

Retrospective Case Series of Real-world Clinical And Patient-reported Outcomes With Lecanemab

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INTRODUCTION

- Lecanemab, a humanized IgG1 monoclonal antibody targeting amyloid-beta protofibrils, represents the **first disease-modifying therapy to receive full FDA approval for treating early Alzheimer's disease (AD)**.
- While phase III trials demonstrated significant reductions in brain amyloid burden and slowed clinical decline, **real-world evidence may be complementary contributing a broader patient base**.
- This study characterizes **longitudinal outcomes, patient experiences, and satisfaction** within a U.S. clinical practice.

METHODS

- This retrospective case series included 73 patients receiving lecanemab at a multidisciplinary memory disorders clinic.
- Patient-reported outcomes were collected after atleast 6 months on treatment via a 10-item survey adapted from the "What Matters Most" framework using a 5-point Likert scale and focusing on symptomatic stability and functional performance in activities of daily living (ADLs).
- Descriptive statistics were used to determine frequency and percentage distributions of cognitive and functional status.
- Cognitive decline was defined as a drop in cognitive testing equal to or greater than 3 points per year.

5-Point Likert Scale

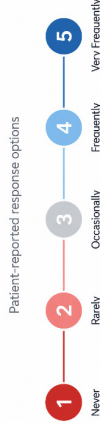


Figure 1 . Five point Likert scale used to categorize patient survey responses ranging from "Never" to "Very Frequently"

RESULTS

- A total of **73 patients with biomarker confirmed AD (64% MCI and 36% mild AD)** were included. **Average treatment duration was 15 months** with 48 patients >12 months. The mean age was 73 years, with majority female (66%), and white non-Hispanic (100%).
- A total of 47 patients (64%) were **APOE4 carriers**(57% heterozygous and 8% homozygous).
- Six cases of ARIA occurred across five patients (7%)**; two asymptomatic ARIA-H cases, three asymptomatic ARIA-E cases, as well as a single symptomatic case of severe ARIA-H and ARIA-E.
- Among patients treated for ≥6 months (n=58), **54.3% did not experience significant decline**.
- Among surveyed participants (n=41), **95.1% reported being "satisfied" or "very satisfied" with lecanemab therapy**.
- Across functional items, **22.0-68.3% of patients reported frequent successful completion of cognitive tasks**, while **68.3-97.6% maintained frequent engagement in ADLs**.
- Qualitative feedback identified **perceived disease stability or attenuated progression as the primary benefit (73.2%)**, followed by emotional benefits or increased hope (17.1%).
- A subset (29.3%) noted **difficulty quantifying improvement** without knowing how untreated progression would appear.

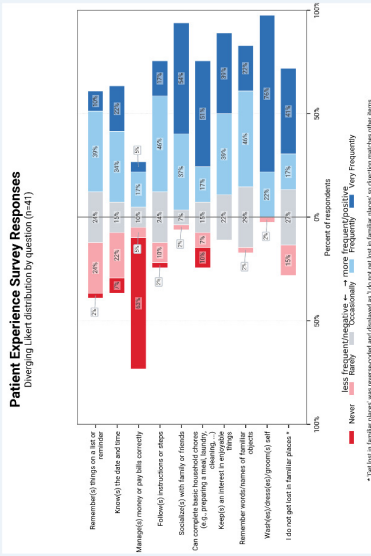
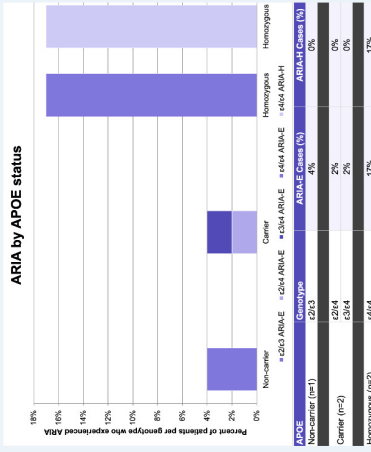


Figure 3. Diverging Likert distribution of patient-reported cognitive and functional survey responses across both cohorts. Percentages indicate the proportion of respondents selecting each response category.

Figure 4. Among patients treated for ≥6 months (n=58), 54% did not experience cognitive decline.

CONCLUSION & DISCUSSION

- In a real-world clinical setting, the lecanemab efficacy and safety profile was favorable compared to that of the clinical trial.
- Patients treated with lecanemab reported high levels of perceived stability in cognitive and instrumental functioning.
- High satisfaction rates underscore the value of disease-modifying interventions.

LIMITATIONS

- Limitations include limited sample size, lack of and untreated control group, and an ethnically homogenous population.

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