

Anti-amyloid immunotherapies in Alzheimer’s disease: Are future prescribers prepared? Insights of a French national survey

P1-03

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INTRODUCTION

2022: Emergence of anti-amyloid immunotherapies and progressive public access across several countries.

2024: European approval granted, but reimbursement denied in France due to insufficient clinical benefit.

→ **Coming soon to routine practice?**

AIMS

Are future prescribers ready ?

- Knowledge of **indications**
- Knowledge of **side effects** and administration methods

METHODS



Online survey distributed to physicians *via* the French Fédération des Centres Mémoire (FCM), Association des Neurologues Libéraux Français (ANLLF) and network of the authors.

July 2024 – November 2024



3 domains evaluated:

- Indications and contra-indications
- Side effects
- Administration methods

Correct answers based on clinical trials data

303 physicians

48% <10 years practice
49% specifically trained to Alzheimer’s and related diseases
11.2% used anti-amyloid immunotherapy in clinical trials

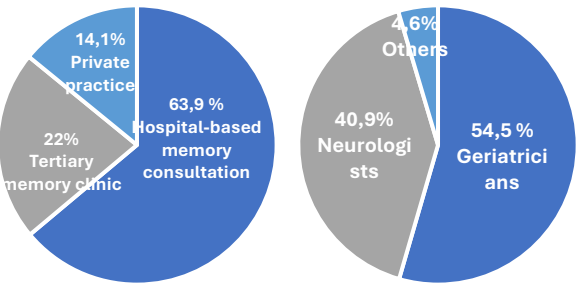


Figure 1. Demographics

RESULTS

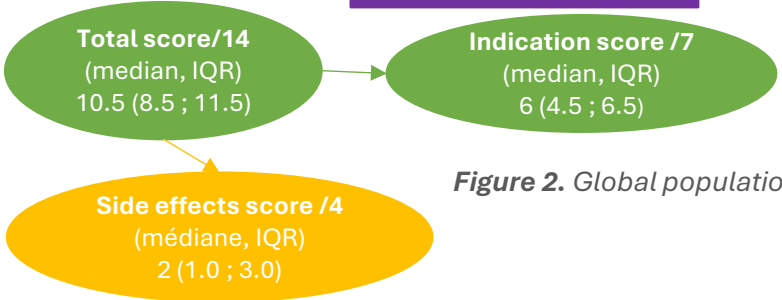


Figure 2. Global population results

	Tertiary memory clinic (1)	Hospital-based memory consultation (2)	Private practice (3)	P	
Total (/14) (median, IQR)	11.25 (10.5 ; 12)	10.0 (8.5 ; 11.5)	9.0 (7 ; 11)	<.001	<.05 for all comparisons
Indications (/7) (median, IQR)	6 (5.87 ; 6.5)	5.5 (4.5 ; 6.5)	5 (4 ; 6)	<.001	<.05 1vs2, 1vs3
Side effects (/4) (median, IQR)	2 (2 ; 3)	2 (1.37 ; 3)	2 (1 ; 2)	.033	<.05 1vs3

Table 1. Impact of practice setting

	Specific formation	No formation	P
Total (/14) (median, IQR)	11.0 (10 ; 12)	9.5 (7.5 ; 11.0)	<.001
Indications (/7) (median, IQR)	6 (5.0 ; 6.5)	5.5 (4.0 ; 6.0)	.002
Side effects (/4) (median, IQR)	2.0 (2 ; 3)	2 (1.0 ; 2.0)	<.001

Table 2. Impact of prior formation

KEY FINDINGS

Indications well known, lack of specific knowledge on side effects

Best Knowledge: Tertiary memory clinic, prior formation on Alzheimer’s and related diseases