148	N = 146	N = 59
Age, mean (SD), y	71.1 (7.8)	71.4 (7.9)	69.8 (7.6)	70.3 (8.1)	75.4 (6.9)
Female, n (%)	476 (53.1)	462 (51.4)	86 (58.1)	85 (58.2)	34 (57.6)
Education, mean (SD), y	N/A	N/A	N/A	N/A	13.3 (3.9)
MMSE score, mean (SD)	25.6 (2.2)	25.5 (2.2)	25.4 (2.1)	25.2 (2.1)	24.4 (3.6)
CDR-SB score, mean (SD)	3.2 (1.3)	3.1 (1.3)	2.81 (1.2)	2.76 (1.0)	3.0 (2.1)
APOE ε4 carrier status, n (%)					
Non-carrier	286 (31.9)	278 (31.0)	42 (28.4)	40 (27.4)	24 (40.7)
Heterozygote	478 (53.3)	479 (53.3)	76 (51.4)	25 (17.1)	32 (54.2)
Homozygote	133 (14.8)	141 (15.7)	30 (20.3)	25 (17.1)	3 (5.1)
Antiplatelet use, n (%)	N/A	N/A	N/A	N/A	16 (27.1)
Baseline MRI Findings, n (%)					
Microhemorrhages ≥1	N/A	N/A	N/A	N/A	14 (23.7)
Superficial Siderosis ≥1	N/A	N/A	N/A	N/A	1 (1.7)

Table 2. Safety Outcomes: ARIA Incidence

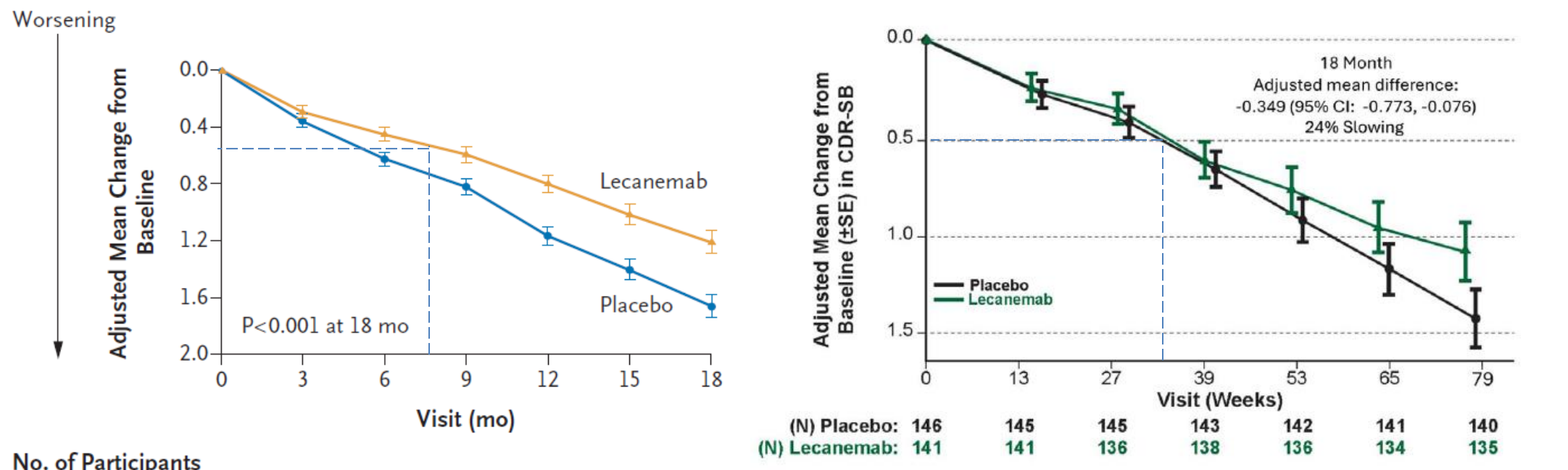
Characteristic	CLARITY-AD		CLARITY-AD-Asian		GN_SEV
	PBO	LEC	PBO	LEC	
	N=897	N=898	N = 148	N = 146	N = 59
Any ARIA	85 (9.5)	193 (21.5)	24 (16.8)	26 (16.9)	9 (15.3)
ARIA-E	15 (1.7)	113 (12.6)	2 (1.4)	9 (6.2)	5 (8.5)
Radiographic severity, mild	9 (1.0)	37 (4.1)	0	6 (3.9)	5 (8.5)
Moderate	6 (0.7)	66 (7.3)	2 (1.3)	4 (2.6)	0
severe	0	9 (1.0)	0	0	0
Symptomatic	0	25 (2.8)	0	0	0
ARIA-H	81 (9.0)	155 (17.3)	24 (16.2)	21 (14.4)	9 (15.3)
Mild	73 (8.1)	97 (10.8)	20 (13.3)	16 (10.5)	5 (8.5)
Moderate	5 (0.6)	26 (2.9)	3 (2.0)	5 (3.3)	1 (1.7)
Severe	3 (0.3)	32 (3.6)	1 (0.7)	1 (0.7)	3 (5.1)
symptomatic	2 (0.2)	13 (1.4)	0	1 (0.7)	0
Concurrent ARIA-E and ARIA-H	9 (1.0)	74 (8.2)	2 (1.3)	4 (2.6)	5 (8.5)

Table 3. Comparison of Baseline Characteristics by ARIA Status

Characteristic	GN_SEV		
	No ARIA	Any ARIA	P-value
	N = 50	N = 9	
Age, mean (SD), y	75.3 (7.2)	75.9 (5.5)	0.816
Female, n (%)	28 (56.0)	6 (66.7)	0.720
Education, mean (SD), y	13.6 (3.7)	11.8 (4.8)	0.195
MMSE score, mean (SD)	24.5 (3.4)	23.8 (4.7)	0.577
CDR-SB score, mean (SD)	2.9 (1.8)	4.4 (3.4)	0.086
APOE ε4 carrier status, n (%)			0.360
Non-carrier	21 (42.0)	3 (33.3)	
Heterozygote	27 (54.0)	5 (55.6)	
Homozygote	2 (4.0)	1 (11.1)	
Antiplatelet use, n (%)	14 (28.0)	2 (22.2)	1.000
Baseline MRI Findings, n (%)			
Microhemorrhages ≥1	11 (22.0)	3 (33.3)	0.457
Superficial Siderosis ≥1	1 (2.0)	0 (0.0)	1.000

Table 4. Cognitive Outcomes: longitudinal CDR-SB, MMSE change

Outcome	Baseline Score	Annual change	Interaction P-value
CDR-SB: Total	3.03	+0.80 ± 0.19	0.359
MCI group	1.46	+0.62 ± 0.26	
Dementia group	4.44	+0.97 ± 0.38	
MMSE: Total	24.40	-1.10 ± 0.28	0.574
MCI group	27.40	-0.95 ± 0.39	
Dementia group	21.70	-1.27 ± 0.57	



(Left: van Dyck et al. NEJM 2023, Rt: Chen et al. JPAD 2025)

CONCLUSION

This single-center Korean real-world cohort showed manageable lecanemab safety outcomes, with ARIA rates comparable to the Asian Clarity AD subgroup. Differences in age and APOE ε4 carrier proportion should be considered when interpreting ARIA risk. Longer follow-up is needed to clarify cognitive outcomes in routine clinical practice.