

Impact of an Educational Symposium and a Local Consensus Statement on the Use of Alzheimer's Disease Biomarkers and Anti-Amyloid Therapies



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Introduction and Background

- There are limited symptomatic treatment options for **Alzheimer's disease (AD)** dementia. However, recent **advances in biomarkers and anti-amyloid therapies (AAT)** offer new therapeutic opportunities.
- Implementation of these advances faces barriers including low clinician familiarity and healthcare infrastructure limitations.
- Improving clinician knowledge and acceptance is critical to bridge the gap between research advances and clinical care.
- This study evaluates the impact of an educational symposium and a local multi-specialty consensus statement on clinician attitudes and intended utilization of AD biomarkers and AAT.

Methods

- A three-hour **Hong Kong Alzheimer's Disease Symposium** was held on 24 January 2026, focused on biomarker utilization, patient selection for AAT, practical and clinical considerations, and introduction of a local consensus statement.
- Electronic **pre- and post-symposium surveys** assessed clinician attitudes, understanding, and self-reported use of AD biomarkers and AAT among symposium attendees.
- A **local consensus statement** comprising 26 statements was developed by a multi-disciplinary group of 20 medical specialists from five professional societies to guide decision-making regarding the use of AD biomarkers and AAT.



Reference

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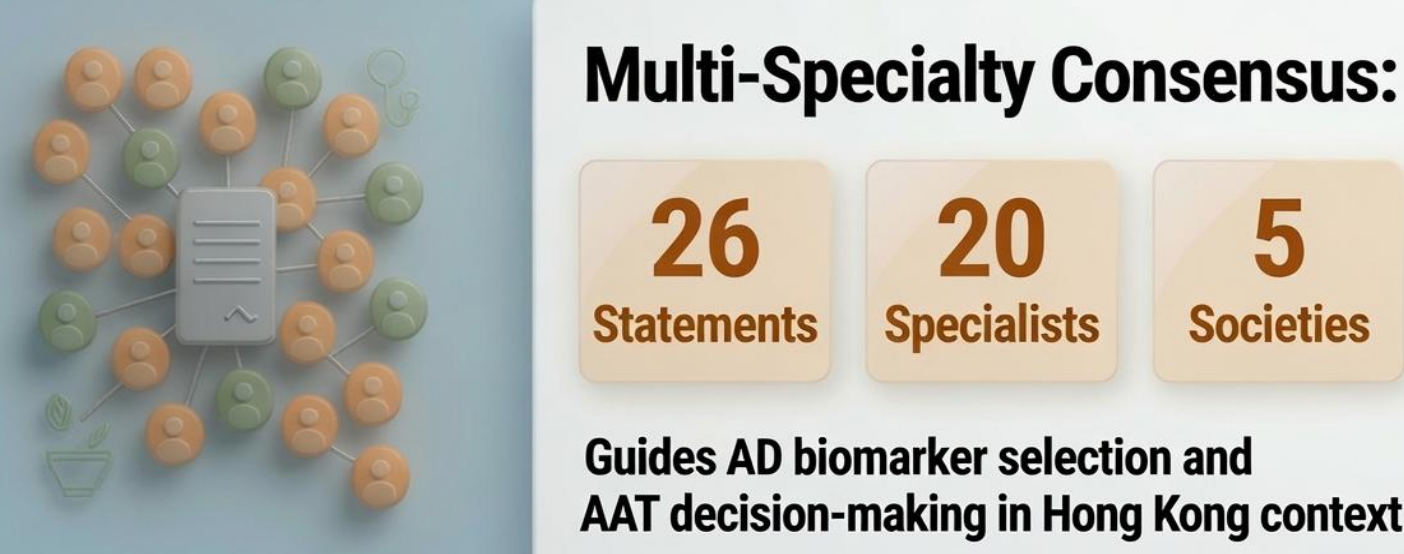
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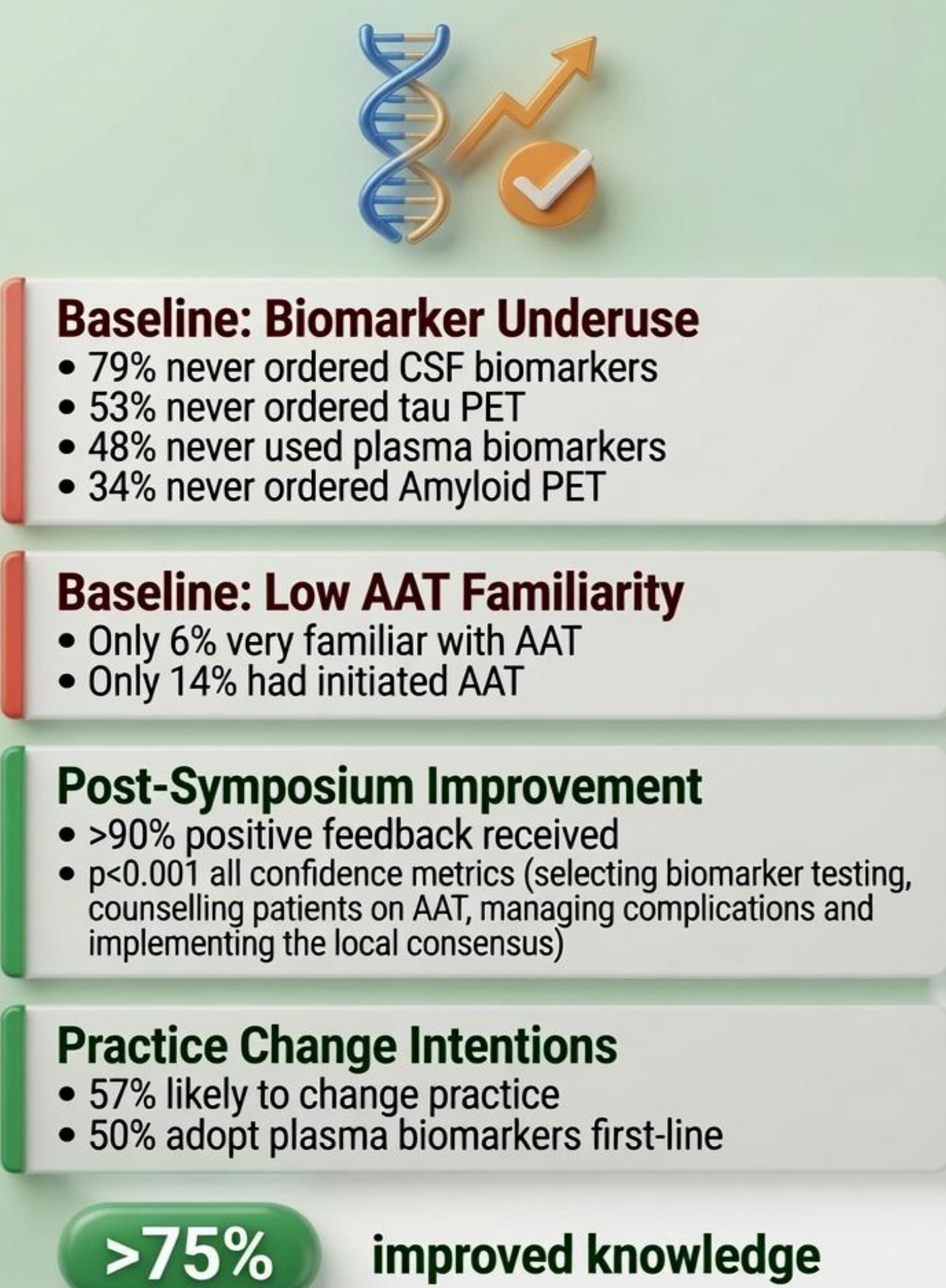


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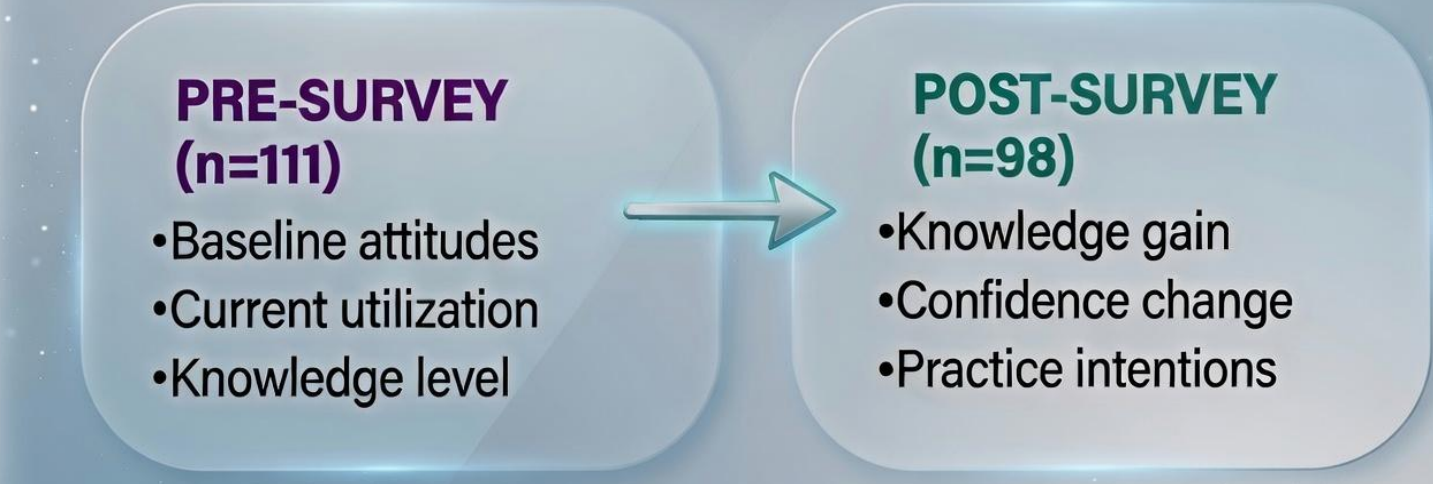
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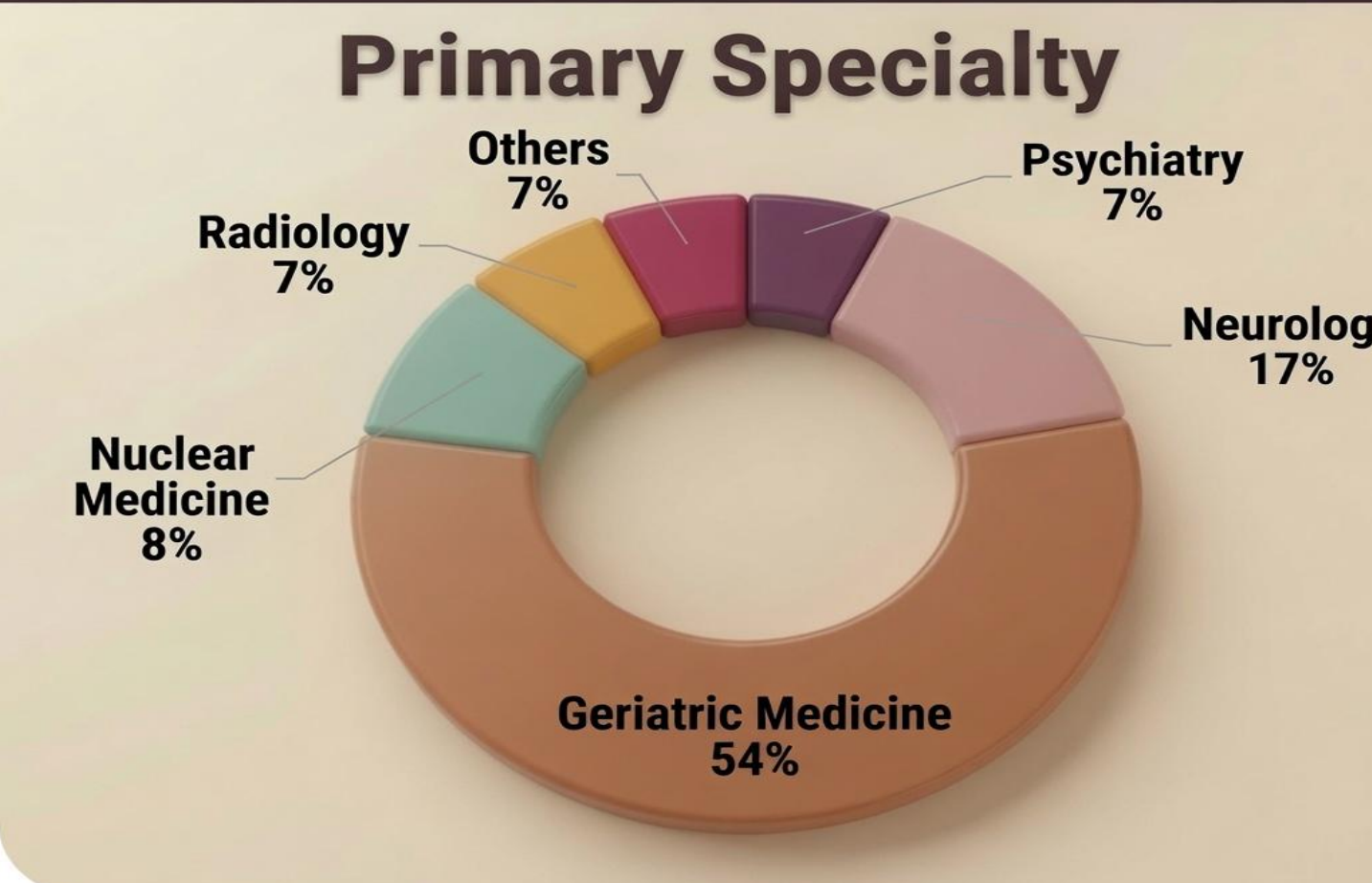
KEY RESULTS



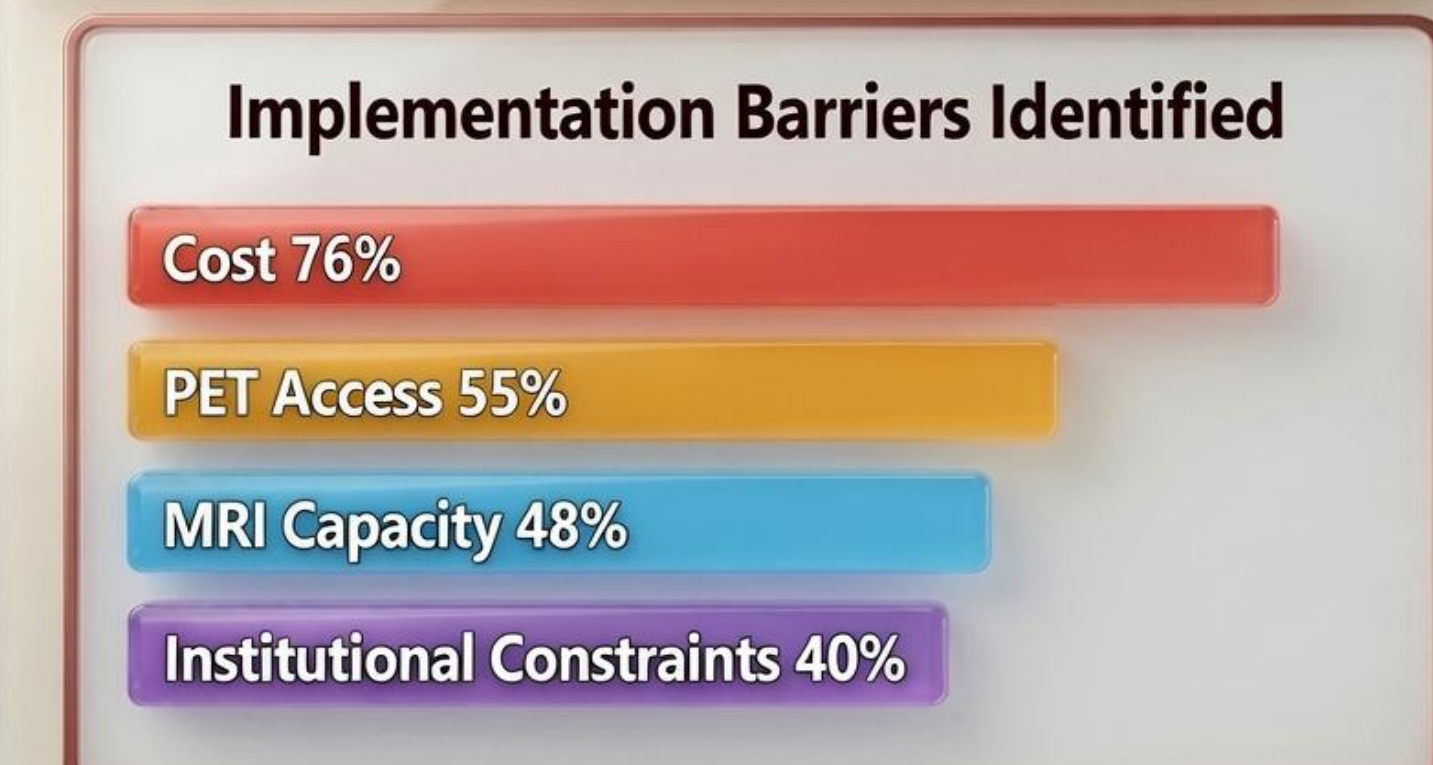
EDUCATIONAL SYMPOSIUM



RESPONDENT CHARACTERISTICS



BARRIERS



CLINICAL IMPLICATIONS



Key Findings

- An educational symposium and a local consensus statement **significantly increased clinician confidence** in using AD biomarkers and AAT.
- Pre-symposium:** 79%, 53%, 48% and 34% of never used CSF biomarkers, tau PET, plasma biomarkers and amyloid PET respectively. Only 6% were very familiar with AAT and 14% had initiated treatment.
- Post-symposium:** 57% planned practice changes, including adopting plasma biomarkers and amyloid PET selectively.
- Despite improved knowledge and intentions, **major barriers** such as **cost, PET and MRI access, and institutional limitations** pose challenges to implementation.

Discussion and Implications

- Infrastructural and cost barriers** remain substantial obstacles to implementation, especially in the public sector.
- The multi-specialty **local consensus statement enhances clinician confidence and attitudes** towards adopting new diagnostic and therapeutic modalities in Alzheimer's disease within the Hong Kong context.
- Emerging therapies with subcutaneous administration may help overcome limitations in infusion services.
- Study strengths** include reflecting real-world practice in Hong Kong with a pre-post survey design, demonstrating positive impact of education.
- Limitations** include potential selection bias due to majority of participants working in the public sector and possibly higher utilization rates in private practice not captured.